



SUBJECT	Tuition Approval - Graduate Certificate in Primary Health Care
SUBMITTED TO	Finance Committee
MEETING DATE	April 6, 2020
SESSION CLASSIFICATION	Recommended session criteria from Board Meetings Policy: OPEN
ACTION REQUESTED	Decision requested: approval of proposed resolution IT IS HEREBY REQUESTED that the Finance Committee, on behalf of the Board of Governors, approve tuition of \$850.00 per credit for the 12-credit Graduate Certificate in Primary Health Care for domestic students, effective September 2020.
SUBMISSION DATE	March 13, 2020
LEAD EXECUTIVE	Andrew Szeri, Provost and Vice-President Academic, UBC Vancouver
SUPPORTED BY	Pam Ratner, Vice-Provost and AVP Enrolment & Academic Facilities Simon Bates, Associate Provost Teaching and Learning

PRIOR SUBMISSIONS

The subject matter of this submission has not previously been considered by the Finance Committee.

EXECUTIVE SUMMARY

The proposed 12-credit Graduate Certificate in Primary Health Care supports the transformation of health care in British Columbia signaled by the British Columbia Ministry of Health's adoption of an integrated primary healthcare model. This model prioritizes the delivery of primary health care through formalized interprofessional, collaborative teams involving a range of healthcare professionals including audiologists, dietitians, midwives, nurses, nurse practitioners, occupational therapists, pharmacists, physicians, physical therapists, social workers and speech language pathologists. The certificate is designed to prepare practising healthcare professionals to lead and participate effectively in this new environment.

Pending Board of Governors and Vancouver Senate approval, this certificate will launch in September 2020. The proposed tuition for the program is \$850.00 per credit for domestic students. The program is not open to international students. The program has an anticipated enrolment of 20 students in its first year with a maximum cohort of 40 students. All fees are subject to increases as approved by the Board of Governors.

A recent report from the Office of UBC Health notes that the transition in primary healthcare delivery is '*possibly the biggest healthcare transformation in decades*'¹ – a transformation that will require a substantial change of practice for a broad range of healthcare providers. This proposed program, offered primarily online and supplemented with two weekends of face-to-face intensive learning and team-building, will play an instrumental role in the successful implementation of this change. It will assist leaders and healthcare professionals to ensure that all members of a team understand and are committed to team-based approaches to care, have a shared understanding of team-based care and speak the same language. At a practical level, this proposed certificate can ensure that leaders know the 'how', e.g., how to promote working together as an interprofessional team, how to build and support an effective team and how to create an environment where each team member contributes to high quality patient-centred care delivered by the team.

¹ Integrating Primary Care Continuing Professional Development, Recommendation Report, Office of UBC Health, May, 2018, p. 4.

Prospective students will receive specialized training and develop the understanding and skills to deliver interprofessional, team-based health care in a complex environment, including team dynamics, leadership, navigating complex health systems, interprofessional collaboration, cultural and ethical issues, chronic disease management and health delivery management. Ultimately, not only will this accelerate the future primary healthcare teams to enhance the care of British Columbians but it will situate our graduates to take leadership positions on the primary healthcare teams in evolving these teams.

This certificate is strongly aligned with several strategies of the University's Strategic Plan including:

- [Strategy 11: Education Renewal](#) by offering the program primarily online;
- [Strategy 14: Interdisciplinary Education](#) as the certificate will be taught by faculty members from multiple departments and schools, including Family Practice, the School of Population & Public Health, Rehabilitation Sciences, the School of Nursing, and industry experts; and
- [Strategy 16: Public Relevance](#) by offering a program that responds directly to the changes underway in health care, including the provision of team-based primary care, prioritized by the Ministry of Health.

During the development of the program, the Faculty surveyed potential students from 8 healthcare disciplines in BC with over 1,400 responses. Ninety percent of respondents showed their support of the certificate by indicating their willingness to undertake and pay for the certificate. As further evidence of strong support, 77% of those working in upper-level management reported that they would sponsor a staff member to enrol in the certificate and 65% indicated they would enrol themselves. Additionally, as part of the Ministry of Advanced Education, Skills and Training (AEST) Health Program Review Policy, the Faculty has been liaising with the Ministry of AEST and the Ministry of Health on the proposed program. Consultations with several regional Health Authorities such as Fraser Health, Vancouver Coastal Health and Island Health, are ongoing to better understand their needs as well as the needs of their employees. The goal of these consultations is to ensure that the certificate is designed to be as responsive as possible to this new approach to the delivery of primary health care. Initial conversations underlined the importance of this kind of education for effective team operations. They noted that having staff who had completed the certificate program would have helped make their current and future implementations more effective.

