Governance and Leadership in European Public Health

Master's Programme

Master Governance and Leadership in European Public Health

Fac. Health, Medicine and Life Sciences

Introduction to Governance and Leadership in European Public Health

EPH4014

Period 1
4 Sep 2017
29 Sep 2017

[Print course description](#)
ECTS credits:
5.0
Instruction language:
English
Coordinator:
[D.M.R. Townend](#)

Fac. Health, Medicine and Life Sciences

Measuring and Comparing Health in Europe – Quantitative and Qualitative Approaches

Full course description

The aim of this module is to enable the students to make critical judgments, assess, explore, measure, recognize and compare the striking diversity of populations' health status, health indicators, health inequalities in European Region using quantitative and qualitative data collection approaches region.
Accordingly, different approaches and techniques to assess and measure health, disease and quality of life are discussed in-depth. Definition of indicators, indicator sets and benchmarks are considered and analysed. Furthermore, students get acquainted with the health information systems and the major European public health databases.
Once understanding how to deal with quantitative data, this module will acquaint students with the science and art of comparing health and healthcare in the European Region. The students will learn why and how comparisons are made, how difficult it is to compare and what is being compared in

cross-national and cross-cultural research. Here it is asked: How are we to choose the areas for comparison? What are the theoretical implications of comparative research and quantitative and qualitative methods used? What are the differences between variable and case-based comparisons? How can we assure that the factor and units of comparison resemble each other? How to cluster the units of comparison? The students will understand what can be the flaws of doing comparative research in the health field.

Students will be guided how to make use of the available datasets and databases for assessments and comparative studies such as: EUROSTAT or HFA-DB. The students will understand the advantages and limitations of secondary data analysis. The students will be also challenged to think about comparing seemingly more difficult areas for comparison such as migrant health and disability.

The Module finishes with the European negotiations game.

Course objectives

To explore, understand and compare the present health status and national healthcare provisions in the European Region using quantitative and qualitative approaches.

Recommended reading

Hantrais L & Mangen St (eds.) (2007) Cross-National Research Methodology & Practice. London & New York: Routledge. Vallagarda S, Koch L (eds) (2008). Research methods in public health, Gyldendal Akademisk, Copenhagen. Priscilla R.Ulin, Elisabeth Robinson, Elisabeth Tolley. Qualitative Methods in Public Health. A Field Guide for Applied Research. Jossey-Bass; 2005. WHO: "World health statistics 2016": http://www.who.int/gho/publications/world_health_statistics/2016/en/ WHO: "Targets and indicators for Health 2020":
http://www.euro.who.int/__data/assets/pdf_file/0009/251775/Health-2020-Targets-and-indicators-version2-ENG.pdf?ua=1 WHO: "Qualitative indicators for monitoring Health 2020 policy targets":
http://www.euro.who.int/__data/assets/pdf_file/0004/259582/Qualitative-indicators-for-monitoring-Health-2020-policy-targets-Eng.pdf WHO: "World health statistics 2015":
http://www.who.int/gho/publications/world_health_statistics/2015/en/ WHO: "Global Reference List of 100 Core Health Indicators":
http://apps.who.int/iris/bitstream/10665/173589/1/WHO_HIS_HSI_2015.3_eng.pdf?ua=1 Rechel B, Mladovsky P, Devillé W. Monitoring migrant health in Europe: A narrative review of data collection practices. Health Policy 2012; 105: 10–16. Rechel B, Mladovsky P, Ingleby D, Mackenbach JP, McKee M. Migration and health in an increasingly diverse Europe. Lancet 2013; 381: 1235–45. Aromaa A, Koponen P, Tafforeau J, Vermeire C, and the HIS/HES Core Group. Evaluation of Health Interview Surveys and Health Examination Surveys in the European Union. European Journal of Public Health 2003; 13 (3 SUPPLEMENT): 67–72. Inen KK, Tuomi-Nikula A, Thelen JR, Gissler M, Sihvonen AP, Kramers P, Aromaa A. Health indicators in Europe: availability and data needs. European Journal of Public Health 2012; 22 (5):716–720.

EPH4012

Period 1
2 Oct 2017
27 Oct 2017

[Print course description](#)
ECTS credits:
5.0

Instruction language:

English

Coordinators:

P. Schröder - Bäck

K.M. Czabanowska

Teaching methods:

Work in subgroups, Lecture(s), Paper(s), PBL, Skills, Training(s)

Assessment methods:

Assignment, Attendance, Written exam

Keywords:

Measuring health, comparing health, health indicators, migrant health.

Fac. Health, Medicine and Life Sciences

Public Health Leadership Strand

Full course description

The importance of understanding leadership as part of achieving Public Health goals is critical to reducing inequality and improving health. However the rapidly changing environment and huge variations in available health resources makes leadership in Public Health a complex and constantly evolving issue. It is important for those of us in Public Health, or entering Public Health roles for the first time, to have some understanding of leadership as it relates to our chosen field of work.

This Module aims to introduce you to and help you to develop leadership competencies through the following.

• Examining the key debates around Leadership in Public Health in relationship to modernism, postmodernism, technological change and their implications for leaders within organisations.
• Introducing key theoretical frameworks that underpin leadership learning, and enable the critical use of this knowledge and understanding by applying theory to actual practice within the context of Public Health.
• Developing the ability to reflect on the Public Health leadership role and development needs of individuals, so that personal and professional development planning for a leadership role is built upon sound analysis of self in context.
• Stimulating self-assessment of leadership competencies by the participants to help identify knowledge gaps and further training needs in leadership.

Course objectives

By engaging successfully with this module you will be able to:

1. Understand the key concepts of Leadership theory and the key differences between Management and Leadership, and their relevance to Public Health practice.
2. Critically reflect on your own job role in the light of leadership theory, review your professional and personal development as a Public Health leader throughout the module, and develop a Personal Development Plan (PDP) with reference to your organisational context.
3. Critically analyse the complexities of leading and motivating people in the Public Health arena, where one is predominantly working with multiple stakeholders.
4. Critically evaluate the impact of all the above-mentioned outcomes on the management practice of Public Health professionals, in terms of both discourse and practice.

