

**Institute of Public Health
Faculty of Health Sciences
Jagiellonian University
Medical College**



**Detailed program and plan
of the full-time master studies**

EUROPUBHEALTH PLUS

**Specialization
Governance of health system in
transition**

ACADEMIC YEARS 2017/2019

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Program of the specialization:
Governance of health system in transition
Classes conducted in academic year 2018/2019

The presented program of the specialization **Governance of health system in transition** is designated for the second year international students of the **Europubhealth Plus** program (it does not regard Polish students choosing this specialization) who completed their first year at University of Sheffield (Sheffield, Great Britain) or in Andalusian School of Public Health, University of Granada (Granada, Spain).

I. GENERAL REQUIREMENTS

Second year specialization encompasses two semesters. Number of mandatory teaching hours is 226 (this does not include master seminar, practical placement and Integration Module). Minimal number of acquired ECTS is 29. Additional 11 ECTS student gains during 2-months practical placement and 17 ECTS for master's seminar (master thesis preparation). Students obtain also 3 ECTS for Integration Module conducted by French School of Public Health (EHESP in Rennes, France).

II. QUALIFICATIONS OF THE GRADUATE

The goal of the master studies is education enabling graduates to undertake positions mentioned below, as well as to undertake further post-graduate training in epidemiology, economy, health care management, journalism, pedagogic etc or doctoral studies for professional improvement:

- member of health care programs development team,
- leader of health care programs,
- head of organization and methodical units in health care systems,
- head of units for prevention and health promotion in health care administration and health care provider institutions,
- independent professional in health care administration, governmental and self-governmental institutions, health insurance institutions and non-governmental organizations.

III. REQUIREMENTS FOR GRADUATION AND OBTAINING PROFESSIONAL TITLE

The main condition for graduation is to obtain all mandatory credits and passing all examinations for mandatory subjects included in the program, passing practical placement, obtaining in total 120 ECTS, including ECTS obtained during first year of the program in partner university (Sheffield or Granada) and submitting master thesis along with passing master examination.

IV. PRACTICAL PLACEMENT

Practical placement lasts for 2 months. Students obtains 11 ECTS for passing practical placement.

**PLAN OF THE
Specialization: Governance of health system in transition - 1st semestr**

No	Name of the course	Class form	M/F	Grading	Number of teaching hours	ECTS
1	Introduction to governance in health system	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	22	3
2	Health systems goals and performance in transition	Practical classes/seminars	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	14	2
3	Financial resources for health	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	16	2
4	Human resources for health	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	18	2
5	Change management and leadership	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	18	2
6	Economic burden of diseases	Lectures/ computer laboratory	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	6/12	3
7	Health technology assessment and rational pharmaceutical policy	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	30	4
8	Market and economic incentives in health care	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	18	2
9	New public management in health care	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	10	1
10	Projections of health care expenditure and revenue	practical classes in computer laboratory	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	16	2
11	Coordinated/managed care	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	16	2
12	Health impact assessment in all policies	Practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	12	2
13	Qualitative and quantitative research methods	Lectures/ practical classes	M(g)	Yes - grading scale: 2 (insufficient) – 5 (very good)	3/15	2

F- elective, M(g) – mandatory

Total number of mandatory hours (without self-education): 226

Total number of ECTS: 29

IInd semester

No	Name of the course	Class form	M/F	Grading	Number of teaching hours	ECTS
1	Practical placement	Practical	M(g)	not (passed/not passed)	160	11
2	Master's seminar	Seminar/	M(g)	Grading for master thesis and master exam - grading scale: 2 (insufficient) – 5 (very good)	8	17
3	Integration module 2 - Interspecialization - takes place in EHSP in Rennes	Seminar/ Self-education	M(g)	yes	35	3

M- mandatory, F- facultative, M(g) – mandatory to graduate

Total number of mandatory hours (without self-education): 203

Total number of ECTS: 31

Introduction to governance in health system

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department Health Economics and Social Security Department Epidemiology and Population Studies Department Information Studies Department
Course unit title	Introduction to governance in health system
Language of instruction	English
Aim of the course	The purpose of the course is to deliver to the students the information about the important role that governance plays in the health sector, detailing how governance is synergistic but different with management and leadership approaches, and ultimately contributes to the highest attainable level of health system performance and good health outcomes for beneficiaries. There will be introduced the key governance terms, concepts, and definitions, and students will useful gain an understanding of how governance works in the public sector and within civil society organizations.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. is aware of the contemporary challenges to policy-making in health. 2. understands principles and values of good governance in health and correctly identify its features <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. is able to identify various situational constrains and determinants of policy-making in health 4. is able to adequately propose governance tools in dealing with those issues 5. is able to relate theoretical and normative aspects of governance to various real-life cases of decision-making <p>Social skills - student:</p> <ol style="list-style-type: none"> 6. is able to clearly present own views and opinions on governance in health 7. can engage in a constructive critique and consideration of any relevant health policy issue 8. is able to express engagement and willingness to explore the subject further
Assessment methods and criteria, course grading	<p>Students are required to be prepared and participate actively on classes.</p> <p>The final course grade will be composed of:</p> <ul style="list-style-type: none"> • 20% oral power point presentation • 70% final exam • 10% activity during classes <p>Final Exam: questions will be related to the obligatory reading material as well as to the content presenting during the classes. Grades will be determined by the percentage achieved.</p>

Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<u>dr Iwona Kowalska – Bobko</u> mgr Michał Zabdyr-Jamróż dr Roman Topór-Mądry dr hab. Christoph Sowada dr hab. Barbara Niedźwiecka
Name of examiner	dr Iwona Kowalska – Bobko mgr Michał Zabdyr-Jamróż
Mode of delivery	practical classes
Prerequisites	knowledge of basic concepts of health and social policy, English language skills at a level, which enables to efficiently utilize scientific literature and participate actively in seminars.
Type of classes and number of hours taught directly by an academic teacher	practical classes - 22
Number of ECTS credits allocated	3
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 22 hours – 1 ECTS • preparation for seminars – 17 hours- 0,6 ECTS • preparation of a presentation: 35 hours – 1,4 ECTS
Teaching & learning methods	The detailed structure of the course is based on the topics listed above. Each meeting starts with a lecture, which introduces the topic and presents the main problems. The second part of the seminar serves for discussing case studies and applying alternative theoretical models. Class sessions will consist of a variety of activities including: small group discussions, presentations, in-class exercises, and case study analysis.
Form and conditions for the award of a credit	<p>The module will complete with an oral examination. The final assessment is based on 3 elements: passing the oral exam 70%, oral presentation 20%, activity during classes 10%.</p> <p>Participation in the classes is obligatory - 10% absence in classes is allowed, as a general rule. Pre-requisites for exam entry: appropriate presence and active involvement in seminars, preparation of the oral presentation.</p> <p>Assessment of each of 3 elements contributing to the final grade:</p> <p>1. Active participation:</p> <ul style="list-style-type: none"> • very good – highly active involvement in seminars, discussions and group work as well as excellent team work and 100% presence throughout the course; • good plus – highly active involvement in seminars, discussions and group work, combined with 100%

	<p>presence throughout the course;</p> <ul style="list-style-type: none"> • good – moderately intensive involvement in seminars, discussions and group work; • sufficient plus – basic involvement in seminars, discussions and group work, combined with 100% presence throughout the course; • sufficient – only basic involvement in seminars, discussions and group work. <p>2. Oral presentations:</p> <ul style="list-style-type: none"> • very good – excellent form and content of presentation, good timing, influential discussion with the audience; • good plus – credible form, content and timing of presentation, formative discussion with the audience; • good – appropriate form, content and timing of presentation, formative discussion with the audience; • sufficient plus – acceptable form and content of presentation and big effort to involve the audience into a discussion; • sufficient – acceptable form and content of presentation, weak efforts to involve the audience into a discussion. <p>3. Oral exam: Round Table discussion:</p> <ul style="list-style-type: none"> • very good: 91-100% of points; highly active involvement in the discussions, excellent timing, influential discussion with the audience; • good plus: 84-90% of points; highly active involvement in the discussion, very good timing, influential discussion with the audience; • good: 77-83% of points; very active involvement in the discussion, good timing, influential discussion with the audience; • sufficient plus: 70-76% of points; acceptable involvement in the discussion, good timing, discussion with the audience; • sufficient: 60-69% of points: acceptable involvement in the discussion, weak efforts to involve the audience into a discussion.
Course topics	<ol style="list-style-type: none"> 1. Concept of governance (WHO, European Commission and leading governmental health national agencies) 2. Determinants of health (demographic, epidemiological, economic, social, technological, health systems) 3. Evidence based policy-making (information resources) 4. State – market – society (economic determinants of health and market vs. state dilemma) 5. Models of health systems in transition (coordination models of health system) 6. Political context (centralization, decentralization, globalization, political systems)

	<p>7. Multi-level systemic legislation</p> <p>8. Social values in healthcare (human rights, solidarity, equality, inclusion, autonomy, people's voice, liquid modernity)</p> <p>9. New modes of health policy-making (good governance, stewardship, participatory governance, models of policy-making and models of democracy)</p>
Recommended and required reading	<ul style="list-style-type: none"> • USAID Health Governance: Concepts, Experience, and Programming Options, February 2008, http://www.healthsystems2020.org/content/resource/detail/1914/ • UNDP and Governance: Experiences and Lessons learned, Management Development and Governance Division, Lessons-Learned Series No. 1, 16.06. 2006 http://www.pogar.org/publications/other/undp/governance/lessonslearned-e.pdf • COMMISSION OF THE EUROPEAN COMMUNITIES, EUROPEAN GOVERNANCE. A WHITE PAPER, COM (2001) 428 final, Brussels, 25.7.2001, http://ec.europa.eu/governance/index_en.htm • REGULATION (EC) No 1081/2006 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 5 July 2006 on the European Social Fund and repealing Regulation (EC) No 1784/1999, http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2006:210:0012:0018:EN:PDF • COUNCIL DECISION of 6 October 2006 on Community strategic guidelines on cohesion (2006/702/EC) http://slimak.onet.pl/_m/specjalne/fundusze/sww20072013_en2.pdf. • Kaufmann D., Kraay A., Mastruzzi M., Governance Matters VII: Aggregate and Individual Governance Indicators, 1996-2007, World Bank Policy Research Working Paper No. 4654, http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1148386 • Anello E. (2008), A Framework for Good Governance in the Public Pharmaceutical Sector, Working draft for field testing and revision, WHO, Department of Essential Medicines and Pharmaceutical Policies, October 2008 • Ritsatakis A. (2000), Learning from the past, looking to the future, Exploring health policy development in Europe, Edited by: Anna Ritsatakis, Ruth Barnes, Evert Dekker, Patsy Harrington, Simo Kokko, Peter Makara, WHO regional publications. European series; No. 86, WHO 2000, pp. 347-388 • Wismar M., Lahtinen E., Stahl T., Ollila E., Leppo K. (2006), Introduction, Health in All Policies. Prospects and potentials, edited by Timo Stahl, Matthias Wismar, Eero Lahtinen, Eeva Ollila, Kimmo Leppo, Ministry of Social Affairs and Health, Finland, European Observatory on Health Systems and Policies

