



Large TLEF Project Completion Report

Report Completion Date: (YYYY/MM/DD)

1. PROJECT OVERVIEW

1.1. General Information

Project Title:	UBC School of Nursing Flexible Learning Initiative		
Principal Investigator:	MAURA MACPHEE, BERNIE GARRETT, CATHRYN JACKSON		
Project Initiation:	July 2013	Project Completion:	March 2016

Project Summary

The BSN curriculum has been under a substantive review to streamline and better coordinate the delivery of content and eliminate any potential for duplication of content within the program. Flexible learning has been identified as an approach that can enhance the new curriculum by introducing new teaching and learning strategies. This has presented the possibility of weaving Flexible Learning more widely across the BSN curriculum and will ensure the possibility that FL strategies operate in a consistent manner throughout the entire BSN program.

The Flexible Learning Initiative at the UBC School of Nursing was implemented from 2013-2016. The overall objective of the project was to offer students a variety of teaching and clinical learning opportunities that introduce a range of new flexible teaching strategies in support of this. This improved flexibility in scheduling of in-class days and use of strategies such as high fidelity simulation exercises, web-based video clips, and interactive discussion activities, was aimed at improving students’ learning experience and outcomes. Table 1 on the page 4 summarizes the project’s specific objectives and corresponding results.

Prior to this project, most of the nursing courses were taught in large face-to-face classrooms based on didactic lectures by instructors and/or guest speakers.

Using a blended learning format, the FL project enabled nursing faculty members to “flip” up to 30% of traditional lecture content. With instructional design and technical supports from the UBC Centre for Teaching and Learning Technology (CTLT), nursing faculty members have become proficient in designing, delivering and evaluating new online learning modules across the entire curriculum. Students now do online pre-work (i.e., online modules with guided, embedded critical thinking exercises) followed by in-class small group case discussions, skills laboratory simulations, and hands-on learning in a diverse array of practice settings. The new curriculum delivery model is designed to link core content within and across the curriculum, reinforcing and integrating critical theoretical concepts and skills.

An evaluation survey and focus groups were conducted with nursing faculty members and students after FL project completion. The FL project has made a significant, positive difference to them—freeing up classroom seat time and enhancing the quality and the diversity of active learning opportunities. Students and faculty members are “more



engaged,” “more enthusiastic about learning. As one student commented: “I can learn at any time and anywhere--- even in my pajamas!” Both students and faculty members value teaching/learning accessibility and flexibility. A pre-post comparison of student learning in community health, demonstrated that student performance on in-class case studies was significantly improved after instituting the new, blended learning approach. Students also indicated that they were more confident about learning important content: “I had the chance to go back over the material online until I felt I really understood it.”

In addition to online learning modules with guiding questions and critical thinking quizzes, new technological components include a virtual “Canadian Neighbourhood” and augmented reality skills lab activities. The real innovation behind this FL project is the faculty perspectives and culture change. There has been a remarkable shift in faculty members’ confidence and uptake of FL learning. “Flexible learning” is part of the SoN vocabulary, it’s integrated in all course syllabi, and several faculty members have presented their FL course work at local, national and international higher education conferences. The FL conversion was not an easy endeavor for many faculty members. The initial time and energy investment created resistance and skepticism at the beginning of the project. A few faculty innovators, with CTLT support, served as role models for other faculty, building momentum and a stronger teaching/learning mindset at the SoN.



