Self-evaluation report

Well-Being oriented Healthcare

Universität zu Köln, Coordinating Institution

Semmelweis Egyetem

Università de Firenze

Universidad de Murcia

Universidade de Santiago

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Glossary

1. General overview

1.1. INTRODUCTION

The current Master degree programme is a jointly developed educational offer by 5 partner universities collaborating in the European Universities Alliance EUniWell. The partners have been cooperating in medicine and healthcare for the past five years, developing a shared understanding of health as a "complete state of physical, mental and social well-being" and their institutional's complementary strengths. The programme has been designed with a bottom-up approach, developing from the original idea discussed in the EUniWell Arena "Health and Well-Being" in 2023 up to the coordination of a Working Group in 2024, support of institutional and EUniWell bodies to today's status of implementation (see chapter 1.3).

The Master programme is designed for healthcare professionals and aims at fostering a new mindset amongst medical practitioners by delivering theories, models, practices and methods of application for person-centred healthcare, supporting the ultimate goal of enhancing medical and healthcare treatment and thus promoting population health in a comprehensive understanding that focuses on well-being of all involved in the patients' sphere. The programme promotes a paradigm shift by setting patients' well-being and quality of life as the goal of healthcare by also keeping patients' interaction with relatives, informal care-givers and medical practitioners in mind.

All 5 partners are experienced in offering medical and healthcare education, with strong medical and/or healthcare faculties, and they have joined forces in advancing medical education and healthcare by providing this innovative, international and interdisciplinary integrated curriculum on wellbeing-oriented healthcare. Each partner brings unique foci and complementary expertise to the consortium and the partners complement each other along the biopsychosocial model (see definition below) and the analysis of determinants of well-being (as the core structural elements of the programme).

As members of EUniWell, the partners have cooperated on various topics and activities related to promoting well-being. This shared understanding of the importance of well-being in medical education has enabled them to develop a common vision for collaborative offers such as this programme.

The Master programme in wellbeing-oriented healthcare has the main objective of training a workforce on the current and future challenges of complexity by empowering them with transversal skills and competencies focused on personal needs, prevention of functional and well-being loss including the role of spirituality across life. A focus is placed on the acquisition of interdisciplinary skills and competencies relevant across the whole health-and-disease trajectory, as well as on social-psychological, intercultural and communication skills. In particular, the programme will

- provide students with the models and theories, methods and practical experience to be able to develop a patient- and wellbeing-oriented perspective and integrate it in their medical and healthcare practice directly;

- prepare students to face the future social and demographic challenges and provide high-quality comprehensive treatment that fosters well-being and quality of life;

- span from the biological to the psychosocial perspective, including mental health, social and spiritual needs not just of patients but also of those who care for patients;

- enable a European and comparative analysis of and reflection on healthcare and national best practices;

- expose students to the diversity of European healthcare and educational contexts by an integrated curriculum and mandatory mobility (on-site sessions).

As well-being is an inherently subjective and multifaceted concept with different meanings in different cultures and contexts, the programme entails a multicultural learning experience with participants coming from various professional as well as national and cultural backgrounds, who bring their own best practices into the programme and thus also learn from one another. The programme will bring not only an important added value to its students and their professional environment, but also to healthcare systems to become more resilient and sustainable. It will prepare graduates to face future challenges by providing high-quality comprehensive and global treatment that fosters well-being and quality of life.

The Master programme will be targeting professionals who are experiencing the challenges within the healthcare system and who want to learn to apply a different, more comprehensive approach in their treatment of patients. Healthcare professionals may be physicians, nurses, caregivers or medical staff in healthcare management. The programme thus targets professionals who know the challenges in the current national systems and who want to initiate change within their local and/or national sphere by equipping them with theoretical knowledge and teaching them the relevant skills and competencies to foster this approach. The graduates will become advocates of and multipliers for a different approach in healthcare.

Participating Institutions and the Programme's Relevance

The University of Cologne is one of the oldest and largest comprehensive universities in Germany. Its mission is to create, preserve and impart knowledge, to offer its students and early-career academics outstanding academic education, to qualify them for both academic and professional careers, to promote cutting-edge research and to drive innovation while focusing on the constantly changing needs and challenges of today's society.

As a founding member and coordinating institution of EUniWell, the current programme constitutes innovation in teaching and learning under a well-being agenda. The programme has been designed to address the pressing needs of today's and future generations, upskilling the workforce in the healthcare sector with relevant skills and competences in line with the guidelines of the university's <mark>Mission Statement Teaching and Learning</mark>. The programme strengthens the internationalisation of the University of Cologne and its Medical Faculty in particular and supports the institution's strategy to "convey intercultural competencies, increase awareness of diversity, reflect global research trends, and benefit from international

scientific collaborations" (see <mark>Internationalization Strategy</mark>). Of special significance for the faculty is the approach to reach out to the new target group of students - professionals with a need for training, acknowledging the increasing relevance of lifelong learning. The programme will broaden the faculty's portfolio and boost potential for further innovation in teaching.

The University of Florence is a public institution devoted to teaching and research. Established in 1321, it is one of the oldest universities in Italy. It comprises 12 schools including a school on Medicine and a school on Psychology. The university has about 60,000 students enrolled and 2,288 staff members. The University works in joint venture with two academic hospitals (one devoted to the care of adults and old people; the other one devoted to the care of children and adolescents). The two Academic Hospitals are a referral for the Tuscan region and for central Italy health care system, they are the elective place of training of students pertaining to the health area.

The University of Florence is a founding member of EUniWell and currently coordinating the Arena 2 of the EUniWell Alliance devoted to health (see Chapter 1.3). The current programme, built in line with the current guidelines of the institution's Statute (<mark>Statuto dell'Università degli Studi di Firenzehttps://www.unifi.it/sites/default/files/migrated/documents/statuto_dr1680_18.pdf</mark>), is an example of innovation and international teaching and represents a step forward in the biomedical area under these two issues. It is also a programme strongly embedded in the biopsychosocial model and in well-being, thus a unique occasion for students to be formed on these topics. The programme strengthens the international relationships among the organizational institutions and in the framework of EuniWell Alliance (<mark>https://www.unifi.it/it/ateneo/nel-mondo/iniziative-e-reti-internazionali/european-university-well-being-euniwell</mark>). The programmes will broaden the university portfolio and boost potential for further innovation in teaching.

The University of Murcia is a public institution devoted to research and teaching. Therefore, this joint master's programme is strategically very important for the University of Murcia as it would be its first joint international master's degree, establishing a new milestone in the institution's educational offering. Internationalization is also one of the main pillars of the University of Murcia. Besides, the first regional law on universities is currently being processed, and it expressly states the need for universities in the Region of Murcia to participate in international training programmes.

In turn, the Spanish Government has launched a highly relevant and innovative strategic initiative inviting Spanish universities to incorporate lifelong learning and professional development for professionals. In this sense, as this is a master's degree aimed at professionals in the social and healthcare sector, which will enable them to update their professional skills and broaden their horizons and perspectives on their clinical practice, it fits perfectly into this new strategic line of lifelong learning.

The University of Murcia is also developing a community-oriented campus at the Faculty of Social and Health Sciences (Lorca campus), which actively participates in the community health of the area in which the campus is located. This is achieved through close collaboration with the entire network of associations in the area: health centres, mental health centres, the Lorca City Council's departments of health, education and senior citizens, associations of patients with various pathologies, pensioners' associations, day centres and nursing homes for the elderly, a child development and early intervention centre, and a comprehensive neurorehabilitation centre, among other social agents. In this sense, the in-person part taught at the University of Murcia will be based in the community-oriented campus.

Founded in 1769, Semmelweis University in Budapest has been a leading biomedical institution in Hungary and Central Europe for over 250 years. It is ranked among the world's top 251 universities (THE World University Rankings 2022) and among the top 200 in medicine and life sciences globally (QS Subject Ranking 2021). The university's mission integrates education, research & innovation, and healthcare, offering world-renowned programmes in Hungarian, English, and German. Each year, more than 1,500 students graduate, while over 12,000 students from 97 countries study across its six faculties. Semmelweis University is Hungary's largest healthcare provider, with hospitals and clinics delivering high-quality patient care and practical training, handling around 2.5 million cases annually. The university has also played a leading role in public health crises, including the COVID-19 pandemic.

Within EUniWell, Semmelweis University contributes through its Institute of Mental Health, a central unit of the Faculty of Health and Public Services since 2010. The Institute's academic mission is to promote mental health and well-being at individual, family, and community levels through integrated research, education, and public engagement. It offers a range of master's and specialist courses and provides frameworks for counseling services, fostering a general culture of mental health in society. The Institute also initiated the Ph.D. programme "Sociological and Mental Health Approaches to Resources for Individuals and Communities", bridging medical and social sciences and preparing future academic professionals. Its research covers psychological, social, and societal determinants of health and well-being, emphasizing interdisciplinary approaches and applied solutions. Staff members are actively engaged in national and international conferences, collaborations, and publications, including the European Journal of Mental Health. Through these activities, the Institute ensures that students gain both theoretical knowledge and practical skills to understand and address mental health challenges across multiple levels of society.

[USC]

1.2. BASIC INFORMATION

Full name of the programme: Well-Being oriented Healthcare

EQF level: 7

Degrees awarded: Master in Well-Being oriented Healthcare

Number of ECTS points: 60

ISCED field(s) of study: 74(7)

List of the institutions delivering the programme:

Name of the institution	Higher education institution (yes/no)	Degree awarding institution (yes/no)	Role in the consortium (i.e. coordinator etc.)
Semmelweis Egyetem (SE)	yes	yes	full partner
Università de Firenze (UNIFI)	yes	yes	full partner
Universidad de Murcia (UMU)	yes	yes	full partner
Universidade de Santiago de Compostela (USC)	yes	yes	full partner
Universität zu Köln (UzK)	yes	yes	coordinator

Accreditation status per institution:

Name of the institution	Relevant External Quality Assurance Agency (if any)	European Approach allowed (yes/no)	Additional information
Semmelweis Egyetem (SE)		yes	
Università de Firenze (UNIFI)		yes	
Universidad de Murcia (UMU)		yes	
Universidade de Santiago de Compostela (USC)		yes	
Universität zu Köln (UzK)		yes	

1.3. JOINT DESIGN AND DELIVERY

The partners have collaborated on analysing, researching and advancing a wellbeing-oriented approach in healthcare and medical education within the context of the wide and deep cooperation in the European University for Well-Being (EUniWell), starting in 2020.

EUniWell is a European Universities Alliance coordinated by the University of Cologne. It was founded in 2019 and has been mainly funded under the ERASMUS+ programme since 2020. EUniWell's core mission is to understand, improve, measure, and rebalance the well-being of individuals, our communities, environments, and societies as a whole on a regional, European, and global level. EUniWell is currently formed by the 11 member universities of Cologne (Germany), Florence (Italy), Inalco (France), Konstanz (Germany), Linnaeus (Sweden), Murcia (Spain), Nantes (France), Santiago de Compostela (Spain), Semmelweis (Hungary), Birmingham (United Kingdom), and Taras Shevchenko National University of Kyiv (Ukraine). It is further supported by 60+ Associated Partners from all sectors of society (www.euniwell.eu), including university hospitals and regional healthcare authorities.