5. Apply relevant concepts of leadership to future or current professional workplace.

Recommended reading

• Northouse PG. Leadership: theory and practice. 7th ed. USA: Sage Publications; 2016. • Rowitz L. Public Health Leadership. 2nd ed. Sudsbury, MA: Jones & Bartlett Publisher; 2009. • Yukl G. Leadership in Organizations: 6th ed. Saddle River, NJ: Prentice Hall; 2005. • Daniel Goleman. Working with Emotional Intelligence: New York : Bantam Books; 2006. • Jane Clarke. Savvy. Dealing with people, power and politics at work. London, U.K. ; Philadelphia, PA : Kogan Page; 2012. • Lussier, R. N., & Achua, C. F. Leadership : Theory, application & skill development (5th ed.); Mason, OH: South-Western Cengage Learning; 2013.(ebook copy) You can access the ebooks through the Libsearch, zie http://library.maastrichtuniversity.nl/ • Manfred F.R.Kets de Vries. The Hedgehog Effect. The secrets of building high performance teams. 2011 (eBook copy) You can access the ebooks through the Libsearch, zie http://library.maastrichtuniversity.nl

EPH4016

Period 1
4 Sep 2017
22 Dec 2017

[Print course description](#)
ECTS credits:
5.0
Instruction language:
English
Coordinator:
[K.M. Czabanowska](#)
Teaching methods:
Assignment(s), Work in subgroups, Lecture(s), Presentations, Training(s)
Assessment methods:
Assignment, Attendance, Participation, Portfolio, Presentation, Written exam
Keywords:
Public health leadership, leadership theories, emotional intelligence, professionalism, collaboration and personal development plan.

Fac. Health, Medicine and Life Sciences
Identifying and Assessing Good and Best Practices in Health

Full course description

In this third module, students are introduced to the evaluation of prevention and care in the European region, and to the identification and selection of best practices. They learn about models for evaluation and selection of best practices based upon criteria of equity, humanity, client satisfaction, efficiency, effectiveness and cost-effectiveness; they familiarise themselves with the methodology to assess the effectiveness and cost-effectiveness of prevention and care; and learn how these models

and methods can be applied for cross-national comparison. In addition, they learn how to apply systematic reviews and benchmarking with a view to standardisation and best practices. The methodologies of health impact assessment (HIA) and health technology assessment (HTA) are introduced and applied. The students also study the international comparability of cost of illness. 2. Module Content 2.a. Contents: At the start of the module, students learn about different approaches to the evaluation of prevention and care. They are introduced to the different goals of process versus output and outcome evaluation, and learn about the methods for the assessment of the effectiveness and cost-effectiveness of interventions for prevention and care. Specifically, they are introduced to the hierarchy of evidence for defining best practices, including systematic reviews and meta-analysis, randomised controlled trials, cohort studies, case-control studies, cross-sectional surveys, case reports, and expert opinions. They are also introduced to criteria and protocols that have been specifically designed to address scientific evidence for public health interventions, including the Cochrane Library and review protocols, and are invited to critically reflect on the applicability of these approaches to public health and health promotion. In close connection to the Essentials and Project strands, the students gain a thorough understanding of systematic reviews and economic evaluation (notably cost-effectiveness, cost-benefit and cost-utility analyses). The different steps of a systematic review process and the methodologies of health impact assessment (HIA), health technology assessment including economic evaluation (HTA) are introduced and applied. Next, the students learn how to apply these models and methods for cross-national comparison and they explore methods for benchmarking based on standardisations and best practices. Further emphasis is given to the question how cross-national and cross-regional research methodology is feasible. Students learn to identify pitfalls in cross- national and regional research and how to improve such research methodologically. This means using techniques to assure comparability and standardisation of the methods employed in each country. As this is the first module to deal explicitly with the concept of 'best practice', students critically reflect on this concept from the perspective of the philosophy of health sciences. A first strand of discussion leaves from a critical appraisal of evidence-based medicine (and Randomised Controlled Trials) and leads to lessons to learn for European Public Health. To consolidate the understanding of evaluation and review, respectively, and to learn how to apply the theoretical knowledge, practice sessions are foreseen to learn to apply the different steps of a systematic review process and of health impact assessment and health technology assessment. In addition, a field trip to Luxembourg will be arranged to sensitise the students to topics for Module 4, including: policymaking and the world of politics, 'lobbying' to the European Institutions and working with civil society. The trip involves visits to a Directorate General of the European Commission, the Executive Agency for Health and Consumers, and possibly the European Parliament.

Course objectives

Objectives Knowledge and understanding At the end of the module, students have - insight in and knowledge of definitions and concepts of evaluation - insight in and knowledge about models and methods to assess effectiveness, cost-effectiveness, cost-benefit and cost-utility - insight in and knowledge about methods for systematic review and selection of best practices - insight in and knowledge about techniques to ensure cross-national comparability and standardisation - insight in and knowledge about concepts, models and methods of benchmarking - insight in and knowledge about methodologies of health impact assessment (HIA) and health technology assessment (HTA) - insight in basic concepts of sociology of science - insight in meta-analysis, systematic reviews and observational research designs Application of knowledge and understanding At the end of the module, students are able to: - understand the concept and role of evaluation in prevention and care - are able to apply methods to select and define best practices in prevention and care - are able to formulate a design or protocol to assess effectiveness of practices in prevention and care - understand the quantitative aspects of effectiveness, cost- effectiveness and cost-utility analysis and of systematic reviews - understand the difficulties and pitfalls in cross-national and cross- regional research - are able to apply the concepts, models and methods of benchmarking - understand the methods of health impact assessment (HIA) and health technology assessment (HTA) Making judgements At the end of

the module, students are able to: - critically reflect on the concepts of context, European culture and (scientific) culture - critically reflect on approaches to evaluation, evaluation studies and best practices - critically reflect on cross-national and cross-regional comparisons of prevention and care - make suggestions for evidence-based improvement of prevention and care practices Communication At the end of the module students are able to: - communicate in a professional way with researchers, health experts, policy makers and other representatives of European organisations about issues of evaluation, effectiveness and best practices in health across the EU - write, discuss and present issues of evaluation, effectiveness and best practices in health across the EU in a professional manner Learning skills At the end of the module, students a e able to: - read, understand and comment on published evaluation studies and reviews - select appropriate methods to assess prevention and care practices in a cross-national context - search for, identify, analyse and interpret key information to underpin recommendations for improvement of practices in prevention and care

