



CORPORATE AND ACADEMIC SERVICES

MODULE SPECIFICATION

Part 1: Basic Data

Module Title	Health Economics				
Module Code	UZYSKM-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	Allied Health Professions		
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			

CAP Approval Date	31 May 2016
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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"> 1. Demonstrate an understanding of the ethical basis of economics, the tools and techniques of economic approaches, and the limitations of economic evidence as a basis for conducting economic evaluations in health and social care. (Component A) 2. Demonstrate an understanding of, and assess alternative theoretical approaches in, health economic practice. (Component A) 3. Critically examine the trade-off between efficiency and equity in the organisation of international health systems and its impact upon health and social care delivery. (Component A) 4. Reflect upon and critically appraise the validity and reliability of economic evidence for health and social care, rehabilitative interventions taking into account physical, social, cultural and institutional contexts. (Component A) 5. Critically examine approaches to estimating economic efficiency where social capital and community assets are important. (Component A) 6. Reflect upon the factors that allow inequalities in the distribution of health and health care to persist and critically examine prioritisation and commissioning of healthcare interventions in communities. (Component A)
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Syllabus Outline	<ul style="list-style-type: none"> ○ The ethical perspective of health economics and its relationship to the allocation and distribution of resources in health and social care. ○ The importance of context in health and social care interventions, whether in hospital or the community, the nature of the relationship between health interventions and outcomes and the factors influencing behaviour change. ○ Examination of the welfarist, extra welfarist and capability models within health economics and understand the alternative approaches to assessing cost effectiveness. ○ Inequalities in the distribution of health and health care – social and physical environments, household factors and individual motivation. Marmot Review. ○ Trade-off between equity and efficiency in resource allocation for primary prevention, health systems and health policy – legislation, regulation, nudging population intervention and targeted intervention to improve population health. ○ The nature of the evidence base for economic analysis of healthcare and public health programmes. ○ Measures of economic efficiency in the allocation of resources in healthcare: cost-benefit ratios, cost per QALY, ICER, Social Return on Investment. ○ Commissioning health and social care, public health programmes and services. Priority setting, rationing and decision making in health and social care. ○ Spatial planning and health: effectiveness and cost-effectiveness of including health in built environment planning.
Contact Hours	<p>The module will be delivered as a distance learning module. The majority of the module is based on self-directed independent learning using a range of interactive, online resources, directed reading, independent reading and discussion forums.</p> <p>Contact hours are typically up to 8 and will be scheduled during the module for online group discussion and tutor support throughout the module.</p>
Teaching and Learning Methods	<p>This module has 150 allocated hours and a variety of learning approaches will be used to support distance learning. Students will be required to engage with online materials and discussion forums and to support this with essential reading. Typically, up to 8 hours of virtual contact will be scheduled for group discussion and tutor support; preparation will be required for virtual scheduled sessions. We expect that 8 hours will be scheduled learning and 142 hours will be independent learning which includes assessment preparation and completion time.</p> <p>Independent learning is a key element of the module learning strategy to enable students to engage in areas that directly relate to their professional practice and clinical interest. Tutor supported discussions will facilitate students to undertake their independent study. The assessment also supports self-directed learning related to clinical practice and assessment preparation will be encouraged and supported through scheduled activities and discussions.</p> <p>There will be opportunities for interactive learning with the module team and other students through discussion boards and real-time communication via Blackboard Collaborate.</p> <p>Scheduled learning includes, tutorials, project supervision, scheduled group discussions.</p> <p>Independent learning 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</p>

prospective students to compare and contrast between programmes they are interested in applying for.

Key Information Set - Module data				
<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	8	142	0	150

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

Reading Strategy

Core and further readings

Students will be directed to reading which is primarily available electronically. Wherever possible, a chapter from essential texts will be clearly indicated and digitised and provided via Blackboard if not available electronically. Students will be expected to read more widely by identifying relevant material using the Module Guide, Library Search and a variety of bibliographic and full text databases and Internet resources. Many resources can be accessed remotely. The purpose of this wider reading is to ensure students are familiar with current research, classic works and material specific to their interests from the academic literature.

