

Module Descriptor

Title	Quality Improvement in Healthcare					
Session	2024/25	Status				
Code	11049	SCQF Level	11			
Credit Points	20	ECTS (European Credit Transfer Scheme)	10			
School	Health and Life Sciences					
Module Co-ordinator	Jonathan Johnston					

Summary of Module

Failures in healthcare quality and safety are a dominant national and international issue (WHO, 2014) it is estimated, 1 in 10 patients is harmed while receiving hospital care, and 7 in every 100 hospitalized patients can expect to acquire a healthcare-associated infection, within high-income countries (WHO, 2020). The NHS ceaselessly promotes and advocates for engagement in quality improvement QI in order to deliver the highest quality healthcare outcomes, at the lowest possible cost (Jabbal and Lewis, 2018). However international healthcare systems are still recovering from a global pandemic exacerbating excessive demands and challenges (Reece et al 2018). QI over the last decade has gained the attention of not only clinicians but also managers and policymakers (Knezeric, 2019). It has been highlighted that the National Health Service (NHS) in Scotland is now a world leader in patient safety and QI (Jeffcott, 2014), based on the developments associated with the Health Care Quality Strategy (Scottish Government, 2010) and the 2030 Vision (Scottish Government, 2017)

Quality improvement has attempted to address identified gaps in healthcare quality, however QI methodologies concepts and tools advocated have rapidly changed from one favoured concept to another (Reese et al 2018). Additionally, healthcare is a complex system of processes and procedures in which Quality improvement methodologies have demonstrated variable inconsistent results with limited benefit (Coles, 2017) no actual change or improved outcomes with potential barriers identified in the designing delivery and sustaining of the quality improvement initiative (Jones, 2019) This module aims to develop, therefore, practitioners' knowledge and understanding relating to the variety of QI methodologies, models of quality improvement, the tools and techniques used, thus enabling them to use a variety of different approaches to realise the potential of the improvements being undertaken.

The above skills acquisition, contributes to the development of the UWS Graduate Attributes: Universal - critical thinking, analytical, inquiring, culturally aware, emotionally intelligent, ethically-minded, culturally aware, collaborative, research-minded and socially responsible; Work-Ready -knowledgeable, digitally literate, effective communicator, motivated, potential leader; and Successful -autonomous, incisive, creative, resilient and daring.

Module Delivery Method	On-Campus ¹		ı	Hybrid ²	Online³ ⊠		Work -Based Learning⁴	
Campuses for Module Delivery	Ayr Dumfrie	38		∠ Lanarks∠ London∠ Paisley	hire	Online / Distand Learning Other (specify)		
Terms for Module Delivery	Term 1			Term 2		Term	3	
Long-thin Delivery over more than one Term	Term 1 – Term 2			Term 2 – Term 3		Term Term		

Lear	ning Outcomes
L1	Critically appraise improvement methodologies, their development, implementation and implications within healthcare settings.
L2	Review and evaluate differing approached to continuous quality improvement and their relevance and applicability within a healthcare setting
L3	Systematically appraise evaluation strategies, examining impact and effectiveness within the healthcare setting.
L4	
L5	

Employability Skills and Personal Development Planning (PDP) Skills					
SCQF Headings	During completion of this module, there will be an opportunity to achieve core skills in:				
Knowledge and Understanding (K and U)	SCQF 11 Demonstrate and or work with a critical understanding of the principal theories, principles and concepts.				
Practice: Applied Knowledge and Understanding	SCQF 11 Demonstrate the use of a significant range of the principal skills, techniques and practices relating to improvement methodologies.				
	Demonstrate originality and creativity in the application of knowledge, understanding and / or practices.				

¹ Where contact hours are synchronous/ live and take place fully on campus. Campus-based learning is focused on providing an interactive learning experience supported by a range of digitally-enabled asynchronous learning opportunities including learning materials, resources, and opportunities provided via the virtual learning environment. On-campus contact hours will be clearly articulated to students.