Table 1: Summary of Project Objectives and Results

OBJECTIVES	RESULTS
<p>Redesign curriculum structure within practice-based courses to shift/flip 12 hours of traditional classroom time to flexible learning activities.</p>	<ul style="list-style-type: none"> ●Flexible learning strategies were incorporated in the following 11 undergraduate courses: N302, N303, N304, N305, N306, N333, N334, N336, N337, N343, N344. The total percentage of FL hours/ classroom hours ranged from 12.5 to 100%. ●Lecture videos were developed for N333 (Infant Feeding), N336 (Public Health Nutrition, Dental Public Health). ●A common core Health Policy module, including video lectures, was developed for use in N306 and N336. ●Other Flexible Learning modules were developed for N303 (Care of patients with Diabetes, Care of patients experiencing COPD, Care of patients experiencing stroke); N305 (Critical Inquiry, Research and Evidence; Theory and Skill set development to promote EINP processes: linking understanding of research design to clinical questions); N334 (Perspective on Child Health and Well-Being; ●Growth and Development: infancy, childhood and adolescence; Children’s Pain; Child Health Assessment); N337 (Endocrine). <p>Case studies were used extensively in classroom discussions to consolidated online learning. Instructors in N336 and N337 developed new cased studies for use in their courses.</p>
<p>Use situated learning resources, such as the <i>Canadian Neighbourhood</i>, a virtual community of individuals/families accessing health care along a continuum of care.</p>	<ul style="list-style-type: none"> ●Canadian Neighbourhood was used extensively in N303. <p><u>Additionally, the following online resources were identified and adopted for use in other courses:</u></p> <ul style="list-style-type: none"> ●ATI, an online learning resource (with practice quizzes) that covers course content and prepares students for their registered nursing licensure exam (i.e., NCLEX), were also extensively incorporated into N302, N306, N333, N337. ●NCLEX-RN 10,000 was used in N334 to promote learning about various concepts within pediatric nursing and the help prepare for the NCLEX exam.
<p>Deliver professional development sessions to introduce faculty to new teaching strategies in support of Flexible Learning (FL).</p>	<ul style="list-style-type: none"> ●Weekly brown bags and monthly workshops on teaching scholarship were regularly conducted, with partial funding from the EKM Scholarship fund. ●Faculty and FL staff participated/ presented in the following conferences: ISSOTL 2014, STLHE 2015, Nurse Summit 2016, UBC Spring Institutes 2015 and 2016, TELF Showcase 2016
<p>Evaluate FL design and implementation in the BSN curriculum.</p>	<p><u>The following evaluation activities were conducted:</u></p> <ul style="list-style-type: none"> ● Students: Town Hall, Teaching Approaches Survey (in collaboration with the UBC VP Students office), Focus group sessions, Analysis of reflective journals ● Faculty: Feedback was solicited informally by requesting them to share their insights/experience/successes/challenges on the implementation of Flexible Learning in their courses, at the UBC CTLT Spring Institutes and off-campus conferences (STLHE, Nurse Educator Summit). ● Community/Practice Partners: Provided feedback informally through anecdotes shared by email. ● Educational research: Ethics approval was obtained to conduct evaluation research in N336 (“ N336 Flexible Learning Evaluation”) and N344 (“Reflective Practice”).



Team Members - (Please fill in the following table and include students, undergraduate or graduate, who participated in your project).

Name	Title/Affiliation	Responsibilities/Roles
Khristine Carino	Flexible Learning Coordinator/Nursing	Project management; coordinator of professional development events for regular faculty, clinical instructors and teaching assistants; evaluation and research facilitator; Teaching Matters blog administrator
Marc Legacy	Teaching and Learning Fellow/Nursing	Focus group facilitator, brown bag coordinator
Joanne Ricci	Senior Instructor/Nursing	Content experts for their respective courses; participated in revising their courses to include blended learning modules
Ranjit Kaur Dhari	Lecturer/Nursing	
Cathy Ebbehoj	Lecturer/Nursing	
Farah Jetha	Lecturer/Nursing	
Lynne Esson	Lecturer/Nursing	
Elsie Tan	Senior Instructor/Nursing	
Cheryl Segaric	Lecturer/Nursing	
Lucas Wright	Learning Technology Specialist/CTLT	Provided education technology support
Namsook Jahng	Namsook Jahng, Instructional Designer/CTLT	Provided instructional design support, spearheaded the development of video lectures for N333, N336 and N337.
Adriana Briseno-Garzon	Flexible Learning Evaluation Coordinator, CTLT	Evaluation support
Marcelo Bravo	VPS Office	Provided evaluation assistance
Katherine Lyon	VPS Office	Provided evaluation assistance

1.2. Student Impact - Please fill in the following table with past, current and future courses that have been or will be impacted by your project, including any courses not included in your original proposal. [Note: Adapt this section to the context of your project as necessary].



