

Course Package

Innovation in Public Health – 1B

| | |
|-----------------------|---|
| Name module | Innovation in Public Health – 1B |
| Educational programme | MSc Health Sciences |
| Period | Second block of the first semester (block 1B) |
| Study load | 15 ECTS (3 x 5 EC) |
| Coordinator | A.H Prins |

| Innovation in Public Health | | | |
|-----------------------------|--|----------|----------|
| block 1A | block 1B | block 2A | block 2B |
| | Public Health innovations 201600033 (5 EC) | | |
| | PH: Dynamics in policy, law & regulation 201600034 (5 EC) | | |
| | Citizen Science and Public Involvement 202300114 (5 EC) | | |

Required preliminary knowledge: Basic knowledge in Economics. Basic knowledge of Excel and Statistics. Knowledge of organization of healthcare.

201600033 - Public Health innovations

This course provides students with a state of the art knowledge and insight into the processes of diffusion and implementation of medical technologies in public health care organizations and networks. Public Health innovations are implemented in open interaction between clients, professionals, and (networks of) organizations. Increasingly, organizations and professionals must intensively and successfully collaborate to improve the quality of public health and wellbeing of the population. In this course we study how organizations and professionals optimally collaborate in the implementation of public health innovations. Substantive examples of innovations covered are in the areas of vaccinations, child abuse, poverty related health care for children, ADHD-care, and elderly care.

The first aim of this course is to provide students with the competences to analyze the landscape of innovation in public health care. Students learn to combine state-of-the-art theory and research with a close examination of substantive examples of collaboration in the implementation of public health innovations.

Lectures (including class discussions led by students) and master classes (including panel discussions led by students) support this first aim. During the lectures, we will discuss the major theories implementing medical innovations as well as the actors that are involved. During the master classes, students discuss the implementation of public health innovations related to several topics with experts from the field.

The second aim of this course is to provide students with the competences to critically evaluate and reflect on how they can make a difference in public health care delivery by stimulating public health innovation. They are able to identify the conditions in the collaboration between clients, professionals, and organizations for the successful implementation and diffusion of public health innovations. The video seminars and a design project support this

The modules are tentative and subject to change. Please check [the website](#) regularly.

second aim. Students focus on the design of a plan for a new public health innovation—in its (inter)organizational design, implementation, and/or diffusion.

201600034 - Public Health: Dynamics in policy, law & regulation

Public health refers to the physical and psychological well-being of the populace, i.e. the health of the public. It includes interactions with the public through traditional health service providers, as well as broader provisions of law and social services that have an impact on people. It also includes human and corporate behaviour that might be the subject of public policy. Policy, law and regulation are different ways in which public authorities attempt to influence the provision of public health. They change as political, social, economic and environmental conditions evolve, and as various actors, public and private, advocate changes. Collisions and disputes over resources, over regulatory requirements such as masks and vaccinations for individuals, business places and public spaces happen with regular occurrence. In the process of tackling public health challenges, various actors, institutions and levels of government often depend on what other actors, institutions and levels of government are doing in the same field. Coordination between them is therefore just as important as resources, regulations and methods of interacting with the public.

In this course, we provide a framework for studying how local public health actions are built and shaped over time, how they are contested in the process rather than generated by technocratic expertise, how implementation, monitoring and enforcement are challenging for public officials and private organizations involved in public health, and how local policy, law and regulation is embedded in national and international requirements and support mechanisms. This includes the European Union, which coordinates between national health and legal systems of its member states, and sets out the frameworks for adopting global standards and programs from the World Health Organization and other international bodies.

Throughout the course, the students apply their knowledge about policy, law and regulation to a concrete case of public health innovation. Students prepare a presentation and a short paper analyzing the legal and regulatory challenges for health innovations with the help of the tools learned in the course. The posters will be presented at a final colloquium at the end of January.

202300114 - Citizen science and public involvement

In recent decades, healthcare evolved steadily from a field where all research and policy decisions were made by professionals such as clinicians and researchers in academia, to a field where patients first were heard and later on were involved. People form advocacy groups and patients organisations, which gives them a seat at the table when it comes to their own care. Especially people with chronic conditions are vocal about their own care. They often use the phrase ‘nothing about us without us’. This phrase incorporates the notion that people living with a condition know what is best for themselves. In healthcare this is seen in the shared-decision making process. Patient involvement can also be seen through patient- and client councils in hospitals and long-term care organizations. In research, patients can get involved in priority-setting, they can get invited to provide input on specific issues in the research process, or they can team up for joint research projects with academic researchers.

Such approaches to research and policy-making where activities are done ‘with’ or ‘by’ citizens, not ‘to’ or ‘for’ them, are called public involvement or citizen science.

In this course we will examine what citizen science and public involvement are, how it can be accomplished, and what the benefits and barriers of such approaches are.