

FORM 3 (or Section B of Form 1 if submitted as part of a new programme)

Before completing this form, please read the document entitled *Important notes for completing proposal forms* (Please retain the small font prompts for submission to the Board of Undergraduate Studies and Board of Graduate Studies.)

UNIVERSITY OF OTAGO
Proposal for New Paper

Name of Division/ School/ Department	Division of Health Sciences / Division of Humanities
Proposer (name and position)	Associate Professor Patricia Priest HOD / Preventive and Social Medicine Associate Professor Tim Cooper Associate Dean (Academic) / Humanities
Subject Code, Number, Title (60 characters max.)	POPH 192 Population Health
Proposed year of introduction	2019

Deadlines:

- a) *For the introduction of new papers as part of a proposal for new qualifications and new major and minor subjects requiring CUAP approval for introduction in the following year to ensure their inclusion in the Guide to Enrolment:*
- *the March meetings of the Divisional Boards;*
 - *April meetings of the Board of Undergraduate Studies and the Board of Graduate Studies;*
 - *April Senate*
- b) *For the introduction of new papers for the following academic year:*
- *the May meetings of the Divisional Boards;*
 - *June meetings of the Board of Undergraduate Studies and the Board of Graduate Studies;*
 - *June Senate.*

Purpose of Proposal

(A succinct description of the purpose of the proposal including the introduction of new papers and any consequential amendments such as deletions of existing papers and amendments to schedules. Also note if you are proposing a number of related papers, please include on the one proposal form rather than filling out a separate form for each paper.)

To introduce a new 100-level paper POPH 192.

Level of study

(Please indicate the level of study as defined by the NZ Qualifications Framework. For undergraduate papers, 100-level corresponds to Level 5, 200-level corresponds to Level 6, and 300-level and 400-level correspond to Level 7. For postgraduate papers, 400-level is Level 8. Master's papers are Level 9 and Doctoral papers are Level 10.)

Level 5

Part (i)

(Please note that the information in Part (i) of this proposal is required for the University Calendar, Guide to Enrolment and online Paper Information.)

Qualifications Affected

(Major qualifications for which this paper will be offered)

Bachelor of Dental Surgery, BDS

Bachelor of Health Sciences, BHealSc

Bachelor of Medical Laboratory Science, BMLSc

Bachelor of Medicine and Bachelor of Surgery, MBChB

Bachelor of Pharmacy, BPharm

Bachelor of Physiotherapy, BPhty

Prescription

(Refer to *Guide to Enrolment* for format. Include proposed subject code, paper number, points value and anticipated EFTS, prerequisites, restrictions, programmes the paper is 'limited to', whether it will offered on-campus and/or by distance learning, and whether it is to be taught in the 1st and/or 2nd Semester, during the whole year or Summer School. The description of the content should be no longer than 30 words. Refer to the *Important Notes for Completing Forms* for guidance on title, prescription and prerequisites etc.)

POPH 192 Population Health
S2 0.15 EFTS OL, OC 18 points

Introduces students to the science of epidemiology, the study of the distribution and determinants of health and disease in human populations, and to different ways of understanding health.

R HEAL 192, PUBH 192

S Arts and Music, Science

Occurrence Details

Basic details of each occurrence of the paper, each listed separately. Include campus being taught at or from (Dunedin, Christchurch, Wellington, Invercargill, Auckland), teaching period (S1, S2 etc.), indicative start date (for each occurrence – if not standard), indicative end date (for each occurrence – if not standard), teaching method (i.e. on campus or by distance). Refer to the *Important Notes for Completing Proposal Forms* for guidance on the definition of an occurrence, teaching period and start/end dates.

Campus Taught From	Teaching Period	Indicative Start Date (if Non-Standard)	Indicative End Date (if Non-Standard)	Teaching Method
Dunedin	S2			On Campus

Consequential Amendments to Regulations and/or Schedules and/or Other Papers

(All changes to regulations, schedules and the paper rules of related papers (e.g. prerequisites, corequisites, and restrictions) as a result of introducing this paper must be detailed below. Please provide both the current and proposed forms of words for publication, with changes or additions in bold or italic type. This includes changes that will need to be made to Schedules, including Schedules A, B and C. Include Calendar page numbers. Changes to the Programme information in the *Guide to Enrolment* are not required. Consequential deletion(s) of papers must also be reported here (in which case a separate Form 5, proposal to delete a paper, does not need to be completed).)

For 2019 Calendar (page numbers are those of Calendar 2018):

Replace PUBH 192 Foundations of Epidemiology with POPH 192 Population Health in the following Schedules:

BDS Schedule First Year (p. 446)

BMLSc Schedule First Year (p. 503)

MBChB Schedule First Year (p. 535)

BPharm Schedule First Year (p. 588)

BPhty Schedule First Year (p. 606)

(The ability to substitute PUBH 192 for POPH 192 for those entering under the Two or More Years of University Study category or Graduate entry category will need to be handled by the Health Sciences Admissions Office.)