Recommended reading

Literaure will be recommended and provided during module

EPH4003

Period 2
30 Oct 2017
24 Nov 2017

[Print course description](#)
ECTS credits:
5.0
Instruction language:
English
Coordinators:
[D.M.R. Townend](#)
B.F.M. Wijnen
Teaching methods:
Assignment(s), Lecture(s), PBL, Presentation(s), Training(s), Working visit(s)
Assessment methods:
Attendance, Final paper
Keywords:
Good practice, best practice, evaluation

Fac. Health, Medicine and Life Sciences
Europe as one Zone - European Health Law & Policies: The Translation of Evidence into Norms

Full course description

1. Summary of the module In this module the European institutions are discussed from a legal and historical perspective. The first aim is to introduce students to the institutions, their history and tasks. The second aim is to teach students how policy processes and decision-making procedures are

organised at the European and National level and what implications this has on the potential transfer of best practices throughout Europe. The third aim is to discuss European policy and law concerning (public) health. The fourth aim is to highlight the translation of evidence into policy. The continuum from evidence to policy making is an overarching component in the module. Students will strengthen their quantitative and qualitative research abilities in order to be equipped for this process. 2. Module Content 2.a. Contents: The EU treaties concentrate on the free movement for people, goods, services, and capital; less attention is paid to health and healthcare so far. These are generally perceived as public rather than private goods under the governance of member states (the subsidiarity principle in Art. 168 EC Treaty). Against such framework conditions, a central question is: how do we transform benchmarks into norms – how do we get from benchmark to reality? The EU and national regulations and agencies perform an important role in the transferability of practices in prevention and care between member states. In this module, students discuss potential opportunities and threats, realistic ambitions, and enabling as well as hindering actors and factors in the health field. This involves the study of EU treaties, the role of regulations and agencies with regard to health, and the transferability of practices in the EU (including the Commission's agencies EMEA, OSHA, EFSA, ECDC) and the European Region. Students will address the development of EU Health Principles and Actions, and in particular the "health in all policies" approach. As the focus is on the whole European Region, not only the EU, also the WHO, OECD, IMF and the World Bank have to be considered. A stakeholder analysis that reflects on the diversity of actors in the political reality is combined with institutional and governance theory. A multilevel analysis shows how different levels of actors are affected and what their impact on best practices is (including EC Health forums etc.). This module strives to provide the most appropriate actual overview of and insight into the position and role of EU, other European and International bodies, and national regulations and agencies with regard to the transferability of situations and practices in prevention and care. 2.b. Essentials Strand: In the fourth module the following topics are covered: A lecture on European history links the previous history lectures of the Essentials strand with the politics and institutions of the European Region and the EU. This is done in close coordination with the Contents strand, but has added value in that it takes the perspective of history, and thus provides a systematic timeframe. The focus is on European integration and the establishment of an internal market, with the aim of providing a background to their influence on health policy. The lecture also covers the history of the EU treaties. With regard to statistics and economic analysis: Students deepen their understanding of the quantitative aspects of cost-effectiveness analysis (e.g. frequentist versus Bayesian approaches, an introduction to Markov Chain Monte Carlo [MCMC] methods). To contribute to their study of economic evaluations, students learn additional techniques such as ratio statistics and uncertainty analysis. Students further advance their epidemiology skills and integrate their knowledge on statistics by learning criteria to evaluate research quality, such as internal and external validity, measurement precision/accuracy, statistical efficiency, and issues related to the study power. In addition, this strand focuses also on advanced qualitative research. Furthermore, students deepen their understanding and ability to use quantitative questionnaires measuring multidimensional constructs, which are often used in European health surveys; for this very reason, factor analysis is introduced. Students consolidate their knowledge in the Project strand. 2.c. Critical Thinking Strand: The concepts of harmonisation, convergence and subsidiarity are discussed from an epistemological, philosophical, cultural and political perspective in the first lecture. Theories of social constructivism in combination with social technologies are examined to equip students with critical attitudes on how problems and solutions in fields relevant to policymaking are constructed and influence policy agendas. The second lecture discusses neofunctionalistic versus actor-centred institutionalist approaches in social and political theory in relation to the concept of harmonisation. 3. Practicals and Skills 3.a. Practice Strand: The political reality of European health policymaking is once more on the agenda. Following the Brussels excursion, two forums at Maastricht University with guests from Brussels are planned. These forums sensitise students to the 'real world' of public health policymaking – and especially health policymaking. For the first forum three representatives are invited to present their current work: one from a policymaking body, one from an expert EU forum and one from a civil society organisation (NGO). They will discuss with each other and with the students the topics on their agenda and on how

policymakers and civil society really work together. Their shared experience and expertise allow students to gain better insight into the reality of health policy work, and train them to engage in discussions with these professional groups. For the second forum a representative from the pharmaceutical or food industry presents the topics s/he is currently prioritising, and engage in critical discussions with students on both content and meta-levels about how to make public-private partnerships. 3.b. Project Strand: Using their knowledge of qualitative research, students are to conduct a stakeholder analysis relating to what has been discussed in this module. The topic is the implementation of a health in all policies initiative. This can relate to the work of the first forum to be organised in the practice strand. Students also prepare for their thesis and placement. They apply for host institutions using a database with over 40 host institutions eager to take students of European health (this database has already been successfully used for the bachelor's programme). This is the students' first step in finding a thesis topic and host institution. Once they have identified the host institution, they narrow down their thesis topic together with their thesis and host supervisors. In the next modules students then prepare and write their thesis proposal.

Course objectives

Objectives Knowledge and understanding At the end of the module, students have: - insight in and knowledge about the main political and legal institutions of the EU, their tasks and their competences - insight in and knowledge about the decision procedures and legal and policy instruments - insight in and knowledge about the historical development of European unification and the role and content of the European Treaties - insight in and knowledge about the relation between EU and the Member States and the principle of subsidiarity - insight in and knowledge about the formal competences and activities of the EU in the field of health (prevention, research, pharmaceuticals, services) - insight in and knowledge about the transformation of principles and evidence into policy - insights in theories of social constructivism related to aspects of transferability Application of knowledge and understanding At the end of the module, students: - understand the impact of the legal and political infrastructure of the EU - are able to assess the role of the EU and other bodies concerning prevention and healthcare on the level of the EU and on the national level. - are able to formulate a design or protocol for a policy oriented, translational research project Making judgements At the end of the module, students are able to - critically reflect on the function of laws, moral principles, and regulations which shape the governance of prevention and healthcare. Communication At the end of the module students are able to: - communicate in a professional way with policy makers and other representatives of European organisations - decipher the language barriers between professions involved in the translation of evidence into policies Learning skills At the end of the module, students are able to: - read a juridical case - have improved their writing skills, especially writing in an argumentative and analytical style - assess the translation process of evidence into policies.

