



**ACADEMIC SERVICES**

**MODULE SPECIFICATION**

Part 1: Basic Data					
Module Title	Knowledge Mobilisation				
Module Code	UZYSNP-15-M	Level	M	Version	1
UWE Credit Rating	15	ECTS Credit Rating	7.5	WBL module?	No
Owning Faculty	Health and Applied Sciences	Field	Health		
Department	Allied Health Professions	Module Type	Project		
Contributes towards	MSc Rehabilitation				
Pre-requisites	None		Co-requisites	None	
Excluded Combinations	None		Module Entry requirements	None	
First CAP Approval Date	31 May 2016		Valid from	September 2016	
Revision CAP Approval Date			Revised with effect from		

<b>Review Date</b>	2022
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Part 2: Learning and Teaching	
Learning Outcomes	<p>On successful completion of this module students will be able to:</p> <ol style="list-style-type: none"> <li>1. Critically apply and evaluate the process of knowledge mobilisation within the health and social care system (Component A)</li> <li>2. Identify the barriers and facilitators to knowledge mobilisation in practice (Component A)</li> <li>3. Discuss and critically evaluate models and strategies for disseminating evidence, implementing an evidence-based approach and planning projects</li> <li>4. Explore change management strategies within the knowledge mobilisation context in health and social care environments (Component A)</li> <li>5. Critically evaluate strategies to address local barriers to mobilising knowledge in the workplace (Component A)</li> <li>6. Critically appraise what types of knowledge are required for effective practice and how this knowledge is acquired, validated and shared (Component A).</li> </ol>
Syllabus Outline	<ul style="list-style-type: none"> <li>• An historical perspective of knowledge mobilisation</li> <li>• An overview of the theories involved in the creation, sharing and uptake of evidence in health and social care.</li> <li>• What types of knowledge/evidence inform every day practice and what are the strengths and limitations of different forms?</li> <li>• What constitutes evidence within the knowledge mobilisation context</li> <li>• The individual, organisational and societal barriers and facilitators to knowledge mobilisation</li> </ul>

	<ul style="list-style-type: none"> <li>• Strategies to enable knowledge sharing:</li> <li>• Co-creation of knowledge to facilitate mobilisation practices</li> <li>• The role of knowledge brokers in facilitating the mobilisation processes</li> <li>• Decision making in healthcare commissioning</li> <li>• Normalisation processes associated with knowledge transformation and mobilisation</li> <li>• The role of evaluation toolkits in assessing and improving service initiatives.</li> </ul>
Contact Hours	<p>The majority of the module is based on self-directed learning with a small number of contact hours (typically up to 2, via telephone, email or other technology aided means) associated with reviewing progress and providing tutor support throughout the module. These will be set up in accordance with the individual student's needs and appropriate contact method, e.g. telephone, email.</p> <p>Independent learning will form the vast majority of the educational activity in the module.</p>
Teaching and Learning Methods	<p>This distance learning module provides a learning approach utilising asynchronous online activities that may include lectures, podcasts, reading, videos and synchronous tutorials (online discussions). Progress through the module is managed through time-dependent release of online resources to ensure structured progression through the learning materials and the activities promote development of the student-tutor relationship and encourage a cohort identity in addition to supporting core learning.</p> <p>Approximately 27 hours of directed study (e.g. online lectures, seminars, etc) are delivered via Blackboard. Teaching is delivered in the format of up to 8 online lectures (delivered as audio podcasts or video capture linked with Adobe presenter or equivalent), plus other web-based activities. Online seminar activities include student-centred active learning techniques (e.g. via Collaborate) and access to a module discussion board or blog. These are delivered via the Blackboard online learning platform.</p> <p>Essential, indicative and supplementary online learning materials and resources are also provided via Blackboard, with links to online library resources.</p> <p><b>Scheduled learning</b> includes tutorials and supervision via virtual means i.e. telephone, or other technologies.</p> <p><b>Independent learning</b> includes hours engaged with online activities, essential reading, case study preparation, assignment preparation and completion etc.</p> <p>These sessions constitute an average time per level as indicated in the table below. Scheduled sessions may vary slightly depending on the module choices you make.</p>
Key Information Sets Information	<p>Key Information Sets (KIS) are produced at programme level for all programmes that this module contributes to, which is a requirement set by HESA/HEFCE. KIS are comparable sets of standardised information about undergraduate courses allowing prospective students to compare and contrast between programmes they are interested in applying for.</p>

<b>Key Information Set - Module data</b>				
<i>Number of credits for this module</i>				15
Hours to be allocated	Scheduled learning and teaching study hours	Independent study hours	Placement study hours	Allocated Hours
150	2	148	0	150



The table below indicates as a percentage the total assessment of the module which constitutes

**Written Exam:** Unseen written exam, open book written exam, In-class test

**Coursework:** Written assignment or essay, report, dissertation, portfolio, project

**Practical Exam:** Oral Assessment and/or presentation, practical skills assessment, practical exam

Please note that this is the total of various types of assessment and will not necessarily reflect the component and module weightings in the Assessment section of this module description:

Total assessment of the module:	
Written exam assessment percentage	0%
Coursework assessment percentage	100%
Practical exam assessment percentage	0%
	100%

Reading Strategy

**Core reading**

Any core reading will be indicated clearly, along with the method for accessing it, e.g. students may be required to purchase a set text, be given a print study pack or be referred to texts that are available electronically or in the Library. Module handbooks will also reflect the range of reading to be carried out.