The partners have since cooperated in delivering joint educational offers and collaborative research on health and well-being and specifically in the area of medical and healthcare education. The pivotal contact point is the interdisciplinary networking hub, called arena, on "Health and Well-Being" coordinated by EUniWell partner University of Florence (UNIFI) which fosters bottom-up, high-profile academic collaboration on research and teaching in health and affiliated subjects and their relation to well-being (Busse 2022). The arena "Health and Well-Being" was established in 2020. The current programme idea was sparked through discussions within this group of academics.

The programme has since then been developed jointly and with a co-creational approach by the 5 partners under the coordination of the University of Cologne supported by the experts from Cologne's QA-department and relevant experts when needed. A working group has been

drafting and designing the learning objectives and the curriculum which consisted of academic and administrative colleagues.

The partners pool resources based on their particular expertise to deliver the comprehensive and interdisciplinary programme for which a single institution would not have the capacity. They share equal responsibilities and rights clearly outlined in the consortium agreement. The curricular contributions have been jointly agreed upon; decisions on the further development of the programme will be taken unanimously (see Agreement § xx).

In previous projects and discussions, it has become clear that the partners complement each other in their strengths and experience and add unique value within the framework of the biopsychosocial model and with regard to different determinants of well-being.

The University of Cologne is characterized by a strong research profile in (bio-)medicine. One of its key profile areas, characterised by research at the highest international level, lies in ageing-associated diseases. At the core of the area is the "Cologne Cluster of Excellence on Aging and Aging-associated Diseases" (CECAD), awarded by the German government (in a competitive call) to interdisciplinary collaborative projects which are at the spearhead of international research. At CECAD and affiliated institutes and departments, researchers from various disciplines focus on understanding the cellular mechanisms that lead to ageing and age-related diseases such as cancer, diabetes and neurodegenerative diseases such as Alzheimer's or Parkinson's disease. This expertise will allude to the biomedical and biological determinants of well-being.

In addition to a biomedical focus, the Medical Faculty has been one of the first faculties in Germany to implement a chair for palliative care, a branch in medicine which follows a person-centred approach at its core. Innovative ways of teaching in medical education have been introduced at the faculty by a skills lab and simulation centrer which trains students (and professionals) in acquiring and testing patient-oriented skills.

Semmelweis University stands at the forefront of medical education with a rich history spanning over 250 years. Renowned globally for its excellence, the university excels in integrating education, research, and healthcare, consistently ranking among the top 300 institutions worldwide. Of particular note is the expertise of its Institute of Mental Health, a cornerstone of the Faculty of Health and Public Service. Semmelweis University thus complements the partners with its focus on psychological aspects within the biopsychosocial model.

Semmelweis University leads the semester "Personal and Social Transformations", which explores mental health and well-being from micro, meso, and macro perspectives. The semester integrates individual, community, and societal dimensions, combining theoretical, research-based, and applied approaches to personal development, social change, and overall well-being. This contribution ensures that the EUniWell programme incorporates a holistic, human-centred understanding of mental health, complementing the interdisciplinary strengths of the partner institutions.

The Institute is dedicated to advancing the physical and mental health of individuals, families, and communities, particularly within Hungarian society. It offers two Master courses and seven specialist training programmes in Hungarian, alongside a Ph.D. programme in "Sociological and mental health approaches to resources for individuals and communities," which uniquely bridges medical and social sciences. The Institute's research is at the forefront of mental health development, and its faculty regularly contribute to conferences and symposia both in Hungary and abroad. Through its publications, textbooks, and counselling services, the Institute actively promotes a culture of mental health. Beyond academic education, the Institute provides continuous professional development and research-based

curriculum enhancements, ensuring its students are equipped for the future of mental health care. With its comprehensive approach to mental health, Semmelweis University plays a crucial role in fostering well-being, both through education and community-centered initiatives.

The University of Murcia is especially experienced in considering social aspects of well-being. It was a pioneer in having a disability care service (since 1994) to meet the needs and demands of this group in day-to-day academic life. For this reason, in relative terms, the University of Murcia is the Spanish on-site university with the highest ratio of students with disabilities in its classrooms, with approximately 2.7% of the total number of people enrolled, according to the latest available data.

Global ageing is one of the major demographic phenomena of the 21st century, both in terms of increasing chances for individuals to reach old age and of a rising share of older people over the total population. In this scenario, welcoming older adults to university and attentively addressing their needs could pave the way for significant breakthroughs in gerontology. In this context The Age-Friendly University Global Network (AFUGN) was created, and the University of Murcia (Lorca campus) is the only Spanish university and one of the few European universities to belong to this network. Similarly, the Lorca campus of the University of Murcia is one of the few campuses in the world to have a Day Centre for the Care of the Older Adults on campus, which provides care services as well as university teaching and research in gerontology. In addition to this, training is provided for formal and informal caregivers to improve their competencies and skills to navigate the healthcare system.

Taking into account that communication plays a very important role in quality care services, it is important that professionals are aware of the need to count on a qualified and trained interpreter. Learning how to work with interpreters will guarantee everyone's wellbeing. As the University of Murcia already includes interpreting in public services, professionals will learn how to deliver care with the aid of interpreters and Interpreting students would benefit from the opportunity of practicing in a real context.

The University of Florence is one of the oldest universities in Italy. It comprises 12 schools including a school on Human Health Sciences and a school on Psychology, which offer a range of Bachelor and Master programmes. The University of Florence works in close connection with several hospitals, among them the Academic Hospital (named Careggi) and Meyer University Hospital, a scientific hospitalisation and treatment institute for paediatrics in order to achieve the highest level of response to the demand for health, defined as the recovery and maintenance of physical, mental and social health, in a process that inseparably includes teaching, as a tool for building and improving the skills of operators and subjects in training, and research, aimed at the continuous progress of clinical and biomedical knowledge. In particular, UNIFI has considerable competences in biopsychosocial factors of human health. Such competences have the highest expressions in various areas which complement the expertise within the consortium especially in the following areas: socio-economic and socio-demographic variables and well-being, gender medicine and discrimination as well as technology (also integrated with artificial intelligence) and well-being in clinical and surgical settings.

The University of Santiago de Compostela has a wide academic offer and a powerful research capacity. It has been valued for its excellence as one of the best universities in Spain and in the European Higher Education Area [reference?]. It offers comprehensive medical and healthcare education coordinated in its Department of Psychiatry, Radiology, Public Health, Nursing and Medicine. A strong focus is put on preventive medicine and public health as key aspects in considering well-being and quality of life, and eventually within the planned Master programme on "Wellbeing-oriented Healthcare". The Institute is experienced in offering

education in the area (e.g. Master programme in "Public Health" and in "Master in Genetic, Nutritional and Environmental Determinants concerning Growth and Development-NUTRENVIGEN G+D Factors"). The involved research group has maintained a line of research and community intervention in the field of healthy lifestyles. Special mention should be made of the recommendations on the prevention of alcohol consumption aimed at the general population through videos and infographics in recent years; and the development of standards to grant a health seal to cafeterias in educational centers. This programme includes 5 mandatory standards and 42 recommendations. The main objectives are offering healthy food options like fruit, avoiding alcohol and sugary drink ads, banning tobacco, promoting physical activity, and reducing waste, for example by encouraging unpackaged water consumption. Cafeterias play a key role in promoting healthy habits, because creating environments with healthier options can mitigate non-communicable diseases.

2. Learning Outcomes

2.1 LEVEL

The intended learning outcomes align with the second level of the Framework for Qualifications in the European Higher Education Area. The ILOs have been jointly drafted at the beginning of the development process in two on-site workshops by the partners supported by experts from the Center for Higher Education Development and Q³ – Evaluation, Development & Accreditation. The ILOs build upon knowledge and understanding acquired in a Bachelor's degree and in the students' professional experience to support them in developing original ideas and solutions to medical and healthcare problems [Themes 1, 3 & 4].

The interdisciplinary and international aspects of the ILOs encourage students to apply knowledge and understanding in new, e.g. different local healthcare systems, and broader contexts (when considering the determinants of well-being) [Themes 2 & 5].

Students are guided to reflect on social and ethical responsibilities and their role in the healthcare system to support well-being oriented decision-making and judgement [Themes 2 & 3].

The learning outcomes include skills that enable students to communicate to different audiences, to specialists and non-specialists, and to argue for a well-being approach [Themes 3 & 4].

Furthermore, the ILOs include the self-reflection of the application of new competencies and skills and personal growth [Theme 6].

In reference to the EQF, the ILOs refer to level 7 in their detailed description of knowledge, skills and responsibility and autonomy (e.g. also relating to "attitude" in the programme's ILOs).

The respective national qualifications frameworks of Germany, Italy, Hungary and Spain are aligned with the EQF which ensures that the ILOs refer to the relevant level of the national regulations; in particular

- in Germany to level 7 of the German Qualifications Framework for Lifelong Learning *(DQR*) and the second level of the *Qualifications Framework for German Higher Education Degrees*
- in Italy to level xx of Quadro Nazionale delle Qualifiche (QNQ)
- in Spain to level 7 of the Spanish Qualifications Framework for Lifelong Learning (MECU)
- in Hungary to level xx of the Hungarian National Qualifications Framework (HuQF)

2.2 DISCIPLINARY FIELD

The intenteded learning outcomes have been jointly developed by the group in on-site and online workshops supported by Cologne's Centre of Higher Education Development. The learning outcomes are defined with regard to knowledge, skills and attitude and centre

around 6 "themes" – overarching topics – which relate well-being on micro-, meso- and macro-level.

Theme 1: Role of Well-being in Person-Centred Healthcare

Knowledge

- Graduates differentiate the concepts of well-being, quality of life, quality of death and related measures of people's own health and life perception and emotions including PROMs (Patient's Reported Outcome Measures) by
    - relating between well-being and quality of life/quality of death.
    - reflecting on the person-centred approach in healthcare including somatic (biomedical), psychological and social (cultural) correlates
    - critically examining organ- and disease-centred clinical approaches including biomolecular signatures.
- Graduates elaborate on
    - the effect of disease and the caregiving situation on the function of family systems and
    - conversely the role of the family (and further relationships) in the process of healing and finding the resources of well-being.

Skills

- Graduates relate well-being at micro-, meso- and macro-level to the UN Sustainable Development Goals.
- Graduates judge the traditional organ- and disease-centred approach and the person-centred approach.
- Graduates apply and evaluate objective and innovative measurement instruments and readouts of well-being and quality of life, integrating PROMS appropriately.

Attitude

- Graduates systematically consider well-being in their professional practice.
- Graduates appraise the role of a person's biography in his/her health trajectory.

Theme 2: Well-Being-Oriented Decision-Making in Professional Routine (*micro-level*)

Knowledge

- Graduates review the characteristics of shared decision making.
- Graduates categorize the common determinants of well-being including important biopsychosocial and spiritual issues related to educational, cultural, social and socio-economic backgrounds, life stages (including children, young adult, adult, elder), gender including abuse and neglect, lifestyle, values, fertility, retirement, anxiety disorders, substance abuse, underreporting of symptoms and illnesses, home safety, community

resources and adaptation to alternative living situations, such as long-term care facilities/hospices.