Recommended reading

Basic Literature • Bevan, G, Heldermann JK, Wilsford D,(2010), Changing choices in health care: implications for equity, efficiency and cost, 1-17 • Boessen S (2008). The Politics of European Union Health Policy-Making. An actor-centred institutionalist analysis. Maastricht: Universitaire Pers Maastricht. • Field A (2005). Discovering Statistics using SPSS. 2nd edition. SAGE Publications. Chapter 15. • Freedman D, Pisani R, Purves R. Statistics (2006). 3rd edition. Norton Publisher. Chapter 6. • Ginsburg GS (2008). "'Grand Challenges' in the Translation of Genomics to Human Health", European Journal of Human Genetics 16: 873-874. • Gordis L (2004). Epidemiology. 3rd edition. Philadelphia, W.B. Saunders Company. Chapters 5, 18. • Gostin, L.O. (2001). Health Information: Reconciling Personal Privacy with the Public Good of Human Health, Health Care Analysis 9: 321–335. • Hervey, T.K. & McHale, J.V. (2004). Health Law and the European Union. Cambridge University Press. • Khoury, M.J et al (2007). The continuum of translation research in genomic medicine: how can we

accelerate the appropriate integration of human genome discoveries into healthcare and disease prevention?, Genetics in Medicine, 9 (10): 665 – 674. • Kickbusch I (2007). Innovation in health policy: responding to the health society, Gac Sanit. 21(4):338-42. • Lomas J (2007). "The in-between World of Knowledge Brokering" BMJ 334: 129-132 • Moore DS, McGabe GP (2006). Introduction to the practice of statistics. 5th edition. New York, Freeman. Chapter 14. • Mur-Veeman I, van Raak A, Paulus A (2008). Comparing integrated care policy in Europe: Does policy matter? Health Policy 85: 172-183. • Neale WC (1987). Institutions. Journal of Economic Issues, 21, 3, 1177-1206. • Neuman WL (2006). Social Research Methods: quantitative and qualitative approaches. 6th edition. Chapters 7-8. • Piattoni S (2009). Multi-level Governance: a Historical and Conceptual Analysis. European Integration Vol. 31, No. 2, 163-180. • Puska P, Stahl T, (2010) Health in All Policies—The Finnish Initiative: Background, Principles, and Current Issues, Annual Review of Public Health, Vol. 31: 315-328 • Schäfer W (2006). Harmonisation and Centralisation versus Subsidiarity: Which Should Apply Where? Intereconomics 41(5) 246-249. • Sieveking, K (2007). ECJ Rulings on Health Care Services and Their Effects on the Freedom of Cross-Border Patient Mobility in the EU, European Journal of Migration and Law 9: 25–51(long paper). • Stahl, T et al. (2006). Health in all Policies – Prospects and Potentials, Publication by the Finnish EU Presidency 2006, Finnish Ministry of Social Affairs and Health. • Strauss A, Corbin J (1998). Basics of qualitative research. 2nd edition. SAGE Publications. Chapters 9-14. • Van Kimmern J, deSavigny D, Sewankambe N (2006). Using Knowledge Brokering to Promote Evidence-based Policy-Making: the Need for Support Structures, Bulletin of World Health Organization 84: 608-612.

EPH4004

Period 2
27 Nov 2017
22 Dec 2017

[Print course description](#)
ECTS credits:
5.0
Instruction language:
English
Coordinators:
[D.M.R. Townend](#)
[T. Krafft](#)
Teaching methods:
Lecture(s), PBL, Training(s)
Assessment methods:
Attendance, Written exam

Fac. Health, Medicine and Life Sciences
Research Methods

Full course description

The master program HPIM draws on multiple disciplines in the realm of social sciences. Acquiring scientific knowledge about human society and social behavior is not an easy task. Very different methods of enquiry are available to the researcher, depending on the nature of the problem, the scientific paradigm underpinning the investigation, the unit of analysis, the empirical context. The

research methodology constitutes the backbone of any scientific enquiry. It determines the soundness and reliability of the empirical findings, as well as the possibility to generalise them to other social contexts. In order to create knowledge, it is therefore crucial to understand how to collect and elaborate information through a scientifically sound methodology. The unit 'Research Methods' will prepare you to design and develop a research project, and to formulate choices that relate to research questions, data collection, data analysis and reporting. Also, the unit pays attention to research ethics. This unit is particularly aimed to provide you with the necessary methodological framework for developing the individual research project at the core of your master thesis. You will acquire knowledge about the qualitative and quantitative research methods most frequently used in social sciences. The knowledge gained during this unit concerns the following steps of preparation and execution of a research project: a) formulating a research question; b) selecting a theory; c) developing a research design; d) selecting methods for data collection and for data analysis; e) handling issues of research validity and reliability; f) valorizing the empirical findings through appropriate reporting techniques.

Skills training.

During a skill straining, you will apply the knowledge acquired during the unit by writing the research proposal for your master thesis research project.

Course objectives

Knowledge and understanding:
Students will acquire knowledge of and insight into:

• Research methodologies and research designs that are common in the fields of the master program.
• Methods for data collection and data analysis that are key in the fields of the master program.
• Reporting methods.

Applying knowledge and understanding:
Students will be able to:

• Use knowledge of theories and issues from other units to write a research proposal.
• Select or develop a problem statement, a theoretical framework, the research methodology and research methods for their master thesis research project.

Making judgments:

• Students develop a scientific attitude.

After having completed this unit, the students are able to:

• Critically assess the applicability, strengths and weaknesses of the research methodologies and methods that are taught and discussed during the unit.
• Form opinions about the proper use of research methods in research articles.

Communication:

• Students are able to communicate effectively by discussing research methods, doing presentations, giving feedback to the work of others, and by writing a research proposal.

Learning skills:

• The students are trained to draw up a research proposal in a collaborative setting.

Recommended reading

Literature - Neuman, WL (2005). Social Research Methods: Qualitative and Quantitative Approaches. 6th Edition. Boston: Allyn and Bacon. Polit, DF and Beck, CT (2008). Nursing Research: Generating and Assessing Evidence for Nursing Practice. 8th Edition. Philadelphia: Lippincott, Williams and Wilkins.

