Module Descriptor

Title	NMC Responding to Public Health Challenges		
Session	2024/25	**Status**	
Code	NURS11150	**SCQF Level**	11
Credit Points	20	**ECTS (European Credit Transfer Scheme)**	10
School	**Health and Life Sciences**		
Module Co-ordinator	A Bonar		

Summary of Module

The impact of the Pandemic has left up to 100 million people in extreme poverty. (The Lancet, 2022). Unacceptable inequalities in health still exist across societal groups (EU Commission, 2014; NHS Scotland, 2020; Scottish Government, 2018a), with some developed countries experiencing notable differences in life expectancy between poor and affluent areas of as much as 17 years (OECD, 2018).

This module will explore the policy context and its intended impact (Scottish Government, 2018a; WHO, 2017), developed across sectors to address, improve health and tackle health inequalities (Walker & John, 2012; WHO, 2017). It will allow an insight into some of the measures used in determining trends and patterns in population health, including epidemiology and health statistics, as well as a number of contemporary approaches in addressing health concerns (Hosseinpoor, Bergen, and Schlotheuber, 2015).

Students will be introduced to public health theory and practice, and work towards adopting a systematic approach to developing health improvement interventions using the processes underpinned by public health and health promotion specialists. Students will also explore the methods by which these interventions can be planned, managed, and evaluated, in order to develop the maximum impact and benefit for organisations and stakeholders (Corcoran, 2013).

Syllabus Overview:

Determinants of health

Health inequalities and equity

Policy context; public and social policy

Epidemiology

Health needs assessment

Health improvement, policy, methodologies, models (e.g. Beattie's, Downie, Fyffe &Tannahill, Precede-Proceed, Transtheoretical model) and initiatives.

Cultural competence

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] ☐	Hybrid[2] ☒	Online[3] ☒	Work -Based Learning[4] ☐
Campuses for Module Delivery	☐ Ayr ☐ Dumfries	☒ Lanarkshire ☐ London ☐ Paisley	☒ Online / Distance 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 3 – Term 1	☐

Learning Outcomes	
L1	Critically examine the range of theories and models, which underpin contemporary health improvementand public health practice.
L2	Demonstrate a critical understanding of the concepts, principles and methods of utilising epidemiologicaland other health data to underpin health needs assessment.
L3	Analyse the major determinants of health and critically evaluate global, national and local policy initiativesfor improving public health.
L4	Systematically review and evaluate the effectiveness of health improvement interventions whichcontribute to enhancing the health and social wellbeing of individuals, families and communities.
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** Critically exploring both the policy and practice context of health inequalities andappraisal of the cross sectoral responses to improve health and tackle inequalities.

Practice: Applied Knowledge and Understanding	SCQF 11
	Critically examining the application of knowledge and skills required byhealthcare professionals to contribute to the health improvement agenda.
	Apply the principles of epidemiological theory to the health care environment.
Generic Cognitive skills	SCQF 11
	Analysing the links between policy and strategy and implementation of local,national and/or international public health initiatives.
Communication, ICT and Numeracy Skills	SCQF 11
	Critically appraising health and social care communication strategies used to enhance wellbeing at individual, family and community levels
Autonomy, Accountability and Working with Others	SCQF 11
	Reflecting analytically on own role and those of health and social care providersacross statutory and third sector services contributing significantly to the deliveryof health improvement and public health practice.
	Commenting critically on partnership working between public health, health improvement and third sector organisations.