Alter “and PUBH 192” to “and (POPH 192 or PUBH 192)” in:

BHealSc Schedule Part 1: 100-level line for each of the four majors (pp. 482-483)

Alter “PUBH 192” to “POPH 192 or PUBH 192” in:
BHealSc Schedule Part 2, 100-level line for Pacific and Global Health minor and Public Health minor (p. 483)

Alter “and PUBH 192” to “and (POPH 192 or PUBH 192)” in:
the italic note for 200-level in the Maori Health minor (p. 483)

Arts and Music Schedule C (p. 270)
alter Public Health PUBH to Public Health POPH, PUBH
Science Schedule C (p. 371)
add POPH 192 to Public Health list of papers
Calendar list of Papers (p. 646) add POPH 192

Guide to Enrolment 2018:
List POPH 192 Population Health under the Public Health list of paper prescriptions.

Prescription for PUBH 211
Alter to P (HEAL 192 or **POPH 192** or PUBH 192)

NB: An editorial search for PUBH 192 elsewhere in the *Calendar* and *Guide to Enrolment* may be required.

NB: PUBH 192: Foundations of Epidemiology is a current Health Sciences First Year (HSFY) paper that is also taken by a group of approximately 400 students who are not enrolled as HSFY students. Some of these go on to study undergraduate Public Health (as a Minor up to 2017 in the Sciences Schedule, and also as a Major and a Minor in the BHealSc Schedule from 2018), which currently requires PUBH 192. The Department of Preventive and Social Medicine plans to survey these students in 2018 and 2019, to ascertain whether there is demand for a non-HSFY 100-level Public Health epidemiology paper once the new paper is in place. If so, and if a Health Sciences Sustainability assessment is favourable, PUBH 192 may be re-started in 2020. *For now its status in the Guide to Enrolment should be changed to ‘not offered’ in 2019.*

Transitional Arrangements

(Are there any transitional arrangements necessary as a result of introducing a new paper? If necessary, special arrangements must be specified for students who are part-way through programmes who would otherwise be disadvantaged, e.g. by changes to prerequisites or the redistribution of course content amongst a number of papers.)

N/A

Predicted Student Numbers

(Please give an estimate of the number of students who will enrol in the paper. Please provide a justification for the estimate.)

Based on experience in PUBH 192 around 1500 students will take this paper.

Limitation on Student Numbers

(Most new papers will not have a limitation on enrolment. However, if it is proposed that there needs to be a limit on the maximum number of students permitted to enrol in the paper due to availability of resources, please indicate using the format below (including the note) and complete and attach a Limitation of Enrolment Form for Papers, available at www.otago.ac.nz/otago077162.pdf This form will be used to assess the proposed limitation and, if

appropriate, to gain formal approval for the limitation from Council. Further information is available in the Limitation of Enrolment for Specific Papers and Programmes Procedure at www.otago.ac.nz/administration/policies/otago075807.html)

Formal Enrolment Limit (maximum number of students)

No Limit

Vulnerable Children Act Compliance

(If the paper involves students working with children then it is possible the Vulnerable Children Act will apply; if so, under the Act, safety checking of students planning to enrol in the paper will be required if this is not already covered at programme level)

- The Vulnerable Children Act does not apply to this paper
- The Vulnerable Children Act applies and compliant student safety checking processes are, or shall be put, in place (at programme and/or paper level as appropriate)

Academic Consultation with other Departments/other Divisions

(Outline the consultation that has been undertaken with interested parties including other departments and Divisions. Detail any professional accreditation requirements. Please note that if you are introducing new papers as part of a new qualification, new major subject or new endorsement and have already outlined the consultation undertaken in response to Section A of Form 1, simply refer to that part of Section A under this heading.)

This proposal was sent out for consultation to the Health Sciences professional programmes; to all HODs in the Division of Humanities and in the Division of Science; and to the Otago University Students' Association and the Otago University Medical Students' Association. Their responses are collated in the attached Consultation Record.

Part (ii)

(Please note that proposals for individual papers do not need to be approved by CUAP unless they are being proposed as part of a new programme. The information in Part (ii) of this proposal is consistent with that required by CUAP of all new papers being introduced in New Zealand universities.)

Justification and Relationship to Strategic Planning Goals

(A statement as to why the new paper is being proposed with reference to the strategic direction of the department, Division and University, relevance to the academic discipline or profession nationally and internationally. The statement should also include such matters as background, context and evidence of demand. Please note that if you are introducing new papers as part of a new qualification, new major subject or new endorsement and have already outlined the justification and relationship to strategic planning goals in response to Section A of Form 1, simply refer to that part of Section A under this heading.)

