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**Internationalisation of Higher Education – Policy and Practice**

*Title*

Comparing Masters programmes’ curricula to facilitate exchange and collaboration: a case in occupational therapy education

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Abstract

Masters programmes play an important role in continued academic and professional development of health care professionals, and produce leaders in clinical practice, education and research. This article describes the process that led to the development of a framework for describing and comparing Masters’ competences in post-registration occupational therapy education, as a reference point for international cooperation, exchange and potential benchmarking. The project was a collaboration of master programmes from nine countries. The framework may serve as a guideline for prospective students and support curriculum development and review of Masters programmes. It can also serve other educational programmes as an example for benchmarking and promotion of internationalisation in higher education.
Introduction

[Benefits of internationalisation in higher education]
Internationalisation of Higher Education is defined as the ‘intentional process of integrating an international, intercultural or global dimension into the purpose, functions and delivery of post-secondary education, in order to enhance the quality of education and research for all students and staff, and to make a meaningful contribution to society’ (De Wit, Hunter, Howard and Egron-Polak, 2015 p.29). Internationalisation is increasingly demanded by policy-makers, university managers, scholars and students alike (Egron-Polak & Hudson, 2014). It carries the promise of enhancing quality by broadening the horizons of all stakeholders in Higher Education (HE) and by providing opportunities for benchmarking. International exchange, along with other modes of international collaboration, exposes students and scholars to wider learning environments and diverse perspectives. Beyond the expected impact in terms of fostering competences (Grant & McKenna, 2003; Shimmel et al., 2016), ranging from self-efficacy to problem solving, and attitudes, such as open-mindedness (Suarez-Balcazar, Hammel, Mayo, Inwald & Sen, 2012), international exchange and collaboration open the way for knowledge transfer.

Lunadron, Pasqualoni and Permpoonwiwat (2017) observed that “from a historical perspective, higher education has itself been a highly international enterprise, …, although the way it is increasingly associated with innovation indicates that “it appears … to have assumed a new function” (p. 36). Internationalisation has become a key feature, and a focus of continuing development in higher education:

Its importance has grown along with … offering new opportunities but also posing new challenges. Discussions among policy makers, higher education leaders and stakeholders, and ongoing research have shown that the expansion of internationalisation has brought with it questions about its meaning, its impact on learning as well as on the nature of relations among institutions” (Egron-Polak & Hudson, 2014, p.5).
To provide strategic guidance for higher education institutions Advance HE (2016) produced an ‘Internationalising higher education’ framework. The framework distinguishes the layers of organisations, people and curricula, and the realms of activities, knowledge and values to: (i) recognise, build on and enhance the quality and variety of internationalisation policy and practice in Higher Education (HE); (ii) foster collegial approaches to education, research and partnership that transcend national and international boundaries; and (iii) acknowledge the ongoing institutional and individual roles and responsibilities required to realise the internationalisation of HE (Higher Education Academy, 2016)

[Internationalisation as quality indicator]
Internationalisation became a common indicator for University Rankings (e.g. Times Higher Education (2019) World University Rankings (https://www.timeshighereducation.com/world-university-rankings) to which, despite some debate regarding their validity, university managers are paying increasing attention (Pasqualoni & Scott, 2011; Levin & Greenwood, 2016). To make the promises and benefits of internationalisation a reality, context matters: “The internationalisation of higher education […] is driven by a dynamic and constantly evolving combination of political, economic, socio-cultural and academic rationales. These motives take different forms and dimensions in the different regions and countries, and in institutions and their programmes. There is no one model that fits all” (De Wit et al., 2015 p. 27).

[Facilitating internationalisation in HE as a rationale for this project]
Despite the known benefits of internationalisation for different stakeholders, ensuring relevant and successful international experiences that contribute to the development of professional competencies is not always straightforward. To address these challenges, the authors undertook an international project which aimed to tailor the approaches to a particular discipline (Occupational Therapy), level (the Master’s level, which also allows for research cooperation) and region (as covered by the European Network of Occupational Therapists in Higher Education, ENOTHE). ENOTHE is a non-governmental organisation and its
members comprise universities and educational institutions offering occupational therapy programmes within Europe and abroad. ENOTHE is concerned with standards and quality of professional education of Occupational Therapy across Europe (https://enothe.eu/). In the area of occupational therapy, a Tuning report defined descriptors in the form of generic and specific competences (TUNING Occupational Therapy Project Group, 2008) for post-qualification Masters students in occupational therapy. The ‘ENOTHE Masters Tuning Project Group’, of which the authors are members, was established in 2012 to explore how a sample of post-qualification, Masters programmes for occupational therapists across nine countries used the Occupational Therapy Tuning reference points and competences (TUNING Occupational Therapy Project Group, 2008) in their curricula, and implemented quality guidelines. Specific occupational therapy post-qualification Masters programmes are not available in all European countries. To ensure a broader geographical coverage and to compare the discipline-specificity across programmes, the project group also included some colleagues whose universities provided Interdisciplinary Masters programmes which were undertaken by occupational therapists, along with students from other health or social care backgrounds. Attention was paid to the potential strengths and weaknesses which are inherent in internationalisation projects focusing on curriculum. Whilst diversity is a strength, it also requires: “…a degree of harmonization among the educational systems and environments” involved (Lunardon et al., 2017, p.36).