HPI4005

Period 3
8 Jan 2018
2 Feb 2018

[Print course description](#)
ECTS credits:
6.0
Instruction language:
English
Coordinator:
[M.I. Pavlova](#)
Teaching methods:
Assignment(s), Work in subgroups, Lecture(s), PBL, Research, Training(s)
Assessment methods:
Final paper, Written exam
Keywords:
Research methods, qualitative research, quantitative research.

Fac. Health, Medicine and Life Sciences
Diffusion, Implementation and Quality Assurance of Health Innovations in Europe

Full course description

Once we know what good and best practices are (modules 1, 2 and also 3), once we know what role EU institutions play in bringing this evidence to norms (module 3), we need to know how to really ensure that good and best practices are known, accepted and implemented with a sustainable positive effect. We focus on aspects of diffusion and dissemination by taking (policy) learning and transferability into account. Thus, the aim of this module is to enable students to learn and think critically about the translation, transferability, diffusion, implementation, monitoring and quality assurance of good and best practice. Once a new practice is implemented, however, there is no guarantee that it will be continuously effective. Following the cycle of the Public Health Trias policies and other kinds of interventions need to be re- assessed and, if necessary, modified or replaced. Thus, students also explore the role and influence of monitoring and quality systems and agencies in public health and health care as applied in Europe.

Course objectives

To acquire knowledge about the translation, transferability, diffusion, implementation and quality assurance of innovative good practices

Recommended reading

Donabedian, Avedis (2003): An Introduction to Quality Assurance in Health Care. Oxford: Oxford University Press Greenhalgh T, Robert G, Macfarlane F, Bate P, Kyriakidou O (2004) Diffusion of Innovations in Service Organizations: Systematic Review and Recommendations. Milbank Quarterly, Vol. 82, No. 4, 2004 (pp. 581-629) Grol, R. et al. Improving Patient Care. The implementation of Change in Clinical Practice. London. (ISBN: 9780 7506 8819 2) Elsevier 2005, reprinted 2009 MacKay JM, Vincenten J (2009) Why isn't more injury prevention evidence based? International Journal of Injury Control and Safety Promotion 16(2): 89-96. Rogers EM (2003). Diffusion of innovations (fifth edition). New York: Free Press. SL T 174.7

EPH4013

Period 4
5 Feb 2018
6 Apr 2018

Print course description
ECTS credits:
6.0
Instruction language:
English
Coordinators:
P. Schröder - Bäck
K.H.A.J. Michelsen
Teaching methods:
Assignment(s), Work in subgroups, Lecture(s), Paper(s), PBL, Research, Skills, Training(s)
Assessment methods:
Assignment, Attendance, Written exam
Keywords:
Transferability, diffusion, translation, implementation, quality, assurance

Fac. Health, Medicine and Life Sciences
Strategic Management, Leadership and Organizational Change in Healthcare

Full course description

Healthcare delivery results from the combined action of a variety of organisations in a complex, highly regulated yet highly dynamic environment. Multiple public and private stakeholders operate individually and in collaboration to enable care provision, at national but also at international level. Governmental agencies,international regulatory bodies, NGOs, donor foundations, universities but

also private entities such as hospitals, GPs, pharmaceutical companies, health insurance companies, shape their competitive actions according to different strategies, heterogeneous revenue models, leadership styles, and internal incentive schemes. This unit will apply knowledge about strategic management, leadership, and organisational change to understand how healthcare providers ensure their competitive advantage, while pursuing the overall common objective to deliver high quality, cost-effective healthcare. The unit will examine how strategic management enables healthcare organisations to maintain their dynamic fit between internal resources and external demands. The unit will also consider how effective leadership is necessary to guide organisational members towards successful strategy creation and implementation. Furthermore, strategic perspectives and appropriate leadership will converge as fundamental underpinnings of organisational change, which is salient to organisational adaptation and survival.The first part of the unit will lay the theoretical foundation on which you can build your knowledge about the three core topics of the unit: strategic management, leadership and organisational change. At the end of part 1, you are introduced to three projects.

Skills trainings.

The unit offers different trainings related to strategic management, leadership and organizational change. You can choose one of these trainings (whether all students are assigned to the training of their first choice depends on the number of places that are available for each training).

Course objectives

Knowledge and understanding:

• Articulate what is meant by the terms strategic management, organisational change and leadership and critically evaluate the relationship between these terms.
• Understand and discuss the main theories and seminal literature on these terms.
• Acquire insights into the theories underpinning the analysis of managerial processes, organisational change processes and leadership in healthcare settings.
• Gain skills to analyse managerial problems, organisational change issues and problems with leadership and to provide solutions.

Applying knowledge and understanding:

• Evaluate and apply conceptual models on strategic management, organizational change and leadership.
• Apply theoretical knowledge to actual problems regarding managerial problems, organisational change issues and problems with leadership.
• Relate the acquired knowledge to the knowledge from other units.

Making judgments:

• Demonstrate their ability to critically analyse their own and others' work.
• Critically consider the needs of stakeholders.
• Critically discuss barriers to organisational change, strategic management and leadership and outline strategies to overcome them.
• Critically reflect upon the role of individual agency in organisational change, strategic management and leadership.

Communication:

• Debate the strengths and weaknesses of strategies underlying strategic management, leadership and organisational change.
• Communicate effectively within a group.

• Communicate effectively with faculty members and other students when using electronic media.

Learning skills:
Students will be able to:

• Take responsibility for their own learning and demonstrate an ability to plan and organize their workload effectively.
• Reflect upon the importance of leadership, personal persuasion, consensus building and their ability to influence others' beliefs and behaviors.
• Demonstrate their ability to act as advisors, advocates, change agents and/or (opinion) leaders.
• Respond appropriately to formative feedback provided in response to set learning tasks and assignments.
• Work in a collaborative way with others.

Recommended reading

Literature - Ginter, P.M., Duncan, W.J, and Swayne, L.E. (2013). Strategic management of health care organizations. Chichester: Wiley. -Johnson, J.A. (2009). Health organizations: theory, behavior, and development. Sudbury, MA: Jones & Bartlett Learning. -Northouse PG. Leadership: theory and practice. 5th ed. USA: Sage Publications; 2010. -Rowitz L. Public Health Leadership. Sudsbury, MA: Jones & Bartlett Publisher; 2003. -De Caluwé, L. and Vermaak, H. (2003) Learning to Change. Thousand Oaks, CA: Sage.