The HSFY programme is one of very significant strategic importance to the University. In 2015 the programme was reviewed. One of the reflections of the review panel was that 'there is currently little focus on whole people, which should be the focus for health professionals', and this gave rise to Recommendation 11: 'That the overall programme be modified in order to...introduce notions of the whole person'. In addition, Recommendation 14 sought to increase 'the visibility of Māori and Pacific health perspectives'. Many of the recommendations of the review have now been implemented but, due to current curriculum space and budgetary requirements, it has not been possible to create a place in the programme for a stand-alone paper that focuses on the whole person. In the process of aligning all the papers in the programme the HSFY Strategic Management Committee has decided to introduce a new paper that will incorporate a focus on whole persons along with much of what is now taught in PUBH 192: Foundations of Epidemiology.

The new paper will serve to meet two of the three purposes for the HSFY programme as set out in *Health Sciences First Year – Programme Outcomes* (8 June 2016):

(ii) Understanding people and their health within a New Zealand context. This includes measuring health and exploring the determinants of health (epidemiology), Māori health in context (political, historical, cultural), and an introduction to Pacific Health. It further encompasses learning about individuals and their responses to health, illness and health care.

(iii) Attributes associated with life-long learning in Health and Health Science. This includes the ability to build upon knowledge and concepts developed during HSFY.

It will meet this Desired Outcome: ‘Students will be expected to gain knowledge of important New Zealand societal and people contexts associated with health, spanning from populations to individuals.’ Also, it will support these parts of Section A of the Programme Structure, ‘The Scientific Basis of Health and Disease’:

Critical Thinking

The capacity to be a critical thinker, capable of weighing, evaluating and integrating new information.

Interdisciplinary Perspective

Commitment to intellectual openness and curiosity, and an awareness of the limits of current knowledge and of the links between each of the papers in HSFY.

Research

An appreciation of the importance of research, by recognising when information is needed, and the ability to be able to locate, retrieve, evaluate and use it effectively.

It will feed into Section B of the Programme Structure: ‘Understanding People and their Health within a New Zealand Context’, especially these sections:

Cultural Understanding

Knowledge and appreciation of both biculturalism and multiculturalism within the framework of the Treaty of Waitangi. Knowledge of Māori and Pacific concepts of health and health care.

Epidemiological Basis of the Health Sciences

The general patterns and determinants of diseases and health conditions in New Zealand and other countries, including basic epidemiological concepts.

Health Outcomes

Knowledge of the factors impacting on the health status of different population groups, and an understanding of the role played by individuals and society in the development of disease and the maintenance of well-being.

Finally, the new paper will align with Goal 3 in the Māori Strategic Framework: ‘to deliver excellent and innovative teaching that provides a positive learning experience and enables students to understand relevant aspects of to ao Māori and mātauranga Māori’. And it will align with Goal 5 of the Pacific Strategic Framework to

‘encourage divisions to incorporate Pacific topics and a “Pacific view” in their curricula’.

Internationalisation

(Please provide a statement as to how the new paper contributes to the internationalisation goals of the Department and Division. The statement should address the potential for international student recruitment, as well as the possibility of international mobility experiences, such as student exchange. In addition, and if relevant, the potential for collaboration and/or articulation pathways with international partner institutions should also be highlighted. Staff should consult with the Divisional Associate Dean International prior to submission of Form 3 to the Divisional Board and read section 11 of the *Important Notes for Completing Proposal Forms*.)

Already a significant number of international students enrol in the HSFY programme, most often with the hope of entering one of the Health Science professional programmes. With its particular focus on the context of Aotearoa New Zealand this paper will also be of interest to international students who are not part of that programme. As it is a 100-level paper they will be permitted to enrol in it without any previous University of Otago academic background. For domestic students it will equip them with intercultural competencies that will serve them well as they live in an increasingly diverse, globalised world. In particular, it will equip them to understand patterns in the distribution and determinants of health-related states in populations (whatever country they are part of), and it will develop an appreciation that there are a broad array of worldviews, not least cultural views around understandings of health. The paper will support the objectives of the Division of Health Sciences’ Internationalisation Plan, in particular, those seeking to ‘increase the internationalisation of the curriculum’ (Goal 4) and to ‘ensure the preparation and commitment of staff and students as good global citizens’ (Goal 6).

Learning Outcomes (Aims/Objectives) of Paper

(Learning outcomes (aims/objectives) for individual papers can be described in a range of styles and should indicate what learners are able to do on successful completion of the paper. Outcomes for the paper should also contribute to the Graduate Profile of the programme – *please identify which attributes of the Graduate Profile are achieved by the paper*. See Section 10 of the *Form 1S and Form 1 Important notes for applicants* for further information and a best practice example, or the *Teaching and Learning Plan* at <http://www.otago.ac.nz/staff/>)

The course design should ensure alignment between learning outcomes, teaching and learning methods, and assessment. When considering outcomes, be sure to consider the different domains such as knowledge, skills (generic and subject-specific) and attributes. Note that assessment tasks later in this form will need to be aligned with the outcomes for the paper.)