Course	Enrolment	Term
N302	240	Cohort 2014-2016 Cohort 2015-2017
N303	240	Cohort 2014-2016 Cohort 2015-2017
N304	240	Cohort 2014-2016 Cohort 2015-2017
N305	240	Cohort 2014-2016 Cohort 2015-2017
N306	240	Cohort 2014-2016 Cohort 2015-2017
N333	240	Cohort 2014-2016 Cohort 2015-2017
N334	240	Cohort 2014-2016 Cohort 2015-2017
N336	240	Cohort 2014-2016 Cohort 2015-2017
N337	240	Cohort 2014-2016 Cohort 2015-2017
N343	240	Cohort 2014-2016 Cohort 2015-2017
N344	240	Cohort 2014-2016 Cohort 2015-2017



PRODUCTS AND ACHIEVEMENTS

Products and Achievements - Please update project products and achievements as necessary. Indicate the current location of such products and provide an URL if applicable.

Product(s)/Achievement(s):	Location:
<p>ACHIEVEMENT:</p> <p>2016 NIE-RCIE Award in Excellence and Innovation in the Integration of Technology in Formal/Non-Formal Educational program</p>	<p>Award to be publicly announced in the 2016 CAUCE-CNIE Conference, May 30-June 20, 2016; Waterloo, Ontario.</p> <p><i>*CNIE- Canadian Network for Innovation in Education</i></p> <p><i>*CAUCE- Canadian Association for University Continuing Education</i></p>
<p>PRODUCT:</p> <p>UBC School of Nursing Flexible Learning Course Examples</p> <p><u>Contents</u></p> <p>A. Online module examples N333: Infant Feeding Module N334: Child Health/Pain Module N336: Public Health Nutrition module N337: Endocrine System</p> <p>B. Video learning resources -Introduction vidoes -Health Policy videos</p> <p>C. Module templates -Templates/Worksheets</p> <p>D. Links and Resources -Flexible Learning Website UBC</p>	<p>URL: https://connect.ubc.ca/webapps/blackboard/execute/launcher?type=Course&id=_81231_1&url=</p> <p>Login ID: lwrite Password: CNIEAward2016.</p>
<p>PRODUCT:</p> <p>Health Policy Videos</p> <p>- Online, self-study module containing core content on Health Policy shared by N336 (Community Nursing), N343 (Leadership, Ethics and Policy in Nursing Practice) and other courses. Developed to eliminate redundancy, and to connect policy more thoughtfully to other key concepts across the BSN curriculum.</p>	<p>Part 1: https://www.youtube.com/watch?v=CLFut2QDZxE</p> <p>Part 2: https://www.youtube.com/watch?v=U6s6x86PhWw</p> <p>Part 3: https://www.youtube.com/watch?v=Qfzh4VBvOiA</p>



Product(s)/Achievement(s):	Location:
<p>PRODUCT:</p> <p>Nursing 344 Synthesis Project Site</p> <p>-Showcases the project work undertaken by students in N344. The course is designed to give students an opportunity to synthesize their knowledge gained from the undergraduate program and to collaborate on new or ongoing initiatives in a nursing practice area. Over six months students work in teams and are mentored by practice partners in diverse settings across the mainland. Practice partners are nursing leaders working in organizations such as Fraser Health, Vancouver Coastal Health and the Provincial Health Services Authority.</p>	<p>2014 Gallery: http://synthesisprojects-nursing.sites.olt.ubc.ca/posters-3/</p> <p>2015 Gallery: https://synthesisprojects-nursing.sites.olt.ubc.ca/</p>

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

Item(s) Not Met:	Reason:
Distribution of FL “equally” across a selection of 7 BSN courses by replacing 12 hours of class time in each with FL.	Due to a variety of curricular reasons this has not proved feasible. Course leaders indicated a preference for adjusting both logistical and pedagogical flexibility to meet the specific needs of their particular courses.
Community/Practice Partners Engagement Survey	Due to logistical issues, the survey was not implemented.

2. PROJECT EVALUATION

2.1. Project Outcomes - Please list the intended outcomes or benefits of the project for students, TAs and/or instructors.

1. The implementation of Flexible Learning has resulted in benefits in both how, where, and when students learn. This improved flexibility in scheduling of in-class days and use of strategies such as simulation has provided better preparation for clinical practice.
2. This project has supported more flexibility in the schedule to allow our placement unit to provide more flexible scheduling of clinical practice days. The implementation of flexible learning has supported more diverse and creative curriculum design, which helped develop faculty expertise and skills with these techniques.



2.2. Findings – Please describe the findings of your project evaluation effort: to what extent were intended project outcomes achieved or not achieved? You are encouraged to include both graphical representations of data as well as scenarios or quotes to represent key themes.

