

The Older Individual

Part 1: *November - December*

Part 2: *January – February*

MODULE BOOK

Master Vitality and Ageing

Course year 2023-2024

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Preface

How can you define vitality? What are the perspectives of older people on vitality and ageing? How do older people deal with the problems they encounter? How can you enhance vitality? During this course, these type of questions will be addressed. Students gain understanding about perspectives of older people on health, vitality and ageing.

In the first part of the course, students will learn about concepts of vitality and ageing, frailty, common diseases and disabilities, interventions and personalised care. During interactive lectures, current knowledge of the physical, psychological, functional and social challenges elderly people are facing will be presented and the students will be engaged in interactive discussions. The student will delve into the perspective of the older people about what it means to become older. The first part will be assessed with an essay-exam.

The second part will be 'hands on': students will focus on analysing challenges that older people face and they will focus on developing solutions. At the end of the course, each student has designed an innovation (prototype) that contributes to the vitality of older people. Students will present innovations in a creative video pitch (teamwork) and they will individually substantiate the evidence for this innovation in a written report.

The Older Individual course is 10 ECTS. Education about Communication in Science, Research and Evidence and Academic Development is integrated in this course.

Introduction and general information

Structure and organization of the course

The course is divided in two parts:

Part 1: Knowledge and understanding

Part 2: Living Lab

Part 1 Knowledge and understanding

We will focus on concepts of health, vitality and ageing and various aspects regarding vitality and ageing, like successful ageing and cultural differences. Thereafter, we will focus on common complaints and personalized care. We will also look at challenges to daily activities, such as mobility that often occur with increasing age. Moreover, many older individuals suffer from several concurrent chronic conditions (multimorbidity or comorbidity) and experience potential problems with polypharmacy. To deal with different problems at the same time requires a different approach than simply following up on disease focussed guidelines. Lecturers will address non-pharmacological interventions, psychiatric functioning and health behaviour. A mini-symposium by the students themselves is organised in which students will teach each other about a disease or functional limitation and its impact on daily life. At the end of part 1 the application of knowledge and understanding will be assessed in a written essay exam.

Part 2 Living Lab

At this point in the course students already have acquired extensive knowledge and understanding about many challenges to vitality and ageing. In this part 2, Living Lab, we take a practical approach by providing students with the building blocks of designing an intervention or innovation to address a specific challenge. Please be aware that during the Living lab education is really hands-on and with a lot of team-work, and therefore it is a pretty intense period. Students follow the steps of the design thinking process in a fast pace together with your team members. During this part, Communication in Science is highly integrated to perform the assignments of the Living lab.

Overall objectives The Older Individual

At the end of the course the student:

- is able to describe common diseases and impairments in older people
- is able to explain how somatic, psychological, functional and social mechanisms are related to vitality
- is able to apply and review the value of the concepts such as risk and resilience factors, vitality in older age and multidisciplinary interventions for older persons as a response to challenges to health and well-being
- is able to analyse problems in light of multimorbidity
- is able to analyse and identify the underlying mechanisms of challenges to vitality in older age
- is able to explain the process of developing, implementing and evaluating innovations or interventions for ageing individuals.
- is able to apply the knowledge regarding intervention development to find a solution for a specific challenge that addresses the influencing factors of the challenge.
- is able to critically establish the value and applicability of scientific results and studies for the older population
- is able to take the perspectives of older people into account in considering strengths and limitations of an intervention or innovation
- is able to identify barriers and facilitators for implementing an intervention or innovation

Overview important dates

Your grade will be based on successful participation in the mini symposium, an essay exam, an individual innovation paper, and a group video. The table below provides an overview of important dates, including the mandatory assignments. Note that for both OI Part 1 and 2, also weekly and sometimes daily deadlines apply as preparation for the working groups or lectures. These are not mentioned below since these are regarded as part of the innovation process you will go through. Please refer to the day-to-day descriptions for details and instructions for preparation.

Assignments/assessments	Module	Dates	Part of assessment plan?
Select chronic disease and enroll via Brightspace/OI	OI	28 November	
Submit draft research question for internship for early birds and internships abroad (via masterva@lumc.nl)	S&C	1 December	
Watch 100 UP movie together with older people	OI	2 December	
Working group perspectives of informal care giving	OI	8 December	
Hand-in presentation Mini-Symposium assignment (group assignment)	OI	14 December	
Mini Symposium (group assignment)	OI	15 December	Yes
Exam	OI	21 December	Yes
Pitchers Living Lab Assignment	OI	8 January	
Orientation visit IZI woningen (to be confirmed)	AD	9, 12 or 23 January	Yes