By the end of the paper students will be able to:

1. Understand how health and disease in Aotearoa NZ and other countries are described;
2. Understand how the major influences on the health of populations and individuals are determined;
3. Understand and apply epidemiological methods to assess the quality of health information in scientific literature and popular media; and
4. Appreciate the complexity of health and well-being.

The paper will contribute to the following graduate attributes:

- *Interdisciplinary perspective* – students will be exposed to different ways of thinking in the Sciences and Humanities;

- *Lifelong learning* – the broader approach to understanding health will give students an appreciation of the expansive nature of knowledge and perspective;
- *Critical thinking* – students will gain the tools to evaluate information, evidence, claims, and conclusions;
- *Cultural understanding* – the paper will increase the visibility of Māori and Pacific contexts of health as well as encompassing cultural viewpoints beyond NZ and the Pacific;
- *Ethics* – students will encounter the importance of ethics in the process of research and interpersonal communication; and
- *Research* – students will be introduced to the research methodology underpinning the science of epidemiology.

Paper Outline

(Please provide an outline of the structure and content of lectures, laboratories and tutorials, and a description of the assessment tasks – see also Section 12 of the *Important Notes for Completing Forms*.)

Lecture Schedule:

1 Health: An Introduction to Complexity

Module One: Narratives of Health

2 The Stories We Tell
 3 The Journeys We Make
 4 Suffering and Healing Tutorial 1
 5 Health and Identity
 6 Health and Power
 7 What Does All This Mean For Health Systems?

Module Two: Enablers of Well-being

8 Māori History and Environment
 9 Māori Systems of Co-existence
 10 Enablers in Practice Tutorial 2
 11 Pacific History and Environment
 12 Pacific Systems of Co-existence
 13 What Does All This Mean For Health Contexts?

Module Three: Disease Detectives: Measuring Health in Populations

14 Population health
 15 Patterns of disease globally and over time
 16 Evidence-based practice Tutorial 3
 17 Measuring disease occurrence
 18 Cross-sectional and epidemiological studies
 19 Surveillance

Module Four: Study Designs: Establishing Causes, Consequences and Evaluating Interventions

20 Measures of association
 21 Cohort studies
 22 Case-control studies Tutorial 4

- 23 Randomised controlled trials
- 24 Research ethics

Module Five: Questioning Assumptions and Evaluating the Evidence

- 25 Chance I
- 26 Chance II
- 27 Selection bias
- 28 Information bias
- 29 Confounding I Tutorial 5
- 30 Confounding II
- 31 Association and causation
- 32 Reading papers/critical appraisal
- 33 Systematic reviews

Module Six: Using the Evidence: Evidence-based approaches to monitoring and supporting the health of individuals and populations

- 34 Prevention Tutorial 6
- 35 Screening
- 36 Outbreaks
- 37 Epidemiology in practice

Drawing it all together/holistic understanding of health

- 38 Bringing It All Together: The Complexities of Health

Tutorials:

Each tutorial will be three hours long and will reinforce and elaborate on the content of the related module. An element of formative assessment will give students an opportunity to practise those skills and knowledge that will be assessed in the tests and exam. Tutorials 1 and 2 will prepare students for Test 1; tutorials 3 and 4 for Test 2; and tutorials 5 and 6 for that component of the exam that will assess the final third of the paper. The precise nature and content of the tutorials will be decided by those who will actually teach into the paper. That decision has not yet been taken but we expect to convene that teaching team sometime in the next few months so they can begin to put in place the detail of the new paper.

Assessment Tasks:

Test 1: 20%, 1 hour

A combination of multi-choice questions and short-answer questions assessing Modules 1 and 2.

Test 2: 15%, 45 minutes

Multi-choice questions assessing Modules 3 and 4.

Exam: 65%, 3 hours

A combination of multi-choice questions assessing Modules 5 and 6, short-answer questions assessing Modules 3 to 6, and a critical appraisal of a published paper that assesses both the Epidemiology and Humanities aspects of the whole paper.

Workload Expectations

(For undergraduate study 1 point = 10 hours (except in many Health Sciences papers), e.g. the expected student workload is 180 hours for a 18-point paper, 240 hours for an 24-point paper, and 360 hours for a 36-point paper. For postgraduate students 1 point = 12 hours (except in Health Sciences), e.g. expected student workload is 240 hours for a 20-point paper.

Every paper has a point value that indicates its contribution to the qualification enrolled for (or to any other qualification to which that paper can contribute). These values have been derived on the basis of an equivalent full-time year of enrolment being 120 points.

It is recognised that Divisions may have guidelines for workload (total hours per point) for the undergraduate papers in their Division, including the ratio of contact to non-contact hours. If this is the case please state any differences to the University “norm”.

The required workload for a paper should include provision for lectures (50-minute lectures factored as 1 hour), seminars, tutorials, laboratories, use of computer resource rooms, field work, examinations and tests, preparation and private study. Allocations for each component should be specified in hours and the basis of the allocation given in brackets (suggestions are provided below). A paper that does not include a final examination will normally demand more work of a student during the 13 teaching weeks of a semester.)

