Small TLEF Project – Final Report

Report Completion Date: (YYYY/MM/DD)

1. PROJECT OVERVIEW

1.1. General Information

Project Title:	Walk and Talk for your Life		
Principal Investigator:	Charlotte Jones		
Report Submitted By:	Charlotte Jones		
Project Initiation Date:	March 2016	Project Completion Date:	July 2017

1.2. Project Summary

1.3. Team Members – (Please fill in the following table and include <u>students</u>, undergraduate or graduate, who participated in your project).

Name	Title/Affiliation	Responsibilities/Roles
Emma Garson	Md candidate: class of 2019	Help develop the module
Talia Del Medico	Medical school applicant	Help develop the module
Courtney Chang	MSc Human Kinetics	Help develop the module
Breanne Cadham	Md candidate: class of 2020	Beta testing the final module

1.4. Courses Reached – Please fill in the following table with <u>past</u>, <u>current</u>, and <u>future</u> courses and sections (e.g. HIST 101, 002, 2017/2018, Sep) that have been/will be reached by your project, including courses not included in your original proposal (you may adapt this section to the context of your project as necessary).

Course	Section	Academic Year	Term (Summer/Fall/Winter)
Med 419 FLEX	Medicine	2017-ongoing	Fall, Winter and can be summer

2. OUTPUTS AND/OR PRODUCTS

2.1. Please <u>list</u> project outputs and/or products (e.g. resources, infrastructure, new courses/programs). Indicate the current location of such products and provide a URL if applicable.

Product(s)/Achievement(s):	Location:
Walk and Talk for Life online implementation toolkit	Medical: accessible to students and key involved
	community stakeholders

2.2. Item(s) Not Met – Please list intended project outputs and/or products that were not attained and the reason(s) for this.

Item(s) Not Met:	Reason:

3. PROJECT IMPACT

3.1. What were you hoping to change or where were you hoping to see an impact with this project? – *Please list the intended benefits of the project for students, TAs, instructors and/or community members.*

THE INVOLVED STUDENTS EXPERIENCED THE FOLLOWING BENEFITS AS OUTLINED IN THE ORIGINAL GRANT:

Direct: Involvement in developing the online WTL course:

- Playing leadership role in developing new/innovative educational tools and a novel and ongoing interdisciplinary student research and education course:
- Early exposure and to the power of IP team learning and work (this benefit should occur for the short and sustained benefits)
- Better understand IP, participatory collaborative teamwork
- Interaction between students from different years within disciplines. (e.g. first and second year medical students may take the course at the same time during the Jan-April semester).
- Working along with MedIT and learning Website development

Short-term: Involvement in developing the online WTL course:

- Provision of an innovative and fulfilling FLEX, CSL or experiential activity for credit
- Student objectives-driven blended learning (face to face, online, independent, experiential) that encompasses varied community service learning and research options.
- Supports a faculty and students (multiple disciplines) with an enhanced network of connections on campus

THE STUDENT (B.C.) WHO HELPED FIRST TEST THE WEBSITE AND ONLINE MODULE BY IMPLEMENTING THE FIRST WALK AND TALK PROGRAM AT THE UNITED CHURCH IN KELOWNA, AND THE 3 SECOND YEAR MEDICAL STUDENTS (B.S., G.R., P.G.) AND THE SECOND-YEAR MEDICAL RESIDENT (J.C.) WHO ARE CURRENTLY IMPLMENTING A WALK AND TALK PROGRAM IN VANCOUVER ARE EXPERIENCING THE FOLLOWING BENEFITS.

Sustained: for those students taking the course:

Fulfills the 3 UBC objectives for FLEX learning: improved learning, increased access and greater operating efficacy (especially after scale up), is accessible and scalable (4 UBC and other university and community sites). Firmly based within the FOM who sees value in integration into the new curriculum as it adds to and supplements

- Provides early and sustained exposure to IP teaching and learning
- Provision of an accessible blended learning option that fulfills student learning style and objectives.
- Intergenerational learning: lifelong and potentially life changing learning

the standard curriculum and provides a valuable opportunity for FLEX learning for students that:

- Previous WTL Students have published and presented evidence to suggest that participating in WTL
 effectively promoted the development of the mandatory exit competencies and applied skills of medical
 expert, scholar, advocate, communicator, leader, collaborator and teacher.
- Experiential exposure and opportunities to the development of faculty and student peer-to-peer learning, integration of clinical knowledge, ethics expertise, stimulation of reflection and reasoning
- Hands on experience working in the community, inspiring students to continue community work in the future
- Supports a faculty and students (multiple disciplines) with an enhanced network of connections on campus and in the community.
- **3.2.** Were these changes/impacts achieved? How do you know they occurred? To what extent were intended benefits achieved or not achieved? What evaluation strategies were used? How was data collected and analyzed? You are encouraged to include copies of data collection tools (e.g. surveys and interview protocols) as well as graphical representations of data and/or scenarios or quotes to represent and illustrate key themes.

