

Project E-HEALth Literacy

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Training Curriculum

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Leading organisation(s)	IASIS
Author(s)	IASIS, SIMBIOZA, RIAP, SDC & YNTERNET.ORG
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1. FCVFT FRAMFWORK

1.1 Terminology

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The European Qualification Framework is a translation tool that helps understand and compare qualifications awarded in different countries and by different education and training systems, structured in eight levels

EQF Level

For instance, Level 5 designed for up-skill individuals already in employment that want to acquire advanced technical, transversal and/or management skills.

Learning Objectives

An exhortation to put the learning into practice

Hours of Learning

Number of hours needed to apply this Curriculum, distributed in contact, handson practice hours, self-study hours and assessment hours.

ECVET points

Number of credits that can be allocated after completion of this Curriculum. 25 hours of training corresponds to 1 ECVET credit.

Learning Outcomes

Learning outcomes are statements that describe significant and essential learning to be achieved, and can reliably demonstrate at the end of the training. In the EQF learnings outcome are described in terms of Knowledge, Skills, Responsibility and Autonomy

Knowledge

In the context of EQF, knowledge is described as theoretical and/or factual.

Skills

In the context of EQF, skills are described as cognitive (involving the use of logical, intuitive and creative thinking) and practical (involving manual dexterity and the use of methods, materials, tools and instruments).

Responsibility and Autonomy

In the context of the EQF responsibility and autonomy is described as the ability to apply knowledge and skills autonomously and with responsibility





The Training Curriculum

1.2.1 Introduction

Within the HEAL Project, the Curriculum sets the framework for planning the learning outcomes, as an important part of the curriculum. The initial aim of the Curriculum is to guide trainers, professionals on the teaching process and inform the learners about what they are expected to know, understand and be able to do after a given learning activity. The design of the Training Curriculum is based on the EQF framework addressed to coaches/counsellors and VET for coaching and support. The aim of the present document is to inform the reader about the ECVET Framework and its application of the current project. The document is structured into the following sections:

- Overview of the EQF and NQF: Regarding the range and level of learning expected from the learners, partners (based on the outcomes from the state-of-the-art report) besides the identification of the learning units for the curriculum will also have to assign an EQF level to each of the units. The settlement of the EQF level will allow partners to establish the correspondence between the EQF level and their NQF. In this section, we provide the updated information of the EQF and NQF of each partner's country to serve as a reference guide.
- Learning Outcomes in the level of Performance criteria, Knowledge, Skills and Responsibility.





1.2.2 Overview of the EQF (European Qualification Framework)

The European Qualifications Framework (EQF), implemented in 2008, is a common European reference system which links different countries' National Qualifications Systems (NQF) and frameworks together. In practice, it works as a translation mechanism making qualifications more readable between countries. As an instrument for the promotion of lifelong learning, the EQF encompasses general and adult education vocational education and training as well as higher education. It is structured in 8 qualifications where each level is defined by a set of descriptors indicating the learning outcomes relevant to qualifications at that level in any system of qualifications. The 8 levels cover the entire span of qualifications from those achieved at the end of compulsory education to those awarded at the highest level of academic and professional or vocational education and training and are described in terms of level descriptors for the expected knowledge, skills and competences (responsibility and autonomy) for each level of qualification. The learning outcomes descriptors, for all levels of qualification, are defined in terms of knowledge, skills, responsibility and autonomy.

• Source: https://ec.europa.eu/ploteus/content/descriptors-page

The Recommendation of the European Parliament and the Council on the establishment of the EQF (23 April 2008) explicitly stated that the Member States shall use "(...) an approach based on learning outcomes to define and describe qualifications" and to promote the validation of informal and non-formal learning. The new recommendation from the European Parliament and the Council on EQF for lifelong learning (17 May 2017), reinforces that objective encouraging "the use of EQF by social partners, public employment services, education providers, quality assurance bodies and public authorities to support the comparison of qualifications and transparency of the learning outcomes.".





The core of the **EQF concerns eight reference levels** describing what a learner knows, understands and is able to do – 'learning outcomes'. Levels of national qualifications will be placed at one of the central reference levels, ranging from basic (Level 1) to advanced (Level 8). This will enable a much easier comparison between national qualifications and should also mean that people do not have to repeat their learning if they move to another country.