The Office of the Vice-President Students, in partnership with the Faculty of Medicine, conducted a student consultation regarding the tuition proposal (as per Policy LR4) for the proposed program. The e-consultation was conducted from November 6, 2019 to December 6, 2019. Specific questions were raised by the Graduate Student Society (GSS) which the Faculty of Medicine addressed with additional information and answers. A submission responding to the tuition proposal was received from the AMS and GSS.

Please note: This proposal is pending approval at the Senate Curriculum Committee (March 30th) and will be presented to Senate for information on April 15, 2020.

SUPPLEMENTAL MATERIALS

1. Tuition and Fee Assessment Details
2. Student Tuition Consultation Report

Tuition and Fee Assessment Details

Program Description: Graduate Certificate in Primary Health Care

Anticipated Start Date: September 2020

	Domestic
Tuition fees per instalment/credit – Note 1	\$850.00
Application Fees (Graduate) – Note 2	\$108.00
Other Faculty and Course Fees – Note 3	\$0

Note 1 – Proposed tuition will be subject to increases as approved by the Board. The program is not open to international students.

Note 2 – This is the current fee for the 2021W application cycle and is subject to increases as approved by the Board.

Note 3 – No additional fees

GRADUATE CERTIFICATE IN PRIMARY HEALTH CARE

STUDENT TUITION CONSULTATION REPORT

The Vice-President, Students Office, in partnership with the Faculty of Medicine conducted a student consultation regarding the tuition proposal for the Graduate Certificate in Primary Health Care. This report outlines the consultation process and summarizes student feedback including the student representatives' submission verbatim in Appendix 2.

Student Representative Bodies Invited to the Consultation

- Alma Mater Society (AMS)
- Graduate Student Society (GSS)

Mode of Consultation

The consultation consisted of an e-consultation and a face-to-face meeting. Student representative groups were invited to the consultation through email, and asked to distribute the invitation to their constituents as they felt appropriate. Student representative groups were also offered a face-to-face meeting to discuss the tuition proposal. A meeting was not requested by student representatives.

Basis of Consultation: The consultation was based on a tuition proposal and rationale document created by the Faculty of Medicine. Please see Appendix 1 for the invitation and tuition rationale document.

Timelines: The e-consultation was conducted over the period of Wednesday 6th November to Friday 6th December.

Summary of Student Feedback: Submissions were received from the GSS and AMS. The verbatim submissions are in Appendix 2.

Faculty Response to Student Feedback: The Faculty of Medicine provided a response to the submission by the GSS addressing concerns raised. Faculty response is in Appendix 3.

Organization	Summary
GSS	<p>ACCESS FOR MARGINALIZED POPULATIONS “Due to the \$10, 200 fees, we are concerned this cost may disproportionately affect marginalized groups and create a financial barrier to those considering the program. Working in the medical field requires an interdisciplinary and intersectional approach, as you have demonstrated, and financial barriers must be acknowledged when deciding tuition fees. We would recommend that demographics of individuals surveyed be re-examined to ensure that equitable representation is present amongst all social groups.”</p> <p>TUITION AS ONLINE PROGRAM “As listed in the proposal, the key factors considered in determining the proposed tuition includes class size, senior faculty and industry expert teaching, and significant student/teacher interaction. Since this an online-course, we are concerned that the impact of these factors on such a program may have been inflated, reflecting that of an in-person delivered course ... While we realize this is new territory, we would ask for further clarification on how this tuition was benchmarked using these existing programs and factors described to attain the proposed tuition.”</p>
AMS	<p>CONCERN WITH TUITION LEVEL “While we recognize that very few existing programs at peer institutions exist, we feel that the programs selected for comparison are too varied in format to be comparable. As similar programs develop globally, we hope that UBC will continue to be mindful of its benchmarking and commit to assessing the program’s tuition fees over time.”</p>

No individual student submissions were received.