² The module includes a combination of synchronous/ live on-campus and online learning events. These will be supported by a range of digitally-enabled asynchronous learning opportunities including learning materials, resources, and opportunities provided via the virtual learning environment. On-campus and online contact hours will be clearly articulated to students.

³ Where all learning is solely delivered by web-based or internet-based technologies and the participants can engage in all learning activities through these means. All required contact hours will be clearly articulated to students.

⁴ Learning activities where the main location for the learning experience is in the workplace. All required contact hours, whether online or on campus, will be clearly articulated to students

Generic	SCQF 11					
Cognitive skills	Critically analyse, evaluate and synthesise issues which are at the forefront or informed by developments relating to quality improvement methods.					
	Identify, conceptualise and define new and abstract problems and issues.					
	Develop original and creative responses to problems and issues.					
	Critically review, consolidate and extend knowledge, skills practices and thinking in relation to continuous quality improvement.					
Communication,	SCQF 11					
ICT and Numeracy Skills	Undertake critical evaluations using a wide range of numerical and graphical data.					
Autonomy,	SCQF 11					
Accountability and Working with Others	Demonstrate leadership and or initiatives and make an identifiable contribution to change and development.					
	Practice in ways which draw on critical reflection on own and others roles and responsibilities.					

Prerequisites	Module Code	Module Title
	Other	
Co-requisites	Module Code	Module Title

Learning and Teaching

In line with current learning and teaching principles, a 20-credit module includes 200 learning hours, normally including a minimum of 36 contact hours and maximum of 48 contact hours.

Learning Activities During completion of this module, the learning activities undertaken to achieve the module learning outcomes are stated below:	Hours (Note: Learning hours include both contact hours and hours spent on other learning activities)	
Tutorial / Synchronous Support Activity	20	
Personal Development Plan	4	
Lecture / Core Content Delivery	16	
Independent Study	152	
Asynchronous Class Activity	8	
Please select		

TOTAL 200

Indicative Resources

The following materials form essential underpinning for the module content and ultimately for the learning outcomes:

There are no core texts for this module: all are considered recommended reading:

https://uws-

uk.alma.exlibrisgroup.com/leganto/public/44PAI_INST/lists?courseCode=NURS11049&auth=SAML&idpCode=44PAI_Azure4LegantoCustom

Websites

www.hqip.org.uk/resource/guide-to-quality-improvement-methods/ (excellent resource covering methodology and tools)

Healthcare Improvement Scotland

https://www.ihi.org/

https://www.health.org.uk/

https://www.kingsfund.org.uk/

Cite Them Right - Setting out citations (citethemrightonline.com)

McLaughlin C.P, Johnson J.K, Solleciko W.A. (2011) Implementing Continious Quality Improvement in Healthcare: A Global Casebook. London: Jones & Bartlett

Powell A, Rushmer R, Davis H. (2009) A systematic narrative review of quality improvement models in healthcare. Edinburgh: NHS Quality Improvement Scotland.

Scottish Government Health Department (2008) Leading Better Care. Edinburgh.

Sherwood G and Barnsteiner, J. (2012) Quality and Safety in Nursing: A competency Approach To Improving Outcomes. Oxford:Wiley-Blackwell.

Gillan, S and Siriwardena, A.N (2014) Quality Improvement in Primary Care. Oxford: Radcliffe

Baillie, L., Maxwell, E. (2017) Improving Healthcare; A Handbook for Practitioners: Routledge

International Journal for Quality in Healthcare

Journal for Healthcare Quality

(N.B. Although reading lists should include current publications, students are advised (particularly for material marked with an asterisk*) to wait until the start of session for confirmation of the most up-to-date material)

Attendance and Engagement Requirements

In line with the <u>Student Attendance and Engagement Procedure</u>, Students are academically engaged if they are regularly attending and participating in timetabled oncampus and online teaching sessions, asynchronous online learning activities, course-related learning resources, and complete assessments and submit these on time.

