

STUDENT AND ACADEMIC SERVICES

MODULE SPECIFICATION

Part 1: Basic Data						
Module Title	Rehabilitation					
Module Code	UZYSQC-30-M		Level	М	Version	3
UWE Credit Rating	30 ECTS Credit Rating		15	WBL module? No		
Owning Faculty	Health and App	lied Sciences	Field	Allied Health Professions		
Department	Allied Health Pr	ofessions	Module Type	Standard		
Contributes towards	MSc Rehabilitation MSc Advanced Practice Continuing Professional Development Module					
Pre-requisites	None		Co- requisites	None		
Excluded Combinations	None		Module Entry requirements	None		
			Valid from	January 2018		

Part 2: Learning and Teaching					
Learning Outcomes	 On successful completion of this module students will be able to: Critically analyse and discuss the International Classification of Functioning, Disability and Health framework and its application to current concepts in Rehabilitation (Component A) Discuss and critically evaluate how health promotion relates to rehabilitation in health and social care (Component A) Discuss the perspectives on recovery and how this relates to rehabilitation in health and social care (Component B). Critically consider how current rehabilitation concepts can be implemented in marginal or deprived populations which are not governed by the health and social care legislation (Component B) Critically examine the impact of healthcare legislation on practitioner autonomy in practice (Component B) 				
Syllabus Outline	Rehabilitation is a concept which has evolved in the changing health and social care systems today. Its application is extremely diverse and dynamic with changing culture and populations. This module aims to explore the breadth of Rehabilitation and how this relates to changing environments. To promote critical analysis and debate of how it is applied or not in one's own practice and to challenge current practice with critical consideration of ethics and practitioner autonomy. Four main areas which relate to Rehabilitation will be addressed and deconstructed: • The International Classification of Functioning, Disability and Health (ICF) which is a framework developed by The World Health Organisation (WHO) to measure health and disability. This provides a common language in the				

multidisciplinary teams across the world in their approach to Rehabilitation. Health promotion which is current and ever growing in national and international agendas for resource management in health and social care. Exploring its application and how this relates to rehabilitation. How perspectives in Recovery as a concept in mental health and in conditions like cancer affect intervention and rehabilitation processes. Identifying marginal populations and their needs which impact on traditional rehabilitation process and practitioner skills and autonomy. Contact Hours Contact hours will include phone and email contact with staff throughout the module typically with up to 4 hours available for tutorial/assignment/module support and synchronous discussion boards. Teaching and Learning This distance learning module uses a distance learning approach utilising Methods asynchronous online activities including 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 synchronous activities promote development of the student- tutor relationship and encourage a cohort identity in addition to supporting core learning. Approximately 60 hours of independent study (e.g. online lectures, seminars, reading, student recordings, etc.) are delivered via Blackboard. Teaching is delivered in the format of online lectures delivered as video capture to introduce the 5 main elements of the module. Associated with these will be case studies of lived experience by individual cases or populations either presented as audio podcasts or written. These elements will be set up as a learning modules and students will have essential reading with structured questions to promote thinking in preparation for online seminars for each element. Online 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. Essential indicative and supplementary online learning materials and resources are also provided via Blackboard, with links to online library resources. Scheduled learning includes tutorials, and discussion board engagement. Independent learning includes hours engaged with online activities including lectures, seminars and discussion boards, essential reading, case study preparation, assignment preparation and completion etc. 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. **Key Information** Key Information Sets (KIS) are produced at programme level for all programmes that **Sets Information** 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.

Key Inform	ation Set - Mo	dule data			
Number of	credits for this	module		30	
Hours to be allocated	Scheduled learning and teaching study hours	Independent study hours	Placement study hours	Allocated Hours	
300	4	296	0	300	~

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

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		
Written exam asse	0%	
Coursework asses	50%	
Practical exam ass	50%	
		100%

Reading Strategy

Core reading

All essential reading will be indicated clearly, along with the method for accessing it. All essential reading will be made available electronically. The module handbook will clearly indicate the range of reading to be carried out.

Further reading

Further reading will be necessary to supplement the essential reading. This will ensure that students access up to date research, policies, guidelines, underpinning knowledge, and theoretical perspectives. This is particularly relevant when sourcing materials related to their own practice. As such, students will be expected to access all additional reading themselves. Identification of reading will be via library search, including online databases, and via other internet resources.