- Graduates appraise the well-being associated features of healthy longevity including spirituality, gratefulness and optimism
- Graduates review the well-being associated ethical issues related to advanced directives, decision-making capacity, euthanasia, assisted suicide, healthcare rationing, pain management and end-of-life care.

Skills

- Graduates identify, assess and prioritize bio-psycho-social determinants for well-being and quality of life in relation to health and disease using a person-centred approach
- Graduates assess the role of life expectancy and prognosis for well-being-based decisions in healthcare using a person-centred approach.
- Graduates recommend the appropriate social institution, i.e. services and support systems, such as social care, city hall, religious communities, civic centres, community gardens, for individual cases.
- Graduates recommend person-related strategies to find psychological resources for a higher quality of life, e.g. gratefulness and optimism.
- Graduates apply the principles of person-centred helping attitudes and helping relationships (e.g. family relations, …) in their professional activities.
- Graduates support family members and family care-givers in finding the resources for well-being.

Attitudes

- Graduates include an evaluation of determinants of well-being in their tailored, shared decision-making process.
- Graduates take the patient and the whole family system of relatives and family caregivers into account in the decision-making process.

Theme 3: Well-Being in the Local Healthcare System (*meso- to macro-level*)

Knowledge

- Graduates relate roles within the healthcare system.
- Graduates distinguish basic concepts of implementation science and innovation processes.
- Graduates compare different communication strategies.

Skills

- Graduates appraise the advocates/local champions for well-being within their local, institutional and healthcare system networks based on a reflection of roles and motivations.
- Graduates develop communication strategies according to different addressees.

- Graduates reflect upon their individual role within the healthcare system; they assess the boundaries of their own and others' roles within the local, institutional and healthcare system.
- Graduates review their own personal limitations in applying and advocating the well-being approach and act according to it.
- Graduates foster cooperation between the different social and healthcare professionals by using teamwork skills.

Attitude
- Graduates confidently connect with promoters from other disciplines and institutions to foster well-being in healthcare systems.
- Graduates act against the background of a vision of their own mission to bring well-being into their profession, the local and wider healthcare system.

Theme 4: Well-Being within the Healthcare System and Society (*macro-level*)

Knowledge
- Graduates are familiar with policies and differences in policies in various healthcare systems.
- Graduates connect well-being in healthcare to the wider economic picture.
- Graduates inspect the consequences of neglecting well-being at population health level.

Skills
- Graduates demonstrate the ability and the best communicative practices to appropriately consider well-being in healthcare.
- Graduates propose changes in policies to better implement the person-centred approach and emphasise the importance of the family system (and further relationships) for well-being.
- Graduates measure the economic benefit of applying a well-being approach for the healthcare system and communicate it to professionals and third parties.

Attitudes
- Graduates appraise the appropriate social institution for individual cases.

Theme 5: Well-Being in the International Context (*meso- and macro-level*)

Knowledge
- Graduates compare best-practice examples in different European healthcare systems.
- Graduates categorise educational, cultural, socio-economic and historical influences on healthcare systems.

Skills

- Graduates extrapolate international best practices for well-being in healthcare to adopt them to their own institution and healthcare system and vice versa.
- Graduates build international professional relationships between relevant healthcare stakeholders and promote mutually fruitful cooperation.
- Graduates develop rhetorical and argumentation strategies aimed for the interaction with policy makers to achieve integration of best practices in their own professional context.

Attitude
- Graduates exhibit openness, inclusivity and endurance in integrating and enhancing well-being best practices in healthcare systems.

Theme 6: Personal Well-Being (*micro-level*)

Knowledge
- Graduates differentiate the determinants of individual well-being.
- Graduates review methods and strategies to improve individual well-being, such as lifestyle, mindfulness, self-awareness, resilience, coping strategies, embodiment, conflict management, cooperation, leadership, teambuilding and communication.

Skills
- Graduates investigate in their own well-being and generate strategies and measures to maintain or improve it.
- Graduates assess tools to strengthen their resilience and cope with stressful/challenging situations/working contexts.

Attitude
- Graduates articulate their needs with regard to well-being and reserve time dedicated to it.

2.3 ACHIEVEMENT

In the programme a combination of elements is envisaged to monitor whether the intended learning outcomes are achieved. In particular, these elements are direct feedback by students on the modules, assessment and quality assurance mechanisms.

A key element is the approach in teaching and learning to directly integrate the professional experience of students and thus receive direct feedback on the programme's relevance. Students are encouraged to reflect on their professional experiences and how this relates to the programme's learning outcomes. At the same time, students have the opportunity to report on the application of acquired knowledge and skills in-between the modules.

Furthermore, the programme's assessment strategy is aligned with the learning outcomes, ensuring that students are assessed on their ability to demonstrate the skills and knowledge required to achieve the module's learning outcomes. The assessment includes a range of

methods which directly require the students to apply, review and reflect what they learned and thus assess students' ability to apply theoretical knowledge to practical contexts.

Finally, the joint QA approach includes a graduate survey to receive feedback on the ILOs from a more distant point of view of graduates.

2.4 REGULATED PROFESSIONS

n/a

3. Study Programme

3.1 CURRICULUM

The achievement of the ILOs is supported by a curriculum which facilitates a comprehensive understanding of the complex interplay of determinants which affect an individual's well-being and which takes the professional experience (and professional obligations) of students into account. The workload in each semester is reduced to 15 instead of 30 CP and covers one on-site learning experience as well as virtual teaching elements and self-study phases.


Curriculum: General overview
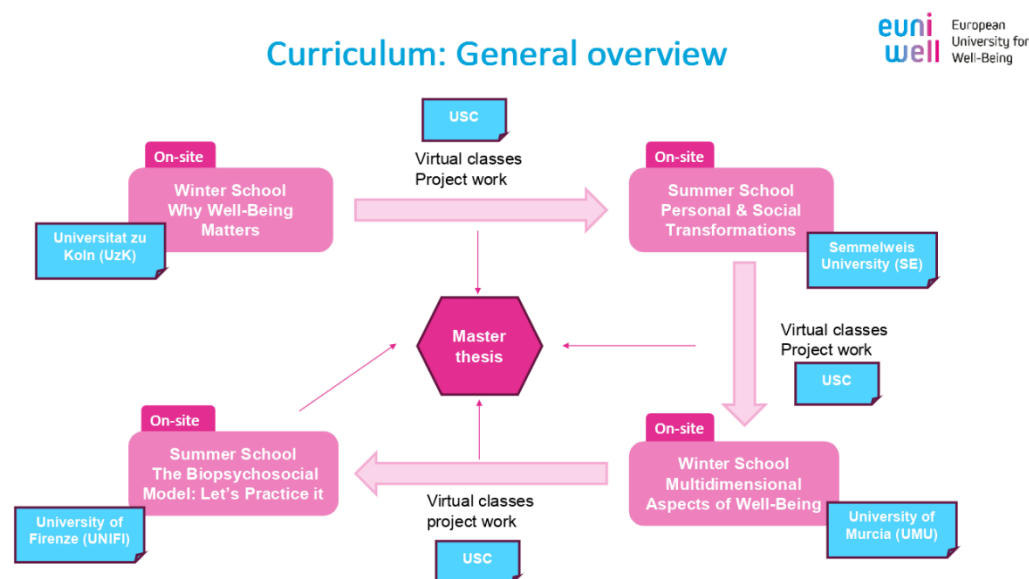
The curriculum's cornerstone is the biopsychosocial model of disease (Engel, Science 1977) which serves as a transparent structure in the acquisition of a holistic approach to health and well-being. [+spiritual] It provides orientation for students (and partner universities) in reviewing determinants of well-being. It is considered in 4 core modules which contain on-site sessions, the Summer/Winter Schools, 3 of which primarily focus on one aspect of the model and its determinants on well-being, and a final one which integrates the previous foci in the application of a holistic approach. The on-site sessions are supported by preparatory virtual sessions which guide students' self-reflection towards taking a holistic view on well-being. In addition, the 4 core modules are connected via virtual courses on relevant topics supporting the achievement of specific ILOs: "Identity and Belonging" and "Economics of Healthcare".

Starting with an introduction to basic concepts and terms as well as a sound biomedical understanding of well-being, the module on "Why well-being matters" provides insights and practical applications on the relationship between biochemical and biomedical factors on well-being. Supported by the Cologne Excellence Cluster for Aging and Aging-Associated Diseases students will learn about biochemical, biological and physiological aspects of mental and physical health to support well-being in a holistic way. Students will learn to consider health & well-being as a lifelong learning process understanding biological correlates of well-being determinants from fertility to "super-agers".

The module on "Social and personal transformations" in the 2nd semester facilitates the

understanding of psychological and spiritual determinants on well-being with a special focus on personal development and growth of students. "Multidimensional aspects of well-being" in the 3rd semester takes social factors into consideration and in particular centres on community practice.

The final on-site session, part of the module "xxx", supports students in integrating the different foci to systematically consider well-being in their professional practice.
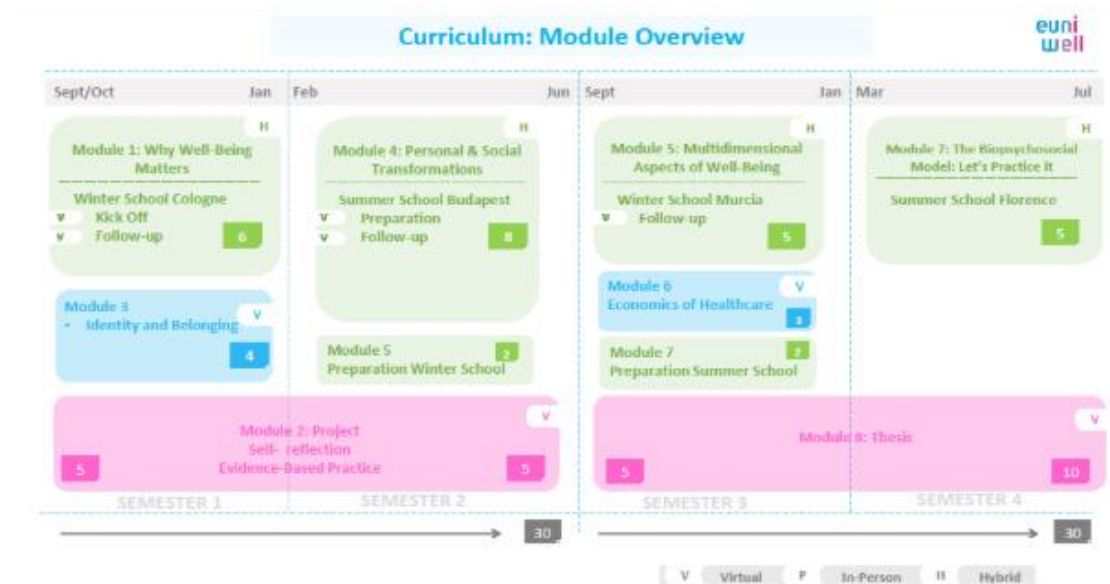
The common theme throughout the on-site sessions is a core focus as outlined above accompanied by institutional strengths and best practices. Students will visit and explore facilities, labs and external partners involved in healthcare in four different institutions which illustrate and exemplify the application of a well-being approach based on different determinants of well-being.