HPI4008

Period 4
5 Feb 2018
6 Apr 2018

[Print course description](#)

ECTS credits:
6.0
Instruction language:
English
Coordinator:
D.D. Westra
Teaching methods:
Assignment(s), Work in subgroups, Lecture(s), Paper(s), PBL, Training(s)
Assessment methods:
Final paper, Written exam
Keywords:
Strategic management, leadership, organisational change, stakeholders, competitive advantage.

Fac. Health, Medicine and Life Sciences
The EU, Enlargement and Global Health

Full course description

1. Summary of the module This final module reflects upon the future role and position of the

European Union, the individual Member States and their respective agencies in the quest for better quality, equity, transferability, innovativeness and competitiveness in health and healthcare in Europe. This includes an investigation of health implications and health strategies with regard to the EU enlargement, especially Turkey and Southeast Europe. Finally, as a means to fully grasp the European dimensions of health, students are taught to look beyond the European Region, to examine health from a global perspective and to identify and distinguish the role and contribution of Europe in global health. These issues are discussed in the first 2 weeks. In the framework of this module, students will also visit the headquarters of the WHO in Geneva to discuss different aspects and issues related to the role of the (European) health policy and decision-making – also in the global perspective. The second part of this module is the placement of students, where they finalise their master thesis (10 weeks). 2. Module Content 2.a. Contents: This module wraps up the topics of the previous modules and allows students to look beyond the borders of the EU. This is done while focusing different aspects synthesised in futuristic scenario discussions: one aspect is to reflect upon the future role and position of the European Union, the individual Member States and their respective agencies in the quest for better quality, equity, transferability, innovativeness and competitiveness in health and healthcare in Europe and the world. The question remains open how stakeholders can secure the right balance between diversity and unity in practice and governance in Europe. The second aspect widens these scenario discussions focussing on health implications and health strategies with regard to EU enlargement (especially Turkey and Southeastern Europe). Finally, as a means to fully grasp the European dimensions of health, students are taught to look beyond the European Region, to examine health from a global perspective and to identify and distinguish the role and contribution of Europe in the quest for global health. . 2.b. Essentials Strand: The Essentials strand presents general scenarios for Europe's future, including the EU enlargement. This feeds into the perspective of the Contents strand. Response lectures are offered to ask questions and deepen aspects of research methods. 2.c. Critical Thinking Strand: The last lecture of this strand in the programme will be on global justice and health – to critically reflect on the last aspect of the Contents strand. In other words: What are the moral duties of European citizens for the sick and the poor in other continents and how could European institutions facilitate change to fulfil our moral duties towards health in a global perspective. 3. Practicals and Skills 3.a. Practice Strand: A field trip to Geneva is arranged. Students meet with public health representatives from the national, regional (canton) and local level. In doing so, they learn how a non-EU state surrounded by EU states operates in the health field and what impact the EU has on this independent state. Students will visit the headquarters of the WHO in Geneva to discuss the role of the (European) health policymaking in a global perspective. 3.b. Project Strand: During the academic year students begin preparatory work on the selected topic of their master's research project (see above). They receive guidance during the initial phase of writing their proposal and in planning their project, which they eventually submit as the master's thesis. The training sessions in the first two weeks of this module are Thesis Groups meetings where students present their work to each-other for peer-review. In the last 10 weeks of this module, students finalise their thesis in a placement. They collect data, analyse these data and subsequently write the master thesis. Time is devoted solely to writing and finalising the thesis. Guidance for this process begins at the start of the programme.

Course objectives

Knowledge and understanding
At the end of the module, students have:

• knowledge of the method of scenario discussions
• knowledge of European enlargement
• knowledge of the position of the European health institutions' perspectives on enlargement and health
• knowledge and understanding of the main problems and challenges related to inclusion and integration into EU of Turkey and SEE countries

• knowledge and understanding of the future role of the European Union in Europe
• knowledge of global health challenges
• knowledge of approaches towards global health
• nowledge of moral reasoning with regard to global justice.

Application of knowledge and understanding
At the end of the module, students are able to:

• complement their problem solving abilities through using the method of scenario discussions
• lead scenario discussions
• understand the implications of EU enlargement for health
• understand the implications of the EU in global health
• argue about duties of Europe and the European Union in global health.

Making judgments
At the end of the module, students are able to:

• recognize and distinguish challenges of EU enlargement with regard to health
• recognize and distinguish the main challenges related to enlargement of EU
• recognize and distinguish challenges of global health and Europe's and the EU's role in this.

Communication
At the end of the module students are able to:

• use scenario discussions in their future career
• communicate in a professional fashion with health experts, advocators, policymakers and decision-makers about issues related the future of the European Union in the light of enlargement
• communicate in a professional fashion with health experts, advocators, policymakers and decision-makers about the role of Europe, European and especially EU institutions on global health
• write and discuss in a professional and expert manner on the topic chosen for the Master thesis.

Learning skills
At the end of the module, students are able to:

• give and receive feedback on scenario discussions with regard to EU enlargement and the global perspective
• write a research proposal on a Master level
• write a larger piece of own work (= Master thesis) in a placement.

Recommended reading

Basic Literature • European Commission: Health in Candidate Countries http://ec.europa.eu/health/ph_international/enlargement/enlarg_en.htm. • Hollis A, Pogge T (2008). The Health Impact Fund. Making New Medicines Accessible for All. Yale University: Incentives for Global Health. http://www.yale.edu/macmillan/igh/. • Legido-Quigley H, McKee M, Nolte E, Glinos IA (2008). Assuring the quality of healthcare in the European Union. A case for action. Copenhagen: World Health Organization. • McKee M, McLehose L, Nolte E (2004). Health Policy and European Union Enlargement. Open University Press. • Neiner JA, Howze EH, ML (2004). Using Scenario Planning in Public Health: Anticipating Alternative Futures. Health Promotion Practice 5 (1): 69-79. • Pogge T (2008). World Poverty and Human Rights: Cosmopolitan Responsibilities and Reforms, second edition. Cambridge, Polity Press 2008. • Tavanxhi N, Burazeri G, Laaser U (2008). Southeastern Europe, Health Systems of. In Heggenhougen C and Quah S (eds.). International Encyclopedia of Public Health. Elsevier. Vol. 6: 137-147.