Access and skills

Students will be provided with opportunities in the curriculum to develop their information retrieval and evaluation skills in order to successfully identify, retrieve and evaluate materials. Additional support is available via 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

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.

• Geyh, S., Peter, C., Müller, R., Bickenbach, J.E., Kostanjsek, N., Üstün, B.T.,

Stucki, G. and Cieza, A. (2011), The Personal Factors of the International Classification of Functioning, Disability and Health in the literature - a systematic review and content analysis. *Disability and Rehabilitation*. [online] 33 (13-14), pp. 1089-1102. [Accessed 8 April 2016].

- Haglund, L., Fältman, S., Hälsa, A., Vård (HAV), Linköpings universitet, Institutionen för samhälls- och välfärdsstudier & Hälsouniversitetet (2012) Activity and Participation — Self-Assessment According to the International Classification of Functioning: A Study in Mental Health. *The British Journal of Occupational Therapy*. [online] 75(9), pp. 412-418. [Accessed 8 April 2016].
- Kronenberg, F., Pollard, N., and Sakellariou, D. (2011) Occupational therapies without borders. [online] Edinburgh: Churchill Livingstone. [Accessed 8 April 2016].
- Madi, Z., Nasreddine, N. and Rau, B., (2015) Physiotherapy without borders: case of the international committee of the red cross (ICRC) supported project in Tindouf, Western Sahara. *Physiotherapy*. [online] 101, pp. e924. [Accessed 8 April 2016].
- Public Health England (2015) A Strategy to develop the capacity, impact and profile of allied health professionals in public health 2105-18. Available from: http://www.ahpf.org.uk/files/AHP%20Public%20Health%20Strategy.pdf [Acces sed 22 March 2016]
- Public Health England (2015) Embracing the Challenge Public Health in Allied Health Professional Pre-registration England. Available form: http://www.ahpf.org.uk/AHP_Public_Health.htm [Accessed 22 March 2016]
- Stucki, G. (2005) International Classification of Functioning, Disability, and Health (ICF): a promising framework and classification for rehabilitation medicine. American journal of physical medicine & rehabilitation / Association of Academic Physiatrists. [online] 84(10), pp. 733-740. [Accessed 8 April 2016]
- Stucki, G., Cieza, A. and Melvin, J. (2007) The International Classification of Functioning, Disability and Health: A unifying model for the conceptual description of the rehabilitation strategy. *Journal of Rehabilitation Medicine*. [online] 39(4), pp. 279-285. [Accessed 8 April 2016].
- World Health Organization (2007) International classification of functioning, disability and health. Available from: http://www.who.int/classifications/icf/en/ [Accessed 8 April 2016].

Part 3: Assessment

Assessment Strategy

This module will be assessed by two components to enable the students to both articulate and present their critical application of rehabilitation principles to a variety of settings.

Summative assessment:

Component A:

Will be a 15 minute presentation with an additional 5 minutes (20 minutes in total) for defended questions which will require the students to present a critical application of the ICF and health promotion. The presentation may be carried out in person or via virtual means.

Component B:

Will be a 3000 word essay which will require the student to critically analyse how practitioner autonomy and skills are affected in the rehabilitation and

recovery process within or outside of health and social care legislation.
Formative assessment Opportunities for formative assessment and discussion will be provided throughout the module through online seminars, discussion and individual feedback.

Identify final assessment component and element	Compoi	Component A1			
% weighting between components A and B (Star	A: 50%	B: 50%			
First Sit					
Component A (controlled conditions) Description of each element		Element v	Element weighting		
1. 20 minute defended presentation	100%				
Component B Description of each element	Element v	Element weighting			
1. 3000 word assignment	100%				
Resit (further attendance at taught classes is no	t required)				
Component A (controlled conditions) Description of each element		Element v	weighting		
1. 20 minute defended presentation	100%				
Component B Description of each element		Element v	weighting		
1. 3000 word assignment	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.

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First CAP Approv	val Date	31 May 2	2016		
Revision	31 Octob	per	Version	3	Link to RIA 12473
ASQC	2017				
Approval Date					