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.
This module is delivered via hybrid delivery as well as by fully distance learning utilising the Virtual Learning Environment (VLE).
Hybrid delivery: In this mode of delivery, students will attend classes and take part in a range of face-to-face/synchronous student-centred activities with the lecturer and class peers. The materials presented during the classes will be those utilised by fully online students to ensure parity of experience. Taught students have access to direct individual and tutorial support from their lecturers and will be directed to wider reading, including access to an electronic library and books. They will also have access to the VLE as a mechanism for communication and dissemination of information.
Distance learning students: In this mode of delivery, students are learning fully online and are supported by the VLE. Online students will receive core module resources; individual and group tutorial support and directed learning via the VLE system. This will be aided by asynchronous online VLE discussion boards; virtual learning activities; tutorials (online / face to face via MST Teams and WEBex); directed wider reading including access to electronic library and e-books.
All students will be expected to work through the online module materials independently via the VLE. This will assist in enhancing skills of communication, presentation, problem-solving, and critical reflection.
Module content reflects societal diversity and a rights-based approach to practice. To promote accessibility, anticipatory adjustments have been made to teaching and learning strategies e.g. availability of electronic copies of lecture materials. Further reasonable

adjustments can be made for students who have been assessed as requiring specific adjustments e.g., specialised equipment for studying e.g., specialised software.

Learning Activities	Student Learning Hours
During completion of this module, the learning activities undertaken to achieve the module learning outcomes are stated below:	(Note: Learning hours include both contact hours and hours spent on other learning activities)
Lecture / Core Content Delivery	18
Tutorial / Synchronous Support Activity	18
Personal Development Plan	6
Asynchronous Class Activity	20
Independent Study	138
Please select	
TOTAL	200

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

Core text:

Bhopal, R. S. (2013) Concepts of Epidemiology: Integrating the Ideas, Theories, Principles and Methods ofEpidemiology. 3rd ed. Oxford: Oxford University Press.

http://libcat.uhi.ac.uk/record=b1106651~S18Corcoran, N. (ed.) (2013) Communicating Health: Strategies for Health Promotion. 2nd ed. Thousand Oaks: SAGEPublications.

http://libcat.uhi.ac.uk/record=b1562518~S18Douglas, J. (ed.) (2010) A Reader in Promoting Public Health: Challenge and Controversy. 2nd ed. Milton Keynes:SAGE.

 http://libcat.uhi.ac.uk/record=b1488036~S18Ebner, Y. (2010) The Impact of the Economic Crisis on Health Inequalities. Geneva: Assembly of EuropeanRegions. [Online]

Available:http://www.aer.eu/fileadmin/user_upload/Commissions/HealthSocial/EventsAnd Meetings/2010/Brussels_Fall/FINAL-Healthinequaltities.pdf

Institute for Government (2018) Understanding the economic impact of Brexit. Institute for Government: London

Kings Fund (2019). Brexit: the implications for health and social care. (Online) https://www.kingsfund.org.uk/publications/articles/brexit-implications-health-social-care (Date Accessed 19/01/21)

Hosseinpoor, A., Z, Bergen, N. & Schlotheuber, A. (2015) Promoting health equity: WHO health inequalitymonitoring at global and national levels, Global Health Action, 8:1, DOI: 10.3402/gha.v8.29034

Marmot, M., Allen, J., Goldblatt, P., Herd, E. and Morrison, J (2021) Build Back Fairer: The Covid-19 MarmotReview. The Pandemic, Socioeconomic and Health Inequalities in England. London: Institute of Health equity

NHS Scotland (2020) Recover, Restore, Renew. Chief medical officer for Scotland annual report 2020-021https://www.gov.scot/binaries/content/documents/govscot/publications/corporate-report/2021/03/cmo-annual-report-2020-21/documents/chief-medical-officer-scotland-annual-report-2020-2021/chief-medical-officer-scotland-annual-report-2020-

2021/govscot%3Adocument/chief-medical-officer-scotland-annual-report-2020-2021.pdf?forceDownload=true

OECD/EU (2018), Health at a Glance: Europe 2018: State of Health in the EU Cycle. OECD Publishing: ParisAvailable (online) https://doi.org/10.1787/health_glance_eur-2018-en (Date accessed 18/1/21).