EPH4008

Period 5
2 Apr 2018
20 Apr 2018

Print course description
ECTS credits:
2.0
Instruction language:
English
Coordinator:
P. Schröder - Bäck
Teaching methods:
Lecture(s), PBL, Training(s)
Assessment methods:
Assignment

Fac. Health, Medicine and Life Sciences
Research Project and Masters' Thesis

EPH4011

Period 5
9 Apr 2018
8 Jun 2018

Print course description
ECTS credits:
15.0
Instruction language:
English
Coordinator:
P. Schröder - Bäck

Fac. Health, Medicine and Life Sciences
Financial Management of Healthcare

Full course description

This unit offers an introduction to the field of healthcare financial management and the application of financial management tools for innovations in Healthcare organisations. The leading question throughout this unit is how managers in enterprising healthcare organisations can plan, organise, allocate, monitor, control, and manage the financial resources available within their organisations in

an effective and efficient manner given the specificities of their organisations and the constraints posed by the external environment (e.g.external funding). During this unit, you will become acquainted with the theory and innovative methods of financial management, and you will develop management skills in this area. The following issues relevant to healthcare managers are discussed during the unit: basic financial management concepts; analysis and reporting of costs and revenues; financial planning and control (incl. internal budgeting, financial statement analysis); external funding of Healthcare organisations (incl. the Dutch system of healthcare funding, e.g. DBCs/DOT); and financial decision-making. Particular attention is paid to (decisions about) investments in innovative technology and other innovations in care delivery. The unit is an elective unit for other master's programmes health of the FHML.

Skills trainings.

The unit offers three trainings.

• Training 1. Cost Analysis and Budgeting. This training is for all students. You must carry out cost analysis and/or develop the operating budget of a healthcare unit. In addition, students can choose one of the following trainings (whether all students are assigned to the training of their first choice depends on the number of places that are available for each training):
• Training 2. Business Case Investments in innovative information technology. You are presented with a business case describing the need of an investment in innovative information technology. You are asked to e.g. outline feasible investment alternatives.
• Training 3. Business Case Investments in innovative healthcare technology.

Course objectives

Knowledge and understanding:

• To gain basic knowledge in the theory of healthcare financial management to understand the issues of cost analysis, external funding, internal budgeting, financial analysis, and investment decision-making, specifically investments in new information technology and new care delivery processes.
• To gain understanding in basic methods, models and tools that are applied in the financial management field.

Applying knowledge and understanding:

• To be able to apply basic theoretical knowledge from the field of financial management to practical management problems in the healthcare sector and to design solutions to these problems.
• To be able to analyze and understand business cases related to investments in the Healthcare sector, particularly investments in innovations.
• Can relate the acquired knowledge to the knowledge from other units.

Making judgments:

• To develop a critical scientific attitude towards the literature and practices in the field of healthcare financial management.
• To be able to identify and make judgments about relationships between financial management and other management fields that deal with the processes of planning and control in healthcare organizations, based on the acquired knowledge.

Communication:

• To be able to communicate effectively, i.e. to present arguments and advices orally and in writing with regard to managerial problems, specifically problems related to financial management.
• To develop skills to prepare written reports and oral presentations in a concise and clear manner regarding management problems.

Learning skills:

• To develop skills to gather and analyze data and information about complex financial management problems, as well as management problems characterized with uncertainty.
• To develop skills to search for optimal solutions to financial management problems in situations characterized by limited information and/or conflicting interests of individuals and parties.
• To work with others on real-life cases in a collaborative setting.

Recommended reading

Literature Basis textbooks: - Gruen R, Howarth A. (2005). Financial management in health services. Open University Press. - Finkler SA. (2005). Financial management for public, health, and not- for-profit organizations. 2nd ed. Pearson Education / Prentice Hall. - Zelman, E.; McCue, M; Millikan, A. (2003). Financial management of healthcare organizations: an introduction to fundamental tools, concepts and applications. 2nd ed. Blackwell Publishers. - In addition to the basic literature, an electronic reader is prepared. It includes recent articles and documents related to theory and practice.

HPI4007

Period 4
5 Feb 2018
6 Apr 2018

Print course description
ECTS credits:
6.0
Instruction language:
English
Coordinator:
S.M.A.A. Evers
Teaching methods:
Assignment(s), Work in subgroups, Lecture(s), Paper(s), PBL, Presentation(s), Training(s)
Assessment methods:
Written exam, Final paper
Keywords:
Financial Management, costs and revenues, financial planning and control, financial decision-making, business case.

Fac. Health, Medicine and Life Sciences
Implementation and Evaluation

Full course description

To what extent are health promotion interventions that are developed and tested according to scientific standards, practically useful and effective? And how should policy makers take costs into account when deciding on the implementation of health promotion interventions? These are some of the key questions addressed in this module.

The first step in the intervention process is the development and small-scaled evaluation of interventions. In this evaluation phase scientists are concerned with efficacy and internal validity, often realized through the use of randomized controlled trials. Internal validity is important for the interpretation of the intervention effects in the experiment. Even though this first step is crucial, using small-scaled experiments is not sufficient for achieving an impact on public health.

Besides testing the effects of an intervention under ideal circumstances, it is also important to assess its effect in a 'real world' setting. The second step is therefore to study conditions for the effectiveness of the interventions and the actual use in practice. Different aspects of external validity should be addressed to facilitate large scale dissemination and implementation to other settings in the final third stage. Stage three focuses on the settings and populations to which the observed intervention effects can be generalized. This aspect of external validity is very important; after all, why should one invest time and money into dissemination and implementation if the intervention is unlikely to work in the settings of concern? For health promoters and policy makers, interventions that are not used and implemented in practice are not only a waste of valuable time and money, but they can also seriously impede effective health promotion.

In this unit, students acquire knowledge about the factors that influence the successful dissemination and implementation of evidence-based health-related interventions, and their effectiveness in relevant settings and target populations.

Course objectives

The first aim of this unit is that students acquire knowledge about the factors and strategies that influence the successful dissemination and implementation of evidence-based health-related interventions in relevant settings and target populations. Of concern here are theories of diffusion and change, effective communication and marketing, persuasion, reach, adoption, retention, cooperation among stakeholders, sensitivity to local values, perceptions of, and responses to the intervention, and tension between fidelity and adaptation of the intervention or "re-invention". Second, student will get insight in how to evaluate intervention the effectiveness as well appreciation by its users and target group. The cost-effectiveness associated with the development, testing, and successful implementation and maintenance is also treated.