The visit to 4 partner institutions with university hospitals, university care facilities and close cooperation with local healthcare partners is one of the major elements for students to learn about and reflect on (best) practices in different healthcare contexts and international healthcare systems. The international and interdisciplinary exchange with fellow students, international teachers and different international as well as professional contexts will allow students to develop a broader and more open mindset to acknowledge and respect diversity and different needs of patients as well as of co-workers in the workplace.

Common to all educational elements in the curriculum is the holistic view on well-being and health which not only considers the patients alone, but takes into account the family, caregivers and community systems around them. As a consequence, community-orientation is fostered throughout the programme, contact to formal and informal caregivers is encouraged.

To enhance the application of a person-centred approach and a reflection on its implementation in a practical context, the curriculum contains a project in which students work on a small-scale project in their direct and/or national healthcare system. The students receive theoretical training in project management as well as academic and peer guidance in the design of their project, especially with regard to setting realistic objectives and timelines. This project may focus directly on patients of the students, on structural aspects at their local employer or on policy aspects within the national healthcare system.

In contrast, the thesis puts a more theoretical focus on a topic chosen by the students.

3.2 CREDITS

The programme conveys 60 ECTS credits. Due to the part-time structure of the programme, students acquire 15 ECTS credits each semester.

The thesis covers 15 ECTS credits in line with the respective national regulations.

3.3 WORKLOAD

Due to the part-time structure of the programme and the professional work students will be carrying out while studying, setting a realistic and manageable workload is of crucial importance for the programme and the student's successful progression and completion. A close monitoring of workload is thus one of the tools and manageable workload an objective defined in the joint quality assurance approach.

Based on the joint reference of the Bologna framework outlined in the ECTS Users' Guide one ECTS credit is equivalent to a workload of 25 hours of work.

The workload will be monitored as part of the joint QA approach in the online surveys and the focus group interviews. Student progress will be monitored via a basic data sheet (see Chapter 9). The programme committee will review results regularly.

4. Admission and Recognition

4.1. ADMISSION

Admission rests on jointly agreed upon criteria to ensure a successful progression and completion of the programme. These criteria are:

Bachelor's degree (or equivalent): applicants will need to have finished a bachelor's programme or equivalent degree (EQF 6) with at least 240 ECTS in a discipline in the field of healthcare such as medicine, nursing, pharmacy, healthcare management, etc.

Professional experience: applicants will need to have completed at least 12 months of proven professional experience in their field after receiving the bachelor's degree.

English proficiency: applicants will need to submit proof of sufficient language skills certified by an international exam at the level CERF B2.

Applicants will be reviewed and selected jointly by the consortium based on the following review and selection process.

The Programme Committee assesses applications and provides a recommendation for admission supported by the coordinating institution which will carry out a formal check of the applications. The committee will assess the above-mentioned requirements as well as a submitted project sketch. In that sense, applicants are required to hand in the following documents:

- Application form (with all contact data)
- Project sketch (with the outline of the intended project to be developed during the programme)
- Degree Certificates
- Proof of professional experience on their field of at least 12 months (in the form of e.g. confirmation/certification by an employee, letter of recommendation, etc.)
- Proof of English language skills (in form of an official certificate not older than 2 years at the date of application)

Selection will be based on the following evaluation criteria and their respective weighting:

GPA of the Bachelor	40
Project Sketch (Template)	20
(Group) Interview	40
Total	100

Admission/Enrolment

4.2. RECOGNITION

All partner institutions apply examination regulations that adhere to standards of the Lisbon Recognition Convention. These are included in the local examination regulations.

5. Learning, Teaching and Assessment

5.1 LEARNING AND TEACHING

Teaching and learning in the programme are based on 3 essential approaches implemented by all partners and crucial to the achievement of the learning outcomes:

- Practice-oriented teaching and learning
- Collaborative learning
- Guided self-reflection

By practice-oriented the partners understand teaching and learning to be taking place along real-life situations and problems. Students will be exposed to practical and professional contexts to learn about, apply and reflect on skills and competences. They will apply and test skills hands-on in contact with patients and other stakeholders in the in-person sessions.

Collaborative learning relates to peer learning by and with the fellow students. The programme will bring together healthcare practitioners from various fields, career stages and national contexts. The collaborative learning supports them in exchanging (best) practices, reflecting on professional contexts and transferring knowledge into their own professional context. Sufficient time and adequate methods will be provided for this peer-to-peer learning; e.g. in group work, debates, etc.

Guided self-reflection is a central theme in teaching and learning to support personal, academic and professional development and growth.

The group size of 15-20 allows sufficient time for individual guidance of students and the practical applications of skills and development of competencies within the curriculum.

In addition to the 3 major approaches, each partner applies institutional and national styles of teaching to enforce the international learning experience of students. In Spain/At USC, for example, the use of debates as teaching methods is well-experienced and frequently used (see Modules 3 & 6). The concept of living labs will be practiced in the module on "Multidimensional Aspects of Well-Being". The University of Florence applies problem-based learning. The University of Cologne has made valuable experience in simulation labs. These different teaching methods support the international approach of the programme and students' exposure to them.

5.2 ASSESSMENT OF STUDENTS

To support the practical approach in the programme, assessment forms do not cover written exams, but more interactive formats and those which require application and reflection.

The first module is not assessed at all. In order to first get to know the different educational and professional backgrounds of students and to allow them to reflect on where each student individually stands, the module will only be passed or not passed by students. Students shall be allowed to adapt to the university context (after a longer period of professional work), to reflect for themselves where they might face challenges and to review their expectations at the beginning of the programme without having the pressure of being assessed.

Assessment formats used in the modules target specific skills relevant for the learning outcomes. Several modules require a portfolio assessment which supports students in self-reflection and the transfer of skill and competences to their practice (e.g. Module 3, 6, 7). Some of the smaller assignments and also Module 7 require oral assessment formats with the aim of practising communicative skills.

Each module will be assessed based on the examination regulations of the responsible institution. These have been aligned (acknowledging national regulations). The regulations for the thesis have been agreed upon in the Consortium Agreement and implemented in the respective examination regulations.

6. Student Support

The target group for this programme is a unique one and support to students will be tailored to their needs. Several aspects stand out: Students will be involved in practice throughout the programme; they will come from different international backgrounds; they will only be on campus for a short time (4 in-person sessions) while working individually and in virtual courses to a larger extent. Support will therefore focus on providing clear and easy access to information and contact persons, support in organising the mobilities as well as guidance throughout the programme.

Due to the nature of this programme and since the students will be visiting the universities only for short in-person sessions, the main priority is to guarantee an easily accessible and reliable virtual contact point for them. The Programme Coordinator, located at the coordinating university, will be responsible for centralising communication with students and help them solve their doubts or direct them to third parties whenever is needed.

During the phase of admission and enrolment, the Programme Coordinator will make sure to keep students informed as well as to respond to particular questions. Furthermore, students will have a local contact person at each institution to direct questions related to the short-term mobilities taking place at each of them or the modules led by a specific university.

The four core on-site sessions will not only provide an intensive educational component but will also serve as enabling element for team building and networking for students. The coordination will ensure that students have options for a complementary offer of social activities and facilitate the exchange of students with local peers. The virtual sessions will serve as complementary educational offer and provide continuity to the on-site component.

Between on-line and on-site sessions, students will work on the guided-self reflection component, these sessions will be coordinated Semmelweis University who has designed the materials and methodology to facilitate the autonomous and flexible work for students meanwhile they keep gaining crucial knowledge and competencies within the master's programme.

The whole educational programme will be centralized in the EUniWell platform ILIAS where students will be able to access materials, virtual sessions and will be able to reach out to their professors and peers. The Programme Coordinator will also be in charge of centralising inquiries regarding the usage of ILIAS and will provide support for those students who might have technical difficulties (in cooperation with the relevant IT expertise).

In terms of physical mobility, students will receive support in finding housing and special rates or discounts (when possible), no support in the form of travel funding can be promised, but students will receive orientation about external sources of funding. Possibilities to compensate one in-person session (due to medical absence) will be individually agreed upon with the student. While it is crucial for the achievement of the learning outcomes to participate in all 4 in-person sessions, alternatives need to be considered in cases of emergency or medical absence.

Students will count with a complete Student Handbook with all relevant information, from student application to graduation, the different administrative bodies within the programme, the academic monitoring mechanisms and an overview of the five participating universities. The handbook will also cover frequently asked questions and a directory of contacts.

For further needs of students related for example to visas and other administrative matters beyond the scope of the programme, universities will make available their existing infrastructures such as international offices that normally deal with this topic at the university

level.

7. Resources

7.1 STAFF

Teaching staff in the programme stems from the 5 partner institutions based on their scientific profile and committent to the programme. The partners rely on institutional selection and nomination practices for teaching staff to ensure quality in teaching. Module coordinators have been involved in the design and development of the programme and constitute the contact person for students at each institution (?). Further teaching staff enriches the pool of academics coming from various faculties and affiliated disciplines to convey the holistic approach to health and well-being.

Teaching staff has access to didactic and further training along the offers at their home institution and by EUniWell.

Main teaching staff in the programme are:

Name & Institution	Title & Position/Denomination	Permanent position
Maria Cristina Polidori, UzK	Full Professor of Ageing Clinical Research, Principal Investigator at "Cologne Cluster of Excellence on Aging and Aging-associated Diseases"	Yes/Tenure Track
David Iyu, UMU	Dean of School of Health and Social Sciences, Associate Professor of Physiology	
Fiametta Cosci, UNIFI	Professor of Clinical Psychology	
Anett Leleszi-Tróbert, SE	Professor at the Institute of Mental Health	
…		

7.2 FACILITIES

The programme is characterized by 4 short-term mobilities and virtual courses. Mobilities will take place at Cologne, Semmelweis, Murcia and Florence. Students are welcome to take advantage of the campuses on-site.

[UzK, SE]

The University of Florence has devoted areas for students and offers them both a desk in an office and the institutional internet connection which allows to get access to the scientific database and journals. Also meeting rooms are available for supervision purposes. Students can take advantage of the biomedical library (https://www.sba.unifi.it/), which was founded in 1999 through the unification of the libraries of two faculties (Medicine and Pharmacy) and the biomedical departments. It has nowadays approximately 228,000 volumes, 15,738 volumes available on open shelves, 5,538 active journals (full-text electronic journals available

from the university catalog for the Biomedical Sciences category, which also includes many free titles and titles not strictly of biomedical interest).