STUDENTS

<p>1. TEACHING APPROACHES SURVEY- Overall findings indicate students’ satisfaction with Flexible Learning. Results from the survey of N336 and N337 are cited below.</p>	
<p>N336</p>	<p>1. COLLABORATION WITH OTHER STUDENTS AS EFFECTIVE FLEXIBLE LEARNING PRACTICE: Nursing 336 students indicated that collaborating with other students was an effective flexible learning practice:</p> <ul style="list-style-type: none"> • 90% felt part of a respectful learning community and were satisfied with their experience collaborating with other students • 70% felt that collaborating with other students enhanced their learning and was effective in supporting their learning • 60% were able to develop new skills and knowledge as a result of collaborating with other students • 50% found this got them to engage deeply in course material <p>2. USE OF TECHNOLOGY: Nursing 336 students were somewhat satisfied with the use of technology overall. Most indicate that they feel part of a respectful learning community as a result of such technology (63%).</p>
<p>N337</p>	<p>BENCHMARK COMPARISON WITH UBC FL DATA: Nursing 337 performs better than the UBC benchmark in:</p> <ul style="list-style-type: none"> • Providing an inclusive and respectful environment • Providing opportunities to interact with other students in the course • Providing opportunities to develop new skills from other students in the course • Providing engaging interaction with instructors • Supporting academic and academic balance <p>Nursing 337 performs lower than the UBC benchmark in:</p> <ul style="list-style-type: none"> • Effectively supporting student learning • Providing valuable feedback • Deeply engaging students on course material
<p>2. FOCUS GROUPS and TOWN HALL</p>	
	<p>Feedback received from Focus Group Sessions and the Town Hall indicated general student satisfaction with the FL initiative. Students found the Online Modules beneficial, freeing classroom time to be used at their discretion. However, they also cautioned that faculty should design Online Modules to be completed equivalent to and not more than the allotted in-class hours.</p>



FACULTY

<p>SUCCESES</p>	<ul style="list-style-type: none"> • FL modules were well put together, with videos and external resources available for future use. • Opportunity to review highlights with clinical instructors. • More effective use of time: freeing up class time (3 hours on-campus lectures) for one on one student consultation. • Ease in updating online content to ensure it is current. • Faculty forced to identify and focus on key elements of course content in developing the FL modules. • Workload was lighted in subsequent rotations. • Inspired with positive feedback from students and eager to learn and use more FL teaching strategies in the future.
<p>CHALLENGES</p>	<ul style="list-style-type: none"> • Amount of up-front faculty work in an already full schedule. • Variety of (minor) technical difficulties (e.g. uploading material in Connect).

EDUCATIONAL RESEARCH

<p>N344 EDUCATIONAL RESEARCH</p>	<ul style="list-style-type: none"> • The rubric was useful in establishing clear criteria of project outcomes for both students and instructor. • Themes which emerged from Inductive Coding were: <ul style="list-style-type: none"> -Flexibility (project schedules, project goals) -Autonomy (student independence, self-direction) -Technology (e-communications/ strategies, e.g. google docs) -Structures, processes, outcomes (student benefited from “boundaries”)
<p>N336 EDUCATIONAL RESEARCH</p>	<ul style="list-style-type: none"> • Evaluation based on Bloom’s Taxonomy: students engaged in deeper levels of discussion (analyzing/applying vs. recall/remembering). • Student survey: indicated students’ satisfaction with learning experiences. Written comments substantiate student preferences for some online requirements. Increased flexibility for covering material and ability to go back to course content and review numerous times. • The Flexible Learning approach better engages our students without sacrificing exam performance. • Increased knowledge base: students become more creative and confident in presenting the nutrition content within the community context resulting in decreased anxiety. • Flexibility: students able to complete the content whenever they wanted and to review materials as many times as they want.