Intended benefits achieved included:

AS ABOVE, THE BENEFITS ARE BEING REALIZED AS INDICATED. I AM IN CONTACT EVERY WEEK WITH THE VANCOUVER TEAM AND VISITED ONSITE NUMEROUS TIMES AND WAS IN WEEKLY CONTACT WITH THE KELOWNA UNITED CHURCH STUDENT AND TEAM.

3.3. Dissemination – Please provide a list of <u>past</u> and <u>upcoming</u> scholarly activities (e.g. publications, presentations, invited talks, etc.) in which you or anyone from your team have shared information regarding this project.

THE VANCOUVER GROUP OF 4 ARE SUBMITTING AN ETHICS PROTOCOL AND WILL COLLECT DATA TO PUBLISH THEIR FINDINGS. LIKELY THEY WILL PRESENT AT THE UBC STUDENT RESEARCH CONFERENCE AS WELL. B.C. (KELOWNA) PLANS TO SUBMIT A COMMENTARY ARTICLE TO THE NATIONAL GERIATRIC INTEREST GROUP JOURNAL AND WILL PRESENT A POSTER AT THE ANNUAL SOUTHERN MEDICAL PROGRAM INTERDISCIPLINARY STUDENT HEALTH CONFERENCE.

4. TEACHING PRACTICES – Please indicate if <u>your</u> teaching practices or those of <u>others</u> 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?

GIVEN THE INCLUSION OF THE VANCOUVER SITE, RATHER THAN FACE TO FACE TEACHING, THE TEACHING GOES ON USING SKYPE AND EMAIL. TO DATE, THE STUDENTS HAVE BEEN QUITE PLEASED WITH THE PROCESS. THIS MODE OF TEACHING IS NOT AS MUCH FUN AS FACE TO FACE, BUT IS CERTAINLY SASTIFACTORY AND SEEMS TO WORK WELL. I AM PLEASED WITH IT AND FEEL IT IS SUSTAINABLE.

5. 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 COURSE WILL BE SUSTAINED THROUGH CONTINUED LISTING AND MARKETING VIA THE FACULTY OF MEDICINE FLEX ACTIVITY REPOSITORY. ADDITIONALLY, THE SECOND-YEAR STUDENTS (AND OHTER STUDENTS) THAT HAVE PARTICIPATED IN THE COURSE WILL PASS THE WORD ALONG ABOUT THE COURSE TO OTHER MEDICAL AND NON-MEDICAL STUDENTS. STUDENTS WHO HAVE TAKEN PART IN THE COURSE HAVE VOLUNTEERED TO PRESENT AT FLEX DAYS AND AT SITE (VANCOUVER, KELOWNA SO FAR) RESEARCH EVENTS. THE COURSE WILL BE "MARKETED" THROUGH STUDENTS, PROFESSORS AND WEBSITES FROM OTHER FACULTIES AND SCHOOLS AT ALL UBC SITES.

CHALLENGES:

ONE CHALLENGE MAY ENTAIL BEING ABLE TO CONNECT EFFICIENTLY WITH EACH SITE SHOULD SEVERAL SITES (AND STUDENTS) BE TAKING THE COURSE SIMULTANEOUSLY. I EXPECT THIS WILL NOT BE A MAJOR CHALLENGE GIVEN THE EXCELLENT CONNECTIVITY USING SKYPE AND FACETIME. BOOKING UBC MEDIT VIDEOCONFERENCING TIME WILL BE CONSIDERED IF NEEDED.

Nota Bene: since writing this report in mid-September, I have connected with 3 Vancouver students and a medical resident and they are using the toolkit to implement a Walk and Talk program at Granville Senior's Center in Vancouver!!! So, not a problem!!!

ANOTHER CHALLENGE: UPDATING THE MODULE: FOR EXAMPLE, CURRENTLY THE ONLINE MODULE IS NOT COMPLETELY HEARING LOSS ACCESSIBLE (VIDEOS NOT CLOSE-CAPTIONED), PARQ+ FORM HAS BEEN UPDATED. I HAVE YET TO DETERMINE HOW THE ONLINE MODULE WILL BE UPDATED AS NEW INFORAMATION AND STUDENT NEEDS ARISE. I will request help for this.