Health Systems goals and performance in transition

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department
Course unit title	Health systems goals and performance in transition
Language of instruction	English
Aim of the course	This course presents a comparative analysis of the origin, structure, and organization of health care systems goals in the global, European and country perspective as well as the global ideas of the public health operation and the concepts of HiAP and Universal Health Care Coverage. The course should expand students understanding of health care systems by observing systemic differences rooted in history, culture, social, economic and political factors. Models of organizing and delivering health care will be presented and why and how these models have been adopted and adapted by each country resulting in health service delivery systems that are unique to each country.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. identifies specific health system strengths and weaknesses, employing comparative analysis as a research tool 2. compares the health system performance of the different health care systems 3. recognizes differences in health systems of the industrialized countries in this class <p>Abilities - student:</p> <ol style="list-style-type: none"> 4. is able to evaluate the health system performance of several industrialized nations 5. is able to identified, evaluated, and discussed the strengths and weaknesses of these various national health systems 6. can better assess the health care systems by putting it into a broader perspective <p>Social skills - student:</p> <ol style="list-style-type: none"> 7. uses some strategy formulating methods in the social environment
Assessment methods and criteria, course grading	<p>Students are required to be prepared and participate actively on classes.</p> <p>The final course grade will be composed of:</p> <ul style="list-style-type: none"> • 20% oral power point presentation • 70% final exam • 10% activity during classes <p>Final Exam: questions will be related to the obligatory reading material as well as the content of the classes. Grades will be determined by the percentage achieved.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)

Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	dr Iwona Kowalska- Bobko Michał Zabdyr-Jamróż
Name of examiner	dr Iwona Kowalska – Bobko
Mode of delivery	practical classes/seminars
Prerequisites	basic knowledge of health policy, English language skills at a level, which enables to efficiently utilize scientific literature and participate actively in seminars
Type of classes and number of hours taught directly by an academic teacher	practical classes/seminars - 14
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 14 hours – 0,5 ECTS • preparation for seminars: 15 hours – 0,5 ECTS • preparation of a presentation: 25 hours - 1 ECTS
Teaching & learning methods	Class sessions will consist of a variety of activities including small group discussions, presentations, in-class exercises, and case study analysis.
Form and conditions for the award of a credit	<p>The module will complete with an oral examination. The final assessment is based on 3 elements: passing the oral exam 70%, oral presentation 20%, activity during classes 10%.</p> <p>Participation in the classes is obligatory - 10% absence in classes is allowed, as a general rule. Pre-requisites for exam entry: appropriate presence and active involvement in seminars, preparation of the oral presentation.</p> <p>Assessment of each of 3 elements contributing to the final grade:</p> <p>1. Active participation:</p> <ul style="list-style-type: none"> • very good – highly active involvement in seminars, discussions and group work as well as excellent team work and 100% presence throughout the course; • good plus – highly active involvement in seminars, discussions and group work, combined with 100% presence throughout the course; • good – moderately intensive involvement in seminars, discussions and group work; • sufficient plus – basic involvement in seminars, discussions and group work, combined with 100% presence throughout the course; • sufficient – only basic involvement in seminars, discussions and group work.

	<p>2. Oral presentations:</p> <ul style="list-style-type: none"> • very good – excellent form and content of presentation, good timing, influential discussion with the audience; • good plus – credible form, content and timing of presentation, formative discussion with the audience; • good – appropriate form, content and timing of presentation, formative discussion with the audience; • sufficient plus – acceptable form and content of presentation and big effort to involve the audience into a discussion; • sufficient – acceptable form and content of presentation, weak efforts to involve the audience into a discussion. <p>3. Oral exam: Round Table discussion:</p> <ul style="list-style-type: none"> • very good: 91-100% of points; highly active involvement in the discussions, excellent timing, influential discussion with the audience; • good plus: 84-90% of points; highly active involvement in the discussion, very good timing, influential discussion with the audience; • good: 77-83% of points; very active involvement in the discussion, good timing, influential discussion with the audience; • sufficient plus: 70-76% of points; acceptable involvement in the discussion, good timing, discussion with the audience; • sufficient: 60-69% of points: acceptable involvement in the discussion, weak efforts to involve the audience into a discussion.
Course topics	<ol style="list-style-type: none"> 1. Global Health Care Systems Goals: <u>Millennium Development Goals</u> (MDGs) 2. Health regulations, role for health care systems goals: global and European 3. Supporting, implementing and monitoring health systems goals on global and European level. The concepts of public health operations (functions, activities) and Health System Performance Assessment (HSPA) 4. Interrelationships of health and social systems. Challenges on the local, national and European levels. The concepts of HiAP and Universal Health Care Coverage 5. Main contemporary trends towards universal systemic coverage of health needs: perspectives on the formal grounds 6. Health systems performance: global administrative law, public health surveillance and networks 7. Health system goals in Poland
Recommended and required reading	<ul style="list-style-type: none"> • Reid T.R. (2010), <i>The Healing of America: A Global Quest for Better, Cheaper and Fairer Health Care</i>, Penguin • OECD (2015) <i>Health at a Glance 2015: OECD Indicators</i>, OECD Publishing, Paris,

	<p>http://dx.doi.org/10.1787/health_glance-2015-en</p> <ul style="list-style-type: none">• Marmor T., Freeman R., Okma K. et al. (eds.) (2009), <i>Comparative Studies & the Politics of Modern Medical Care</i>, Yale University Press, New Haven• Włodarczyk W.C., Mokrzycka A., Kowalska I.(2012), <i>Efforts to Improve the Health Systems</i>, Difin, Warszawa• Marmor T., Freeman R., Okma K. (2005), <i>Comparative Perspectives and Policy Learning in the World of Health Care. Journal of Comparative Policy Analysis</i>, Vol. 7, No. 4, pp. 331 – 348, December 2005 <p>Websites: information about health policy in the industrialized countries</p> <ul style="list-style-type: none">• Commonwealth: http://www.cmwf.org/topics/topics.htm?attrib_id=12009• Kaiser Family Foundation: http://www.globalhealthfacts.org• Kaiser Family Foundation: http://www.globalhealthreporting.org• European Observatory on Health Systems and Policies: http://www.euro.who.int/observatory
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Financial resources for health

Faculty	Faculty of Health Sciences
Department conducting module	Health Economics and Social Security Department
Course unit title	Financial resources for health
Language of instruction	English
Aim of the course	The aim of this module is to provide students with knowledge on health care funding and to enhance students' ability to analyze and evaluate health care funding systems.
Course objectives and learning outcomes	<p>Knowledge – student:</p> <ol style="list-style-type: none"> 1. presents the elements of health care funding system and its objectives 2. explains different methods of health care funding (public and private) and their basic characteristics 3. presents the concept of universal health coverage (UHC) and the measures for achieving UHC 4. presents the evidence on the performances of different health care funding methods <p>Abilities - student:</p> <ol style="list-style-type: none"> 5. is able to comprehensively analyze and evaluate and present health care funding system based on defined criteria 6. is able to perform a critical evaluation of different health care funding methods 7. is able to find and select an adequate literature and data <p>Social competences - student:</p> <ol style="list-style-type: none"> 8. is able to work effectively in multicultural groups, shows openness to different opinions and values which drive health care funding systems and is aware of the need for independent learning 9. understands and uses ethical principles in health care
Assessment methods and criteria, course grading	To complete the module student is required to prepare and submit the essay on a given topic. The essay is also to be presented orally by the student. The activity of the student during class tasks and discussions will be also evaluated. Effect 1-7: evaluation of essay, presentation and class tasks Effects 8-9: monitoring student's activity during seminars.
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<u>dr Marzena Tambor</u> dr hab. C. Sowada
Name of examiner	dr Marzena Tambor
Mode of delivery	practical classes

Prerequisites	basic knowledge of health economics, English language skills at a level, which enables to efficiently utilize scientific literature and participate actively in seminars.
Type of classes and number of hours taught directly by an academic teacher	practical classes - 16
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 16 hours – 0,6 ECTS • preparation for seminars: 12 hours – 0,4 ECTS • preparation of essay and presentation: 25 hours - 1 ECTS
Teaching & learning methods	Interactive lecture, group work, presentations and discussions
Form and conditions for the award of a credit	<p>The evaluation of the essay will take into account: students' knowledge and understanding of a given topic, ability to gather and analyze a broad range of relevant data, ability to critically evaluate gathered evidence, appropriate use of terminology, logical structure of the essay and clear reasoning, writing skills (max. 15 points)</p> <p>Scores:</p> <ul style="list-style-type: none"> - sufficient (dst) - 9-10 points - sufficient plus (+ dst) – 11 points - good (db) - 12-13 points - good plus (+ db) – 14 points - very good (bdb) - 15-16 points <p>The evaluation of the presentation will take into account: student's knowledge and understanding of a given topic, ability to gather and analyze a broad range of relevant data, ability to critically evaluate gathered evidence, appropriate use of terminology, logical structure of the presentation and clear reasoning, presenting skills (max. 15 points)</p> <p>Scores:</p> <ul style="list-style-type: none"> - sufficient (dst) - 9-10 points - sufficient plus (+ dst) – 11 points - good (db) - 12-13 points - good plus (+ db) – 14 points - very good (bdb) - 15-16 points <p>The evaluation of the class work will take into account student's readiness to participated in discussions and class tasks, demonstrated during class work student's knowledge, skills and social competences (max. 15 points)</p> <p>Scores:</p> <ul style="list-style-type: none"> - sufficient (dst) - 9-10 points - sufficient plus (+ dst) – 11 points - good (db) - 12-13 points - good plus (+ db) – 14 points