These workload expectations should be part of the information provided to students at the beginning of the paper.)

(i) Contact hours

	<i>hours</i>	<i>derivation</i>
Lectures	38	(3 per week for 12 weeks; 2 in UMAT week)
Tutorials	18	(6 x 3 hours)
<i>Sub-total</i>	<i>56</i>	

(ii) Non-contact hours

	<i>hours</i>	<i>derivation</i>
Class preparation	50	(1 hour per lecture; 2 hours per tutorial)
Test preparation	27	(15 hours for Test 1; 12 hours for Test 2)
Tests	2	(2 x 1 hour)
Final Exam preparation	42	
Final exam	3	
<i>Sub-total</i>	<i>124</i>	

(iii) Total number of hours: 180

(iv) Evidence of consultation with student body in deriving the above workload expectations.

One of the main aims of the Strategic Management Committee has been to relieve student stress by reducing workload across all papers in the programme so as to bring them into line with expectations for 100-level papers generally across the University. In 2017 the Committee consulted with students who had recently undertaken HSFY and with representatives of Otago University Students’ Association and Otago University Medical Students’ Association as part of that process and we are consulting with them on this particular proposal. The workload in the new paper fits that revised pattern and is comparable with the workload in PUBH 192, which has traditionally had a more measured workload that fits the new requirements.

(v) Impact on semester workloads in relation to existing papers that could be expected to be taken in combination with the paper being introduced.

This paper is designed to fit within the balanced structure of the HSFY programme so it will have a neutral impact on semester workloads.

Terms Requirements

(Some departments require that a student gain Terms before they sit final examinations i.e., fulfil certain specified conditions (e.g. attending classes; completing oral, written and practical work to a satisfactory level). If students are required to gain Terms before being permitted to sit the examination, please give details of these requirements. If there are no Terms Requirements please state this.)

There are no terms requirements.

Assessment Procedures

(Please provide details of the assessment procedures for the new paper. This table should show clear alignment between the main learning outcomes and how they will be taught and assessed.)

Key Learning Outcomes	Teaching and Learning Method	Summative Assessment (Internal or Final Exam)
Understand how health and disease in Aotearoa NZ and other countries are described.	Lectures, tutorials	Test 1, Test 2, exam
Understand how the major influences on the health of populations and individuals are determined.	Lectures, tutorials	Test 2, exam
Understand and apply epidemiological methods to assess the quality of health information in scientific literature and mass media.	Lectures, Tutorials	Test 2, exam
Appreciate the complexity of health and well-being.	Lectures, tutorials	Test 1, exam

(Add more rows if required)

i) Summative (graded) Internal Assessment

Type of Task	Percentage Contribution to Final Grade (figure should align with non-contact hours assigned to these tasks)	Non-contact hours
Test 1	20%	15
Test 2	15%	12

(Add more rows if required.)

ii) Formative (non-graded) Internal Assessment (*For more information, see section 8 of the Important Notes for completing Form 3 or Section B of Form 1*)

Type of Task	Type of Feedback
Each tutorial will contain elements of formative assessment that will test students' knowledge and prepare them for the summative assessment.	The precise nature of that formative assessment is to be confirmed by those who will teach into the paper.

(Add more rows if required.)

iii) Final Examination

Duration	Percentage Contribution to Final Grade
----------	--

3 hours

65%

(If a final examination is worth 50% or less of the final grade it would normally have a 2 hour examination. If the final examination is worth more than 50% of the final grade the examination is 3 hours. If not please provide a brief justification here.)

(If a minimum grade has to be achieved in the final examination to pass the paper as a whole, please state the minimum and provide a brief justification for the requirement here.)

(Will plussage apply to the paper? If so, please supply a justification here.)

Internet-Based Learning

(Please indicate whether teaching and learning in the paper is available in part or as a whole via the Internet by stating which one of the four classifications it falls under)

No Access

is where no part of the paper or course is accessible online.

Web – Supported

is where a paper or course expects students to access limited online materials and resources. Access is optional, as online participation is likely to be a minor component of study.

Web – Enhanced

is where a paper or course expects students to access online materials and resources. Access is expected, as online participation is likely to make a major contribution to study.

Web – Based

is where a paper or course requires students to access the accompanying online materials and resources. Access is required, as online participation is required.

Online Learning Management System used (Choose one)

Blackboard**Moodle****OceanBrowser****Other****None**

(If you are using Moodle, OceanBrowser or Other, how will this be supported?)

Proposed Timetable

(Timetable Services must be contacted in the early planning of the introduction of the paper. They can provide advice and information and they will need to know your intentions. Timetable allocations are dependent on the availability of suitable teaching space. Also please attach written confirmation from the Timetable Services that requested facilities are available (contact Timetable Services at timetables@otago.ac.nz). Please note that timetable consultation is not required for research only papers or where a paper is taught within departmental facilities to a circumscribed group of students taking no other subjects e.g. 400 level papers.)