Key references will be provided on blackboard before each session to enable students to start thinking about the particular topics in the context of learning from previous sessions before attendance. Learning from readings will be used during the sessions. These readings will be complemented by the indicative reading below.

Access and skills

Additional support is available online via the UWE Library Services web pages, including interactive tutorials on literature searching skills and the use of electronic library resources. Workshops are also offered by the library. These can be accessed via the UWE Library Services web pages <http://www1.uwe.ac.uk/library/>.

Indicative

Indicative reading list

Reading List	<p>The following indicative reading 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, <i>current</i> advice on readings will be available via the Module Guide.</p> <p>Bevan, G., Helderma, J. and Wilsford, D. (2010) Changing Choices in Healthcare: Implications for Equity, Efficiency and Cost. <i>Health Economics Policy and Law</i> [online] 5(3), pp. 251-267. [Accessed 7 April 2016].</p> <p>Donaldson, C., Gerard, K., Mitton, C., Jan, S. and Wiseman, V. (2004) <i>Economics of Health Care Financing: the Visible Hand</i>. 2nd ed. London: Palgrave Macmillan</p> <p>Great Britain, Cabinet Office (2012) <i>A Guide to Social Return on Investment 2012</i>. Available from: http://socialvalueuk.org/what-is-sroi/the-sroi-guide [Accessed 7 April 2016].</p> <p>Kelly, M., McDaid, D., Ludbrook, A., Powell, J. (2005) <i>Economic Appraisal of Public Health Interventions</i>. Available from: http://www.cawt.com/Site/11/Documents/Publications/Population%20Health/Economics%20of%20Health%20Improvement/Economic_appraisal_of_public_health_interventions.pdf [Accessed 7 April 2016].</p> <p>Mooney, G. (2012) <i>The Health of Nations: Towards a New Political Economy</i> [online] London: Zedbooks. [Accessed 7 April 2016]</p> <p>McIntyre, D., and Mooney, G. (2007) <i>The Economics of Health Equity</i>. [online] Cambridge: Cambridge University Press. [Accessed 8 April 2016].</p> <p>Morris, S., Devlin, N. and Parkin, D. (2012) <i>Economic Analysis in Health Care</i>. 2nd ed. Chichester: John Wiley.</p> <p>Powell, J. E. (2007) Health economics in public health. In: Orme, J., Powell, J., Taylor, P. and Grey, M., eds. (2007) <i>Public Health in the 21st century: new perspectives on policy participation & practice</i>. Maidenhead: Open University Press.</p>
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Part 3: Assessment

Assessment Strategy	<p>Component A</p> <p>Students are required to undertake a written project of 3000 words, which involves the critical review of one of five published economic evaluations of interventions in rehabilitation. Students are required to critically appraise of one of the five papers selected by the module leader and construct a generic argument to support the problems of allocating resources for health improvement in real life settings.</p> <p>The project assessment strategy is appropriate to test the formative learning of the module in applying the findings of a critical appraisal of an economic evaluation study in rehabilitation and the context of allocating resources for population impact in the real world.</p> <p>Project plans are submitted to the module team for formative feedback before students proceed with their project assignment. The final project submission comprises a review of economic evidence utilising a systematic approach from the chosen area of health and social care.</p>
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Identify final assessment component and element	Component A	
% weighting between components A and B (Standard modules only)	A:	B:

First Sit	
Component A (controlled conditions) Description of each element	Element weighting (as % of component)
1. Written Project (3000 words)	100%
2.(etc)	
Component B Description of each element	Element weighting (as % of component)
1. Written Project (3000 words)	100%
2.(etc)	

Resit (further attendance at taught classes is not required)	
Component A (controlled conditions) Description of each element	Element weighting (as % of component)
1. Written Project (3000 words)	100%
2.(etc)	
Component B Description of each element	Element weighting (as % of component)
1. Written Project (3000 words)	100%
2.(etc)	
<p>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.</p>	