**Methodology**

**[Aim and Objectives]**

The overall aim of this project was to initiate the development of a framework for describing and comparing post-qualification Masters’ competences, relevant for occupational therapy, as a starting point for educational exchange across programmes in an international context.

The objectives were:

1. To explore similarities and differences within the sample group’s curricula.
2. To refer, compare and discuss curricula in relation to the ENOTHE Tuning reference points (TUNING Occupational Therapy Project Group, 2008) and to the European Qualification Framework (EQF; European Commission, 2019), as relevant to occupational therapy Masters level descriptors.

3. To compare, describe, document and highlight domain-specific competences and learning outcomes at a Masters' level.

4. To discuss and describe Tuning Competences on Masters level under the light of current and future European developments in health care and society to:
   - support future curriculum development;
   - enable benchmarking and refining of current Masters’ curricula;
   - facilitate international collaboration and exchange between programmes.

[International project group]
The project group was formed through an open invitation at a meeting of the European Network of Occupational Therapists in Higher Education (ENOTHE) in 2012. The core project team, who sourced and reviewed the secondary data in the form of programme, courses and module documents during its two project phases (1st phase 2012-2013; and 2nd phase 2013-2015), was comprised of academics from the following countries: Austria (Innsbruck); Belgium (Leuven & Ghent); Canada (Montreal); Germany (Hildesheim); Switzerland (Lausanne); and the United Kingdom (York). In addition, curriculum management from the European Occupational Therapy Master’s programme (involving institutions in Denmark, the Netherlands, Sweden, Switzerland and United Kingdom) was represented. During the first project phase, academics from Denmark (Odense) and Norway (Trondheim) were also part of the core group.

[Working process]
The project group used their own curricula, the Tuning reference points (TUNING Occupational Therapy Project Group, 2008) and the European Qualification Framework (European Commission, 2019) to map the learning
outcomes and competences, design and delivery of the Master’s degree programmes for occupational therapists they represented, in order to develop a common frame of reference for post-qualification Master’s programmes linked to ENOTHE. The group met face-to-face and online using a shared digital platform and Skype. A collaborative process was used to reach consensus within the group. Competences or learning outcomes from each partner’s curriculum were compared and contrasted, and shared curriculum areas identified. The identified shared curriculum areas, competences and learning outcomes were matched to the ENOTHE Tuning Masters reference points (TUNING Occupational Therapy Project Group, 2008). If interesting or innovative curricula was shared from just one programme, this was considered in relation to Tuning reference points and the EQF, discussed by the group and a consensus approach was used to decide whether or not to include it in the framework. In the end all areas included were from at least two different programmes and innovation related more to competency development, teaching methodologies and assessment methods, rather than curriculum content. Preliminary results were reviewed by a group of interested representatives from other Masters programmes via e-mail communication in 2015 and discussed with wider groups of academics and students in a series of workshops delivered at the ENOTHE annual meetings in 2014, 2015 and 2016. For example, the curriculum areas identified through this process were presented and discussed with participants during a two-hour workshop at the annual ENOTHE conference in 2018 and some participants reported that they had already used the final project report in the process of designing their new Master programmes. Workshop participants included occupational therapy university lecturers, Master and Bachelor students, and Master graduates and practitioners, predominantly from Europe but also from North America. Similarities and discrepancies in learning outcomes addressed in similar Master’s curricula were discussed, using the following starting questions:

- Do the shared curriculum areas cover the master programme in your country/institution? (staff members)
- Do the shared curriculum areas appeal to you and how useful would these be for deciding for a master programme? (students)
Through a process of discussion, comparison and revision within the project group, a list of the most illustrative examples of shared curriculum areas and qualifying verbs was created.

