Flexible Learning Project Completion Report

Report Completion Date: (2015/06/30)

1. PROJECT OVERVIEW

1.1. General Information

Project Name: iEthics – Planning for an Integrated Ethics Curriculum in the Health and Human Service Programs at UBC

Principal Investigator: Lesley Bainbridge

Team Members (Table 1.1)

Table 1.1 - Roles and Responsibilities of the Project Team

Individual	Title/Affiliation	Responsibilities
Lesley Bainbridge	Associate Principal/College of Health Disciplines	Project Lead Integrated Curriculum Committee*
Lynda Eccott	Director IPE Curriculum/College of Health Disciplines	Associate Project Lead Integrated Curriculum Committee
Leandra Best	Associated Dean Academic Affairs/Faculty of Dentistry	Integrated Curriculum Committee
Michael Burgess	Professor/School of Population and Public Health, Faculty of Medicine	Integrated Curriculum Committee
Philip Crowell	Co-chair Ethics Block, Medical Undergraduate Program/Faculty of Medicine	Integrated Curriculum Committee
Victoria Wood	Project Manager/College of Health Disciplines	Develop content for learning activities, liaise with instructional design personnel for development and migration of online module, communicate with stakeholders, facilitate meetings
Donna Drynan	Senior Instructor and Fieldwork Coordinator/Department of Occupational Science and Occupational Therapy	Integrated Curriculum Committee
Bethan Everett	Clinical Ethicist/School of Physical Therapy	Integrated Curriculum Committee
Judy Gillespie	Acting Director/School of Social Work (UBC-O)	Integrated Curriculum Committee
Liz Jones	Chair of BSW Curriculum Committee/School of Social Work (UBC-V)	Integrated Curriculum Committee
Patricia Marck	Director/School of Nursing (UBC-O)	Integrated Curriculum Committee

Jo-Ann Osei-Twum	Research Assistant/College of Health Disciplines	Review resources relevant to learning activities, produce knowledge dissemination material, communicate with stakeholders, compile funding progress reports, document meeting outcomes and summaries
Patricia (Paddy) Rodney	Associate Professor/School of Nursing (UBC-V)	Integrated Curriculum Committee
Barbara Purves	Assistant Professor/School of Audiology and Speech Pathology	Integrated Curriculum Committee
Claudia Ruitenberg	Associate Professor/Department of Educational Studies	Integrated Curriculum Committee
Robert Sparks	Director/School of Kinesiology	Integrated Curriculum Committee
Anne Townsend	School of Population and Public Health, Faculty of Medicine	Integrated Curriculum Committee

* Integrated Curriculum Committee: review, revise, and approve curriculum documents, develop and approve content for learning activities, approve evaluation tools, identify internal and external collaborators, develop learning outcomes and content for learning activities, approve learner assessment tools

Project Initiation Date: 2014/04/01	**Project Completion Date:** 2015/06/30* * Completion of Phase I

1.2. Project Summary

As the health and human service programs, through the Committee of Health Deans at UBC, examine and debate the best model for the integration of education, research, and practice, there is a need to plan, test and evaluate a framework for an integrated curriculum in common areas of learning across programs. To our knowledge, there is no precedent for such a comprehensive and broad integrated curriculum. The topic chosen for the exemplar of an integrated curriculum is ethics as it is common across professions, resonates across all areas of practice, and is critical in today's world of complex, often technology enhanced healthcare. The UBC Integrated Ethics Curriculum (iEthics) brings together educators, learners, and patients/clients to develop a prototype of an integrated curriculum focusing on three pillars of learning: uni-professional, multi-professional, and inter-professional. This curriculum will strengthen learning that is unique to a profession and create opportunities for inter-professional learning that requires skilled collaboration among health care providers, patients/clients, and families. The interdisciplinary project team has developed a curricula model, exit competencies, milestones, and foundational learning activities. These learning activities have been piloted with current health and human services students and faculty and refined based on their feedback. Subsequent phases of the project will see the development of the remaining activities in the curriculum.

1.3. Student Impact (Table 1.2) - *Please fill in the following table for the period of time when your project was active. [Note: Adapt this section to the context of your project if this table does not capture the nature of it].*

The first phase of this project focused on developing a curricular model that will be applicable to many topic areas. For the exemplar topic, the curriculum committee developed key curriculum components that serve as a foundation for the graduated implementation of learning activities in Phase II. Phase I included the development of the foundational activities in the curriculum – an online module and interprofessional workshop – which have been piloted with a small group of students. The curriculum is designed to be flexible, and as such will be integrated into the health and human service programs in a variety of ways. We have been working diligently with each program to support the integration of the curriculum; however, the final implementation lies with the programs. The curriculum will be integrated as a required component of 12 health and human service programs, thereby reaching over 3,000 each year. Several programs will deliver the curriculum as part of an existing course, as outlined below.