APPENDIX 1: INVITATION TO CONSULTATION AND TUITION RATIONALE DOCUMENT**NEW PROGRAM TUITION CONSULTATION**

Faculty of Medicine – Graduate Certificate in Primary Health Care

PROGRAM OVERVIEW

The provision of efficient primary health care is a current societal need and articulated priority. This is reflected in the Government of British Columbia mandate that the Minister of Health prioritize the provision of team-based primary care.¹ The proposed online Graduate Certificate in Primary Health Care (GCPHC) program will support this transformation in health care in British Columbia as signaled by the Ministry of Health's adoption of an integrated primary healthcare model. This 12-credit, part-time certificate is targeted at practicing healthcare professionals who are in or considering healthcare leadership positions, those wishing to be effective health care providers on a primary health care team or those who are interested in the cutting edge thinking and practice of interprofessional, collaborative, team-based care in the primary care setting.

Primary Health Care is the entry point to the health system - the point through which a patient usually first encounters or has access to the health system. Primary health care includes a broad range of activities and services from health promotion to illness prevention, and the treatment and management of acute and chronic conditions at home or in the community that do not require costly emergency room treatment or hospital admissions.

An integrated primary health care model is an approach that involves an interprofessional, collaborative, team-based delivery of primary health care involving a range of health care professionals including audiologists, midwives, nurses, occupational therapists, pharmacists, physicians, physical therapists, social workers and speech language pathologists.

A recent report notes that moving the delivery of primary health care through an interprofessional, team-based, collaborative approach is '*possibly the biggest healthcare transformation in decades*'² – a transformation that will require a substantial change of practice for a broad range of healthcare providers. The GCPHC can play an instrumental role in the successful implementation of this transformational change, assisting leaders and health care professionals to ensure that all members of a team understand and are committed to team-based approaches to care; have a shared understanding of team-based care and speak the same language. At a practical level, this certificate can ensure that leaders also know the 'how' - how to promote working together as an interprofessional team, how to build and support an effective team and how to create an environment where each team member contributes to high quality patient-centered care delivered by the team.

The certificate will be taught online by faculty members from the Faculty of Medicine, including Family Practice, the School of Population & Public Health and Rehabilitation Science, as well as faculty from the School of Nursing and industry experts. Students will receive specialized, in-depth training, and develop the understanding and skills to deliver interprofessional team-based healthcare in a complex environment, including team dynamics, leadership, navigating complex health systems, interprofessional collaboration, cultural and ethical issues, chronic disease management, and health delivery management. It is anticipated that graduates would leave the certificate with the skills, experiences and knowledge to work effectively in and lead a collaborative, interprofessional team-based primary care environment.

STUDENT CONSULTATION DURING THE PROGRAM DEVELOPMENT PROCESS

In the second phase of our three-phase environmental scan, we surveyed potential learners from 8 different health-care disciplines in BC for interest in GCPHC and used their input when designing the curriculum. For example, when asked about topics of most interest, over 60% of respondents indicated 'all of the above', indicating that Clinical, Administrative, Leadership, and Policy were all important. This input reinforced the

¹ Ministry of Health 2017/18 – 2019/20 Service Plan, Sept 2017; Minister of Health Dix Mandate letter, July 2017.

² Integrating Primary Care Continuing Professional Development, Recommendation Report, Office of UBC Health, May, 2018, p. 4.

importance of many of the curriculum topics generated by our Advisory Committee and these subjects were included in the various courses. Highlights from the 1,417 responders include:

Demographic Characteristics:

- 972 respondents (68.6%) were health service providers, 129 (9.1%) provide administrative or managerial support, and 316 respondents (22.3%) perform both roles
- 872 participants (61.5%) practice in urban areas, 209 (14.7%) in rural areas, and 296 (20.9%) in both
- Those responding came from the health professions of Audiology/speech language pathologist, MD-family practice, MD-specialist, Midwifery, Nursing, Occupational Therapy, Pharmacy, Physical Therapy, and Social Work
- 85% of respondents had more than 5 years' experience with the largest group of respondents (30%) being those with 25+ years' of experience.