Assignments/assessments	Module	Dates	Part of assessment plan?
Re-take BVA exam	BVA	12 Januar	
Submit part 1 of draft 1 innovation paper	CIS	15 January	
Orientation visit Vilans (to be confirmed)	AD	15 January	Yes
Co-creation with elderly board	OI	19 january	
Submit tentative division of filming tasks in group	CIS	22 January	
Submit draft 2 innovation paper	CIS	23 January	
Submit peer feedback innovation paper	CIS	24 January	
Debate	AD	26 January	Yes
Deadline Innovation paper	OI and CIS	29 January	Yes
Deadline video (group assignment)	OI and CIS	2 February	Yes
Video presentations to elderly board and pitchers + network event/closing drinks	OI	2 February	Yes
Re-take exam OI part 1	OI	1 March	
Mentoring (see schedule for groups)	AD	30 November 4, 7, 11, 14 December	Yes

The innovation paper and the innovation video pitch will be assessed separately for OI and CIS. Please refer to the assessment matrix for the requirements to pass.

Kaltura

Online lectures and working groups will be held in the main V&A lecture channel in Kaltura Live Room: *2023-24 V&A lecture channel*. This is the online learning platform of Leiden University. Recordings of the lectures can be found in this environment as well.

Brightspace

Please visit Brightspace regularly. Here you can find the latest information, presentations, literature, the timetable, and other information on the course.

Study Books

There is no obligatory textbook that we use during this module.

Ol Part 1: Activities, assignments and Exam

In general

For each lecture, a team of students will be chairing the lectures. The schedule will be uploaded on Brightspace under general information/schedule lecture chairing. Please note that the team that is chairing the lecture is also responsible for delivering a short overview of the content of that lecture in the 'What have we learned' sessions.

At the end of part 1 your knowledge and understanding will be assessed with a written essay exam. In the essay exam, your ability to apply theories and models on a self constructed fictional case will be examined. During the course the following activities next to the lectures will be offered to prepare you for this exam:

1. Ageing suits experience

This activity is offered to empathize with older people. You will experience the impact of impairments on functioning and will get inspiration for your fictional case. Please note that the groups for this activity will be the working groups of BVA, as there are concurrent mentoring sessions.

For more information, see the description in the day-to-day programme

2. Movie

This activity is offered to get more insight in the lives of very old people. This movie based on individual cases will increase your understanding of the impact of concepts like vitality and ageing. As preparation for your exam, you will acquire insight in the role of personal stories regarding the way older people deal with ageing and vitality. You will discuss with older people what you have seen in the movie.

For detailed information, see the description in the day-to-day programme

3. Interview with informal caregivers

This activity will offer you insights in the impact of diseases and disabilities on older people and their informal caregivers and will offer you the possibility to apply knowledge in practice. Using your obtained knowledge of vitality and resilience, you will interview the informal caregiver about his/her experiences and the positive and negative impact of being an informal caregiver on their lives.

For detailed information, see the description in the day-to-day programme

4. Mini-symposium

For the mini-symposium you have to dive into a disease or impairment which is common in older people. With your team members you will construct a fictional case with a disease/impairment, you will explain the disease and the related impairments and you will apply the Positive Health model to analyse the impact of the disease on the chosen fictional case.

For more information, find the description below 'Mini Symposium Assignment'

Mini Symposium Assignment

Introduction and aim

Chronic diseases and functional limitations are common in older people. Therefore, you have to acquire knowledge about these diseases or limitations and their impact for older people. During the mini-symposium, students will teach their fellow students by giving a mini lecture about a common disease in older people and the impact of this disease on daily life. The students create a fictional case of an older individual with a disease, they explain the disease and the related impairments, and they apply the Positive Health model to analyse the impact of the disease on the chosen fictional case. At the end of each lecture, the students will provide each other with peer feedback.

Preparation

The students will work in their teams with whom they will prepare a mini-lecture and present it at the mini-symposium. The students can choose and register on Brightspace for one of the following diseases or chronic conditions:

- Cancer
- Dementia
- Depression
- Falls and mobility problems
- Hearing impairment
- Urine incontinence

Provisional time schedule of the lecture during the mini symposium:

- Interactive presentation (15-20 minutes)
- Questions from the audience (5 minutes)
- Feedback from audience on the content of the mini lecture: richness of the fictional case and application of the model (5 minutes)

Construct a fictional case

Your lecture has to be based on a 'rich' self constructed fictional case. The more details you add to your case, the more opportunities you have to use your case as an illustration of the impact of a disease, impairments or other challenges to vitality. Think about possible challenges that your fictional case will face and how he/she will cope with them given his/her values and talents. What is it like to be old? Not only try to get a better understanding on the individual functioning (e.g. symptoms, distress, self-esteem, quality of life), but also on social functioning (role limitations, stigma, joblessness), and adaptive tasks (e.g. taking medicine, maintain social relations, adopt a healthy lifestyle). Since the construction of a fictional case is also part of the essay exam, you can use this mini symposium to practice with constructing such a case.