2.3. Data Collection and Evaluation Methods - 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.

STRATEGY/ COLLECTION TOOLS	DATA ANALYSIS	LIMITATIONS	OTHER NOTES
STUDENTS:			
1. Focus group sessions	Qualitative: thematic analysis	Low response rate due to students’ intensive academic schedule.	
2. Town Hall	Qualitative: thematic analysis	Audio-recording of discussion was not possible due to privacy concerns, but would have been helpful to document students’ feedback verbatim.	
3. Student Pedagogy Experience Survey (in collaboration with the UBC VP Students office).	Quantitative data: Descriptive analysis Qualitative: thematic analysis	1. Low response rate, possibly due to survey fatigue (e.g. N333 and N334 had the same student pool for the survey). 2. Programming error resulted in some questions for N337 not being asked. 3. UBC campus-wide benchmarking with Nursing 336 data was provided by the VP Students Office, but direct comparisons were difficult to do, due to low response rates for the survey overall (campus-wide) and N336 (under 50% for both).	Recommendation: An evaluation survey should be embedded as a final section in all FL modules so we capture students’ perspectives more promptly; have higher response rates.



STRATEGY/ COLLECTION TOOLS	DATA ANALYSIS	LIMITATIONS	OTHER NOTES
FACULTY			
Feedback was solicited informally by requesting faculty members to share their insights, successes and challenges on FL implementation in their courses.	Quality Improvement	A convenience sample of faculty members.	
COMMUNITY/PRACTICE PARTNERS			
Provided feedback informally through anecdotes shared by email.	Quality Improvement	As above.	A Community Partners engagement survey was planned with UBC Community Engagement-has not been implemented yet.



STRATEGY/ COLLECTION TOOLS	DATA ANALYSIS	LIMITATIONS	OTHER NOTES
EDUCATIONAL RESEARCH			
<p>N336 Flexible Learning Evaluation</p> <p>A quasi-experimental design, received UBC ethics approval. Comparison of traditional versus flipped class. In the traditional class, the students had a homework, lecture, and in-class case discussion. Students in the Flipped Class had online modules with guiding questions, embedded questions; in-class case discussion.</p>	<p>Qualitative analysis of students' case discussions: comparison between students who had the traditional in-class lecture versus those who used a blended format (video lecture with guiding questions).</p>		
<p>Reflective Practice (N344).</p> <p>Seventy senior nursing students collaborated on practice-based projects with healthcare leaders from different sectors (e.g., acute care, community, mental health). These projects enabled students to appreciate the extensive roles and accountabilities of nurse leaders. Student project work was totally conducted outside a class setting: students used a number of online tools to coordinate their work, and to produce agreed-upon project deliverables within a three-month period of time. Specific project learning objectives included students' synthesis of knowledge from critical inquiry/research; relational practice/communications; leadership, ethics and policy; and professional practice. Structured</p>	<p>Guided reflective practice questions and a reflective practice rubric were given to students before their assignment, and the rubric was used by faculty to assess the depth of student learning related to project work. The probing questions and rubric are based on Ryan (2012). Analysis of the papers was conducted using deductive coding</p>		



<p>reflective practice papers were intended to: a) deepen students' appreciation of knowledge synthesis/application through project work (Mezirow, 2006); and b) stimulate identity development with respect to the richness of nurse leader roles within health care (Moje, 2008).</p>	<p>based on rubrics guidelines, and inductive coding to identify emerging themes.</p> <p>There were 4 independent coders: a nursing faculty who coded all 34 students journals, and 3 non-nursing coders who analyzed 24 randomly selected papers. There was an inter-rater agreement of 79-85% between nurse and non-nurse coders.</p>		
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Dissemination – Please provide a list of **past** and **future** scholarly activities (e.g., publications, presentations, invited talks, etc.) in which you or anyone from your team have or intend to disseminate the outcomes of this project.