	<p>- very good (bdb) - 15-16 points</p> <p>Final grade: weighted average of the scores from: written assignment (individual essay) (60% of the final grade), oral presentation (20% of the final grade), class work (20% of the final grade)</p>
Course topics	<ol style="list-style-type: none"> 1. Funding of health care – objectives, functions and models 2. Funding methods: <ol style="list-style-type: none"> a) taxes (NHS) b) social health insurance c) private health insurance d) out- of-pocket payments e) other - international help, employers, MSA 3. Health Funding and universal coverage 4. Fiscal performance, international statistics
Recommended and required reading	<ul style="list-style-type: none"> • Mossialos E., Dixon A., Figueras J., Kutzin J. (eds.) (2002), Funding health care: options for Europe, European Observatory on Health Care Systems Series. Open University Press, Buckingham - Philadelphia • The World Health Report. Health Systems Financing (2000), The path to Universal coverage, WHO • Pavlova M., Tambor M., van Merode G.G., Groot W. (2010), Are patient payments an effective policy tool? Review of theoretical and empirical evidence, <i>Zeszyty Naukowe Ochrony Zdrowia Zdrowie Publiczne i Zarządzanie</i> 2010/1. pp. 29-36 • Thomson S., Mossialos E. (2009), Private Health Insurance in the European Union. Final report prepared for the European Commission, Directorate General for Employment, Social Affairs and Equal Opportunities. London: LSE Health and Social Care London School of Economics and Political Science • Kutzin J., Cashin C., Jakab M. (eds.) (2010), Implementing health financing reform: lessons from countries in transition. Copenhagen: World Health Organization Regional Office for Europe, on behalf of the European Observatory on Health Systems and Policies • Thomson S., Foubister T., Kutzin J., Permanand G., Bryndová L. (2009), Addressing financial sustainability in health systems. Copenhagen: World Health Organization, on behalf of the European Observatory on Health Systems and Policies

Human resources for health

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department
Course unit title	Human resources for health
Language of instruction	English
Aim of the course	The main goal of this module is to present to the students current information regarding the health care market and practical tools of human resources management. On the basis of acquired theoretical knowledge in the area of Human Resources Management and skills connected with this knowledge, students obtain the fundamentals of the proper management of health care staff.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. explains, compares and digest the rules of creation and implementation of the public health strategy and health politics in the field of human resources for health at the regional, national and international levels 2. knows, categorises, justifies the principles and rules for effective and efficient human resources management <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. proposes and plans solutions to various problems in the field of human resources for health <p>Social competencies - student:</p> <ol style="list-style-type: none"> 4. is able to work and cooperate in a group
Assessment methods and criteria, course grading	<p>Effect 1: written examination (multiple choice test) Effect 2: written examination (multiple choice test), Effect 3: student's presentation (prepared in pairs) Effect 4: group work (during lessons) Final rating: 70% - written exam, 30% - presentation prepared by students (students will prepare presentation on current problems of Human resources for health in their country).</p> <p>Assessment of Effects 1-2: Results of the final written exam (multiple choice test):</p> <ol style="list-style-type: none"> 2 - students wrote the test below 60% of the test, 3 - student wrote the test on 60-70% 3,5 – student wrote the test on 71-79% 4 - student wrote a test on 80-86% 4,5 - student wrote a test on 87-93% 5 - student wrote the test more than 93% <p>Assessment of Effect 3:</p> <ol style="list-style-type: none"> 2 - Student is not able to propose any solutions of the problems. 3 – Student is able to propose limited solutions of the problems 4 – Student is able to propose different solutions of the problems 5 - Student is able to propose different solutions of the problems

	<p>and can define the limitations and advantage of particular solutions.</p> <p>Assessment of Effect 4: 2 - Student does not work and cooperate in a group 3 - Student is able to work and cooperate in a group but only in limited scope, his/her activity is limited 4 - Student is able active work and cooperate in a group 5 - Student is able active work and active cooperate in a group and takes the lead in the group</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<u>dr Alicja Domagała</u> dr Marcin Kautsch dr Katarzyna Czabanowska
Name of examiner	dr Alicja Domagała
Mode of delivery	practical classes
Prerequisites	basic knowledge of health care management
Type of classes and number of hours taught directly by an academic teacher	practical classes - 18
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • preparation to classes, self-work: 25 hours - 1 ECTS • participation in the seminar and written examination: 25 hours - 1 ECTS
Teaching & learning methods	Seminars are performed with the assistance of audio-visual presentations with elements of discussion on presented issues. Seminars include small group work, brainstorming, case-studies, discussion and presentations prepared by students. Presentations concern topics of human resources for health in Poland as well as interesting example from other European Union countries. Independent learning includes hours engaged with essential reading of recommended literature for discussions during seminars and preparation of visual presentations.
Form and conditions for the award of a credit	<p>Participation in the classes is obligatory.</p> <p>The module will complete with a written examination whilst single classes will be credited based on the student presence, activity and ability to solve case studies during the classes and computer laboratory.</p> <p>Final assessment: 70% - written exam, 30% - presentation prepared by students (students will prepare presentation focused</p>

	<p>on current problems of Human resources for health in their country).</p> <p>Scores for the final assessment:</p> <ul style="list-style-type: none"> - sufficient (3,0) - 60-70% - sufficient plus (3.5) - 71-79% - good (db) - 80-86% - good plus (4,5) - 87-92% - very good (5,0) - 93-100%
Course topics	<ol style="list-style-type: none"> 1. Human resources for health: definition, characteristics, international comparison 2. The concept and scope of the labour market of health sector 3. Employment of medical staff (trends, shortages). Human resources planning 4. Education for health. Training and professional development 5. Motivation of health care personnel: incentives for health professional, financial and non-financial incentives, effective incentive scheme 6. Migration of health care workers - scale and reasons worldwide 7. The key international initiatives on Human Resources for Health (e.g. WHO Human Resources Framework, Global Health Workforce Alliance)
Recommended and required reading	<ul style="list-style-type: none"> • Buchan J., Perfilieva G. (2015), <i>Making Progress Towards Health Workforce Sustainability in the WHO European Region</i>, WHO Regional Office for Europe, Copenhagen 2015 • European Union, (2012), <i>EU level Collaboration on Forecasting Health Workforce Needs, Workforce Planning and Health Workforce Trends – A Feasibility Study</i>, May 2012 • Malgieri A., Michelutti P., Van Hoegaerden M. (eds) (2015), <i>Handbook on Health Workforce Planning Methodologies Across EU Countries</i>, DO52, Release 1, Bratislava • Ono T., Lafortune G., Schoenstein M. (2013), <i>Health Workforce Planning in OECD Countries: A Review of 26 Projection Models from 18 Countries</i>, <i>OECD Health Working Papers</i>, No. 62, OECD Publishing • World Health Organization (2014), <i>A Universal Truth: No Health Without a Workforce</i> • World Health Organization (2010), <i>Models and tools for health workforce planning and projections</i>, Human Resources for Health Observer, 3, 2010 • Other documents prepared and distributed by lecturers

Change management and leadership

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department
Course unit title	Change management and leadership
Language of instruction	English
Aim of the course	Organizations are nowadays subjects of constant change. This is in order to adjust their operations to the evolving environment as well as due to the internal organizations' forces. To successfully master these changes the proper knowledge and skills are necessary. The aim of this course is to learn the nature and mechanisms of such changes as well as to understand the major management problems of organizational change.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. identifies the specificity of planning, and managing in changing organizational environment, especially oriented towards HRM, leadership and communication 2. knows the basic tools to diagnose the necessity of organizational change and rules of preparing the plan of such change <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. is able to collect the relevant data and show them in a form of a presentation containing description and background explanation of the methodology chosen, as well as a plan of introducing change in the organization 4. is able to evaluate the actions undertaken in the area of organizational change, and propose relevant solutions. <p>Social competencies - student:</p> <ol style="list-style-type: none"> 5. can work in a team analyzing the need and preparing the plan of organizational change
Assessment methods and criteria, course grading	<p>Evaluation of the written project prepared in small group and its presentations (60-70%)</p> <p>Evaluation of students' activity during the course (preparation to the courses, participation in the discussions) (20%)</p> <p>Evaluation of written essays prepared according to the lecturer's requirements (10-20%)</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	dr Stojgniew Sitko
Name of examiner	dr Stojgniew Sitko
Mode of delivery	practical classes

Prerequisites	basic knowledge in management and in human resources management / psychology
Type of classes and number of hours taught directly by an academic teacher	practical classes - 18
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • seminar: 18 hours - 0,6 ECTS • preparation of project and presentation: 35 hours – 1.4 ECTS
Teaching & learning methods	<ul style="list-style-type: none"> • Seminar lectures presenting the basics of change management • Discussions based on the materials indicated by a lecturer • Work on the group project • Individually prepared cases' analysis and their presentations
Form and conditions for the award of a credit	<p>Evaluation of the:</p> <ul style="list-style-type: none"> - group project preparation and presentation, - written essay and preparation of individual presentation, - activity during the discussions. <p>Evaluation of above elements will take into account: students' knowledge and understanding of a given topic, ability to gather as well as to analyze relevant data and to critically evaluate it, appropriate use of terminology, logical structure of the essay and/or presentation and clear reasoning. Both – a group project and individually written essay with presentations will be scored with max. 15 points, these responding to the following grades:</p> <p>Sufficient (dst) = 9-10 points Sufficient plus (+ dst) = 11 points Good (db) = 12-13 points Good plus (+ db) = 14 points Very good (bdb) = 15-16 points</p>
Course topics	<ol style="list-style-type: none"> 1. System changes as a current health sector challenge, basic terms and approaches of change management and leadership, 8 steps of change management, introduction to project preparation and presentation 2. Establishing a sense of urgency, finding and empowering of a leader 3. Creating a guiding coalition, stakeholders management and leaders role 4. Developing of good vision and strategy 5. Leaders function in communicating the changed vision 6. Empowering broad-base action; How leaders make a “change infection” to spread? 7. Generating short-term wins 8. Consolidating gains and producing more change, anchoring new approaches in culture 9. Organizational change managed and lead properly – summary