Findings

[Shared curriculum areas and their definition]
During the 1st project phase, the group identified sixteen shared curriculum areas by comparing the participating Masters programmes’ learning outcomes and competences and then relating them to the EQF and the Occupational Therapy Tuning Master. During the review process in the second project phase, one new curriculum area was identified, “Measurement”, leading to the end result of seventeen shared curriculum areas (see the left-hand column of Table 1). The final curriculum areas illustrated in Table 1 were identified as relevant for Occupational Therapy (related) Master education for the participating OT programmes (a list of all shared curriculum areas can be found in the project report available from: www.enothe.eu/projects/past-projects/master-competences-in-ot). It is recommended that interdisciplinary or occupational therapy specific Masters programmes should cover these curriculum areas in order to be considered appropriate for European occupational therapy students. Following feedback from participants in two ENOTHE meeting workshops, the project group added descriptions and definitions from professional literature in order to make more explicit the meaning and focus of each shared curriculum area (see the right-hand column in Table 1).

[Verbs to describe shared learning outcomes and example assessments]
When examining curricula, it was found that some articulated competencies to be achieved, others defined learning outcomes, and a few described both competencies and learning outcomes. It is, therefore, important to distinguish between competencies and learning outcomes. However, there appears to be a lack of consensus in terms of the precise definition of competence in a higher
education setting (Kennedy, Hyland, & Ryan, 2009). For the purposes of this project, the term competency is defined as ‘a general statement detailing the desired knowledge and skills of student[s] graduating from [a] course or program’ (Hartel & Foegeding, 2004, p. 69). In terms of occupational therapy, “competencies are the knowledge, skills, and abilities obtained through formal, non-formal, or informal learning, [including] ability to perform occupation-specific tasks and duties” (Canadian Association of Occupational Therapists, CAOT, 2012, p. 18). Learning outcomes focus on what the student should be able to achieve after having completed a module, course or programme (Overton, 2010); they are very specific statements and they should be measurable. ‘A competency may have several specific learning outcomes’ (Hartel & Foegeding, 2004, p. 69). Competences and learning outcomes within occupational therapy curricula may be categorised in terms of knowledge, skills, and attitudes / values. They are written considering a specific level of learning and context.

The phrasing of learning outcomes for the framework focuses on what graduates should be able to do and selected verbs appropriate for Masters level education were identified, e.g. showing the development of a critical perspective (please refer to Table 2). In the comparison process, qualifying verbs were extracted for each of the curriculum areas. The group also referred to the ‘Descriptors defining levels in European Qualifications Framework (European Commission, online) levels 5 and 6 when discussing and choosing these learning outcome verbs.

The shared curriculum areas identified in the comparison process described above are listed as descriptive labels and linked to active verbs and illustrative examples of learning outcomes and assessment. Some examples are shown in Table 2, a full list can be found in the project report: www.enothe.eu/projects/past-projects/master-competences-in-ot.

[Reflections]
Overall, there was positive feedback from ENOTHE meetings workshop participants that the proposed framework covered the curriculum areas and
learning outcomes of the Masters programmes they were involved with (either as educators or students). Other specific feedback provided included reflections on how creativity is included in Masters’ programmes and on the distinct emphases programmes place on different curriculum areas, sometimes dependent on a programme’s priorities or educators’ expertise. The curriculum areas should reflect the different professional roles for which the Masters education prepares its students, e.g. the roles of the advanced clinician, researcher and/or educator. Therefore, workshop participants reinforced the project group’s understanding that there are different emphases on the various shared curriculum areas in individual programmes, which a flexible framework can represent better. Therefore, the Framework should be considered to present core curriculum areas to be included, but with an understanding that additional curriculum to reflect the needs of a particular country or expertise of a specific staff group will be added. This means that each Masters programme retains its own unique selling points whilst also maintaining coherence at European level in terms of core professional outcomes.

Discussion
[Lessons learned]
Seventeen curriculum areas were identified through comparing the participating Masters programmes’ learning outcomes and by relating them to the EQF and the ENOTHE Tuning Master reference points. Identifying common curriculum areas, in addition to the described ones by general higher education or domain specific guidelines, stresses the importance of a process of reflecting and actualising reference points for Master education. The results of this work can serve as a basis for further work related to Master competences and learning outcomes in occupational therapy and occupational science education. The active verbs are a selection of possible descriptions of different levels of competences to describe what a student should know, do or be. The verbs can support new or existing programmes in optimising their curricula and benchmarking with relevant comparators. The Framework is intended to allow
for academic and professional mobility at a European level and even a wider international level, given the contributions of colleagues from Canada.