Table 1.2 - Student Impact

Course	Term	Type of Implementation (pilot, full transformation, use of online resource, etc.)
FNH 380 or clinical practice courses	Fall	Foundational Online Module Two-hour face-to-face interprofessional workshop
KIN 489; KIN 103	Fall	
MEDG 535	Fall 2016	
Nursing - Relational Ethics or Leadership ethics and policy courses	Fall	
Nursing UBC-O Nurs 112 (Fall 2015)	Fall	
Nursing UBC-O Nurs 122	Winter	
RTOT 519, RTOT 549	Fall	
Foundations of Pharmacy Course	Fall	
DENT 410	Fall	
MEDD 410 MEDD 412	Winter	

2. PRODUCTS AND ACHIEVEMENTS

2.1. Products and Achievements - *Please <u>update</u> the project products and achievements as necessary and indicate the corresponding implementation date [Examples: 10 online interactive lecture modules (SEPT-DEC 2013); A fully flipped course (JAN-APR 2014); Piloted two-stage midterms and final exam (SEPT-DEC 2013)]. Also please indicate the current location of such products [Examples: Department website, Connect, shared workspace, etc.].*

Table 2.1 – Products and Achievements

Product(s)/Achievement(s):	Implementation Date:	Location:
Curriculum Model	January 2015	N/A
Foundations of Ethical Practice Online Module	September 2015	CHD Moodle Site
Foundations of Ethical Practice Interprofessional Workshop	September 2015	Facilitated through the Interprofessional Education Online Passport

2.2. Item(s) not Met - *Please list all of the intended project products and achievements that were not attained and the reason(s) for this.*

Thanks to an extension, we were able to meet all our intended deliverables.

Table 2.2 – Item(s) not met

Item(s) Not Met:	Reason:

4. **PROJECT SUPPORT –** *Please provide feedback on the support you received during the life of your project, as applicable. Did the received support meet your needs and expectations? What can you recommend to improve the support process?*

This project received curriculum and evaluation support from the Centre for Teaching, Learning and Technology. This support included assistance in determining potential pilot activities, relevant literature on technology enabled learning and ethics, developing a visual representation of the curricula model, and developing evaluation tools for project partners and curriculum committee members. This support was valuable at the outset of the project.

5. PROJECT EVALUATION

5.1. Project Outcomes (Table 5.1) - *Please list the intended outcomes or <u>benefits of the project</u> for students, TAs and/or instructors. Also include the indicators used to guide your evaluation, and what constitutes your project's success.*

Table 5.1 – Evaluation and Indicators

Intended Outcomes (e.g., increased active in-class participation)	Indicator(s) (e.g., number of students participating in class; quality of the interventions)	What constitutes "success"? (e.g., larger numbers of students participating in class; greater integration of content in their comments/questions; 10% attendance increase)
1. Model for integrated curriculum	Student satisfaction	See value of ethics curriculum to their future practice
	Faculty satisfaction	Engagement in development process
2. Implementation plan	Number of programs	Implemented into all health professional programs at UBC
	Number of students	Required component of learning for all students
3. Evaluation plan	Adaptability of the model	Efficient development of integrated curricula in other topic areas using the model (long term; follow-up project)

5.2 Data Collection and Evaluation Method*s - *Indicate your evaluation methods including who was responsible for the evaluation. Please describe the data collection strategies used, how the data was analyzed, and perceived limitations.* **Note: Please attach copies of data collection tools (e.g., surveys and interview protocols), any additional data or other relevant items.**

All evaluations were administered by the project manager. Phase I involved a process evaluation of the model development and a pilot evaluation of the foundational activities.

Evaluation Method	Data Analysis
Foundational Module and Workshop Pilot – Online Survey	Completed by all participants Key themes indicated areas for improvement Module and workshop activities modified based on feedback Limitation – Students later in their programs participated in an activity designed for first year students
Online survey to evaluate perceptions on the curriculum development process	Completed by project team members Analyzed for key themes Limitation – participants invested in the process

5.3 Evaluation Results/Finding*s - Explain to what extent your intended project outcomes or benefits for students, TAs and or/instructors were achieved or not achieved. You are encouraged to include both graphical representations of data as well as scenarios or quotes to represent key themes.*

According to the pilot evaluation:

MODULE
- Majority of the students agreed that the online module was useful in preparation for the face-to-face session
- All students agreed that it was important to have a foundational knowledge of ethical concepts for the subsequent face-to-face discussions
- Majority of students agreed that the online delivery method was effective
- Majority of students agreed that online reflections were valuable
- All students agreed that the module was organized in a logical fashion, building knowledge and skills as it progressed

As a result of the module:
- All students agreed that they are able to define ethics and its relevance to personal and professional decision-making and ethical practice.
- Majority of students can recognize and respond to common, non-complex ethical issues in everyday life
- Majority of the students can identify how my personal values, beliefs and perspectives can impact my responses to ethical situations
- Majority of the students were aware of where their own values, beliefs and perspectives are reflected, and not, in their profession's code of ethics
- All students recognize the need for professional ethics in health care
- All students can define the principles of health care ethic
- Majority of students can describe the purpose of an ethical decision making framework.
  - 1 student disagreed because the framework or examples was not explicitly (e.g. the College of Pharmacists of BC's framework). The reflections were never touched upon again after the online session.