Facilities at the University of Murcia used for the programme are the Faculty of Health and Social Sciences (Lorca campus) with various outdoor spaces, therapeutic and social gardens, classrooms and laboratories, CENERI (Integral Neurorrehabilitation Centre), managed by the Multiple Sclerosis Association of the Region of Murcia (Health Area 3), Lorca. Murcia (Spain), Child Development and Early Care Centre, managed by the municipality of Lorca. Lorca. Murcia (Spain) and the Day Care Centre for Older Adults on the Lorca campus, managed by the Poncemar Foundation. This centre is the result of a joint effort of Fundación Poncemar (non-profit organization), municipality of Lorca, regional council of Murcia, Lorca Campus Consortium and University of Murcia. Community gym at the Faculty of Health and Social Sciences (Lorca campus). University of Murcia.

8. Transparency and Documentation

The programme will be outlined in a student handbook, coordinated by the cooperation agreement and regulated by local examination regulations.

A programme website will be hosted by EUniWell with information on the ILOs, admission requirements and procedures, the curriculum and its full description (including assessment formats) and the cooperation agreement. Likewise, each partner will advocate the programme in its catalogue providing the same information.

9. Quality Assurance

Due to its specific characteristics – being an international Master's programme targeting professionals – the joint quality assurance approach is uniquely designed for the programme. Based on institutional practices and QA criteria, the partners agreed on objectives and tools to ensure quality within the joint programme which is tailored to its characteristics.

The internal QA concept is in line with the Standards and Guidelines for Quality Assurance in the EHEA. All partner institutions apply ESG-based quality assurance in their degree programmes. The QA concept has been jointly developed in an iterative process led by the University of Cologne with the support of QA-experts from the partner institutions.

Tools and procedures have been deducted from the overall objectives for the joint quality assurance. The coordinating institution for the application and implementation of the approach is the University of Cologne. It will ensure that the tools defined in the QA concept will be implemented and that results will be provided to the programme committee.

Survey and feedback formats include learning objectives, teaching and assessment methods as well as workload and relevance for practical application. The QA concept is provided in the attachment.

Unique to the concept is the combination of qualitative and quantitative elements. As the student number is rather small and the workload expected to be demanding for these students, tools have been designed to target relevant aspects at appropriate times, e.g. focus group interviews in the first and last on-site session concise and extended online surveys for other on-site sessions and modules. A matrix of objectives and tools is provided in the concept.

The programme has undergone institutional approval at each partner university according to local/national regulations. For some institutions (SE, UMU), formal institutional approval will take place after the accreditation process has been successfully completed.

Student involvement in the further development of the programme is guaranteed both on consortium level and at each partner institution. Student representatives are an integral part of the annual review of QA results for the further development of the programme in the programme committee. The invitation will be extended to enrolled students as well as to the EUniWell Student Board. Decisions on degree-awarding issues and examination questions will be taken by local examination boards with student representation.

Students have been involved in the development of the programme to provide feedback and input from their perspective. As the programme in its scope and design is rather new to many of the participating institutions, students from affiliated programmes and/or who are experienced in academic governance have been approached to provide feedback. The EUniWell Student Board has been invited to review the concept and the Chief Student Officer joined a Working Group meeting on 26 May 2025 to present and discuss the students' feedback.

With a stronger focus on health and experience in managing a programme while working, students of Public Health at USC, who are working parallel to their studies, provided written feedback which was discussed and reviewed in an on-site workshop of the group in Budapest in July 2025.

Further external stakeholders have been approached and invited for feedback in individual, more informal meetings, such as the Landschaftsverband Rheinland (Rhineland Regional Council) and its large network of clinics and care facilities (meetings of UzK academics on 06.09.2024, 12.12.2024 and 09.09.2025), EIT Health members (meeting with Prof. Magda

Rosenmöller 19.03.2025) and with the Director of the Healthy Aging department at WHO and author of the first WHO world report on ageism and for the Global Campaign to Combat Ageism (<mark>date</mark>).

External review is provided by (re-)accreditation according to the European Approach for Quality Assurance of Joint Programmes.

Annexes

MANDATORY ANNEXES

1) Documents supporting the legal status of the partner institutions

2) Cooperation agreement

3) Documents supporting each partner's legal basis for:
   a) Participating in the joint programme
   b) (Joint) degree awarding rights (if applicable)

4) List of intended learning outcomes, including:
   a) Matrix of alignment with Framework for Qualifications in the European Higher Education Area (FQ-EHEA)
   b) Matrix of alignment with applicable national qualifications framework

5) Course syllabi of all partners

6) Structure of the curriculum / study plan

7) Official documents indicating admission requirements and selection procedures

8) Official documents outlining procedure for recognition of qualifications

9) Students' assessments regulations

10) Academic staff CVs (all partners)

11) Relevant documents constituting internal quality assurance system

12) Diploma supplement (sample)

ADDITIONAL ANNEXES
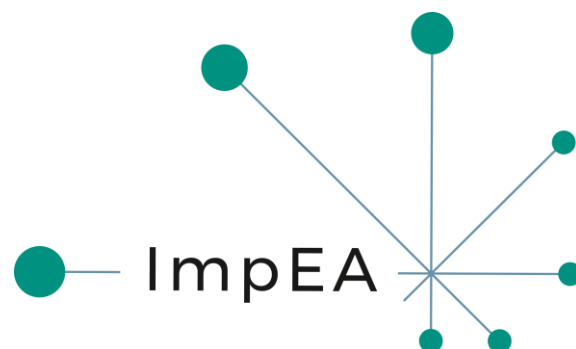
Facilitating implementation of the European Approach for Quality Assurance of Joint Programmes

Project leader

Project partners

Master programme in wellbeing-oriented healthcare

ORGANIZACIÓN DO MÁSTER (MÓDULOS/U. RESPONSABLE)

Module	Semester(s)	ECTS	Repsonsible Institution
1 Why Well-Being Matters	1	6	University of Cologne
2 Project	1-2	10	Coordination by University of Cologne, shared responsibility
3 Identity and Belonging	1	4	University of Santiago de Compostela
4 Personal & Social Transformations	2	8	Semmelweis University
5 Multidimensional Aspects of Well-Being	2-3	7	University of Murcia
6 Economics of Healthcare	3	**3**	University of Santiago de Compostela
7 The Biopsychosocial Model: Let's Practice It	3-4	7	University of Florence
8 Thesis	3-4	15	Shared responsibility
Overall		**60**	

MODULE DESCRIPTION – *WORK IN PROGRESS*

Why well-being matters						
Type of Module /				**Module Code /**		
Identifi- cation Number	**Workload**	**Credit Points**	**Term**	**Offered Every**	**Start**	**Duration**
/	150	6	1	1st semester	1st semester (Winter Term)	1 semester

1	**Educational Components**		**Contact time**		**Private study**	
	a) Virtual Kick-Off		4		25	
	b) In-person Session		48		73	

2	**Module objectives and skills to be acquired**
	The module introduces students to the concepts and key terms of well-being, quality of life, quality of death and related measures of people's own health and life perception and emotions.

In particular, students acquire the following competences and skills (in relation to Theme 1):

> ➢ to distinguish the traditional organ- and disease-centred approach and the person-centred approach;
> ➢ to reflect on the person-centred approach in healthcare including somatic (biomedical), psychological and social (cultural) correlates;
> ➢ to understand the fundamentals of well-being and health, with a particular focus on biomedical and biomolecular aspects/determinants of well-being.

Furthermore, students review the determinants of well-being, including important biopsychosocial and value-based, including spiritual, issues related to cultural backgrounds, life stages (childhood, young adulthood, midlife, young-old, old-old, oldest-old), lifestyle, fertility, retirement, anxiety disorders, substance abuse, (underreporting of) symptoms and illnesses, community resources and adaptation to alternative living situations, such as long-term care facilities/hospices (Theme 2).

Students identify the advocates/local champions for well-being within local, institutional and healthcare system networks based on a reflection of roles and motivations based on best practices experienced in the German context and illustrated by the students (Theme 3).

Students extrapolate best practices for well-being in healthcare, with which they became acquainted with in Germany, and develop adoption strategies in their own institution / healthcare system, and vice versa (Theme 5).

Students review specific methods and strategies to improve individual well-being and assess tools to strengthen their resilience and cope with challenging situations (Theme 6). |

3	**Module content**
	a) Kick-Off
	Students learn about the key terms of a person-centred approach.
	Students get confronted with personal and societal taboos (on micro-, meso- and macro-level) to reflect on determinants of well-being, barriers to a healthy societal context including main aspects of discrimination as well as of lack of inclusion and diversity.
	Students receive an overview of the programme's content and structure.
	b) In-person session
	Students learn about and categorize biomedical determinants of health, of quality of life/death and well-being, in particular
	- biochemical, biological, physiological aspects of mental and physical health (incl. psychosocial aspects) - inflammation and well-being, oxidative stress and effort-reward imbalance - determinants of quality of life/death: From gratitude and spirituality to nutrition and pain - hormonal and biomolecular signatures of healthy lifestyles, predominantly sleep, nutrition, physical activity, social interaction
	Students experience a focus on health & well-being as a lifelong learning process from the holistic perspective, in particular - biological correlates of well-being determinants from fertility to super-agers - biodemographics, socio-genomics - socio-genomic insights into stress regulation, social bonding, and inflammation regulation - intersections of epigenetics, culture, and environmental exposures in shaping health outcomes
	Students visit the following professional contexts and participate in best practices for applying a person-centred approach in various fields of healthcare in Cologne
	- Cologne Interprofessional Skills Lab and Simulation Center, training both clinical and scientific skills - hospice and palliative care - in- and outpatient clinics - nursing and senior care settings - community-based caregiving facility - innovative models of integrative care (Centre for Integrated Oncology)
	Students experience methods/tools of supporting their personal health and well-being, in particular qigong as a mind-body practice, enriched with elements of traditional Chinese medicine and nature-based intervention strategies. Students experience experiential components and critical reflection grounded in scientific literature and cross-cultural perspectives on well-being.
4	**Teaching methods**
	Practice-based learning, collaborative learning based on practical experience of students, guided self-reflection, simulation lab, group work
5	**Prerequisites (for the module)**
	/

6	**Type of examination**
	Pass/no pass
7	**Credits awarded**
	6
8	**Compatibility with other curricula**
	/
9	**Proportion of final grade**
	0%
10	**Module coordinator**
	Prof. Dr. Cristina Polidori
11	**Further information**

MODULE DESCRIPTION

Project						
Type of Module /				**Module Code /**		
Identifi-cation Number	**Workload**	**Credit Points**	**Term**	**Offered Every**	**Start**	**Duration**
/	250	10	1 - 2	1st semester	1st semester (winter term)	2 semesters

1	**Educational Components**	**Contact time (in hours)**	**Private study (in hours)**
	a) Introduction to Project Ideas	8	
	b) Virtual Introduction to Methodology of Project Management and Organisation Development	12 (4 x 3)	
	c) Virtual Introduction to Statistical Methods & Needs Analysis	xxx	
	e) Individual Project Work	3	xx

2	**Module objectives and skills to be acquired**
	Students implement a small-scale project within their professional and/or local context to apply, test and/or review the application (or promotion) of a well-being and/or person-centred approach in healthcare. With the project, students foster change within their professional and/or local context or reflect on challenges which hinder change.