Content (epidemiology, clinical description, disease management, Positive Health model)

To obtain background information about the disease, you are requested to use high quality scientific literature that provides state of the art information about your topic. Please consider for example at least one systematic review in a high impact medical journal. In addition, you are encouraged to use quantitative and qualitative studies to reveal how your disease or functional limitation affects older individuals and how they cope with it. You may also want to search the internet, but please use only

trustworthy sources. For example, RIVM information about prevalence in the Netherlands or information from the WHO website would be fine, but for example articles about speculative new treatments without solid evidence are not allowed. For the application of the Positive Health model, use the theory presented in OI-lectures and search for related literature. Prepare an (interactive) lecture or workshop, provided with literature references, and try to stimulate active participation of the audience.

NB Please apply (some domains of) the Positive Health Model. Note that you don't need to explain the model itself. Everyone is already familiar with this model!

Tip: If you like to experiment with your lecture form to make it more interactive, feel free!

Presentation

The presentation takes approximately 15-20 minutes and will concern a disease or functional limitation and how this afflictions affect daily life, according to one or several of the domains of the Positive Health model. During or after the presentation there will be room for questions of the audience.

The following topics will be taught by the groups:

- Introduction of the fictional case
- Epidemiology: prevalence, incidence, risk factors
- Clinical description: features, symptoms, diagnostic tests
- Disease management: therapeutic / lifestyle/ behavioural interventions and prevention
- Patient's experience according to one or several domains of the Positive Health model

Bring your presentation on a USB stick.

Feedback

After each presentation students will give each other feedback on the content of the mini lecture, especially on the richness of the fictional case and application of the model.

Written essay exam

The exam will be based on the literature and the materials presented and discussed in the lectures during part 1 of the Older Individual course. It will test your knowledge and understanding of the impact of health, diseases, impairments and social relations on wellbeing, vitality and ageing. Moreover, your ability to apply theories and models on a self constructed fictional case will be examined. Use of other sources are allowed. You will receive the instructions for the essay at the starting time of the exam. You have one day to complete the exam. You will write the essay at home or any other location in a Word document, which you will upload via [Brightspace/OI/Course Tools/Assignments/Written essay exam OI](#).

The assignment will be placed on Brightspace and will become visible at 09.00 am. In case Brightspace is not working, you will receive the instructions via e-mail at exactly 09.00 am. The address used will be the e-mail connected to your Brightspace account (your university e-mail address). You have to write an essay with a maximum of 2000 words. The essay has to be uploaded via [Brightspace/OI/Course Tools/Assignments/Written essay exam OI](#), 17.00 hrs at the latest. You must write the essay alone and you are not allowed to use input from fellow students or anyone else. You are allowed to use literature and online sources (open book). You need to make sure you have a reliable computer and internet connection and a space where you can work alone and where you will not be disturbed. The text must be your own. No text may be 'copy-pasted' and a plagiarism check will be performed.

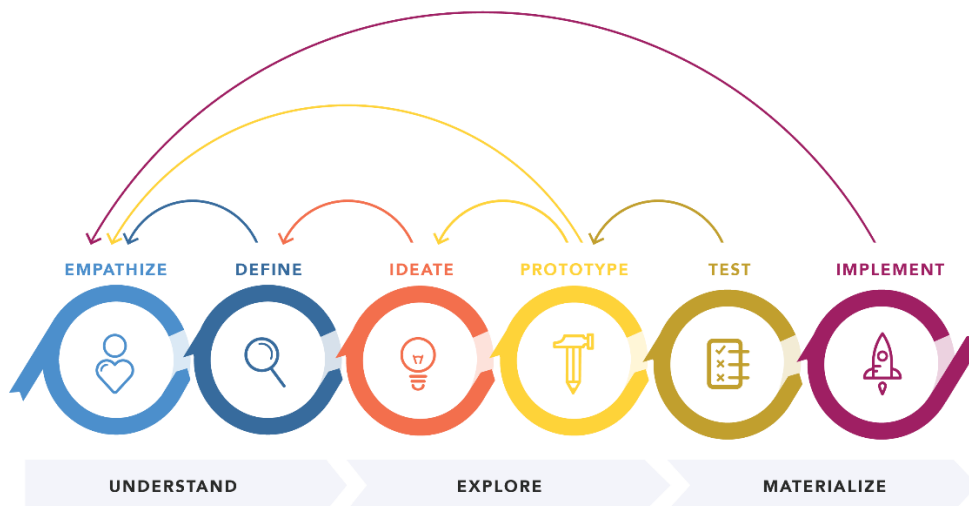
OI Part 2: Living Lab - Activities and assignments

Living lab: designing an intervention or innovation

In the Living Lab, you will work on your own project together with a small subgroup of fellow students. To ensure that you will work on a topic that is an actual challenge for older people, we will invite a social partner to present actual issues for which they require help. Thereafter, you will choose a challenge. Teams will be formed to analyse the challenge together and to inspire each other to develop an intervention or an innovation. You will use the expertise of the team to analyse the challenge. To develop an innovation, you are challenged to come up with your own creative solutions. At the end of the course, each student has designed an individual innovation (prototype) that contributes to the vitality of older people. You will substantiate the evidence for this innovation in an individual written report. Moreover, as team-assignment, you will present one of the innovations in a creative video pitch.