Recommended and required reading	<ul style="list-style-type: none">• Kotter J.P., Cohen D.S. (2002), The Heart of Change, Harvard Business School Press, Boston• Kurt Lewin. Change Mnagement Model, http://www.change-management-coach.com/kurt_lewin.html• Gleicher's Formula: A Scientific Approach to Change, http://www.brighthubpm.com/change-management/122241-gleichers-formula-a-scientific-approach-to-change/• On Death and Dying By Elisabeth Kübler-Ross, http://selfdefinition.org/afterlife/Elizabeth-Kubler-Ross-On-Death-and-Dying.pdf
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Economic burden of diseases

Faculty	Faculty of Health Sciences
Department conducting module	Health Economics and Social Security Department
Course unit title	Economic burden of diseases
Language of instruction	English
Aim of the course	<p>The aim of the module is to familiarize students with the modern approach of evidence based health policy development to help them to learn about methods and tools of assessment of the burden of diseases to the societies at the country, regional and global level.</p> <p>After completing the course students will be able to use available data sources to assess a burden of particular disease on society, to calculate the burden of selected diseases in various units of measurement and to present properly results by: gender, age groups and geographical regions; to use actual results of Global Burden of Disease (GBD) study for benchmarking health systems of selected countries, and to identify the main public health problems in different countries and regions.</p>
Course objectives and learning outcomes	<p><u>Knowledge - student:</u></p> <ol style="list-style-type: none"> 1. enumerates and defines comprehensively approaches to assessment and presentation disease burden to the societies 2. lists and characterizes main units of measurement the disease burden (expressing: years of life lost, quality of life reduction, disability caused by disease, costs from different perspectives, economic growth reduction, other) and describes techniques of their calculation and presentation 3. describes main stages in GBD study methodology development and critically evaluates the methods used for generic DALY calculation and the methodology applied in the latest version of the Global Burden of Disease Study 2010 (GBD 2010) 4. knows the method of using GBD results for benchmarking the health systems of selected countries <p><u>Abilities - student:</u></p> <ol style="list-style-type: none"> 5. is able to identify and utilize available data sources to assess the burden of selected chronic non-communicable disease to the society 6. is capable to calculate main indicators of disease burden presenting time lost (with and without quality of life consideration) and to carry out cost of illness study from different perspectives 7. can use the published results of the GBD 2010 study to formulate an opinion on the major health problems of selected countries and globally 8. using diabetes mellitus or mental illness as an example the student is able to describe an economic impact of chosen diseases in the selected country and to present examples of

	<p>disease prevention studies</p> <p><u>Social skills – student:</u></p> <p>10. is capable to compare the consequences of the diseases and to detect major health problems in selected country, using the appropriate tools for assessing disease burden on a society</p> <p>11. is able to motivate decision-makers to use effectively data generated in the health system and by the Global Institutions for ongoing assessment of disease burden in a country and for health policy evaluation</p>
<p>Assessment methods and criteria, course grading</p>	<p>To complete the module student is required to prepare and submit the project on a burden of a selected disease in a given country. The results of the project are also to be presented orally by the student during a special session. Electronic files (: in MS Word, MS Excel) have to be handed over three days before evaluation. The PowerPoint file can be submitted during the day of presentation.</p> <p>Activity during the discussions will be also evaluated.</p> <p>Effect 1:</p> <p>Mark sufficient (3.0): Student enumerates main approaches to assessment of disease burden to societies, however is not able to describe the listed approaches.</p> <p>Mark good (4.0): Student enumerates all main approaches to assessment of disease burden to societies, and describes them, although not completely.</p> <p>Mark very good (5.0): Student enumerates and describes comprehensively all approaches to assessment and presentation of the disease burden to the societies.</p> <p>Effect 2:</p> <p>Mark sufficient (3.0): Student lists and characterizes main units of disease burden measurement, but is not able to characterize them.</p> <p>Mark good (4.0): Student lists main units of disease burden measurement, but is not able to describe the techniques of their calculation.</p> <p>Mark very good (5.0): Student has an extensive knowledge on units of disease burden measurement and on techniques of their calculation and presentation.</p> <p>Effect 3:</p> <p>Mark sufficient (3.0): Student lists stages of the GBD study methodology development, but is not able to describe them.</p> <p>Mark good (4.0): Student lists and describes main stages of the GBD study methodology development, but is not able to critically evaluate the methods used for calculation generic DALY and present version of DALY measurement.</p> <p>Mark very good (5.0): describes main stages in GBD study development and critically evaluates the methods used for calculation generic DALY and latest version of DALY measurement.</p>

	<p>Effect 4: Mark sufficient (3.0): Student knows that the results of the presented GBD study can be used for comparing health systems of different countries, but is not able to define the method. Mark good (4.0): Student knows that the results of the presented GBD study can be used for comparing health systems of different countries and briefly describes the method of performing it, but is not able to define the steps of performing it. Mark very good (5.0): Student knows the method of utilizing GBD results for benchmarking the health systems of selected countries and comprehensively describes it.</p> <p>Effect 5: Mark sufficient (3.0): Student is able identify some of available data sources to assess the burden of selected non-communicable disease to the society, but is not able to utilize the available data. Mark good (4.0): Student is able identify most of available data sources, but is not able properly to use them for burden of selected non-communicable disease assessment. Mark very good (5.0): is able to identify and utilize all available data sources to assess the burden of selected chronic non-communicable disease to the society.</p> <p>Effect 6: Mark sufficient (3.0): Student is capable to calculate only indicators of disease burden measuring duration of time lost due to disease but is not able to calculate indicators of disease burden considering also quality of life and is not able to carry out costs-of-illness study. Mark good (4.0): Student is able to calculate indicators measuring disease burden in time lost (considering both duration and quality of life reduction due to the disease), but is not able properly to carry out cost- of-illness study from different perspectives. Mark very good (5.0): Student is able properly to calculate main indicators of disease burden presenting time lost (with and without quality of life consideration) and to carry out cost-of-illness study from different perspectives.</p> <p>Effect 7: Mark sufficient (3.0): Student superficially knows the most recent published results of the GBD study and is not able to formulate an opinion on the major health problems of selected country. Mark good (4.0): Student knows the published results of the GBD study, but formulates an incomplete opinion on the major health problems of selected country. Mark very good (5.0): Student knows and uses the published results of the GBD study and is able to formulate a complete opinion on the major health problems of selected countries and globally.</p> <p>Effect 8: Mark sufficient (3.0): Student is partly able to present economic impact of diabetes mellitus or mental illness in selected country, and is not able to recall an example of published disease</p>
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	<p>prevention studies</p> <p>Mark good (4.0): Student is able to describe in details an example of economic impact of diabetes mellitus or mental illness in selected country, but is not able to recall an example of published disease prevention studies</p> <p>Mark very good (5.0): Student is able to describe in details an example of economic impact of diabetes mellitus or mental illness in selected country, and is able to present examples of published disease prevention studies</p> <p>Effect 9:</p> <p>Mark sufficient (3.0): Student is partly able to compare the consequences of the diseases, and is not able to formulate major health problems in selected country.</p> <p>Mark good (4.0): Student is able to compare the consequences of the diseases based on the objective tools for assessing disease burden on society, however is only partly able to detect major health problems in selected country.</p> <p>Mark very good (5.0): is capable to compare the consequences of the diseases, to detect and properly present major health problems in selected country, based on the objective tools for assessing disease burden on society.</p> <p>Effect 10:</p> <p>Mark sufficient (3.0): Student is able to a limited extend to formulate message to decision makers for using data generated in the health system for health policy assessment, and is not able to show arguments and properly explain them.</p> <p>Mark good (4.0): Student is able to formulate key messages for using data generated in the health system for disease burden identification and health policy assessment, can show arguments, but is not able to explain them properly.</p> <p>Mark very good (5.0): Student is able to formulate key messages for using data generated in the health system for disease burden identification and health policy assessment, creates strong economic arguments, and is able to explain them properly.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	dr Katarzyna Kissimova-Skarbek
Teacher responsible	dr Katarzyna Kissimova-Skarbek
Mode of delivery	lectures and practical classes in the computer laboratory
Prerequisites	Basic knowledge on health economics, mathematics and epidemiology
Type of classes and number of hours taught directly by an academic	lectures – 6 computer laboratory - 12

teacher	
Number of ECTS credits allocated	3
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • seminar: 18 hours - 1 ECTS • preparation for seminars: 8 hours – 0.4 ECTS • preparation of project and presentation: 28 hours – 1.6 ECTS
Teaching & learning methods	lectures, case studies, practical exercises, project development containing complex burden of selected chronic non-communicable disease identification, oral presentation of the project's results at specially arranged seminar
Form and conditions for the award of a credit	<p>The module will complete with a project preparation and presentation of results whilst single classes will be credited based on the student presence, activity and ability to solve case studies during the computer laboratory.</p> <p>Participation in the classes is obligatory. Student is allowed to miss only one class. In the case of a larger number of absences student must pass the abandoned issues during additional class.</p> <p>Final assessment: project preparation and presentation 80%, activity during classes 20%.</p> <p>The final grade is given according to following scale: 93,0% – 100,0% very good (5,0); 85,0% – 92,9% good plus (4,5); 77,0% – 84,9% good (4,0); 69,0% – 76,9% fair plus (3,5); 60,0% – 68,9% fair (3,0); 0% – 59,9% fail (2,0).</p>
Course topics	<ol style="list-style-type: none"> 1. Introduction to the issue of economic burden of as a part of economic analysis in health care - scope, perspective and main approaches. Social determinants of chronic diseases 2. Nonmonetary units of measurement the disease burden <ol style="list-style-type: none"> (i) units considering only duration of life (PYLL, PEYLL, SEYLL) (ii) units considering duration and quality of life (QALY, DALY) 3. Global Burden of Disease, Injuries and Risk Factors Study. Stages of GDB study methodology development. Sources of data to assess the national burden of disease, injuries and risk factors in DALY 4. The costs of illness: direct costs (medical and non-medical) and indirect costs; Methods of valuing informal care; Costs incurred by patients and their families, the public payer costs and the costs of the disease to the whole society 5. Impact of ill health on economic growth. WHO EPIC model 6. An economic case for prevention of chronic diseases. Burden of diabetes mellitus and its prevention example. Burden of mental illnesses