**Further reading**

Further reading will be required to supplement the set text and other printed reading. Students are expected to identify all other reading relevant to their chosen topic for themselves. They will be required to read widely using the library search, a variety of bibliographic and full text databases, and Internet resources. Many resources can be accessed remotely. The purpose of this further reading is to ensure students are familiar with current research, classic works and material specific to their interests from the academic literature.

**Access and skills**

Students will be presented with opportunities within the curriculum to develop their information retrieval and evaluation skills in order to identify such resources effectively. Additional support is available through the library web pages, including interactive tutorials on finding books and journals, evaluating information and referencing. Sign up workshops are also offered by the Library.

Indicative Reading List

**Indicative reading list**

The following list is offered to provide validation panels/accrediting bodies with an indication of the type and level of information students may be expected to consult. As such, its currency may wane during the life span of the module specification. However,

as indicated above, current advice on readings will be available via the module handbook.

Davies, H., Powell, A. and Nutley, S. (2015) Mobilising knowledge to improve UK health care: learning from other countries and other sectors – a multimethod mapping study. [online] *Health Services and Delivery Research*. 3(27), pp 1-190. [Accessed 7 April 2016].

Gabbay, J. and Le-May, A. (2004) Evidence based guidelines or collectively constructed "mindlines?" Ethnographic study of knowledge management in Primary care. [online] *British Medical Journal*. 329(7473), pp 1013-1016. [Accessed 7 April 2016].

Gabbay, J. and Le-May, A. (2011) *Practice-based evidence for healthcare: Clinical Mindlines*. Abingdon: Routledge

Greenhalgh, T. and Wieringa, S. (2011) Is it time to drop the 'knowledge translation' metaphor? A critical literature review. [online] *Journal of the Royal Society of Medicine*. 104(12), pp 501-509. [Accessed 7 April 2016].

Rowley, E., Morriss, R., Currie, G. and Schneider, J. (2012) Research into practice: Collaboration for Leadership in Applied Health Research and Care (CLAHRC) for Nottinghamshire, Derbyshire, Lincolnshire (NDL). [online] *Implementation Science*. 7: 40. [Accessed 7 April 2016].

Rycroft-Malone, J., Seers, K., Crichton, N., Chandler, J., Hawkes, C.A., Allen, C., Bullock, I. and Strunin, L. (2012) A pragmatic cluster randomised trial evaluating three implementation interventions. [online] *Implementation Science*. 7: 80. [Accessed 7 April 2016].

Rycroft-Malone, J., Seers, K., Titchen, A., Harvey, G., Kitson, A. and McCormack B. (2004) What counts as evidence in evidence-based practice? [online] *Journal of Advanced Nursing*. 47(1), pp 81-90. [Accessed 7 April 2016].

Wieringa, S. and Greenhalgh, T. (2015) 10 years of mindlines: A systematic review and commentary. [online] *Implementation Science* 10: 45. [Accessed 7 April 2016].

### Part 3: Assessment

#### Assessment Strategy

The assessment for this module is a critical evaluation of current knowledge mobilisation literature in relation to how current practice operates. This enables students to bring their wider knowledge mobilisation skills into a relevant document that could inform the use of knowledge within practice.

#### **Component A**

A 3000 word critical evaluation of how knowledge is used, shared and validated within (their) current practice with reference to contemporary knowledge mobilisation theories and strategies.

This in-depth critical reflection should include the types of knowledge currently used within a practice area eg. experiential, clinical, research evidence, relational, organisational, research methods etc., together with reflections on why so many types of knowledge are used/required in the real world; and how each type of knowledge is developed shared and validated within practice with reference to the Knowledge Mobilisation literature.

#### **Formative Assessment.**

Opportunities exist for formative assessment in the module, through Blackboard Collaborate sessions and individual feedback.

Identify final assessment component and element	<b>Component A1</b>	
% weighting between components A and B (Standard modules only)	<b>A:</b>	<b>B:</b>
<b>First Sit</b>		
<b>Component A</b> (controlled conditions) <b>Description of each element</b>	<b>Element weighting</b> <b>(as % of component)</b>	
1. 3000 word critical evaluation	100%	
<b>Resit (further attendance at taught classes is not required)</b>		
<b>Component A</b> (controlled conditions) <b>Description of each element</b>	<b>Element weighting</b> <b>(as % of component)</b>	
1. 3000 word critical evaluation	100%	
If a student is permitted a retake of the module under the University Regulations and Procedures, the assessment will be that indicated by the Module Description at the time that retake commences.		