Specific Responses:

- When asked about the topics of most interest, over 60% indicated 'all of the above' which included Clinical, Administrative, Leadership, and Policy topics. As noted above, this input from potential learners reinforced the initial approach of the Advisory Committee to include all these areas in the curriculum of the Certificate.
- 90% of respondents indicated a moderately to extremely important ranking in the following primary health care topics: Population Health, Health Promotion, Disease Prevention and Self-Management, E-Health, Indigenous Health, Aging, and Mental Health. This input from potential learners reinforced the importance of many of the specific curriculum topics generated by our Advisory Committee and led to their inclusion in the syllabi.
- 90% reported a willingness to pay for the certificate when asked, "Would you be willing to pay for this proposed Certificate?"
- 190 respondents self-identified as working in upper-level management. Of these, 77% reported that they would sponsor a staff member to enroll in the certificate and 65% indicated they would enroll themselves.
- 1443 respondents indicated that time away from their job would be a significant impediment to enrolling in the Certificate, reinforcing the decision to offer the Certificate online.

TUITION AND FEES RATIONALE

Proposed tuition for the program is \$850 per credit (totalling \$10,200 for the program). Key factors influencing the tuition include:

- Small class size of approximately 12 students in our first year with a maximum of 40
- Courses primarily taught by senior research faculty and industry experts
- Significant amount of instructor supervision and instructor/student interaction.

It is envisioned that this certificate would be completed primarily online, supplemented with two weekends of face-to-face intensive learning over 1.5 years to a maximum of four years. Each course will be offered on Canvas, UBC's Learning Management System, and will consist of components such as short modular videos, webinars, discussions, interactive learning activities, quizzes, group projects and submitted assignments.

To complete the certificate, students must complete:

- PRHC 501: Foundations in Primary Health Care I (3; 3-0-0)
- PRHD 503: Foundations in Primary Health Care II (3; 3-0-0)
- PRHC 505: Integrating Principles of Collaborative, Team-Based PHC Into Practice (3; 3-0-0)
- PRHC 507: Primary Health Care in Rural and Remote Communities (1.5; 1.5-0-0)
- PRHC 509: Elective in Primary Health Care (1.5; 1.5-0-0)

Tuition Benchmarking

For the first phase of the environmental scan, we reviewed existing programs at peer institutions . We found that there were:

- No graduate certificates in primary health care offered in North America.
- Three graduate certificates offered in the UK, one of which is offered online
- Two graduate certificates offered in Australia, both offered in the online format
- One graduate certificate offered online in New Zealand

Below are fees charged by these comparable programs.

Institution	Tuition	Canadian Value
University of Birmingham, UK (domestic) University of Birmingham, UK (international)	£6,167 £14,460	\$10,561.09 CAD \$24,623.95 CAD
University of Glasgow, UK (all students)	£5,019	\$8,508.93 CAD
Swansea University, UK (all students)	£5,318	\$9,016.37 CAD
University of Otago, NZ (domestic) University of Otago, NZ (international)	\$5,603 NZD \$19,739 NZD	\$4,693.46 CAD \$16,647.22 CAD
University of Melbourne, AU (domestic) University of Melbourne, AU (international)	\$10,752 AD \$16,182 AD	\$9,656.11 CAD \$14,681.33 CAD
University of Western Sydney, AU (domestic) (no international student admitted to the program)	\$13,520 AD	\$12,139.52 CAD

PROPOSED TUITION AND FEES

Proposed tuition for the program is \$850 per credit.

	Domestic
Tuition fees per credit – Note 1	\$850.00
Application Fees – Note 2	\$106.00
Non-Refundable Acceptance Deposit	N/A
Other Faculty and Course Fees – Note 3	

Note 1 – Proposed tuition will be subject to annual increases as established by the university.

Note 2 – This is the current fee for the 2020W and 2021S application cycles and is subject to annual increases. The fee for the 2021W and 2022S application cycles is being proposed to the Board in the December 2019 meeting at \$108.00 for domestic students and will apply to this graduate certificate if approved.

Note 3 – No additional fees.

APPENDIX 2: STUDENT SUBMISSIONS

There was a submission from the GSS and AMS.