For the purposes of this module, academic engagement equates to the following:

Attendance at tutorials, lectures and other synchronous activity.

Engagement with asynchronous learning on the ELE (Aula).

Cpmpletion of assessments in a timely fashion.

Communication with Module Coordinator if there are issues regarding any of the above.

Equality and Diversity

The University's Equality, Diversity and Human Rights Procedure can be accessed at the following link: <u>UWS Equality, Diversity and Human Rights Code.</u>

Within this module, quality of care, inclusiveness and employability are achieved by:

- Provision of a welcoming and supportive culture that promotes accessibility and equal opportunities to students and prospective students
- Promotion of confidence and knowledge of their rights as a student and employee
- Promotion of respect and knowledge of client diversity, their needs, rights and associated practitioner responsibilities

The above aims are supported by staff belief in fairness and equal opportunities and thus guide the content, teaching and learning, assessment and evaluation.

Anticipatory' and 'reasonable' adjustments are grounded in 'competence standards' – specifically, the core requirements for progression / achievement in placement / module. Anticipatory adjustments have been made and 'reasonable adjustments' can be made available in teaching and learning strategies to promote accessibility of the module. For students who have disclosed a disability, the UWS Disability Service (DS) will assess the individual's strengths and support needs and then forward a Student Support Form to the appropriate DS Co-ordinator who will circulate the form to all of the relevant teaching staff. 'Reasonable adjustments' may include adapted or specialised clinical equipment (e.g. electronic stethoscope, coloured overlays) or further specialist assessment or support (e.g. assessment by an Educational Psychologist, extended time for presentations or assessments). If funding is required, this can be organised by the DS and funded by the School. Reasonable adjustments, in line with DS recommendations for the assessment of the individual student can be assured.

Processes and procedures have been subject to Equality Impact Screening and where appropriate Equality Impact Assessment. Evaluation by all key stakeholders throughout the life of the module is also central to meeting our commitments.

Students should approach the Disability Service as early as possible to discuss support. Details of the service can be found at: www.uws.ac.uk/disabilityservice/

(N.B. Every effort will be made by the University to accommodate any equality and diversity issues brought to the attention of the School)

Supplemental Information

Divisional Programme Board	Please select
Overall Assessment Results	☐ Pass / Fail ⊠ Graded

Compensation		cas pro	If this module is eligible for compensation, there may be cases where compensation is not permitted due to programme accreditation requirements. Please check the associated programme specification for details.							
School Assessment	Board	Con	Community and Health							
Moderator		Ang	Angela Bonar							
External Examiner		Moy	ra Jorne	aux						
Accreditation Detail	s	_								
Module Appears in C catalogue	CPD	N Y	∕es □ l	No						
Changes / Version N	umber	1.15	5							
Assessment (also re	fer to As	sessm	ent Out	comes (Grids be	low)				
Assessment 1										
Summative Part 1: A r (70%)	modified	literatu	re reviev	w around	d quality	improvement in l	nealthcare			
Assessment 2										
Summative Part 2: Pro improvement method		on of a p	oster ou	utlining a	a system	atic critique of a	chosen quality			
Assessment 3										
(N.B. (i) Assessment (below which clearly c					•	•	•			
(ii) An indicative sche assessment is likely t										
Component 1	 		1	1		T				
Assessment Type	LO1	LO2	LO3	LO4	LO5	Weighting of Assessment Element (%)	Timetabled Contact Hours			
						70	0			
Component 2										
Assessment Type	LO1	LO2	LO3	LO4	LO5	Weighting of	Timetabled			
						Assessment Element (%)	Contact Hours			
Component 3										
Assessment Type	LO1	LO2	LO3	LO4	LO5	Weighting of Assessment Element (%)	Timetabled Contact Hours			
L	<u> </u>		1	1	1	1	1			

Yes No

Module Eligible for

	100%	0 hours					

Change Control

What	When	Who