	7. Using results from the global burden of disease, injuries, and risk factors for benchmarking of health systems
Recommended reading	<ul style="list-style-type: none"> • Aldy E. J. and Viscusi W. K. (2007), Age Differences in the Value of Statistical Life: Revealed Preference Evidence. <i>RFF Discussion Paper</i> 07-05. April 2007 http://www.rff.org/rff/Documents/RFF-DP-07-05.pdf • International Diabetes Federation (2013), <i>IDF Diabetes Atlas</i>, 6th edn. Brussels, Belgium: International Diabetes Federation, www.idf.org/diabetesatlas • Institute for Health Metrics and Evaluation (2016), <i>Global Burden of Disease Study 2010. GBD Compare. Results by cause</i>. Seattle, United States. http://vizhub.healthdata.org/gbd-compare/ • Krol M., Brouwer W. (2014), How to Estimate Productivity Costs in Economic Evaluations. <i>Pharmacoeconomics</i>. April 2014, Volume 32, Issue 4, pp. 335-344 • Rice D.P. (2000). Cost of illness studies: what is good about them? <i>Injury Prevention</i>, Vol. 6, Issue 3, pp. 177-179 • The Global Burden of Disease Study 2010. <i>The Lancet</i>, Volume 380, number 9859, December 15, 2012 – January 4, 2013, pp 2053-2260 • Vos T., Global Burden of Disease Study 2013 Collaborators (2015), Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>The Lancet</i>, 8 June 2015, http://dx.doi.org/10.1016/S0140-6736(15)60692-4

Health technology assessment and rational pharmaceutical policy

Faculty	Faculty of Health Sciences
Department conducting module	Drug Management Department
Course unit title	Health technology assessment and rational pharmaceutical policy
Language of instruction	English
Aim of the course	<p>The major goal of this module is to provide the student with knowledge, abilities and competencies necessary to understand and detect the problems associated with appropriate utilization and management of pharmaceuticals within health care facilities and systems, as well as to appreciate the role of health technology assessment within contemporary health care systems.</p> <p>Subsequently the student will be better suited to prepare, undertake or participate in interventions aimed to rationalize usage of medicines at various levels of the health care system, as well as to effectively participate in multidisciplinary teams involved in the process of health technologies assessment at its various stages.</p>
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. analyzes, critically assesses and concludes from facts on organization and financing of pharmaceuticals within health care systems, including Poland, some other countries and international setting (to a lesser extent this type of knowledge pertains also to medical devices) 2. knows and categorizes main rules, pertaining to pharmaceutical policy, in local and national context and also from a broader, European or global perspective; characterizes and explains legal regulations, related to local, national and international health policy in the area of pharmaceuticals; and to a lesser extent to medical devices 3. can list the sources of scientific information, which are necessary in performing HTA analyses, and explains their practical applications 4. explains process and steps of scientific research based on HTA; can design and plan the HTA research, justify the application of necessary research tools and methods of data gathering <p>Abilities - student:</p> <ol style="list-style-type: none"> 5. can independently formulate, plan and propose solutions of concrete problems, related to economics and management of pharmaceuticals and medical devices. Student has also skills, which are necessary for implementing procedures, related to undertaking relevant solutions 6. can perform critical analysis and interpretation of scientific publications, expert reports and analyses in area of public health, focusing on provision of pharmaceuticals 7. can perform critical analysis and interpretation of HTA report, as well as draw conclusions based on such report; can

	<p>participate in preparation of HTA report in its basic and standard form</p> <p>8. understands meaning of main plots of content of complex texts on concrete and abstract topics. This includes understanding of issues associated with pharmacoeconomics, pharmaceutical policy, pharmaceutical pricing and reimbursement policy, provision of pharmaceuticals and medical devices, HTA</p> <p>Social competencies - student:</p> <p>9. is able to independently gather knowledge and expand research skills, utilizing objective sources of information. Student is also aware of the necessity of such activities in his/her own professional career</p> <p>10. demonstrates engagement in promotion of rational management of pharmaceuticals and HTA, as well as shows interest in problems related to pharmaceutical policy (understood as an important element of health policy) and HTA</p> <p>11. is able to work in multidisciplinary team, aiming to solve practical problems in area of pharmaceutical policy and HTA</p>
Assessment methods and criteria, course grading	<p>Effects related to knowledge and abilities: assessment of the final examination results.</p> <p>All effects: monitoring student's activity during seminars, assessment of involvement in a project, preparation of a report and presentation of project's results.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<p><u>dr Tomasz Bochenek</u></p> <p>dr Pawel Kawalec</p> <p>mgr Rafał Nowak</p>
Name of examiner	dr Tomasz Bochenek
Mode of delivery	practical classes
Prerequisites	<p>basic knowledge of health economics, health care management, health policy, epidemiology and statistics, health care systems science.</p> <p>English language skills at a level which enables to efficiently utilize scientific literature and participate actively in classes/seminars.</p>
Type of classes and number of hours taught directly by an academic teacher	practical classes - 30
Number of ECTS credits allocated	4

<p>Estimation of the student workload needed in order to achieve expected learning outcomes</p>	<ul style="list-style-type: none"> • participation in contact activities (seminars): 30 hours - 1 ECTS • preparation for seminars: 25 hours - 1 ECTS • realization of project and presentation of its results: 25 hours - 1 ECTS • preparation for exam and participation in it: 30 hours - 1 ECTS
<p>Teaching & learning methods</p>	<p>Presentation of didactic content in form of short lectures. Discussion on issues related to the didactic content, building on the pre-existing students' knowledge, experience and observations. Practical exercises. Development of group projects, followed by presentation of their results on a students' group forum and discussion. Implementation of "e-learning" techniques, tailored to needs and possibilities of a particular group of students, is possible and necessary.</p>
<p>Form and conditions for the award of a credit</p>	<p>Awarding a credit and a final grade is based on 4 elements: active participation in seminars (20%), preparation of a written group report (20%) and its oral presentation (20%), passing a written exam (40%). Assessment of each of 4 elements contributing to the final grade:</p> <p>1) Active participation (10% absence in classes is allowed, as a general rule):</p> <ul style="list-style-type: none"> -) very good – highly active involvement in seminars, important input into discussions and group work and excellent team work, combined with 100% presence throughout the course; -) good plus – highly active involvement in seminars, discussions and group work, combined with 100% presence throughout the course; -) good – moderately intensive involvement in seminars, discussions and group work; -) sufficient plus – basic involvement in seminars, discussions and group work, combined with 100% presence throughout the course; -) sufficient – only basic involvement in seminars, discussions and group work. <p>2) Written project report, prepared in teams:</p> <ul style="list-style-type: none"> -) very good – highly appropriate combination of information gathered independently by a team and at seminars, content is highly relevant to a task, reflects in-depth knowledge of facts, excellent assortment and use of bibliography; -) good plus – appropriate combination of information gathered independently by a team and at seminars, content is relevant to a task, reflects correct knowledge of facts, appropriate assortment and use of bibliography; -) good – the goal of a report has been achieved, no major errors occur;

	<p>-) sufficient plus – research topic is tackled at a rather basic level, with some defects, but a text is fully correct in technical terms;</p> <p>-) sufficient – presents a research topic, which is tackled at a rather basic level, with some defects, there are some technical errors, which are not disqualifying.</p> <p>3) Oral presentation of a project report:</p> <p>-) very good – exceptional form and content of presentation, very good timing, proportionate involvement of a whole team, very formative discussion with the audience;</p> <p>-) good plus – very plausible form, content and timing of presentation, proportionate involvement of a whole team, formative discussion with the audience;</p> <p>-) good – appropriate form, content and timing of presentation, proportionate involvement of a whole team, formative discussion with the audience;</p> <p>-) sufficient plus – acceptable form and content of presentation, minor concerns about proportionate involvement of a whole team or efforts to involve the audience into a discussion;</p> <p>-) sufficient – acceptable form and content of presentation, major concerns about proportionate involvement of a whole team, weak efforts to involve the audience into a discussion.</p> <p>4) Written exam (multiple choice / single answer type of questions plus text completion questions):</p> <p>-) very good: 91-100% of points;</p> <p>-) good plus: 84-90% of points;</p> <p>-) good: 77-83% of points;</p> <p>-) sufficient plus: 70-76% of points;</p> <p>-) sufficient: 60-69% of points.</p> <p>Pre-requisites for exam entry: appropriate presence and active involvement in seminars, submission of a written project report and its presentation.</p>
Course topics	<ol style="list-style-type: none"> 1. Introduction to the module on rational pharmaceutical policy and Health Technology Assessment (HTA). Subsequent steps of HTA analyses. 2. Analysis of clinical effectiveness: systematic reviews and meta-analyses of data. Critical assessment of medical literature and overview of Evidence-Based Medicine (EBM) methods. 3. Costs of health care interventions. Types of costs and costing methods. Types and steps of health economic analyses. Introduction to decision modeling (decision trees, Markov modeling). 4. Cost-effectiveness analysis and modeling in HTA. The HTA guidelines in Poland and worldwide. 5. Budget impact analyses and health care system impact analyses in HTA. 6. Role of EBM and HTA in decision making. International overview of HTA applications. HTA agencies and other HTA organizations worldwide.