In addition to producing the framework, a number of additional benefits were experienced from forming the group for this project. Knowing and having defined a common base related to generic and specific competences/learning outcomes, teacher and student exchange is facilitated within the network. Several new Erasmus agreements were put in place between institutions and resulted in teaching exchanges. This led to project group members expanding their networks further to other colleagues at another institution and this led to some other collaborative projects and joint conference workshops. Colleagues were also invited to teach on other programmes ahead or after meetings being hosted at that institution. In addition, a couple of the educators in the project group have contributed teaching sessions at partner institutions from a distance (via teleclassing). These teaching exchanges and inputs have fostered dialogue and exchange of students, inspired by a wider range of experts offering more diverse and international perspectives and expertise. In future, we are considering an international week including workshops for Master students and their faculty/teachers, being hosted at one of the institutions with programme representatives to discuss future research-related subjects and plan collaborative projects.

The outcomes of the project have shown to be relevant for colleagues developing Masters programmes in other (non-)European countries in giving an orientation and quality assurance, especially as diverse Masters programmes from different universities resp. universities of applied sciences from European as well as Canadian contexts have contributed and served as a data source as well. The project can therefore be understood as a contribution to the global network.

[How can the list of shared curriculum areas be used?]

Firstly, the framework can be used to outline core curricula when developing new programmes. One project member used the work successfully with colleagues as the basis for developing a new Master’s Occupational Therapy curriculum at their university. Mapping current curricula into the shared areas
may reveal emphases or needs in existing programmes, thereby supporting quality management. Using shared curriculum area descriptions may facilitate exchanging students, staff and modules. Additionally, it may assist programme leaders to organise common modules dealing with specific curriculum areas. Specifically, the shared curriculum areas may be used:

- as a common framework to facilitate international collaboration and exchange, within Europe and abroad.
- as a guideline for prospective students;
- to promote specific Masters programmes by highlighting individual strong points against the background of shared curriculum areas and competences (benchmark);
- as part of quality assurance of curricula;
- as an inspiration and comparison tool for building new master programmes;
- to promote the occupational therapy profession by showing what competencies Masters graduates are expected to have achieved;

Colleagues from a wide range of disciplines could benefit from the process undertaken in this project to reflect and agree on core curriculum areas in their own discipline. Within this project, some programmes were not OT-specific masters, illustrating the potential of this whole process under an interdisciplinary perspective.

**Conclusion**

An ongoing and well-established exchange of experiences and new approaches relevant for first cycle education in Occupational Therapy (Bachelor respectively Diploma education) had grown within ENOTHE. The more recently emerging Masters programmes in Occupational Therapy (and interdisciplinary Masters programmes being targeted at allied health professionals, including occupational therapists), at this stage, did not yet have an established tradition for doing so. By initiating a thematic group work relevant to Master education within ENOTHE, the vision for sharing curriculum areas and learning outcomes, and collaborating more intensely also on Master’s level was developed, with the potential to strengthen new and important educational developments.
The proposed areas cover the curriculum areas and learning outcomes for programmes in Masters education relevant for occupational therapy or occupational science. The produced framework may serve as a guideline for prospective students and aid the promotion of both the profession itself and related master programmes by highlighting individual strong points against the background of shared curriculum areas and competences. This framework for Occupational Therapy Masters programme curricula may also be used as an example by educational programmes for other professions for benchmarking and promotion of internationalisation in higher education. Sharing perspectives on Master education from different (inter-)national contexts enriches the reflection process. The work also led to additional benefits such as new Erasmus exchanges and collaborative projects and research The process is recommended to colleagues from other disciplines structure collating, examining, reflecting upon and agreeing core curriculum areas in their own discipline.
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All electronic sources were correct on: 3.11.2019


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http://ec.europa.eu/ploteus/en/content/descriptors-page


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[http://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1055&context=ojot](http://scholarworks.wmich.edu/cgi/viewcontent.cgi?article=1055&context=ojot)


[https://www.wfot.org/resources/code-of-ethics](https://www.wfot.org/resources/code-of-ethics)

World Federation of Occupational Therapists. (2012). Position Statement on Occupational Science. Available at:  
[https://www.wfot.org/resources/occupational-science](https://www.wfot.org/resources/occupational-science) (p.1)