When consulting with the Timetable Services, please take into account the following, **and supply the details below:**

- (i) Lectures (for each stream)
- (ii) Laboratories (for each stream)
- (iii) Field Trips
- (iv) Tutorials and any other teaching activity
- (v) Identification of possible timetable clashes with other papers that could be expected to be taken in combination with the paper being introduced.

Statement is attached

Library Resources (Please identify the initial library purchases and the ongoing annual requirements. You should include all monographs, serials and electronic databases. Written confirmation from your library contact is required and should be attached:

Commerce, Humanities, Sciences and Health Sciences (Dunedin campus)

Marilyn Fordyce, Information Resources Manager (extn 8923, marilyn.fordyce@otago.ac.nz)

Health Sciences Christchurch

Marg Walker, Health Sciences Librarian, Canterbury Medical Library (extn 364 0505, marg.walker@otago.ac.nz)

Health Sciences Wellington

Kareen Carter, Medical Librarian, Wellington Medical Library (1 04 385 5348, email kareen.carter@otago.ac.nz)



Library Impact Statement attached

Part (iii)

Departmental/Divisional Resources:

Please either provide a detailed “Business Plan” (or equivalent) or answer the following sections:

Confirmation of Availability of Resources

(Please note that resource information regarding the paper being introduced should be provided in this Part and will be considered by each relevant Division. If the academic and/or financial responsibility for the new paper is shared by more than one Division, or the paper resides academically in one Division but is the financial responsibility of another, then Part (iii) will need to be approved by each relevant Division. You should contact the relevant Divisional Office(s) in case there are any additional requirements regarding information on resources for the new paper. By approving this proposal, Divisions are not only approving the academic soundness of the new paper, they are also confirming and approving the capacity for the sustained delivery of the new paper taking into account the consideration of relevant resources including library resources, teaching facilities, equipment and staff (human resources). Consideration should be given to evidence of potential demand for the new paper and the strategic relevance of the paper for the Department. Have all new resources that are required for the sustainable, long-term delivery of the new paper including academic and general staff (new staff or time of existing staff), equipment, space, library and IT been considered? Will the delivery of the new paper be undertaken by more than a single academic staff member? Will the new paper impact upon the Department’s workload in a way that will enhance its research outputs and aspirations? Carefully consider issues like these in the sections below.)

Laboratories/ IT/Other physical resources

(Attach details of any additional costs for laboratory, IT or other resources related to teaching. If new staff are required, will there be a need for additional office or research space (see also Staffing Workload)?)

This paper is formed around tutorials rather than labs so there are no new lab costs but tutorial hours will increase from 10 in PUBH 192 (5 x 2 hours) to 18 in this paper (6 x 3 hours) so there will be additional room costs.

Equipment

(Attach details of any major new equipment required for the paper including computers.)

No new equipment will be required.

Staffing Workload

(Attach details of the impact introduction of this paper will have on the workload of the Department. You should address the following issues: Will any new staff be required? If so what percentage of their time will this paper require? Will any new tutors be required? If no new staff are required, how will the workload of the Department be managed in order to meet the increased responsibilities of the paper, i.e., is the teaching of the new paper in place of or in addition to present commitments? Does the new paper require administrative or technical support in addition to the responsibilities of the academic staff? What impact, including benefits or synergies, will the introduction of this paper have on research in the Department?)

One-third of the paper will be taught out of the Division of Humanities. It has not yet been decided who will teach into the paper but this will be in addition to their teaching workload (or it will require a compensating reduction in their existing teaching workload). Two-thirds of the paper will be taught out of the Department of Preventive and Social Medicine in the Division of Health Sciences. There will be no change in that workload for 2019 because of the extra work in setting up and running the new paper. In 2020 there may be a reduction in lecturer workload if PUBH 192 is not offered again, but the tutor workload will be slightly greater in the past, with 12 rather than 10 tutorial hours associated with the epidemiology content, so little overall change in workload. There may be some adjustment if PUBH 192 is offered again, depending on the way it is taught.

Tēnā koe Tim,

Thank you for the opportunity to proposed new paper POPH192 Population Health, to be offered from semester 2 2019.

This paper is will effectively replace the existing paper PUBH192. In terms of timetabling there is one major structural difference with the current two hour tutorials being extended to three hours.

Currently students are spilt into 52 tutorial streams, these are held in fortnightly cycles using 26 different slots in the timetable. To find space for 26 three hour slots will require changes to the current times and may require a similar structure to practical times used by the existing Health Science First Year papers. This would mean classes at 9am, 2pm and 6pm, with two streams being taught at the same time.

The days and times are to be confirmed and will be decided in conjunction with the other Health Science First Year papers. We are confident that suitable times and venues will be found and plan to work closely with Health Sciences First Year Programme to select appropriate times.

Therefore are we happy to add Timetable Services endorsement to this proposal.