	<p>7. Contemporary pharmaceutical market characteristics. Pharmaceutical policy and its role in health care system governance. Sustainable national pharmaceutical policies and their stakeholders. Risk of fraud and corruption and preventive strategies.</p> <p>8. Methods and policies of pricing and reimbursement of pharmaceuticals and medical devices. Role of pharmaceutical pricing and reimbursement strategies in health care system governance.</p> <p>9. Analyses of drug utilization. Rational management of pharmaceuticals in hospitals and other health care settings.</p>
Recommended and required reading	<p>Basic literature:</p> <ul style="list-style-type: none"> • Schweitzer S.O. (2007), Pharmaceutical economics and policy, Oxford University Press, Oxford (selected chapters) • European Observatory on Health, Systems and Policies (2011), Health Systems in Transition, Poland Health System Review, WHO Copenhagen • Dukes MNG et al. (2004), Drugs and money. Prices, affordability and cost containment, IOS Press, Amsterdam • Espin J., Rovira J. (2007), Analysis of differences and commonalities in pricing and reimbursement systems in Europe, EASP, Granada • Mossialos E. et al. (2004), Regulating pharmaceuticals in Europe: striving for efficiency, equity and quality, Open University Press, Berkshire (selected chapters) • Drummond M.F. et al. (2005), Methods for the economic evaluation of health care programmes, Oxford University Press, Oxford - New York (selected chapters) • Agencja Oceny Technologii Medycznych i Taryfikacji (2016) Health Technology Assessment Guidelines, AOTM, Warszawa • National Institute for Health and Technology Assessment (2007) Guide to the methods of technology appraisal, NICE, London • The Cochrane Collaboration (2008) Cochrane Collaboration open learning material for reviewers. Version 1.1., The Cochrane Collaboration (selected chapters) • WHO (2001), How to develop and implement a national drug policy, WHO, Geneva <p>Supplementary literature:</p> <ul style="list-style-type: none"> • Sloan F.A., Hsieh C.R. (2007), Pharmaceutical innovation. Incentives, competition, and cost-benefit analysis in international perspective, Cambridge University Press, Cambridge (selected chapters) • Drummond M., McGuire A. (2002), Economic evaluation in health care. Merging theory with practice, Oxford University Press, Oxford (selected chapters) • Smith M.D. et al. (2003), Health care, cost, quality, and outcomes. ISPOR book of terms, ISPOR, Princeton

	<ul style="list-style-type: none">• Stahl J.E. (2008), Modelling methods for pharmacoeconomics and health technology assessment. An overview and guide, <i>Pharmacoeconomics</i>, Vol. 26, Issue 2, pp. 131-148• Orlewska E., Gulacsi L. (2009), Budget-Impact Analyses. A critical review of published studies, <i>Pharmacoeconomics</i>, Vol. 27, Issue 10, pp. 807-827• Strom B.L. (1989), <i>Pharmacoepidemiology</i>, Churchill Livingstone, New York, Edinburgh, London, Melbourne (selected chapters)• Quick J.D. et al. (1997), <i>Managing drug supply</i>, Management Sciences for Health, Kumarian Press, New York (selected chapters)• Other scientific sources, including papers from specialist scientific literature, are recommended or delivered to students before some seminars, depending on individual research topic and project of a student
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Market and economic incentives in health care

Faculty	Faculty of Health Sciences
Department conducting module	Health Economics and Social Security Department
Course unit title	Market and economic incentives in health care
Language of instruction	English
Aim of the course	The aim of module is to provide students knowledge concerning possibilities of using market mechanisms in health care sector but also the different market failures which reduce the market efficiency and create different problems in the sector at health care provider level.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. explains basic categories in economics and organization of health sector 2. explains the different cases of market failures in general and in health sector 3. discusses the different financial/economic instruments used as incentives reducing market failures consequences <p>Abilities - student:</p> <ol style="list-style-type: none"> 4. is able to critically apprise economic discussion concerning the implementation of market mechanism in health sector <p>Social competences - student:</p> <ol style="list-style-type: none"> 5. is aware of the need for independent learning, 6. is able to search for objective sources of knowledge health
Assessment methods and criteria, course grading	Effects 1 - 4: assessment of the final examination results. Effects 4 - 6: monitoring student's activity during seminars.
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<u>dr hab. Christoph Sowada</u> dr Marzena Tambor
Name of examiner	dr hab. Christoph Sowada
Mode of delivery	practical classes
Prerequisites	basic knowledge of economics and health economics, English language skills at a level, which enables to efficiently utilize scientific literature and participate actively in seminars.
Type of classes and number of hours taught directly by an academic teacher	practical classes - 18
Number of ECTS credits allocated	2

Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 18 hours – 0,6 ECTS • preparation for seminars: 12 hours – 0,4 ECTS • preparation for exam and participation in it: 25 hours - 1 ECTS
Teaching & learning methods	lectures, case studies, practical exercises, lecture based discussion
Form and conditions for the award of a credit	<p>The module will complete with a written examination (60 minutes)</p> <p>Scores for the exam:</p> <ul style="list-style-type: none"> • sufficient (dst) - 60-67% • sufficient plus (+ dst) - 68-76% • good (db) - 77-84% • good plus (+ db) - 84-91% • very good (bdb) - 92-100%
Course topics	<ol style="list-style-type: none"> 1. Market and market failures in health care an overview 2. Asymmetric information about health risks – adverse selection 3. Asymmetric information about utilization – moral hazard 4. Asymmetric information about services – induced demand 5. Financial incentives for patients/customers (copayment, bonus malus methods, reimbursement methods) 6. Purchasing of health services 7. Competition among insurers and risk adjustment mechanisms
Recommended and required reading	<ul style="list-style-type: none"> • Maynard A. (ed.) (2005), The Public-Private Mix for Health, Radcliffe Publishing Ltd, Abington • Zweifel P. (2007), The Theory of Social Health Insurance, NOW Publisher, Boston • Kifmann M. (2002), Insuring Premium Risk in Competitive Health Insurance Markets, Mohr Verlag, Tübingen, p. 14-20 • Folland S., Goodman A.C., Stano M. (2007), The Economics of Health and Health Care, Pearson Prentice Hall, Upper Saddle River NJ, in 4th ed. chapter 6, 8-10, 17 - 21

New public management in health care

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department
Course unit title	New public management in health care
Language of instruction	English
Aim of the course	The objective of the course is to give an overview of the most important management issues of contemporary public organizations identified in social and health sector. The approach taken has a descriptive rather than a prescriptive nature: the course provides alternative theoretical models and national “best practices”. The lectures cover and give examples from the different fields of the public social and health sector (e.g. health care system, central and local government, economic development, health care management etc.)
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. understands the differences between various sectors (for-profit, non-profit, public) 2. understands the main concepts of performance management, human resource management in the public health sector <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. is able to analyze the environment of public social and health organizations 4. is able to analyze the environment of the public organizations (context), strategy formulation, organizational structure, performance management, human resources management, and information systems management 5. can adopt up-to-date organizational and management theories as well as modern management tools in the organizations of the public social and health sector <p>Social skills - student:</p> <ol style="list-style-type: none"> 6. use some strategy formulating methods in the social environment
Assessment methods and criteria, course grading	<p>Students are required to be prepared and participate actively on classes.</p> <p>The final course grade will be composed of:</p> <ul style="list-style-type: none"> • 20% oral power point presentation • 70% final exam • 10% activity during classes <p>Final Exam: questions will be related to the obligatory reading material as well as the content of the classes. Grades will be determined by the percentage achieved.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2

Semester	3
Type of studies	full-time
Teacher responsible	<u>dr Iwona Kowalska- Bobko</u> dr Stojgniew Sitko mgr Michał Zabdyr-Jamróż
Name of examiner	dr Iwona Kowalska- Bobko dr Stojgniew Sitko
Mode of delivery	practical classes
Prerequisites	basic knowledge of social policy, decentralization in health care, health care management, health policy, health care systems, English language skills at a level which enables to efficiently utilize scientific literature and participate actively in the seminar
Type of classes and number of hours taught directly by an academic teacher	practical classes - 10
Number of ECTS credits allocated	1
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 10 hours – 0,4 ECTS • preparation for seminars – 5 hours- 0,2 ECTS • preparation of a presentation: 10 hours – 0,4 ECTS
Teaching & learning methods	The detailed structure of the course is based on the topics listed above. Each meeting starts with a lecture, which introduces the topic and presents the main problems. The second part of the seminar serves for discussing case studies and applying alternative theoretical models. Class sessions will consist of a variety of activities including small group discussions, presentations, in-class exercises, and case study analysis.
Form and conditions for the award of a credit	<p>The module will complete with a written exam. The final assessment is based on 3 elements: passing the written exam 70%, oral presentation 20%, activity during classes 10%.</p> <p>Participation in the classes is obligatory - 10% absence in classes is allowed, as a general rule. Pre-requisites for exam entry: appropriate presence and active involvement in seminars, preparation of the oral presentation.</p> <p>Assessment of each of 3 elements contributing to the final grade:</p> <p>1. Active participation:</p> <ul style="list-style-type: none"> • very good – highly active involvement in seminars, discussions and group work as well as excellent team work and 100% presence throughout the course; • good plus – highly active involvement in seminars, discussions and group work, combined with 100% presence throughout the course; • good – moderately intensive involvement in seminars, discussions and group work; • sufficient plus – basic involvement in seminars, discussions

	<p>and group work, combined with 100% presence throughout the course;</p> <ul style="list-style-type: none"> • sufficient – only basic involvement in seminars, discussions and group work. <p>2. Oral presentation:</p> <ul style="list-style-type: none"> • very good – excellent form and content of presentation, good timing, influential discussion with the audience; • good plus – credible form, content and timing of presentation, formative discussion with the audience; • good – appropriate form, content and timing of presentation, formative discussion with the audience; • sufficient plus – acceptable form and content of presentation and big effort to involve the audience into a discussion; • sufficient – acceptable form and content of presentation, weak efforts to involve the audience into a discussion. <p>3. Written exam:</p> <ul style="list-style-type: none"> • sufficient (dst) - 60-67% • sufficient plus (+ dst) - 68-76% • good (db) - 77-84% • good plus (+ db) - 84-91% • very good (bdb) - 92-100%
Course topics	<ol style="list-style-type: none"> 1. The Framework and Structures; from Administration to Management, the rationale for Public Administration, theoretical underpinning of the NPM, evaluation, decentralisation and devolved management in health care 2. Accountability and Participation: techniques of implementation 3. Public management and resource allocation - health care sector markets, strategic management, introducing networks 4. Management processes, control and quality management - towards a model of 'positive' performance management
Recommended and required reading	<ul style="list-style-type: none"> • Bovaird T., Löffler, E. (eds) (2009), Public Management and Governance, Routledge, London, Chapter 3, 5, 9, 10, 11 • Pollitt Ch. (2003), The Essential Public Manager, Open University Press, Buckingham - Philadelphia, Chapter 1, 2, 5 • Pollitt Ch, van Thiel S., Homburg V.M.F. (eds) 2007), The New Public Management in Europe. Adaptation and Alternatives, Palgrave, New York • Osborne D., Hutchinson, P. (2004), The Price of Government: Getting the Results We Need in an Age of Permanent Fiscal Crisis, Basic Books, New York • Włodarczyk W.C., Mokrzycka A., Kowalska, I. (2012), Efforts to Improve the Health Systems, Difin, Warszawa <p>Further compulsory reading will be distributed on class or available on the course website</p>