Ritsatakis, A. (2011) Healthy Cities Tackle the Social Determinants of Inequities in Health: a Framework for Action.[Online] Available: http://www.healthycities.org.uk/uploads/files/10_new_healthy_cities_tackle_thesocial_determinants_of_inequities_in_health__a_framework_for_action___edited_final.pdf

Scottish Government (2018a) Public Health Priorities for Scotland. Scottish Government: Edinburgh

Walker, P. and John, M. (2012) (eds.) From Public Health to Wellbeing: the New Driver for Policy and Action.Basingstoke: Palgrave Macmillan. Available (online)http://libcat.uhi.ac.uk/record=b1534234~S18 (Date accessed18/1/21)

World Health Organisation (2010) Poverty, social exclusion and health systems in the WHO European Region.WHO Regional Office for Europe: Copenhagen

WHO (2014) Review of Social determinants and the health divide in the WHO European Region: Final Report.[Online] Available:http://www.instituteofhealthequity.org/projects/who-european-review

WHO (2017) National Health Inequality Monitoring. https://www.who.int/docs/default-source/gho-documents/health-equity/handbook-on-health-inequality-monitoring/9-june-web-version-17136-national-health-inequality-monitoring-step-by-step-manual.pdf?sfvrsn=2a9ac9a9_2

(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 Student Attendance and Engagement Procedure, Students are academically engaged if they are regularly attending and participating in timetabled on-campus 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:

Equality and Diversity

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

The School of Health and Life Science believes that education and practitioner diversity are central to achieving quality of care.

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, 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	Adult Nursing Community Health
Overall Assessment Results	☐ **Pass / Fail** ☒ **Graded**
Module Eligible for Compensation	☐ **Yes** ☒ **No** **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	Community and Health
Moderator	S Struzik
External Examiner	M Journeaux
Accreditation Details	N/A
Module Appears in CPD catalogue	☐ **Yes** ☐ **No**
Changes / Version Number	

Assessment (also refer to Assessment Outcomes Grids below)
Assessment 1
Both formative and summative assessment strategies will be utilised within the module. Early formative assessment will be incorporated into the module to facilitate the process of student development and academicliteracy skills, providing both feedback and feed-forward to enablBoth formative and summative assessment strategies will be utilised within the module. Early formative assessment will be incorporated into the module to facilitate the

process of student development and academic literacy skills, providing both feedback and feed-forward to enable this process.

Each component of the assessment must be passed at 50%. This is to comply with NMC Quality Assurance Framework for Nursing and Education (2013, updated 2017) and in exception to UWS regulatory framework (2017-2018) section 7.3.2.

The summative assessment consists of 2 parts.

Part A of the summative assessment is based on the student's participation in a presentation hosted in the Virtual Learning Environment. This component must be passed at 50%.

Assessment 2

Part B of the summative assessment is a written report equivalent to 50% of the final mark. In addressing all the learning outcomes within the context of the module, the student will select a major health issue for examination and present a report on a critical evaluation of the global, national, and local policy initiatives introduced to tackle the issue. Each component must be passed at 50%.

Assessment 3

n/a

(N.B. (i) Assessment Outcomes Grids for the module (one for each component) can be found below which clearly demonstrate how the learning outcomes of the module will be assessed.

(ii) An indicative schedule listing approximate times within the academic calendar when assessment is likely to feature will be provided within the Student Module Handbook.)

Component 1							
Assessment Type	**LO1**	**LO2**	**LO3**	**LO4**	**LO5**	**Weighting of Assessment Element (%)**	**Timetabled Contact Hours**
Presentation	☒	☒	☒	☒	☐	50	0

Component 2							
Assessment Type	**LO1**	**LO2**	**LO3**	**LO4**	**LO5**	**Weighting of Assessment Element (%)**	**Timetabled Contact Hours**
Report of practical/field/ clinical work	☒	☒	☒	☒	☐	50	0

Component 3							
Assessment Type	**LO1**	**LO2**	**LO3**	**LO4**	**LO5**	**Weighting of Assessment Element (%)**	**Timetabled Contact Hours**
	☐	☐	☐	☐	☐		
Combined total for all components						100%	0 hours

Change Control

What	**When**	**Who**