In particular, students acquire the following skills:

- Students outline a small-scale project relevant to their professional context which supports the application of the well-being and/or person-centred approach.
- Students define realistic and measurable objectives to implement the project and motivate change (Theme 2, Theme 4).
- Students apply a project management methodology to define objectives, design a timeline and milestones.
- Students implement their project practically and creatively within their professional context based on their methodological approach and relevant academic guidance (Theme 2, Theme 3).
- Students reflect on the progress of implementation and refine objectives or methodology.
- Students reflect upon their role within the healthcare system while implementing the project; students assess the boundaries of their own and others' roles within their professional context (Theme 3). |

		- Students communicate the progress and the result of their project verbally and in writing in a form that is understandable to addressees in their professional context (Theme 3).
3		**Module content**
		Based on methodological introduction and academic guidance the students work on a real-life small-scale project to be implemented within their professional context over a time period of ca. 6 months.
		a) Introduction to Project Ideas
		Students present and discuss their project in the plenum and work on refining their project objectives in small groups. They reflect on their objectives, compare their projects to others and receive feedback by their fellow students and the lecturer.
		b) Virtual Introduction to Methodology of Project Management and Organisation Development
		The introduction to project work and organisational development serves as a theoretical basis for students' project implementation. Students will be exposed to classical and agile project management approaches in order to apply them on their individual project.
		As an outcome, students will be able to develop a project organisation that support the success of their project and to define all aspects of planning (personal and financial resources, time, communication, risks etc.) to finalise their project plan based on the methodological input.
		Special attention will be given to organisational change in order to reach change within the organisation or other system of the student. The introduction provides support in implementing the project with respect to organisational/system dynamics and its environment by discussing basic organisational system theory.
		Planning of the project will be supported by structured feedback of fellow students and the lecturer to enable students to lead change.
		c) Virtual Introduction to Statistical Methods & Needs Analysis
		Students receive training in the following methodological aspects:
		<mark>xxx</mark>
		d) Individual Project Work
		Students implement the project in their professional context. They will be supported by guiding sessions with their supervisor. The sessions are designed to discuss challenges, review objectives, plan next steps and encourage self-reflection.
4		**Teaching methods**
		Practice-oriented learning, collaborative learning based on practical experience of students, guided self-reflection, group work
5		**Prerequisites (for the module)**
		/
6		**Type of examination**
		Project Report (ca. 10 pages)
7		**Credits awarded**
		10

8	**Compatibility with other curricula**
	/
9	**Proportion of final grade**
	18%
10	**Module coordinator**
	Prof. Cristina Polidori, University of Cologne
11	**Further information**
	Students receive first preliminary feedback on their project idea on selection to the programme.

MODULE DESCRIPTION – *WORK IN PROGRESS*

Identity and belonging						
Type of Module / Online				**Module Code /**		
Identifi-cation Number	**Workload**	**Credit Points**	**Term**	**Offered Every**	**Start**	**Duration**
/	100 hours	4	1	1º semester	1º semester	1 semester

1	**Educational Components** a) Master classes b) Forum/debate with students c) Work (portfolio)	**Contact time (in hours)** 12 hrs 4 hrs 4 hrs	**Private study (in hours)** 35 10 35
2	**Module objectives and skills to be acquired**		
	To reflect on our roles and how the activities we do, define us (sense of identity)		
	To reflect on how the activities we do contribute to shape who we are, who we become and where we belong.		
	To understand how the individual and environmental factors contribute to the different meanings of our daily occupations.		
	To reflect on the consequences of not being able to engage in our meaningful activities, and how this links with health and well-being.		
	To incorporate an understanding of individuals' identity and sense of belonging within multicultural contexts in order to promote healthcare that are culturally appropriate, inclusive, and respectful of diversity.		
	To incorporate a transcultural perspective when addressing health problems by recognizing and respecting patients' cultural beliefs, values, and practices, in order to provide comprehensive and appropriate care that promotes well-being and equity in multicultural contexts.		
	To develop communication skills and strategies that are culturally sensitive and acknowledge diverse identities and experiences, in order to enhance trust, patient engagement and equity in multicultural healthcare settings.		
	To recognize and consider the interindividual diversity and variability within a community to adapt the healthcare process to each individual's specific needs, values, and context.		
3	**Module content**		
	1. Occupational performance, experience and value in everyday life. Examination of the		

interplay between a person's ability to perform activities, the subjective experience of these activities, and the value attributed to them, and how these dimensions affect the sense of identity and social belonging in different cultural contexts.

2.	Understanding the "The Doing-Being-Becoming-Belonging Framework". Exploration of how this model explain the dynamic relationship between action (doing), presence and identity (being), growth (becoming), and social participation (belonging), and how this framework supports personal development and well-being within diverse communities and sociocultural settings.

3.	Occupational Perspective of Health and Pan Occupational Paradigm. Analsysis of these models to understand how participation (or participation restriction) in meaningful activities contributes to individual and collective health.

4.	The Occupational Meaning System themes and Forms of Meaning associated with Occupations within Sociocultural Contexts. Approach to the system from multicultural contexts and Relationship between this approach and well-being in individuals, people and communities.

5.	Cultural Diversity in Health: Challenges in Health Care from a multicultural Approach

6.	Deconstructing for caregiving: Keys to Empathy and Cultural competence in caring for people from diverse cultural contexts.

7.	Intercultural Communication Strategies: Fortering equity in Health Care.

8.	Giving people voice: Recognizing diversity and encouraging their participation in Health Problem Solving

c) Supervision/Coaching

Academic Supervision: Participants will meet with their supervisor at least twice (for each 50 minutes, via video call) on a group session, where we will have the opportunity to engage in a collaborative analysis.

b) Individual Activity

The participants will be required to deliver two individual reports on the topics specified in the subject. The delivery format could be the portfolio.

4	**Teaching methods**
	The sessions will take about 2 hours and will be developed in an interactive way, combining the transmission of knowledge through master class with practical activities that encourage self-reflection and collaborative learning based on practical experience or problem-based learning.
	A series of explanatory materials will be made available to participants on each content block of the subject, in accordance with the objectives set out in the programme.
	A debate forum will be generated in the virtual classroom in which participants will be able to reflect on the issues raised with the support of the supervisors.
	There are several ways to incorporate activities into our course. These include creating videos and other audiovisual materials, as well as reading academic texts and writing corresponding reports. In addition, students can engage in analyzing and comparing data or processes. Another activity could be conducting bibliographic research to support learning objectives. Finally, incorporating case studies and developing portfolios can also constitute activities of the course.
5	**Prerequisites (for the module)**
	/

6	**Type of examination**
	Project Portfolio. Individual Activities
7	**Credits awarded**
	4
8	**Compatibility with other curricula**
	/
9	**Proportion of final grade**
	6,7%
10	**Module coordinator**
	Ainara Díaz-Geada
11	**Further information**

TEMPLATE MODULBESCHREIBUNG (ENGL.)

Module Name
Personal and social transformation - Semmelweis University

Type of Module		Module Code	
• Basic Module • Advanced Module • Supplementary Module		[e. g. BM3]	

Identifi-cation Number	Workload	Credit Points 3+5	Term	Offered Every	Start	Duration
[XYZ]	197	8	Second Semester	[WiSe/ SuSe]	Before the summer school of the second semester, online	1 semester: On-line before the summer shool (SS) In person during the SS Online after the SS

1	Course types	Contact time	Private study
	Online classes before the SS (Preparation)	33	33
	Classes during the SS (In-person)	50	25
	Online classes after the SS (Follow-up)	56	
	From the above: a) Lecture (online)		

	b) Seminar c) Exercise		
2	**Module Week Summary: Personal and Social Transformation** This week takes an interdisciplinary approach to well-being as a complex, multidimensional concept that unfolds across the **personal (micro)**, **community and organizational (meso)**, and **social (macro)** levels. Students will examine how individual experiences of mental health; culture of care are deeply connected to broader social structures and legal frameworks. At the **micro level**, the focus is on personal well-being across the life course, viewed through the lens of the biopsychosocial and spiritual model (BPSS). Special attention will be given to mental health promotion, burnout prevention, and the role of spirituality in coping with life challenges. Students will explore self-reflection, resilience, and the importance of preserving personal integrity and purpose in helping professions. At the **meso level**, the emphasis is on families, workplaces, and institutional care. Topics include the burden and support of family caregivers, the culture of well-being in organizations, and the communication skills needed to foster supportive, person-centered care environments. The role of supervision, team dynamics, and organizational development is emphasized as a pathway to sustainable care cultures. Students will also learn about good practices and successful examples they can integrate into their own professional practice. At the **macro level**, the course addresses demographic shifts, legal frameworks, and long-term care systems and policies that shape collective responses to ageing, caregiving, and health inequalities. Students will critically analyze legal dilemmas, human rights in care, and the systemic conditions for inclusive, quality care across society. By integrating these perspectives, the module aims to equip students with the ability to recognize how **personal transformation** contributes to and is influenced by **social and institutional change**, fostering a deeper commitment to well-being at all levels of practice. **Objectives of the Module** **Mental Health Promotion:**		

Introduction to Mental Health Promotion (Theme 1, 6)

- Understand holistic mental health approaches and prevention models.

BPSS model - The role of spirituality in well-being (Theme 1,2,6)

- Explore spirituality's role in well-being, build personal spiritual resilience, and apply it in professional care.

Communication in the Helping Relationship (Theme 1)

- Develop communication skills for helping relationships.

Supervision (Theme 1,2,6)

- Enhance self-reflection and teamwork through supervision.

Improving the Well-being in Workplaces – Organizational Culture:

Burnout prevention (Theme 1,2,3,6)

- Identify causes and the prevention of burnout.

Mental Health at the Workplace – best practices (Theme 2,3,6)

- Evaluate and improve workplace mental health programs.

Organizational development and well-being (Theme 2,3,6)

- Apply organizational development strategies to create sustainable, healthy work environments.

Understanding the Social Aspects of Well-being:

Ageing and Care (Theme 1,2,6):

- Understand demographic changes and challenges related to ageing.
- Learn about active ageing and innovative care models.
- Apply ageing concepts professionally and promote technology use for older adults.

Family Caregiving (Theme 1,2,3,4,6):

- Recognize caregiver burden and challenges.
- Support family carers and promote their well-being.
- Advocate for the inclusion of family carers in care processes and labor markets.