**GRADUATE
STUDENT SOCIETY**
UBC VANCOUVER

Thea Koerner House
225 - 6371 Crescent Rd. Vancouver
604.822.3203
gss.ubc.ca

Submission to the UBC Faculty of Medicine regarding the Tuition for the new Graduate Certificate in Primary Health Care

December 4th, 2019

Dear Faculty,

This submission is sent on behalf of the Graduate Student Society of UBC in response to the feedback request from the Vice President University and Academic Affairs Office on tuition for the creation of a 12-credit specialized graduate certificate program in Primary Health Care.

As a Society we try to provide feedback that reflects the dual desires of graduate students:

- That the University is able to meet its goal of providing outstanding and relevant programs for graduate students
- That graduate education at UBC should be affordable and accessible

We recognize that this new Certificate meets a significant need in the rapidly diversifying healthcare field. It is also a program that resonates with UBC's mission of excellence in education, offering students access to senior research faculty and industry experts. We also appreciate that the program is structured to enhance the education of individuals currently employed by the healthcare system, with an emphasis on interprofessional and innovative healthcare practices.

We also acknowledge and recognize that development of a university program is a complex task, and we appreciate the extensive consultation process that has occurred with the BC Healthcare community. However, we would caution that the demographic surveyed may provide limiting data and may not accurately represent the reality of all potential applicants. Due to the \$10, 200 fees, we are concerned this cost may disproportionately affect marginalized groups and create a financial barrier to those considering the program. Working in the medical field requires an interdisciplinary and intersectional approach, as you have demonstrated, and financial barriers must be acknowledged when deciding tuition fees. We would recommend that demographics of individuals surveyed be re-examined to ensure that equitable representation is present amongst all social groups.

The GSS is pleased to see that this course will be offered primarily via online course, as this creates an accessible medium for students, especially mature students and students with dependents. As listed in the proposal, the key factors considered in determining the proposed tuition includes class size, senior faculty and industry expert teaching, and significant student/teacher interaction. Since this an online-course, we are concerned that the impact of these factors on such a program may have been inflated, reflecting that of an in-person delivered course. Moreover, the programs compared for tuition benchmarking (Birmingham, Glasgow, Swansea, Otago, Melbourne, and West Sydney) have substantial differences, in particular mode and delivery of study which does not allow for equitable tuition benchmarking. While we realize this is new territory, we would ask for further clarification on how this tuition was benchmarked using these existing programs and factors described to attain the proposed tuition.



**GRADUATE
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We also believe that scholarships and bursaries have an important role to play in making programs such as this accessible and look forward to an update on what will become available in future.

The GSS would like to thank the University for the opportunity to provide input in this process. We look forward to meeting the first students of the new Certificate and to see them succeed at UBC.

Sincerely,

Tarique Benbow

Vice President University & Academic Affairs
Graduate Student Society
of UBC Vancouver
vpacademic@gss.ubc.ca



Submission to the UBC Board of Governors regarding the Tuition for the Graduate Certificate in Primary Health Care

December 16th, 2019

Dear Board of Governors,

This submission is made on behalf of the Alma Mater Society of UBC Vancouver (AMS) in response to the feedback request from the Vice President Students Office on tuition for the Graduate Certificate in Primary Health.

The AMS appreciates this innovative and interprofessional learning opportunity that addresses provincial priorities on the provision of team-based primary care. As a primarily online program, this certificate is accessible to students and healthcare professionals who can continue to work and partake in the program. This program will be an exciting addition to the new collaborative learning space offered at the Gateway Building (Nursing, Kinesiology, UBC Health, Integrated Health Services), and all students will benefit from this academic environment.

The current tuition fees have been assessed on a per-credit basis of \$850 per credit, totalling \$10,200 for the program. While we recognize that very few existing programs at peer institutions exist, we feel that the programs selected for comparison are too varied in format to be comparable. As similar programs develop globally, we hope that UBC will continue to be mindful of its benchmarking and commit to assessing the program's tuition fees over time.

The AMS supports the implementation of this pilot graduate certificate program and looks forward to being updated on bursaries and scholarships for this program for all students, to continue ensuring its accessibility to students of all income levels.

The AMS thanks the University for soliciting student input in this process. We look forward to the implementation of the Graduate Certificate for Primary Health Care and its innovative program design.