WORKSHOP
- All students agreed that the face-to-face session added to the experience
- All students agreed that the interprofessional approach enhanced this learning experience
- All students strongly agreed they learned with, from and about other professions

As a result of the workshop:
- All students agreed they can articulate how personal and professional values, beliefs and perspectives influence ethical decision-making
- Majority of the students can identify the differences and similarities between different codes of ethics
- Majority of students can use my professional code of ethics to describe my professional responsibilities in relation to specific ethical scenarios
- Majority of students (except 2) can describe how the fundamental elements of an ethical decision-making framework might be applied in specific cases:
  - No frameworks given, and the single example scenario is very thin.

*Attached are the survey reports that show the evaluation tools used and summarize the data.

5.4 Expected Long-Term Impact – *If applicable, indicate the impact your project is expected to have in this and/or other courses beyond completion.*

The integrated ethics curriculum is being integrated as a required component of 12 health and human service programs. This will ensure that all students in these programs are prepared to be ethical practitioners.

5.5 Dissemination – *Please provide a list of scholarly activities (e.g., publications, presentations, invited talks, etc.) in which you or anyone from your team have referred this Flexible Learning project. Include any disseminations activities you intend to accomplish in the future.*

Conference Presentations
1. Bainbridge L, Eccott L, Best L, Burgess M, Crowell P & Everett B. An Innovative Integrated Curriculum Model for the Health Professions: Sharing i-Ethics. 2014 Canadian Bioethics Society Annual Meeting, May 28 – 31 2014, Vancouver, BC, Canada.
2. Bainbridge L & Eccott L. Delivering an Interdisciplinary Ethics Curriculum, Post Conference Workshop, 2014 Canadian Bioethics Society Annual Meeting, May 31, 2014. Vancouver, BC, Canada.
3. Bainbridge L, Eccott L, Burgess M, Everett B, Rodney P & Townsend A. iEthics: An integrated curriculum for teaching ethical practice. 2014 AMEE, August 30 – September 3, 2014. Milan, Italy.
4. Bainbridge L, Eccott L, Burgess M, Crowell P, Wood V, Drynan D, Everett B, Jones E, Marck P & Rodney P. Technology Enabled Learning: Transforming Inter-professional Ethics Education in Health and Human Service Programs at the University of British Columbia. STLHE 2015, June 16 – 19 2015, Vancouver, BC, Canada (abstract submitted).

Peer-reviewed Journal Publications (In preparation/submitted)
1. Bainbridge L, Eccott L & Integrated Ethics Curriculum Committee. An Integrated Approach to Ethics Education in Health and Human Service Programs. Ethics and Education.
2. Bainbridge L, Eccott L, Osei-Twum J & Wood V. Evaluating Recent Canadian Physiotherapy Graduates' Perspectives on Training for Ethics Practice. Journal of Physical Therapy Education.

6. **DISCUSSION, RECOMMENDATIONS AND CONCLUSIONS** - R*eflect on the broader implications of the project. Indicate instances where your project has impacted courses or individuals not identified in your proposal. Include any recommendations you have for future Flexible Learning project leads.*

This project is changing the way health professional education is delivered at UBC. It has created a model that will be used to develop curriculum in other content areas. The model strengthens learning that is unique to a profession and creates opportunities for inter-professional learning that requires skilled collaboration among health care providers, patients/clients, and families.

6.1. Teaching Practices – *Please indicate if your teaching practices have changed as a result of your Flexible Learning project. If so, in what ways? Do you see these changes as sustainable over time? If not, why do you think that is the case?*

In addition to providing an innovative approach to ethics education, this project provides a model that will is changing teaching to integrate more interprofessional approached. The flexible approach is overcoming many of the logistical barriers that have stood in its way.

6.2. Student Involvement in FL team – *Were there any undergraduate or graduate students involved in the development and/or evaluation of your FL project? Please describe their contributions and overall experiences as part of your Flexible Learning team.*

Undergraduate students, through a student focus group and the College of Health Disciplines' Interprofessional Student Advisory Group, made important contributions to the development of pilot activities. Students responded positively to the structure of the iEthics curriculum and provided suggestions for video content in the introductory module. The initial learning activity was also revised to include a face-to-face inter-professional workshop, as students indicated that they would prefer to interact with students in other disciplines at an earlier stage of the curriculum. Constant engagement of students has been pivotal in ensuring that learning activities will resonate with learners. Their participation in the pilot has enabled us to refine the learning activities.

7. PROJECT SUSTAINMENT - *Please describe the sustainment strategy for the project components. How will this be sustained and potentially expanded (e.g., over the next five years). What challenges do you foresee for achieving the expected long-term impacts listed above?*

The second phase of funding will enable us to develop the remaining components of the curriculum. The role of the College of Health Disciplines (soon to be the Office of the Associate Provost Health), under the umbrella of UBC Health, will be to support the delivery of the curriculum and development of integrated curriculum in other content areas. This, in combination with the integrative nature of the curriculum itself, will ensure the sustainability of the project components.