	Society and Well-being (Theme 4): • Study the key factors of well-being based on the OECD Better Life Index • Unfold similarities and differences of the index across the OECD countries • Raise and conceptualize country specific empirical research questions **Exploring the Legal and Policy Background and Frameworks of well-being:** *Legal Dilemmas of Well-Being oriented Healthcare (Theme 2,3):* • Understand national, EU, and international health-related legal systems. • Know patients' rights and legal statuses. • Apply legal standards to promote ethical, patient-centered care. *The Long Term Care system. Sustainability, innovation, opportunities (Theme 2,3,4):* • Learn and understand the policies, characteristics, processes and intervention options of long-term care.
3	**Contents of the Module** **1. Mental Health and Spirituality** - Holistic and systemic approaches to mental health promotion - Prevention models at individual, social, and societal levels - Communication in helping relationships: assertiveness, active listening, empowerment - Supervision and self-reflection in professional development - Applied spirituality in case discussions: end-of-life care, prayer/meditation, life goals - Spirituality and the self of the professional: resilience, self-awareness, meaning-making - Spirituality and well-being: diverse perspectives, coping, and research insights **2. Workplace and Organizational Well-being** - Burnout prevention models and stress management tools - Best practices in workplace mental health promotion - Organizational development: culture, leadership, systems thinking - Interventions for sustainable and healthy work environments

	- Case studies from healthcare and helping professions **3. Social Aspects of Well-being** - Key factors of well-being: context analysis and comparison of 11 dimensions - Societal differences and similarities: special focus on social connections, civic engagement and subjective well-being - Demographic trends, ageing challenges, care needs, and active ageing - Innovative care models and the role of technology in elder care - Family caregiving: caregiver burden, support tools, and work-life balance - Strategies to strengthen carers' resources and prevent exhaustion **4. Legal and Policy Frameworks** - National, EU, and international legal systems in healthcare - Legal capacity, patients' rights, and human rights - Case law and ethical dilemmas in well-being-oriented healthcare - Long-term care systems: sustainability, innovation, and policy solutions - Roles of state, market, and community in shaping care systems
4	**Teaching methods** Collaborative learning based on practical experience of students Lecture Presentation Practice-based learning Interactive group work, small group discussions, case and data analyses Roleplays Analyzing situations presented from videos or case studies Exercise sheets, relaxation techniques, games for self-awareness, self-reported questionnaire Guided self-reflection
5	**Prerequisites (for the module)** Prerequisite for the in-person modules is the completion of the previous in-person module Successful completion of [Module name]

Comentou [TA1]: Module name of first semester

6	**Type of examination**
	Varies depending on the teaching unit. It can take the form of:
	- Paper to be submitted - Online written test - Written colloquium - Written reflection, essay - Written exercise with online presentation - Case study analysis and presentation - Description and analysis of your own professional activity (workplace, activities, timetable)
7	**Credits awarded** 8
8	**Compatibility with other curricula** Not applicable for modules of the programme
9	**Proportion of final grade:** 15%
10	**Module coordinator: Prof. Dr. Beáta Dávid**
11	**Further information** Teaching language: English

MODULE DESCRIPTION – *WORK IN PROGRESS*
WINTER SCHOOL.
UNIVERSTY OF MURCIA (SPAIN).

WINTER SCHOOL: **PREPARATION (VIRTUAL)** and **IN-PERSON** WINTER SCHOOL. UNIVERSITY OF MURCIA.						
Type of Module / Virtual + In-person				**Module Code /**		
Identifi-cation Number	**Workload**	**Credit Points**	**Term**	**Offered Every**	**Start**	**Duration**
/	50 hours 125 hours	2 5	2 3	2nd semester 3rd semester	2nd semester 3rd semester	1 semester 1 semester

1	**Educational Components**	**Contact time (in hours)**	**Private study (in hours)**
	Virtual session. Follow-up. In-person session. Follow-up.	24 hrs (3 hours x 8 sessions) 48 hrs (8 hours x 6 days) +2 hrs	10 16 50 25

2	**Module objectives and skills to be acquired**
	Module Objectives (VIRTUAL SESSIONS):
	The theoretical content of the different subjects/topics that make up the virtual sessions of this module will be focused on facilitating the understanding of the social and health interventions that will be carried out during the winter school in the third semester of the master's degree: Multidimensional Aspects of Well-Being.
	Module Objectives (IN-PERSON SESSIONS):
	The main objective of this module is to involve students as health professionals in real services and activities so that they learn first-hand how the proposed service/activity works, as well as the benefits to patients/users, so that they can assess its prescription or its application in their place of origin, while giving them the opportunity to contribute their point of view and proposals for

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improvement.

In this module, that will take place during the winter school at University of Murcia (Spain) in the third semester: <u>Multidimensional Aspects of Well-Being</u>, which is an eminently practical module, students will be incorporated into different services and face-to-face activities in which they will work and live with social and health professionals and with patients and users.

Common Skills to be acquired: (ILO: Intended Learning Outcomes)

Graduates judge the traditional organ- and disease-centred approach and the person-centred approach (ILO-Theme 1).

Graduates identify, assess and prioritize bio-psycho-social determinants for wellbeing and quality of life in relation to health and disease using a person-centred approach (ILO-Theme 2).

Graduates recommend the appropriate social institution, i.e. services and support systems, such as social care, city hall, religious communities, civic centres, community gardens, for individual cases (ILO-Theme 2).

Graduates support family members and family caregivers in finding the resources for well-being (ILO-Theme 2).

Graduates foster cooperation between the different social and healthcare professionals by using teamwork skills (ILO-Theme 3).

Graduates develop communication strategies according to different addresses (ILO-Theme 3).

Graduates extrapolate international best practices for well-being in healthcare to adopt them to their own institution and healthcare system and vice versa (ILO-Theme 5).

Graduates build international professional relationships between relevant healthcare stakeholders and promote mutually fruitful cooperation (ILO-Theme 5).

Graduates investigate their own well-being and generate strategies and measures to maintain or improve it (ILO-Theme 6).

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Module content

Topics:

1) **Social and Healing Gardens** (<u>3 hours virtual sessions + 8 hours in-person sessions</u>). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in real natural environments with professionals, patients and users and learn first-hand about the different techniques available to take advantage of the therapeutic value of plants and nature for people's well-being.

2) **Integral Neurorehabilitation** (<u>3 hours virtual sessions + 8 hours in-person sessions</u>). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in a real Neurorehabilitation Centre with professionals, patients and users and learn first-hand about the different techniques available to develop an integral neurorehabilitation.

3) **Early Intervention** (<u>3 hours virtual sessions + 8 hours in-person sessions</u>). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in a real Child Development and Infant Early Intervention Centre with professionals, patients

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and users and learn first-hand about the different techniques available for promoting optimal development of children from 0 to 6 years of age.

4) **Day Care Centre for Older Adults** (3 hours virtual sessions + 8 hours in-person sessions). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in a real Day Care Centre for Older Adults with professionals, patients and users and learn first-hand about the different techniques available for providing the best quality of life of the users of this service.

5) **Resistance Training for Cancer Patients** (3 hours virtual sessions + 8 hours in-person sessions). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in a real community gym with professionals, patients and users and learn first-hand about the different techniques, best exercises, and under what circumstances, can be beneficial for these patients.

6) **Senior and Social Theater** (3 hours virtual sessions + 8 hours in-person sessions). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work in a real senior theater group with professionals, patients and users and learn first-hand about the different strategies that can be used in theatre to improve the quality of life of participants.

7) **Age-Friendly and Community-Oriented University Campus** (3 hours virtual sessions + 1 hour in-person sessions). In these sessions students will learn the theoretical underpinnings of this topic and will be able to work and stay in a real Community-Oriented University Campus that has the potential to become a hub for the whole society, including gerontological sector and community health services, to develop translational research aimed at enhancing the quality of life of everyone.

8) **The importance of communication and interpretation** (3 hours virtual sessions + 1 hour in-person sessions). In these sessions students will learn the theoretical underpinnings of this topic and will enjoy the Interpreting Services-Workshop: "How to work with interpreters to guarantee everyone's well-being" to understand the fundamental aspects of good language interpretation in health.

4	**Teaching methods**
	Practice-Based Learning, Collaborative learning based on practical experience of students, Guided self-reflection, Living Labs.
	Presentation of theoretical content and discussion on it, based on the professional and personal experience of the participants (Virtual Sessions). And incorporation into a real working session in social and health services (In-person Sessions).
	During the VIRTUAL SESSIONS there will always be time for group work where students can discuss and exchange ideas and information on the proposed topic (forum/debate).

	The organization of <u>IN-PERSON</u> activities will consist of students carrying out a different activity each day, during the six days. On each of the days the students will carry out the practical activity for 3 hours, together with professionals and patients/users. They will then have a two-hour break for lunch and for their own well-being, and at the end of the activity they will have another 3-hour session to analyze, evaluate, compare and share impressions on the practical activity carried out, which will allow, among other things, the students to compare the good practices carried out in each country. During the module and lectures, students will be invited to actively participate and comment on their own experiences. Students will have to carry out fieldwork to gather information on how services like those discussed in the module work in their own environment or country. This practical work will form the basis of the portfolio and the public presentation that students will have to make to be assessed. They will also be provided with updated bibliography on the different topics.
5	**Prerequisites (for the module)** Successful completion of Modules 1 and 4.
6	**Type of examination** Students will be assessed based on their analytical and reasoning skills via **oral exams**. Similarly, their **portfolios** will be assessed based on the specific and complementary information they incorporate into their portfolios after the practical sessions. Oral Exam (50%). Portafolio (50%). It is very important that students complete the ONLINE SESSIONS of module 5, to be prepared for doing the IN-PERSON SESSIONS, as the ONLINE SESSIONS provide them with a sufficient theoretical basis to make the most of the IN-PERSON SESSIONS. In addition, the portfolios produced in the ONLINE SESSIONS must be completed after the IN-PERSON SESSIONS, so it is necessary that they take them to the IN-PERSON SESSIONS.
7	**Credits awarded** 7 (2+5)
8	**Compatibility with other curricula** Not applicable for modules of the programme.
9	**Proportion of final grade** 8,375%
10	**Module coordinator** David Iyú Espinosa. University of Murcia (Spain).
11	**Further information.**

MODULE DESCRIPTION – *WORK IN RPOGRESS*

Economics of Healthcare						
Type of Module / Online				**Module Code /**		
Identifi-cation Number	**Workload**	**Credit Points**	**Term**	**Offered Every**	**Start**	**Duration**
/	75 hours	3	3	3rd semester	3rd semester	1 semester

1	**Educational Components**	**Contact time (in hours)**	**Private study (in hours)**
	a) Master classes	9 hrs	36
	b) Forum/debate with students	3 hrs	4
	c) Work (portfolio)	3 hrs	20

2	**Module objectives and skills to be acquired**
	This course explores the critical role of social determinants of health (SDH) in shaping health outcomes and contributing to health inequities. It emphasizes the influence of factors beyond the healthcare sector evaluating the primary social determinants as identified by the World Health Organization. The course aims to equip participants with a comprehensive understanding of SDH and the skills to design effective multi-sectoral public policies that promote health equity. Through a multi-disciplinary approach, students will learn to advocate for and implement changes that address the root causes of health disparities. By the end of this course, students will be able to: 1. Understand the concept of social determinants of health and their impact on health outcomes. 2. Analyze the contribution of non-health sectors to population health outcomes. 3. Evaluate the primary social determinants as identified by the World Health Organization (WHO). 4. Develop public policy strategies that address SDH to improve health and reduce inequities.