Recommended reading

Brownson, R. C., Colditz, G. A., & Proctor, E. K. (Eds.). (2012). Dissemination and implementation research in health: Translating science to practice. Oxford: Oxford University Press. Rogers, E. M. (2003). Diffusion of innovations (5th ed.). New York: The Free Press. Rossi, P. H., Lipsey, M. W., & Freeman, H. E. (2004). Evaluation: A systematic approach. Thousand Oaks, CA: Sage

HEP4205

Period 4
5 Feb 2018
6 Apr 2018

[Print course description](#)
ECTS credits:
6.0
Instruction language:
English

Coordinators:

K.M.H.H. Bessems

F.E.K. Schneider

Teaching methods:

Work in subgroups, Lecture(s), PBL, Training(s)

Assessment methods:

Assignment, Final paper, Written exam, Participation, Attendance

Keywords:

Dissemination, implementation, (cost)effectiveness, proces evaluation, internal and external validity

Fac. Health, Medicine and Life Sciences

Health Promotion

Full course description

Main goal of this module is to acquire knowledge and skills on processes and strategies enabling people to increase control over, and improve their health, in a broader context than before in this master. It encompasses issues related to education, health services, employment, government, the media, industry, environmental agencies, and community networks. Students are required to integrate knowledge acquired in this and previous modules by developing a comprehensive strategic plan aimed at promoting health on a particular issue, setting or community. For this they will work on a public health issue of choice in a small project group with frequent expert supervision and exchanges with fellow students. Reflection on the meaning, impact and boundaries of health promotion interventions is started by a discussion of Juli Zeh's novel 'Corpus Delicti'. The discussion is furthered by critical reading of several articles on ethical issues such as social equity, state control, self- regulation, public-private partnership, individual autonomy, stigmatization. Students should become able debaters promoting their views and plans to different audiences. To shape these skills, they prepare for a debate in what is called 'the argument game', in which they defend a position in favour of a public health approach. Choice of subjects comes from situations in which the prevention paradox is apparent, when individual risk is low but when effective prevention in deemed generic. The module will be assessed with a group paper and two individual papers.

Course objectives

The general aim of the module Health Promotion is to obtain knowledge of Health Promotion in the context.

Recommended reading

Green, L.W. & Kreuter, M.W. (2006). Health Promotion Planning; an Educational and Environmental Approach. Fourth Edition; Mayfield Publishing Company, Mountain View. Nutbeam, D. & Harris, E. (eds) (2004). Theory in a nutshell: a guide to health promotion theory. Sydney, Australia: McGraw-Hill Book Company. Furthermore, an extensive list of suggested readings will be provided.

HEP4215

Period 4

5 Feb 2018

6 Apr 2018

[Print course description](#)

ECTS credits:

6.0

Instruction language:

English

Coordinators:

[P.H.H.M. Lemmens](#)

[J.S. Gubbels](#)

Teaching methods:

Work in subgroups, Lecture(s), Presentation(s), Skills

Assessment methods:

Assignment, Final paper

Keywords:

Health promotion International context Public health Social-economic conditions Public-private collaboration Social marketing Collaboration between health care organization(s) and prevention

Fac. Health, Medicine and Life Sciences

The Entrepreneural Health Sciences Professional

Full course description

Balancing stability and renewal is a well-documented paradoxical requirement to any organisation that operates in an environment where societal and client expectations evolve, and where you are faced by service innovations introduced by peers and rivals. Public healthcare providers increasingly have to respond to these developments. They may not be able to compete on price, but they usually compete for clients. Innovation services and service delivery processes is becoming more important, and it requirers heart professionals to behave more entrepreneurially. is a key concern to many governments and societies. In Europe there is a growing awareness that its aging population will pose severe challenges to the current health care system and its costs. This provides tremendous opportunities to introduce new products and services to the health care sector. Such will, however, require entrepreneurial initiative. In this course you will learn how one can turn apparent health related problems and needs in valuable new services and products. This could result in the creation of new organisation (for profit, or also not-for-profit) or add new activities to the portfolio of already established organisations.This course provides master's students in the Health Sciences programme with knowledge and skills to promote the development of innovative services (or products) in healthcare. It provides an additional perspective on how to operate as a professional within the field of health. The course offers a theoretical and practical introduction to the processes through which entrepreneurial behaviour can result in meaningful innovations. We do that by focussing on healthy living and active aging. These trends provide tremendous opportunities to introduce new products and services to the health care sector. Such will, however, require entrepreneurial initiative. In this course you will learn how one can turn apparent health related problems and needs in valuable new services and products.

Course objectives

Knowledge:

• You are able to explain and illustrate the unique qualities of the entrepreneurial process, both for internal venturing and for launching a new organisation.
• You understand the role that business planning may have (at the beginning of) the entrepreneurial process.
• You are able to explain how entrepreneurial opportunities are discovered and created.

Skills:

• You are able to evaluate the attractiveness of product ideas
• You are able to evaluate the attractiveness and feasibility of business models
• You are able to retrieve (sufficiently reliable) primary data as input to a business planning process.
• You are able to develop and evaluate a sophisticated business plan for an identified or given opportunity.
• You are able to work in a team and to contribute to effective teamwork

Competences:

• The ability to implement the newly acquired knowledge and skills in a relevant business plan for an (technology-based) internal project or new organisaton.
• The ability to propose, defend and critically reflect on choices with regard to business planning.
• The ability to work together in an entrepreneurial team, while also taking responsibility for one's own actions and learning.
• The awareness of entrepreneurship as a career option, including an understanding of what type of entrepreneurial role would fit oneself.

Recommended reading

Knott, A. M. (2015). Venture Design. This book is available from the author as a free e-book.

HMS4705

Period 4
5 Feb 2018
6 Apr 2018

[Print course description](#)
ECTS credits:
6.0
Instruction language:
English
Coordinator:
[W.E.J. Bodewes](#)
Teaching methods:
Assignment(s), Presentation(s), Skills, Training(s)
Assessment methods:
Assignment, Attendance, Final paper, Participation
Keywords:

health care, Innovation, enterprising behaviour, Entrepreneurship, service development, value creation