• For the 8 levels of EQF system you can check in this link:

https://ec.europa.eu/ploteus/content/descriptors-page

The Training Curriculum of the HEAL Project is based on level 5:

Level	Knowledge	Skills	Responsibility
Level 5	Comprehensive, specialized, factual and theoretical knowledge within a field of work or study and an awareness of the boundaries of that knowledge.	A comprehensive range of cognitive and practical skills required to develop creative solutions to abstract problems.	Exercise management and supervision in contexts of work or study activities where there is unpredictable change; review and develop performance of self and others.





1.2.3 Learning Outcomes

Learning outcomes are defined as statements of what a learner knows, understands and is able to do on completion of a learning process, which is defined in terms of **knowledge**, **skills**, **responsibility and autonomy**. Each country has its own understanding of knowledge, skills, and responsibility and autonomy, therefore the definition of the learning outcomes, for the HEAL Curriculum, will be developed according to the EQF descriptors, having in mind that the national specificities shall also be taken into consideration.

Within the context of the project development, the learning units will be defined based on the results of the needs analysis results. The structure of the learning outcomes matrix will include the following elements:

Knowledge - What and how deep is the knowledge required?

Skills – What will the trainee be able to do? The ability to apply knowledge and use the acquired resources to complete tasks and solve problems. It may be cognitive (use of logical, intuitive or creative thinking) or practical (implying manual skill and the use of methods, materials, tools and instruments);

Responsibility and autonomy – The ability to develop tasks and solve problems of a higher or lower degree of complexity and different degrees of autonomy and responsibility





2. MODULES

The training Curriculum of the HEAL project consist of the following modules:

Modules	Title
1	Skills and competences to facilitate the usage of e-health
2	Data Privacy and Digital Health Records
3	Searching and Selecting Information
4	Interaction and Usage of Services
5	Communication and Connection with a health professional



3. TRAINING CURRICULUM

Module Number and	Module 1: Skills and competences to facilitate the usage of e-health		
Title			
Learning Outcomes	The learner will be able to design and include a variety of learning methods to be implemented before, during and after the training, and to assess written curriculum resources, and understands how increased awareness, change attitudes, challenge misconceptions and facilitate learning and mastering of knowledge and skills, using appropriate teaching methods and strategies.		
KNOWLEDGE	SKILLS	RESPONSIBILITY AND AUTONOMY	Learning Hours Distribution
			-
K1	S1	R1	Contact Hours and
Have knowledge of the	Respond to group	Monitor work process	hands-on practice: 3
basic principles of human	dynamics, to individual	and revise and compare	
cognition and learning and	learning preferences and to	the transfer of knowledge	Self-study Hours: 2
apply these principles to	the e-health skills gap and	before, during and after	Sen-study modis. 2
train adults.	can design a variety of	the learning event.	
	teaching and transfer		Assessment Hours: 1
	strategies that address		
К2	different learning styles.		
Recognize the importance			
of a comfortable learning environment.	S2		
	Organize, create and orient		
	trainees to a comfortable		
К3	learning environment		
Have knowledge of adult	(physical, on-line, one-on-		
education pedagogies in e-	one).		
health learning.			
	S3		
	33		
	Identify the structural		
	elements of the training		
	curriculum and incorporate		
	the most appropriate		
	training methods to achieve the learning		
	objectives for the		
	enhancement of e-health		
	digital competences of		
	learners.		





Module Number and Title Learning Outcomes	Module 2: Data privacy and digital health records After completing this module, the learner will be able to define personal and personal health data within their related context. S/he will have the possibility to describe the different "moments" (institutions, platforms, apps) of data collection, as well as the level of data privacy and the rules of data sharing linked to them and their beneficiaries.		
KNOWLEDGE	SKILLS	RESPONSIBILITY AND AUTONOMY	Learning Hours Distribution
K1	S1	R1	Contact Hours and hands-on practice: 3
Describe data protection at individual and collective level (legal and societal conditions).	Assist end users to recognize health data sets taking into consideration their governance and reuse mechanisms	Promote the idea of effectively managing personal data stored in private or public spaces.	Self-study Hours: 2
К2		R2	Assessment Hours: 1
Define personal and public health data, as well as the context that they are collected (data privacy rules).	Increase appropriation of personal health data by end users and enhance sharing and use practices, while being able to document this to others.	Share with others a coherent idea of how to share personal health data in the future.	
К3			
Have knowledge of a health data path: access, understand, evaluate, apply data in a health-related context (institutions, platforms, apps).			