Thanks,
Mark



Mark Glover

Kaituitui/Co-ordinator
Kā Ratoka Wātaka /Timetable Services

Te Pokapū Pāroko Tomakaka/
Admissions and Enrolment
Te Whare Wānanga o Ōtago /University of Otago
Pouaka Poutāpeta 56 /PO Box 56
Ōtepoti /Dunedin 9054,
Aotearoa /New Zealand

Waea /Tel + 64 3 479 8252
īmēra /Email mark.glover@otago.ac.nz

Te Whare Wānanga o Ōtago on Facebook
Te Whare Wānanga o Ōtago on Twitter



University of Otago Library

Library Impact Statement

For new or changing courses and programmes

Name of Division/School/Department: Divisions of Health Sciences & Humanities/Department of Preventive & Social Medicine

Title of New Paper/Programme: POPH 192: Population Health. Core paper for HSFY, replacing existing paper PUBH 192.

Course code: POPH 192

Distance Course Code: (if offered): N/A

Year & Semester of Introduction: S2 2019

Predicted enrolment: 1500

Staff members responsible for drafting: Associate Professors Trish Priest (HoD Preventive & Social Medicine) and Tim Cooper (Associate Dean (Academic)/Humanities)

Monographs (print & electronic): *(What are the needs? Does the existing collection support the introduction of the course/programme? What (if any) additional resources are required?)*

POPH 192 is intended to replace an existing paper (PUBH 192) in the HSFY programme in 2019. Depending upon survey results in 2019, PUBH 192 may be reintroduced in 2020, though not as an HSFY paper).

The Library has a strong existing monographic print and electronic collection supporting epidemiology and population health; print volumes are mainly kept at the Health Sciences Library. Copies of essential print texts for PUBH 192 are kept at the Science Library.

Some new monographs may be required as this is a multi-Division paper: the need for any extra resources should be met from within the existing library budget. Library staff will work with academic staff to ensure that required material is available at whichever physical Library location is appropriate (most likely the Science Library).

Serials (print and electronic) resources: *(What are the needs? Does the existing collection support the introduction of the course/programme? What (if any) additional resources are required?)*.

The Library has a strong online collection of journals. As this paper replaces an existing paper, the need for new journal subscriptions is not anticipated.

Summary: *(of impact on Library Services)*

POPH 192 replaces an existing paper within the HSFY suite of seven core papers. Although the University Library's collection development priorities are constantly evolving to support the University's undergraduate courses, **it is not anticipated that the introduction of this paper will have a significant impact.** Readings will be

provided via eReserve and Course Reserve. Some new monographs may be required although no new journals should be required.

The Library has existing subscriptions to key health sciences databases (e.g. *Medline*, *Embase*) and general databases (e.g. *Web of Science*, *Scopus*); there is a database (*Global Health*) that might be a useful addition to existing database provision, should funds permit.

Overall, the Library is well resourced with print and electronic resources to support POPH 192, as the Library already has resources to support the current PUBH 192 paper. It should not prove onerous to extend provision, as well as liaison support, to the new paper.

Form completed by: Richard German
Position: Divisional Librarian (Health Sciences & Sciences)
Date: March 2018

Division of Health Sciences –Academic Proposal Consultation Record

All those who provided feedback were positive and supportive of the paper. In most of the responses below we have included only the issues they raised and our responses...

People/Department/ Committee	Date of Consultation	Issues Raised	Actions or changes made
Professor Stuart Young, HOD Music, Theatre and Performing Arts	28/2/18	The proposal looks very good. The paper seems to cover a huge amount. The time devoted to tutorials promises to ensure that students engage meaningfully with the material.	N/A
Dr Shef Rogers, HOD English and Linguistics	28/2/18	<p>Thank you for the opportunity to comment on POPH 192. Overall it looks like an engaging paper, though I remain disappointed that it is in S2 and has to design its curriculum around the intrusion of UMAT. 2 comments on behalf of the Dept of English and Linguistics:</p> <p>1) Sue Wootton is currently researching her PhD on the therapeutic roles of literature. Her contribution to module 1 of this paper might be very interesting. We also obviously have expertise in narrative, and would be happy to work with other interested in medical history to present relevant material.</p> <p>2) I do not regard a paper that has 38 lectures and 3-hr tutorials as typical of 100-level papers. While the total hours add up to 180, I imagine the experience of taking POPH 192 would feel very different from taking a 100-level paper in our Division.</p>	<p>We cannot change the placement in semester 2 nor the effect of UMAT.</p> <p>We note Sue's expertise, and that of the Department. Decisions on the teaching team will be made in due course.</p> <p>Given its place in HSFY the structure has to be consonant with the overall programme even if it involves more contact hours than a typical Humanities paper.</p>
Professor Mark Henaghan Dean, Faculty of Law	28/2/18	The paper looks good. Is there a possibility of a lecture or two on the law and health? We have a Public Health Act which should be part of this course.	Given the constraints on the paper there is no way of fitting in a lecture on law and health.