3	**Module content**

1. Introduction to Social Determinants of Health (SDH):
    - o Definition and scope of SDH
    - o Impact of SDH on health inequities
    - o Overview of research findings on SDH's contribution to health outcomes (30-55%)
2. Primary Social Determinants of Health (WHO Framework):
    - o Income and Social Protection:
        - ▪ Effects of income inequality on health
        - ▪ Role of social protection programs
    - o Education:
        - ▪ Link between education and health outcomes
        - ▪ Educational policies for health improvement
    - o Unemployment and Job Insecurity:
        - ▪ Health consequences of unemployment
        - ▪ Strategies to mitigate job insecurity
    - o Working Life Conditions:
        - ▪ Workplace safety and health
        - ▪ Impact of working conditions on overall health
    - o Food Insecurity:
        - ▪ Relationship between nutrition and health
        - ▪ Policies to ensure food security
    - o Housing, Basic Amenities, and the Environment:
        - ▪ Importance of housing quality and amenities
        - ▪ Environmental factors affecting health
    - o Early Childhood Development:
        - ▪ Long-term health implications of early development
        - ▪ Programs supporting childhood development
    - o Social Inclusion and Non-Discrimination:
        - ▪ Effects of social exclusion and discrimination
        - ▪ Promoting social inclusion through policies
    - o Structural Conflict:
        - ▪ Health impact of conflict and violence
        - ▪ Conflict resolution and health promotion
    - o Access to Affordable Health Services:
        - ▪ Importance of accessible, quality health services
        - ▪ Strategies to improve healthcare access
3. Public Policy Design and Implementation:
    - o Role of public policies in addressing SDH
    - o Multi-sectoral approach to policy development
    - o Involvement of civil society in policy-making
    - o Case studies of successful public policies

Contents will be introduced in several ways: videos, academic texts, online resourses, lecture notes, data and reports and bibliographic research.

c) Supervision/Coaching

Academic Supervision: Participants will meet with their supervisor at least twice (for each 50 minutes, via video call) on a group session, where we will have the opportunity to engage in a collaborative analysis.

	b) Individual Activity
	The participants will be required to deliver at least one individual report on the topics specified in the subject. The delivery format could be the portfolio.
4	**Teaching methods**
	Online lectures, videos and online activities in the virtual platform, group work, coaching/supervision, individual study.
5	**Prerequisites (for the module)**
	/
6	**Type of examination**
	Project Portfolio. Individual Activities
7	**Credits awarded**
	3
8	**Compatibility with other curricula**
	/
9	**Proportion of final grade**
	5%
10	**Module coordinator**
	Melchor Fernández
11	**Further information**

MODULE DESCRIPTION

Module Name: **The Biopsychosocial Model:** How to translate it into the clinical experience						
Type of Module / a) Online b) Onsite				**Module Code /**		

Identifi-cation Number	Workload	Credit Points	Term	Offered Every 3rd semester and 4th semester	Start End of 3rd semester	Duration last part of 3rd semester; 4th semester
	175	7 CP	3 and 4			

1	Educational Components a) Preparation b) On-site	Contact time 17 48	Private study 33 77

2	Module objectives and skills to be acquired
	In relation to themes 1-6, participants will explore the fundamentals of the biopsychosocial model which integrates biological, psychological, and social factors in understanding health and well-being and will have the opportunity to see the implementation of such a model into the local health system (Theme 3)**.** Personal well-being techniques for generative communication building (Theme 6) and for individual well-being empowering will be proposed. Well-being should be indeed embedded in the whole care process, which includes health care professionals. Overall, the focus on biopsychosocial determinants of health and well-being will allow to reflect on a person-cantered approach in healthcare (Theme 1). Participants will also focus on socio-economic-technological determinants of health and well-being (Theme 4). They will connect well-being in healthcare to the wider economic picture and measure the economic benefits of applying a well-being approach into the health care system. Finally, participants will focus on how to enlarge the biopsychosocial model via additional factors and international experiences on health and well-being. They will take the advantage of international professional relationships between relevant healthcare stakeholders and promote mutually fruitful cooperation (Theme 5). During the whole module, participants will be asked to work collaboratively and under the guide of the speakers, in small groups according to the PBL (Problem-Based Learning) model with the aim of practicing the biopsychosocial model and translating it into their clinical and working realms. The number of students in each group will depend on the total number of enrolled participants. A small group will typically consist of 5 to 8 students. Grades will be assigned to each individual student based on their contribution as part of the group.

Comentou [IC(1): To put it in a broader way:
- how to translate it by the clinical experience
- experience (examples) of translation into clinical practise

Comentou [IC(2): The number of students in each group will depend on the total number of enrolled participants. A small group will typically consist of 5 to 8 students.

Grades will be assigned to each individual student based on their contribution as part of the group.

3	**Module content**
	• **Preparation** (compulsory)
	The preparation phase will be based on online courses, one devoted to healthy ageism, one devoted to delirium prevention, one devoted to palliative care, and one devoted to medical humanities. This will allow to reflect on how the biopsychosocial model can be used in health building in profession and on how the biopsychosocial model can be used in well-being empowerment. During the preparation courses the PBL model will be introduced and simple tasks to small groups operating at distance will be proposed to create a know how to be used in the on-site summer school. In the preparation phase, the small groups projects will be aimed at reflecting and verifying if participants have in their study or working environment the biopsychosocial factors illustrated in the online courses (if these factors are already present, the assignment will be to analyze how they have been implemented and explore ways to strengthen or enhance them. If they are not present, the assignment will be develop proposal on how they could be introduced and implemented from scratch)
	• **On-site**
	The on-site phase will be based on a 6-day Summer School which will be run in person at the University of Florence. The focus will be on biopsychosocial determinants of health and well-being, on preventing surgical complications via an integrated biopsychosocial intervention; on the role of biopsychosocial aspects in managing functional disorders taking advantage of the experiences in migraine and fibromyalgia management; on socio-economic-technological determinants of health and well-being; on gender medicine and discrimination; on the use of technology and well-being in healthcare; on the use of generative communication in healthcare, both considering the relationship between professionals and patients and their relatives/caregivers as well as considering the relationship among health care providers. In addition, a focus on how to enlarge the biopsychosocial model via additional factors and international experiences on health and well-being will be granted making a reflection on OneHealth and communicable diseases and taking the advantage of the experience of academic clinicians of the Academic paediatric hospital in Florence having as mission the export of health and well-being for kids. During the first 5 days of summer school, participants are daily encouraged to translate the contents proposed into the development in small groups of projects according to the PBL model. Specific tasks will be assigned to facilitate this small group activity. Last day of the Summer School is devoted to thesis contents, participants share a brief oral presentation on the state of the art of their thesis and take the advantage of the open discussion to have inputs fruitful to continue preparing the thesis in the following weeks.
4	**Teaching methods**
	Online and on-site formats: Lectures, Workshops, Practical training, Group Work, Self-Study, Visit of the Research Centres
5	**Prerequisites (for the module)**
6	**Type of examination**
	Participants need to prepare a short oral presentation on the project created in the small group via the PBL model during the online courses.
	Participants need to prepare a short oral presentation of the thesis they are working on at the end of the onsite course.
7	**Credits awarded**
	7

Comentou [IC(3): If these factors are already present, the assigment will be to analyze how they have been implemented and explore ways to strengthen or enhance them.

If they are not present, the assigment will be to develop proposals on how they could be introduced and implemented from scratch.

8	**Compatibility with other curricula**
	.
9	**Proportion of final grade**
	11.7%
10	**Module coordinator**
	Fiammetta Cosci
11	**Further information**
	In the event that a student is unable to attend the on-site summer school, alternative solutions may be considered to allow them to participate. These may include the possibility of attending the lectures online and completing an additional assignment provided by the summer school coordinators (for example, a report that can serve as a valuable contribution and a reference method for everyone).

Comentou [IC(4): This was referring to internal compatibility, so the item can be removed

Comentou [IC(5): In the event that a student is unable to participate in the on-site part.

MODULE DESCRIPTION

Module Name: **Thesis**

Type of Module / a) Online b) Onsite	Module Code / Module 8

Identifi-cation Number 8	Workload 375	Credit Points 15 CP	Term 3 and 4	Offered Every 3rd semester and 4th semester	Start Beginning of 3rd semester	Duration 3rd and 4th semesters

1	Educational Components a) Preparation b) Supervisions c) Defence (online)	Contact time 0 28 2	Private study 345

2	**Module objectives and skills to be acquired** In relation to themes 1-6, participants will elaborate a thesis on a topic related to the fundamentals of the biopsychosocial model which integrates biological, psychological, and social factors in understanding health and well-being according to what has been learned during the whole programme**.** Each participant will choose the topic of the thesis based on own expertise, preference and work environment (if any). Overall, the focus of the thesis will be on biopsychosocial determinants of health and well-being which allow to reflect on a person-cantered approach in healthcare (Theme 1), on well-being-oriented decision-making in professional routine (Theme 2), on well-being in the local healthcare system (Theme 3), on socio-economic-technological determinants of health and well-being (Theme 4), on well-being in the international context (Theme 5), and/or on personal well-being (Theme 6). During the whole module, participants will be asked to work individually and guided by two supervisors (chosen among the teachers of the programme and based on the expertise and affiliated, if possible, to two different institutions) with the aim of translating the biopsychosocial model in the contents of the thesis. Online supervision and onsite supervision (during the module 7) will be provided to ensure the thesis production and an adequate standard of quality.
3	**Module content** • **Preparation** (compulsory) The preparation phase will be based on individual work on a topic agreed with the supervisors. This

will allow to reflect on how the biopsychosocial model can be embedded in the clinical and research realm. The thesis must be written in English, have a minimum of 30 pages and a maximum of about 50 pages. The structure must be as follows: title, name of the student, affiliation of the student, name of the supervisors and their affiliations, abstract (max 250 words, unstructured), introduction, methods, results, discussion, references, tables/figures. The content must be original. The thesis must be evaluated and graded by two experts (different from the supervisors), and thereafter approved for the defence.

- **Supervisions** (compulsory)

Each student will choose/be assigned to two supervisors based on their expertise. Supervisors are teachers of the programme and affiliated to EUniWell Alliance institutions. If possible, the two supervisors are affiliated to two different institutions. Each supervisor devotes about 1 hour per week for a period of 12 months to supervise the work produced by the student. Joint supervisions are encouraged. Supervision is online. In addition, a 4-hour session of supervision based on a group format is run during the summer school of the module 7.

- **Defence** (compulsory)

After been graded and passed, the thesis is defended by each student. The defence takes place online. The official language of the defence is English. The defence lasts 45-60 minutes. The evaluating commission consists of the 2 supervisors and a third member, who must be an expert in the field. The following grading is applied: grade A corresponds to the grades obtained by the best 10% of students; grade B corresponds to the grades obtained by the next 25%; grade C corresponds to the grades obtained by the next 30%; grade D corresponds to the grades obtained by the next 25%; grade E corresponds to the grades obtained by the final 10%.

4	**Teaching methods**
	Online and on-site supervisions.
5	**Prerequisites (for the module)**
	Having attended at least 75% of whole course.
6	**Type of examination**
	Thesis + Defence
	The final grade for the thesis module is weighted based on 70% for the thesis and 30% for the defence.
7	**Credits awarded**
	15
8	**Compatibility with other curricula**
	-
9	**Proportion of final grade**
	25%
10	**Module coordinator**
	Fiammetta Cosci

11	**Further information**