[https://www.who.int/health-topics/health-systems-governance#tab=tab_1](https://www.who.int/health-topics/health-systems-governance#tab=tab_1)
<table>
<thead>
<tr>
<th>Shared curriculum areas</th>
<th>Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy through collaborative partnership</td>
<td>Advocacy is an “enablement skill” enacted with or for people to raise critical perspectives, prompt new forms of power sharing, lobby or make new options known to key decision makers: to speak, plead, or argue in favour of (Houghton-Mifflin Company, 2007, as cited in CAOT, 2012, p. 18).</td>
</tr>
<tr>
<td>Leadership</td>
<td>Leaders should be motivated “to influence care and support health outcomes for people”. “(...) Success in leadership participation” include “capacity in relationship building and relationships, …a practically focussed vision, …confidence and professional credibility associated with competence” (Heard, 2014, p 10)</td>
</tr>
<tr>
<td>Policy development</td>
<td>“vision, priorities, budgetary decisions and course of action for improving and maintaining population health”(WHO, 2019)</td>
</tr>
<tr>
<td>Research</td>
<td>This shared curriculum area includes philosophy of science and epistemological and methodological issues. Research in Occupational Therapy and Occupational Science aims to explore and investigate topics related to human occupation, humans as occupational beings, and to further developing Occupational Therapy practice and education. This serves to generate knowledge and provide insights relevant to Occupational Therapy practice and theory, as well as to Occupational Science.</td>
</tr>
<tr>
<td>Service &amp; programme development and evaluation, and quality assurance</td>
<td>“Effectively execute responsibilities and make systematic choices about client service resources….. developing and supporting sustainable practices, managing caseloads, allocating resources, and demonstrating accountability to the public and funders for contributing to effective client programs and services that enable participation through occupation.” (CAOT, 2012)</td>
</tr>
</tbody>
</table>
Table 2 Examples of shared curriculum areas with relevant qualifying verbs, illustrative examples of learning outcomes and assessment.

(a list of all shared curriculum areas and examples can be found in the project report: www.enothe.eu/projects/past-projects/master-competences-in-ot)

<table>
<thead>
<tr>
<th>Shared curriculum areas</th>
<th>Relevant qualifying verbs</th>
<th>Selected illustrative examples of learning outcomes</th>
<th>Examples of Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy through collaborative partnership</td>
<td>Promote, facilitate, communicate, advocate, adapt, collaborate, enable change [change agent]</td>
<td>Advocate for occupational participation in collaboration with and for diverse societal groups Have a deep understanding of enablement and empowerment as occupational therapy approaches to strengthening the occupational performance, participation and quality of life of clients Develop adequate action and participation-oriented initiatives with and for diverse groups of people</td>
<td>Individual Critical reflection (10 pages) on how to integrate in your practice, concepts of social OT, occupational science and advocacy supported by scientific literature and resources/tools seen in class. Student Team led seminars (3 hrs) on specific themes (e.g. occupational justice, social OT constructs, power and participation).</td>
</tr>
<tr>
<td>Leadership</td>
<td>Provide, communicate, lead, develop, influence</td>
<td>Design or implement strategies to strengthen team collaboration and efficiency Demonstrate a critical awareness of current problems and/or new insights at the forefront of leadership,</td>
<td>Student teams are paired with a community based organisation to work on a specific project identified by</td>
</tr>
</tbody>
</table>
| Policy development | Advocate, develop, communicate, review, influence | Advise local policy strategies within the context of increasing impact of European (health care) at the national, European & global level
Advocate for an occupational perspective in the development and implementation of policies and local, national or international strategies, oriented on health promotion | The student writes a paper concerning the application of health economic research methods with a focus on cost-benefit analysis of medical technologies. |
| Research | Research, develop, conduct, analyse, identify, critically approach, assess, measure | Demonstrate a critical understanding of established and novel methodological approaches and techniques of research in a health and social care setting
Able to write research applications
Undertake, present and discuss occupational science and occupational therapy research projects
Apply knowledge of descriptive and inferential statistics and basics of further statistical possibilities to reveal OT diagnostics, intervention, prognostic and risk & harm research | Report on a small qualitative study and a report on a small quantitative study.
Over the course of two semesters: writing a research proposal (1), writing a report about a pilot project (2).
Making a research plan, conducting the research and writing a Thesis. |
| Service & programme development and evaluation, and quality assurance | Act independently, reflect, research, evaluate, develop, identify, influence | A systematic understanding of knowledge related to quality improvement and risk in health and social care contexts  
Evaluate, select and apply innovative analysis and approaches in relation to human occupation, everyday life and health including involvement of clients and health professional perspectives  
Have an insight into the fundamentals of quality-management and case-management  
Collaborate with client groups to facilitate the development of initiatives that address their occupational needs | The evaluation consists of writing and defending a paper. The student describes, based on own experience (of a given case report), a critical incident he/she was involved and in which there was a clear link to the organization of care. The critical incident is described and analysed using the concepts and insights from the course, A plan of action with concrete recommendations for improvement is developed. |