Event	Title	Presenters/Participants
UBC Spring Institute 2016 May 2, 2016	Student-Faculty-Community Flexible Learning Partnerships	Maura MacPhee, Ranjit Dhari, Joanne Ricci, Khristine Carino
UBC TELF Showcase 2016 May 5, 2016	Flexible Learning Initiative: School of Nursing Undergraduate Curriculum	Maura MacPhee, Khristine Carino
Nurse Educator Summit 2016 April 17-20, 2016 Nashville, TN	Community Health Transformation: Success within an Accelerated BSN Program	Ranjit Dhari, Joanne Ricci
CASN Accreditation Jan 27, 2016	Flexible Learning in Nursing	Maura MacPhee, Ranjit Dhari, Joanne Ricci, Cathy Ebbehoj, Cheryl Segaric
STLHE 2015 June 15-June 19, 2015 Vancouver	Use of Reflection to Improve Student Metacognition about their Learning	Marcelo Bravo, Khristine Carino, Katherine Lyon, Adriana Briseno-Garzon, Maura MacPhee
STLHE 2015 June 15-June 19, 2015 Vancouver	Creating, Implementing and Evaluating Flipped Classroom E-Learning	Bernie Garrett, Joanne Ricci, Khristine Carino, Namsook Jahng, Ranjit Dhari
UBC CTLT Spring Institute 2015	Flexible Learning in Nursing	Maura MacPhee, Cathy Ebbehoj, Ranjit Dhari, Joanne Ricci, Cheryl Segaric
ISSoTL 2014 October 22-25, 2014 Quebec City	Flexible Learning Innovations and Outcomes within an Undergraduate Nursing Curriculum	Maura MacPhee, Bernie Garrett, Cathryn Jackson, Marc Legacy
EKM Forum 2014 UBC School of Nursing	Applications for Flexible Learning at UBC	Marc Legacy
EKM Forum 2014 UBC School of Nursing	Applications for Curriculum Redesign in the SoN	Maura MacPhee



3. TEACHING PRACTICES – Please indicate if **your** teaching practices or those of **others** have changed as a result of your project. If so, in what ways? Do you see these changes as sustainable over time? Why or why not?

Maura MacPhee

Principal Investigator

The Flexible Learning Initiative has shifted culture at the School of Nursing. Faculty members use “flexible learning when they discuss the curriculum (undergraduate and graduate), and all faculty members are incorporating flexible learning strategies into individual course work. Faculty members also recognize the benefits to using flexible learning approaches. Although there is definite room for improvement, faculty members are responsive to constructive feedback from students and peers, and some faculty members are actively seeking out assistance from the Applied Science Learning Technology Rovers and the Centre for Teaching and Learning Technology. This evident culture shift within the School of Nursing will enable flexible learning to thrive and expand across our undergraduate and graduate programs.

Cathy Ebbehoj

Lecturer

N333 Course Lead

My teaching practices have changed somewhat since incorporating flexible learning into the N333 Childbearing Individuals and Families course. I have always used some informal flexible learning strategies to support student learning. However, rather than summarize the content from the readings in a lecture as I would do previously about 50% of the time, I now have the opportunity to challenge the students to understand and apply the information in clinically based case scenarios or guiding questions. This helps them to be better prepared for clinical practice and the client receives more comprehensive care. I do not use valuable time re-teaching concepts that the students are expected to have learned, but rather I use class and lab time to check understanding and probe deeper for better reinforcement and retention of the content. When I first used flexible learning/on-line modules, I was very focused on what I would teach and the planned activities for the class and I did not stray from my teaching plan. As I am finding a balance between the structured class and the opportunity to share stories or diverge from my lesson plan, I am feeling much more comfortable with letting go and trusting that the students will have the knowledge. I see the changes in my teaching as sustainable over time as I have grown as a teacher and it is nice to know that I don't need to be the knowledge keeper and that there is a shared responsibility for learning.

Ranjit Dhari

Lecturer

N336 Course Co-Lead

Yes my teaching practice has changed, I look for ways to engage students in the course using technology. I also put more resources/optional items for them to look at on Connect so students can access them easily and anytime. Prior to FL N336 did not have any FL modules, now have created 3 online modules which are used in the course to allow students to have flexibility in their learning. This has freed up my time allowing me to update and enhance the course. This allowed me to develop some creative interactive activities to engage the student e.g. discussion board. There is less anxiety and stress to use technology for engaging and interacting students in the course. I would be open to creating another online module. Yes the changes are sustainable, in fact I am planning to update one of the modules (Dental) without any support or resources from CTLT. Having a Project Manager to support us has made it more feasible to do these modules.



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?*

Long term sustainability:

Faculty development has been the greatest sustainability factor of the FL project. With CTLT support, faculty members have learned how to create their own curriculum materials, and they are working together to provide more seamless delivery of content. Changes in our knowledge of patient/population needs, treatment strategies and healthcare systems are constantly changing. The FL project has enabled faculty to update and create new curriculum as needed—to keep with the fast-paced changes in health care. Many commercial teaching/learning resources are expensive, and they become rapidly obsolete. Commercial products are not always readily adaptable to our national, provincial and local healthcare concerns. Our faculty members, therefore, have the means now to create and deliver undergraduate nursing curriculum that is truly flexible and adaptable to new learners.