Projections of health care expenditure and revenue

Faculty	Faculty of Health Sciences
Department conducting module	Health Economics and Social Security Department
Course unit title	Projections of health care expenditure and revenue
Language of instruction	English
Aim of the course	The aim of the module is to provide students knowledge concerning the most important factors influencing health care expenditures and revenues in general, and in his/her country particularly. After completing the module the student should be able to construct a simple actuarial model of the social health insurance expenditure and revenue, taking into account their main determinants and to present the results of predictive analysis in the form of a short report.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. describes the sources of revenues in his/her country and the main factors affecting the level of sector revenues 2. can explain the main determinants of health care expenditures in his/her country <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. finds, evaluates, analyzes and joins information from different sources 5. constructs a model of expenditure and revenue projection, iterprets the results of projection 6. presents results of research in a form of presentation and paper
Assessment methods and criteria, course grading	<p>Outcomes are checked by presentation and paper (report) prepared by a student on the base of model constructed by them. Final mark depends on the number of points received from the report evaluation. Report is evaluated in terms of:</p> <ul style="list-style-type: none"> - the accuracy and completeness of projections (0-5 points), - the structure of the report (0-5 points) <p>To receive positive assessment, each part has to be rated at least 3 points.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	dr Ewa Kocot
Name of examiner	dr Ewa Kocot
Mode of delivery	practical classes in computer laboratory
Prerequisites	basic knowledge of economy and health care system financing, basic skills of Excel usage

Type of classes and number of hours taught directly by an academic teacher	practical classes in computer laboratory - 16
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in seminars, a needed data gathering and preparation of a project: 40 hours – 1.5 ECTS • analysis of results and their presentation in the oral and written form: 15 hours – 0.5 ECTS
Teaching & learning methods	<ul style="list-style-type: none"> • presentations • discussions • preparation of prognostic model by students (Excel)
Form and conditions for the award of a credit	<p>To complete the module participation in seminars and preparation of health expenditures/revenues projection for selected country is required. The results of projection have to be presented in the oral form at the seminar and in the written form as a report.</p> <p>Final mark depends on the number of points received from the report evaluation. Report is evaluated in terms of:</p> <p>a) the accuracy and completeness of forecasts (0-5 points), b) the structure of the report (0-5 points)</p> <p>To receive positive assessment, each (a and b) has to be rated at least 3 points.</p> <p>Grading scale:</p> <ul style="list-style-type: none"> • 5.0 (very good) - 9.5-10 points • 4.5 (good plus) -8.5-9 points • 4.0 (good) - 7.5-8 points • 3.5 (sufficient plus) - 6.5-7 points • 3,0 (sufficient) - 6 points
Course topics	<ol style="list-style-type: none"> 1. Projections of expenditure and revenue in health care – theoretical introduction and examples 2. The most important determinants of health care expenditures in selected countries and introducing them to the projection model 3. Sources of revenues of health care system in selected countries and factors influenced the level of revenues - introducing them to the projection model 4. Preparation of health care expenditure and revenue projections for selected countries 5. Students' presentations of results of projections
Recommended and required reading	<p>Basic literature:</p> <ul style="list-style-type: none"> • European Commission (2014), The 2015 Ageing Report. Underlying Assumptions and Projection Methodologies, European Economy 8/2014 • European Commission (2015), The 2015 Ageing Report. Economic and budgetary projections for the 28 EU Member

	<p>States (2013-2060), European Economy 3/2015 (part II.2)</p> <ul style="list-style-type: none">• Astolfi R., Lorenzoni L., Oderkirk J. (2012), A comparative Analysis of Health Forecasting Methods, OECD Health Working Papers, No. 59, OECD Publishing <p>Supplementary literature:</p> <ul style="list-style-type: none">• Golinowska S., Kocot E., Sowa A. (2007), Health Expenditure scenarios in the New Member States: Country Report on Poland, ENEPRI Research Report No.47• Przywara B. (2010), Projecting future health care expenditure at European level: drivers, methodology and main results, European Economy, Economic Papers 417• OECD (2013), Public spending on health and long-term care: a new set of projections, OECD Economic Policy Papers No.06
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Coordinated/managed care

Faculty	Faculty of Health Sciences
Department conducting module	Health Economics and Social Security Department
Course unit title	Coordinated/managed care
Language of instruction	English
Aim of the course	The aim of this course is to provide the student with knowledge, abilities and competencies necessary to understand the complexity of the world of coordinated/managed care institutions and instruments.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. explains idea of coordinated/managed care 2. explains the different types of managed care organizations 3. explains the role and tasks of managed care service institutions 4. discusses the different managed care interventions/instruments, their advantages and disadvantages <p>Abilities - student:</p> <ol style="list-style-type: none"> 5. is able to perform a critically evaluation of disease management and case management programs 6. is able to evaluate cost, quality and distribution effects of managed care programs <p>Social competences - student:</p> <ol style="list-style-type: none"> 7. is aware of the need for independent learning, 8. is able to search for objective sources of knowledge health
Assessment methods and criteria, course grading	The module will complete with a presentation and a written examination, whilst single classes will be credited based on the student presence and activity in the discussion Effect 1-6, written examination (60 minutes), presentation prepared by a student, activity during the classes Effect 7-8 presentation prepared by a student, participation in discussion
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	<u>dr hab. Christoph Sowada</u> dr Marzena Tambor
Name of examiner	dr hab. Christoph Sowada
Mode of delivery	Practical classes
Prerequisites	basic knowledge of economics and health economics, English language skills at a level, which enables to efficiently utilize scientific literature and participate actively in seminars

Type of classes and number of hours taught directly by an academic teacher	practical classes - 16
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 16 hours – 0,6 ECTS • preparation of the presentation: 20 hours – 0,7 ECTS • preparation for exam and participation in it: 20 hours – 0,7 ECTS
Teaching & learning methods	seminars connected with short lectures, students presentations, discussions
Form and conditions for the award of a credit	<p>Final score: weighted average of the scores for presentation (40%) and exam (60%). Both parts have to be passed with minimum 3,0 (sufficient).</p> <p>Scores for the presentation</p> <ul style="list-style-type: none"> - sufficient (dst) - 9-10 points - sufficient plus (+ dst) – 11 points - good (db) - 12-13 points - good plus (+ db) – 14 points - very good (bdb) - 15-16 points <p>Scores for the exam:</p> <ul style="list-style-type: none"> - sufficient (dst) - 60-67% - sufficient plus (+ dst) - 68-76% - good (db) - 77-84% - good plus (+ db) - 84-91% - very good (bdb) - 92-100%
Course topics	<ol style="list-style-type: none"> 1. What is coordinated care – coordinated care and managed care 2. Insurance/payer oriented managed care organizations and products: Staff-, Group- and Network-HMOs', point of service products 3. Provider oriented managed care organizations and products: independent practice association, preferred provider organizations, provider sponsored organizations, networks, integrated delivery systems, physician hospital organizations 4. Managed care service institutions: managed service organizations, physician practice management organizations 5. Managed care instruments - an overview: <ol style="list-style-type: none"> a) selective contracts, credentialing b) consumer cost-sharing (only short overview, details in other course) c) paying providers (only short overview, details in other course) d) quality and cost assurance: gate keeping, guidelines and clinical pathways, disease management, case management, utilization review and management, quality management

	<p>e) instruments for evaluation: EBM, HTA (only short overview, details in other course)</p> <p>6. DMP Disease management programs</p> <p>7. Case management</p> <p>8. Performance of managed care – cost effects, quality effects, distribution effects, acceptance</p>
Recommended and required reading	<ul style="list-style-type: none"> • Amelung V.E. (2013) Healthcare Management. Managed Care Organisations and Instruments, Springer Verlag, Berlin Heidelberg • Glied S. (2005), Managed Care, in: Culyer A.J., Newhouse J.P. (ed.), Handbook of Health Economics, vol. 1A, Chapter 13, Elseviewr, Amsterdam a.o. • Folland S., Goodman A.C., Stano M. (2004), The Economics of Health and Health Care, Pearson Prentice Hall, Upper Saddle River NJ, in 4th ed. chapter 12 • Donaldson C., Gerard K., Mitton C. (2005), Efficient purchasing in public and private healthcare systems: mission impossible?, in: Maynard A. (ed.) The Public-Private Mix for Health, Radcliffe Publishing Ltd, Abington, pp. 21-42

Health impact assessment in all policies

Faculty	Faculty of Health Sciences
Department conducting module	Health Policy and Management Department Human Nutrition Department Environmental Health Department
Course unit title	Health impact assessment in all policies
Language of instruction	English
Aim of the course	The objective of the course is to develop understanding of the HIA concept, process and tools. The most important is to assess the health determinants, the health impacts of public policy, project interventions or programs, and the potential of HIA to influence policy and decision making to the advantage of public health. The lectures cover and give examples from the different fields of the public sector (e.g. education, environment, nutrition, labor market, social inclusion).
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. knows the HIA approach and its genesis 2. knows the main trends and opinions represented in this context by researchers, public health specialists, key stakeholders (i.e. WHO) <p>Abilities - student:</p> <ol style="list-style-type: none"> 3. is able to indicate pro- and contra – of HIA in different policies (advantages and difficulties) 4. is able to formulate a proposal of a solution for a given particular case (policy, strategy, instruments) 5. is able to indicate methods and bodies/ institutions/organs for cooperation in the field of HIA implementation <p>Social skills - student:</p> <ol style="list-style-type: none"> 6. cooperates due to project work with other students
Assessment methods and criteria, course grading	<p>Students are required to be prepared and participate actively on classes.</p> <p>The final course grade will be composed of:</p> <ul style="list-style-type: none"> • 20% oral power point presentation • 70% final exam • 10% activity during classes <p>Final Exam: questions will be related to the obligatory reading material as well as the content of the classes. Grades will be determined by the percentage achieved.</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)
Year of study (if applicable)	2
Semester	3
Type of studies	full-time