Sincerely,

Julia Burnham

Vice President Academic and University Affairs
AMS Student Society of UBC Vancouver
vpacademic@ams.ubc.ca

APPENDIX 2: FACULTY RESPONSE TO GSS SUBMISSION



THE UNIVERSITY OF BRITISH COLUMBIA

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December 9, 2019

Graduate Student Society
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**RE: Response to Graduate Student Society Tuition Review
From Proposed Graduate Certificate in Primary Health Care Team**

Dear Tarique Benbow and the Graduate Student Society,

We want to thank the Graduate Student Society for their detailed review of the proposed tuition for our Graduate Certificate in Primary Health Care. We appreciate their suggestions for ensuring that access to the Certificate is equitable and their acknowledgement of the importance of this proposed Certificate.

We would like to respond to the three specific issues raised by the GSS's comprehensive feedback.

First, our response to the comment that, because it is an online certificate, the GSS had concerns that "the key factors considered in determining the proposed tuition" - small class size, senior faculty and industry expert teaching, and significant student/teacher interaction – 'may have been inflated, reflecting that of an in-person delivered course". The implication here is that the online mode of delivery could lessen the impact of having senior faculty and industry experts teaching, as well as undermine the benefits of significant student/teacher interaction.

We would propose the opposite. In fact, we would argue that "high-touch" online courses such as we are proposing, by virtue of limited enrolment, provide a potentially improved learning experience. They expand the classroom beyond the physically-limited and time-bounded three hours of face-to-face interaction that are the hallmark of a traditional lecture or seminar-based course and increase the opportunities for high quality learner-instructor interaction. A well-designed online course comprised of materials and activities developed by the senior faculty and industry experts who will be instructing the courses actually increases the opportunities for learners to actively engage with instructors, course materials and concepts, learning at their own pace using a number of modalities. It can also encourage active, on-going learning through multiple accesses to a variety of text and video-based course materials as well as repeatable quizzes and interactive learning activities, such as low-tech simulations, games and puzzles. -Such online courses can enhance meaningful student interaction with faculty – and with their fellow learners - by providing the time, tools and a managed course space for thoughtful discussion contributions that can be reviewed by both learners and instructors. Further, we envision that learners and instructors will interact in a seminar or small group tutorial format as part of

each week, using online tools to overcome the limitations of geography. Additionally, learners have a protected, private space and dedicated tools to support their work on group projects. Finally, learners can even have opportunities to contribute to course materials since identified in-depth projects can be shared with future cohorts, with the approval of the student(s) creating the projects.

Second, while acknowledging that certificates such as the proposed Graduate Certificate in Primary Health Care are new territory, the letter from the GSS notes that there are substantial differences in the programs used for benchmarking. We began our exploration of tuition rates by looking at costs for online certificates in primary health care that offered similar credentials. Our tuition ranked in the mid-point for these certificates. We also explored the costs of similar online certificates at UBC where we are towards the top end. Finally, we were guided by information from the Provost's Office that provided a salary cost buy-out figure for senior instructors and the need for the program to be cost recovery. Aside from the inherent differences of programs offered in the international educational context such as the loose equivalency of papers vs courses, all the benchmarking examples were online graduate certificate programs - Certificates in Primary Health Care. One of the universities used for our benchmarking, the well-established Postgraduate Certificate in Primary Health Care program from the University of Otago, NZ, has been investigated in depth and, aside from the different terminology and ways of organizing the certificate 'courses', it closely aligns to the proposed Certificate. In fact, the Otago program was frequently consulted in the initial phases of developing our proposed Graduate Certificate in Primary Health Care.

Third, we agree that scholarships and bursaries can have an important role to play in making programs such as this accessible. In this case, we believe this will be less of an issue since we anticipate that this certificate will be undertaken by working health care professionals. Nevertheless, if the Certificate reaches a revenue-generating position, we plan to explore the need for scholarships and bursaries and will work to offer them if appropriate to ensure the equitable representation of all social groups.

We hope this response has addressed your concerns adequately. If you have further inquiries, please don't hesitate to reach out to me (bill.miller@ubc.ca) and/or the Faculty of Medicine curriculum team (fom.curriculum@ubc.ca).

Sincerely,



Dr. William Miller, PhD

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