Module Number and	Module 3: Searching and selecting information		
Title			
Learning Outcomes	After completing this module, the learners will be able to apply the skills and		
	knowledge needed for eff	ective search and selecti	on of health-related
	information online as well as		
	information.	zani comiacnec in scaroning	and selecting election
	mormation.		
KNOWLEDGE	SKILLS	RESPONSIBILITY AND	Learning Hours
		AUTONOMY	Distribution
		ACTONOMI	Distribution
K1	S1	R1	Contact Hours and
			hands-on practice: 3
Develop understanding of	Assist in identifying the	Motivate end users to use	
ways of obtaining health	ways how to search	the Internet more widely	
information online.	information about e-	and effectively as a tool	
	health.	for e-health knowledge	Self-study Hours: 2
		acquisition.	
К2		acquisition	
NZ	62		Assessment Hours: 1
Have knowledge of how to	S2		
evaluate the quality of	Show end users ways to		
health information.	distinguish		
Treater information.	safe/trustworthy websites		
	· ·		
	and conduct advanced		
К3	searches on health-related		
Have knowledge of how	information.		
new technologies support			
in searching and selection	S3		
health information.			
	Show the ways how		
	technologies (mobile apps,		
	social media) support		
	search and selecting of		
	health information online.		





Module Number and	Module 4: Interaction with and usage of services		
Title			
Learning Outcomes	After completing this module, the learners will be able to apply the skills and		
	knowledge needed for eff	ective search and selecti	on of health-related
	information online as well as	built confidence in searching	and selecting credible
	information.		
KNOWLEDGE	SKILLS	RESPONSIBILITY AND	Learning Hours
KITOWEEDGE	SITIES	AUTONOMY	Distribution
		ASTONOMI	Distribution
K1	S1	R1	Contact Hours and
Classify different types of	Build confidence in the e-	Demonstrate in a	hands-on practice: 3
e-health services	health services	concrete manner the	
(overview) and know		added value and	
where to find information		applicability of e-health	Self-study Hours: 2
	S2	services (well-being,	
	Commons and calcat a	lifestyle) for the life of the	A
К2	Compare and select e- health services to work	beneficiaries	Assessment Hours: 1
Identify added value and	with and present to low		
risks of the services for	skilled adults		
certain target groups	Silinea addies	R2	
		Implement experiential	
	S3	activities with well-being	
К3		apps or other e-health	
Danesilla surveta access	Show ways to apply e-	services to motivate the	
Describe ways to access e- health services from the	health services for own benefit	beneficiaries.	
device and app store to the	bellefit		
registration			
. 50.527 00.017			
К4			
The softest of the first			
Have the knowledge of several services and how to			
use them			
use tilelli			





Module Number and Title Learning Outcomes	Module 5: Communication and connection with a health professional After completing this module, the learner will be able to recognize the value of telecommunication technologies and services used to enhance mental and physical health at a distance, support the utilization of those, understand the digital needs of low digital skills adults and assist them to integrate telemedicine practices in their everyday life.		
KNOWLEDGE	SKILLS	RESPONSIBILITY AND AUTONOMY	Learning Hours Distribution
K1 Describe the concepts of telemedicine and telehealth	Respond to the digital skills gap of adults by developing a raising awareness training that increases digital skills in the field of	R1 Support the use of telemedicine and its technologies more widely as a suitable and effective method of enhancing	Contact Hours and hands-on practice: 3 Self-study Hours: 2
K2 Explain the implications of low digital skills of adults on the distance communication and connection with a health professional	telemedicine S2 Assist low digital skills adults to make use of digital tools and telecommunication technologies that foster	health of adults by passing the knowledge to peers (peer teaching)	Assessment Hours: 1
K3 Have knowledge of telecommunication infrastructures, methodologies and tools that facilitate telemedicine practice among low digital skills adults	the receiving of distance health care		

