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MODULE DESCRIPTOR

Module Title

Occupational Perspective Of Population Health

Reference	HS3122	Version	2	
Created	May 2019	SCQF Level	SCQF 9	
Approved	July 2018	SCQF Points	30	
Amended	May 2019	ECTS Points	15	

Aims of Module

The aim of the module is to critically analyse and appraise from an occupational perspective of health, population health, public health and settings applied to occupational therapy theory and practice.

Learning Outcomes for Module

On completion of this module, students are expected to be able to:

- 1 Investigate and critically apply an occupational perspective of health to the wider determinants of health, health and well-being, public health and health promotion.
- 2 Explore the complex underlying health, social, cultural and political determinants of health, which impact on populations, communities and individuals' participation in daily occupations.
- 3 Explore and appraise the relevance of health promotion and public health, in relation to occupational therapy theory and practice.
- 4 Articulate and critically analyse a situated learning experience and apply to occupational therapy theory and practice.

Indicative Module Content

The module focus,topics and content will reflect the diversity of occupational therapy practice in relation to populations, contexts and settings. Occupational therapy theory and practice, public health, health promotion,health literacy, settings, situated and service learning, politics of health, global health and cultural influences. Integrating an occupational perspective of health, humanities, humanising healthcare, occupational science, health in-equalities, human rights,justice, prevention,trans-disciplinary and peripatetic working, evidence, salutogenesis, empowerment, co-creation, co-production, Fifth Wave Thinking, pragmatisim, complex adaptive systems, photo-voice, reflexivity and reflection.

Module Delivery

The module will utilise a blended learning adopting an iterative approach,to explore and analyse populations, from an occupational perspective of health and public health applied to occupational therapy theory and practice. Key note lectures, workshops, situated and service learning will inform practical learning experiences. Virtual learning, self-directed learning, research, trans-disciplinary and peripatetic working, to inform future occupational therapy practice and international collaborations.

Indicative Student Workload		Part Time
Contact Hours	60	N/A
Non-Contact Hours	240	N/A
Placement/Work-Based Learning Experience [Notional] Hours		N/A
TOTAL	300	N/A
Actual Placement hours for professional, statutory or regulatory body		

ASSESSMENT PLAN

If a major/minor model is used and box is ticked, % weightings below are indicative only.

Component 1					
Туре:	Coursework	Weighting:	100%	Outcomes Assessed:	1, 2, 3, 4
Description:	Analysis and Reflection of a Situated Learning Experience: Podcast.				

MODULE PERFORMANCE DESCRIPTOR

Explanatory Text

Individual submission of Analysis and Reflection of a Situated Learning Experience: Podcast, will be graded using the assessment grid and final module grade awarded determined by performance descriptor.

Module Grade	Minimum Requirements to achieve Module Grade:		
Α	A: A		
В	B: B		
С	C: C		
D	D: D		
E	E: E		
F	To achieve this grade you will have failed to achieve the minimum requirements for an E. And/OR Fails to meet module attendance requirements		
NS	Non-submission of work by published deadline or non-attendance for examination		

Module Requirements			
Prerequisites for Module	Successful completion of all Stage 2 modules of the Master of Occupational Therapy.		
Corequisites for module	None Required		
Precluded Modules	None Required		

ADDITIONAL NOTES

Failure to meet the minimum of 80% attendance at first attempt of the module will normally lead to a fail and the requirement to return the next year to complete the module as a second diet attempt. If a student fails to have a provisional pass in any module which is a prerequisite to a practice placement they will be withdrawn from the subsequent placement. Failure to meet 80% attendance on a second diet attempt will normally lead to a fail for the course.

INDICATIVE BIBLIOGRAPHY

- 1 HANLON, P, CARLISLE, S, HANNAH, M, LYON, A, 2012. The future public health. Berkshire: McGraw Hill.
- 2 HANNAH,M,.2014.Humanising healthcare:Patterns of hope for systems under strain.Devon: Triarchy Press
- 3 MACKENZIE, L, O'TOOLE, G, 2011. Occupation analysis in practice. Chichester: Wiley-Blackwell.
- 4 PIERCE, D, 2014. Occupational science for occupational therapists. Thorofare NJ: Slack Incorporated.
- 5 TWINLEY, R., ed., 2020. Illuminating the dark side of occupation: International perspectives from occupational therapy and occupational science. London: Routledge.
- 6 WHITEFORD,G,E,HOCKING,C,.2012.Occupational science, society,inclusion,participation Chichester: Wiley-Blackwell
- 7 WILCOCK, A, A, HOCKING, C. 2015. An occupational perspective of health. Thorofare, NJ: Slack Incorporated.
- 8 WILLS, J., 2022. Foundations for Health Promotion. 5th ed. London: Elsevier Health Sciences