<p>Professor John Sullivan School of Physiotherapy</p>	<p>28/2/18</p>	<p>Firstly I do appreciate the constraints you and colleagues are working under to bring this together. I think it fulfils the mandate very well and should stimulate student engagement and learning.</p> <p>I have made some minor comments and technical points on the attached form for your consideration.</p> <p>There are a number of points I would however like to raise regarding content.</p> <ol style="list-style-type: none"> 1. There does not appear to be any historical context to the NZ health care system. I think this is critical before students study Māori and Pacific systems. 2. While the concept of wellbeing is outlined I think this is an important opportunity for students to begin to understand their own personal lifestyles and wellbeing. I am not sure if this is included in the narratives (or elsewhere). If it is not – then it’s an opportunity lost. 3. The content/programming of the Tutorials will be a challenge for the teaching team. It is critical that these really engage students and encourage participation and teamwork. 	<p>We have amended the form in light of those comments.</p> <p>There will be some historical context and NZ’s health system(s) will be part of the focus in lecture 7.</p> <p>This is important to us and it will feature in the lectures. It is true of much of the material (especially Module One) that students will apply these insights to their own experience and well-being.</p> <p>We agree, and we will do what we can to achieve this.</p>
<p>Professor Catherine Day Mr Tony Zaharic Dr Sugurd Wilbanks</p> <p>Department of Biochemistry</p>	<p>7/3/18</p>	<p>There seems to be a lack of emphasis on individuals in the title and prescription.</p> <p>Learning outcome 3 could read ‘scientific and non-scientific domains’; outcome 4 references biology whereas the paper</p>	<p>We are very aware of the importance of the individual, which will certainly be brought out in the actual teaching of the paper.</p> <p>We have changed ‘mass media’ to ‘popular media’; we do not think that learning outcome 4 references only</p>

		<p>focuses on the many diverse factors that determine/contribute to health and well-being.</p> <p>It would be advantageous for concepts from Module 1 and 2 to be embedded in Modules 3-6.</p> <p>An alternative title to Module 2 might better reflect the content.</p> <p>There could be 5 tutorials instead of 6, for consistency with the HSFY programme, and content should become locked in for the medium term.</p> <p>Test 1 is, unusually, larger in proportion than Test 2; and there could be only one test in order to reduce stress on students and distraction from other papers at the time of the test.</p> <p>Close scrutiny should be given to running PUBH 192 in parallel with POPH 192.</p>	<p>biology and we have in mind those broader factors.</p> <p>We will ensure there is a flow of themes and ideas through all the modules.</p> <p>We like the title as it stands as it implies positive agency.</p> <p>The teaching team will consider this suggestion when it is formed; we agree that content should remain consistent once established.</p> <p>This reflects the different types of knowledge being assessed, which is why we believe 2 tests are necessary.</p> <p>This aspect of the proposal will be well thought through.</p>
Professor Mike Colombo HOD, Department of Psychology	7/3/18	I have heard back from two colleagues about your “POPH 192 Population Health” paper and Psychology has no concerns. We wish you the best of luck with the implementation of your new paper.	N/A
New Zealand Dental Student Association (via OUSA)	12/3/18	Aotearoa New Zealand’s unique data from a national oral health survey (2009) would be a perfect fit in the new paper, bringing in some dental insight into a prerequisite dental	The new paper is not intended to reflect content from all the professional programmes but we will

		course with very little material otherwise specific to this subject.	pass this suggestion on to the teaching team.
Otago University Medical Students' Association (via OUSA)	12/3/18	<p>Would this paper address social accountability? Or would it make the general competitive pathway have more resentment towards special subcategory entry? (e.g. Maori, Pacifica and Rural).</p> <p>More content is being added into PUBH 192; would this put too much of a burden on students?</p>	<p>We hope the paper will only increase understanding and empathy, not resentment, towards these population groups.</p> <p>Content has also been removed from PUBH 192 in order to bring in content from the Humanities, thus making the workload manageable for students and consistent with the HSFY programme.</p>
New Zealand Association of Pharmacy Students Otago (via OUSA)	12/3/18	<p>Under the 'Knowledge of Maori and Pacific concepts of health and health care' examples of health and health care could be given – such as Rongoā.</p> <p>It would be good to have a multi-disciplinary approach to addressing the health problems of Aotearoa New Zealand – exploring how 'Doctors, Pharmacists, Physiotherapists, Medical Laboratory Scientists, and Dentists' can help solve them.</p> <p>There should some form of SAQ before the test containing SAQ so students know what is expected.</p> <p>Is it the case that no content from Modules 1 and 2 will be assessed in the exam?</p>	<p>We will pass this on to the teaching team.</p> <p>We will pass this on to the teaching team.</p> <p>We agree that students should not be taken by surprise in the exam – we will ensure they are prepared.</p> <p>10% of the exam will assess Modules 1 and 2.</p>

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