Teacher responsible	<p>dr Iwona Kowalska- Bobko mgr Michał Zabdyr-Jamróż dr Bartosz Balcerzak dr Beata Piórecka dr Alicja Domagała</p>
Name of examiner	<p>dr Iwona Kowalska- Bobko mgr Michał Zabdyr-Jamróż</p>
Mode of delivery	practical classes
Prerequisites	basic knowledge of social and health policy, English language skills at a level which enables to efficiently utilize scientific literature and participate actively in the seminar
Type of classes and number of hours taught directly by an academic teacher	practical classes - 12
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 12 hours – 0,5 ECTS • preparation for seminars – 15 hours - 0,5 ECTS • preparation of a presentation: 25 hours – 1 ECTS
Teaching & learning methods	The detailed structure of the course is based on the topics listed above. Each meeting starts with a lecture, which introduces the topic and presents the main problems. The second part of the seminar serves for discussing case studies and applying alternative theoretical models. Class sessions will consist of a variety of activities including small group discussions, presentations, in-class exercises, and case study analysis.
Form and conditions for the award of a credit	<p>The module will complete with a written exam. The final assessment is based on 3 elements: passing the written exam 70%, oral presentation 20%, activity during classes 10%. Participation in the classes is obligatory - 10% absence in classes is allowed, as a general rule. Pre-requisites for exam entry: appropriate presence and active involvement in seminars, preparation of the oral presentation.</p> <p>Assessment of each of 3 elements contributing to the final grade:</p> <p>1. Active participation:</p> <ul style="list-style-type: none"> • very good – highly active involvement in seminars, discussions and group work as well as excellent team work and 100% presence throughout the course; • good plus – highly active involvement in seminars, discussions and group work, combined with 100% presence throughout the course; • good – moderately intensive involvement in seminars, discussions and group work; • sufficient plus – basic involvement in seminars, discussions and group work, combined with 100% presence throughout the

	<p>course;</p> <ul style="list-style-type: none"> • sufficient – only basic involvement in seminars, discussions and group work. <p>2. Oral presentation:</p> <ul style="list-style-type: none"> • very good – excellent form and content of presentation, good timing, influential discussion with the audience; • good plus – credible form, content and timing of presentation, formative discussion with the audience; • good – appropriate form, content and timing of presentation, formative discussion with the audience; • sufficient plus – acceptable form and content of presentation and big effort to involve the audience into a discussion; • sufficient – acceptable form and content of presentation, weak efforts to involve the audience into a discussion. <p>3. Written exam:</p> <ul style="list-style-type: none"> • sufficient (dst) - 60-67% • sufficient plus (+ dst) - 68-76% • good (db) - 77-84% • good plus (+ db) - 84-91% • - very good (bdb) - 92-100%
Course topics	<ol style="list-style-type: none"> 1. Introductory issues: explanations of term, definitions, scope, stages of process, data bases 2. HIA - basic models, perspectives of implementation in different policies, perspectives 3. Case studies based on actual proposal, for example: <ol style="list-style-type: none"> a. HIA - environmental health b. HIA and nutrition problems c. HIA: social inclusion and labour market strategies d. d. HIA: education h
Recommended and required reading	<ul style="list-style-type: none"> • Cole B.L., Fielding J.E. (2007), Health impact assessment: A tool to help policy makers understand health beyond health care. <i>Annu. Rev. Public Health</i>, Vol. 28, pp. 393-412 • Fehr R. (1999), Environmental health impact assessment: Evaluation of a 10 step model. <i>Epidemiology</i>, Vol. 10, Issue 5, pp. 618-625 • Harris-Roxas B., Harris E. (2011), Differing forms, differing purposes: A typology of health impact assessment. <i>Environ. Impact Assess. Rev.</i>, Vol. 31, Issue 4, pp. 396-403 • Mindell J.S., Boltong A., Forde I. (2008), A review of health impact assessment frameworks. <i>Public Health</i>, Vol. 122, Issue 11, pp.1177-1187 • Balint J., Boelens P., Debello M. (2003), Health Impact Assessment: SEIC (Sakhalin Energy Investment Company) Phase 2 Development. World Health Organization [online], p. 97-116, in available: http://www.who.int/hia/examples/energy/en/HIA_Chps13_18.pdf [accessed July 29, 2011]

- Benneer L.S., Olmstead S.M. (2008), The impacts of “right-to-know:” Information disclosure and the violation of drinking water standards. *J. Environ. Econ. Manage.*, Vol. 56, Issue 2, pp. 117-130
- Bhatia R. (2010), A Guide for Health Impact Assessment. California Department of Public Health. October 2010 [online]. Available: <http://www.cdph.ca.gov/pubsforms/Guidelines/Documents/HIA%20Guide%20FINAL%2010-19-10.pdf> [accessed Apr. 22, 2011]
- Bhatia R., Seto E. (2011), Quantitative estimation in Health Impact Assessment: Opportunities and challenges. *Environ. Impact Assess. Rev.*, Vol. 31, Issue 3, pp. 301-309

Further compulsory reading will be distributed on class or available on the course website

Qualitative and quantitative research methods

Faculty	Faculty of Health Sciences
Department conducting module	Epidemiology and Population Studies Department
Course unit title	Qualitative and quantitative research methods
Language of instruction	English
Aim of the course	The course provides training in aims and methods of qualitative research as well as in statistical theory and a variety of statistical and computational methods for application in medicine and public health. Students arrive at conclusions about disease and health risks by evaluating and applying mathematical and statistical formulas to the factors that impact health.
Course objectives and learning outcomes	<p>Knowledge - student:</p> <ol style="list-style-type: none"> 1. knows and understands the scenarios where qualitative research should be performed 2. understands the categories of probability, statistical inference and hypothesis testing 3. knows the design and conduct of experimental and epidemiological studies, statistical computation, and data analysis <p>Abilities - student:</p> <ol style="list-style-type: none"> 4. is able to develop research protocol for qualitative research 5. can plan and perform a substantial data analysis project as a culminating experience in quantitative research 6. understands the substance of scientific problems and be able to formulate them qualitatively or quantitatively, as appropriate 7. is able to organize, enter in database and manipulate data in a form ready for analysis 8. chooses appropriate statistical methods and understands the strengths and limitations of different research methods 9. conducts high quality data analysis that can stand review and criticism 10. communicates the work in a clear and logical written report and oral presentation <p>Social competencies - student:</p> <ol style="list-style-type: none"> 11. is able to collaborate and communicate effectively with professionals in related disciplines <ul style="list-style-type: none"> •
Assessment methods and criteria, course grading	<p>Evaluation of the class and homework assignments for choice of proper statistical procedures to recognize patterns in raw data and to perform statistics.</p> <p>Evaluation of technical reports of computer designed statistical analysis.</p> <p>Evaluation of a final project presented in written form</p>
Type of course unit (mandatory/optional)	optional (mandatory for EPH students)

Year of study (if applicable)	2
Semester	3
Type of studies	full-time
Teacher responsible	dr Krystyna Szafraniec
Name of examiner	dr Krystyna Szafraniec
Mode of delivery	lectures, practical classes
Prerequisites	basic knowledge of epidemiology, base of descriptive and inferential statistics
Type of classes and number of hours taught directly by an academic teacher	lectures - 3 practical classes - 15
Number of ECTS credits allocated	2
Estimation of the student workload needed in order to achieve expected learning outcomes	<ul style="list-style-type: none"> • participation in contact activities (seminars): 18 hours – 0,8 ECTS • preparatory work: text readings 6 hours – 0,2 ECTS • realization of project and presentation of its results: 30 hours - 1,0 ECTS
Teaching & learning methods	Instructional classes and seminars including short review of the concepts of descriptive and inferential statistics, and data-based exercises in computer lab using statistical software
Form and conditions for the award of a credit	<p>A final project in 2-person teams in written form will be required. The goal of the project is to conduct statistical analysis of a population health issue using a dataset. Project is scored from 0 to 40 points; minimum credit requirement is 24 points.</p> <p>Grades:</p> <ul style="list-style-type: none"> • no credit (ndst) - <24 points • sufficient (dst) – 24-27 points • sufficient plus (+ dst) – 28-29 points • good (db) – 30-33 points • good plus (+ db) – 34-35 points • very good (bdb) – 36-40 points
Course topics	<p>I. Qualitative research design</p> <ol style="list-style-type: none"> 1. Concept and goals of qualitative research 2. Data collecting instruments <ul style="list-style-type: none"> - strategies of gathering data (structured and non-structured interviews, focus groups, document analysis, participant observation, case study) - design of the questionnaire 3. Levels of measurement and concept of scaling 4. Type of data, qualitative coding and analysis 5. Validity of qualitative research – criteria for research judging

	<p>II. Quantitative methods in data analysis</p> <ol style="list-style-type: none"> 1. Quantitative research concepts and instruments for gathering data 2. Data preparation - organizing the data for analysis 3. Descriptive methods to summarize basic features of sample and measures 4. Inferential statistics – concept of confidence interval, measures of association, review of the methods for comparing groups, regression modeling 5. Practical utilization of the statistical methods in computer lab using statistical software and data-based exercises. 6. Structure of final report - method of presenting the results.
Recommended and required reading	<ul style="list-style-type: none"> • Handouts and other materials will be made available in advance to class period • Strauss A.L. (1989), <i>Qualitative Analysis for Social Scientists</i>, Cambridge University Press, Cambridge • Pope C., Ziebland S., Mays N. (2000), <i>Analysing qualitative data</i>, <i>BMJ</i>, Vol. 320, pp. 114–6 • Rosner B. (2010), <i>Fundamentals of biostatistics</i>, Cengage Learning Inc., Boston