Method of the designing process

The method that you will apply during this course is based on a combination of scientific approaches, that is Intervention mapping and Design Thinking. The methods overlap, but are complementary in several respects. Intervention mapping can be considered as relying more firmly on scientific reasoning, whereas Design Thinking is rooted in a strong belief in playful and creative thinking, as well as (emotionally) connecting with your target population. Both are methods that can be used to systematically build an innovation or intervention, and both stress the importance of co-creation. That is involving your target population to address their needs and preferences. To provide a clear backbone for the process, we rely roughly on the phases of Design Thinking (see figure).



DESIGN THINKING 101 NNGROUP.COM

The program guides you through the steps of innovation. To support you in gathering the building blocks for your intervention or innovation, and eventually your paper and video (see assignments in this paragraph), you will carry out the following steps. You will start together in the team to get insight in the background of the challenge. When you have an overview of the challenge, you will

choose your own specific target group and you will carry out the next steps individually. However, you will regularly meet your team members to discuss your ideas, and to give and receive feedback. A more extensive explanation can be found in the day-to-day program description.

Design thinking phase ‘Understand’

Step 1: choose a challenge

Choose your challenge and form a team. This activity will take place in a working group. After forming a team you will work together on your next step. You will make a team canvas to support your teamwork.

Step 2: Indepth description of your challenge

[As preparation for step 2](#), complete the e-learning module ‘Design thinking’ on Brightspace.

Together with your team you will investigate the background of your challenge. During two working groups, you will firstly give a team presentation to staff and students (step 2a) and secondly, you will discuss your analysis with older people and think about possible target groups (step 2b).

Step 3: Analyse your challenge: define target group and design logic model

[As preparation for step 3](#) complete the e-learning module ‘Making personas’ on Brightspace and follow the powerpoint ‘Design a logic model’, also available on Brightspace.

Elaborating on your groupwork, now you will individually choose your target group and make a persona to empathize with your target group. You will also, based on the literature and discussions, make a list of determinants of your challenge and design a logic model. Moreover, you will formulate your first ideas for an innovation. In a small-group meeting with your team and staff, every student will present his/her ideas.

Design thinking phase ‘Explore’

Step 4: Design prototype

In a working group, you will design a prototype of your innovation.

Step 5: Co-creation

[As preparation for step 5](#) complete the e-learning module ‘Co-creation’ on Brightspace.

You will discuss your challenge with older people in a co-creation session. Older people will give you feedback and you can use their perspectives to improve your innovation.

Design thinking phase 'Materialize'

Step 6: Evaluation plan

After you have developed your innovation, the next step is to formulate an evaluation plan, to study your innovation. You will formulate a research question and you will write a research plan. To support you in this step, a question-hour will be organized.

Step 7: Implementation plan

For the final step, a working group is organized in which you will make a stakeholders analysis and implementation plan.

Assignments

The overall assignments of part 2 of the course comprise an innovation paper and a video. The innovation paper is an individual report about the innovation that you have developed. In contrast, making a video about an innovation is a team assignment. You will choose one of the innovations that will be most suitable to be presented in a video. You will pitch your video together with your team to present the innovation to an audience of students, staff and older people.

Innovation paper

On the next pages you will find instructions regarding the *content* of the innovation paper. This concerns the content requirements that are requested by the Older Individual. We will briefly elaborate on these instructions in the introduction session of part 2. The rubric for OI can be found in the Appendix. More detailed instructions about the *execution* of the innovation paper will be provided by CIS during the Living Lab. CIS will provide you with tips and advices on how to write a good innovation paper and how to make a good group video. Please look up the CIS program for more details.

Instructions for the individual innovation paper OI

Content	
<u>General</u>	
Title:	<i>Make a cover sheet with a complete, attractive title that is well related to the content of your paper</i>
Abstract:	<i>Provide an abstract about the analysis of your challenge and the design of your innovation of 300 words</i>
References:	<i>Display your (scientific) references in APA, Vancouver style, or another standardized scientific format in a specific section at the end of your paper</i>
Attachment:	<i>Hand in your persona as an attachment to your paper</i>
Pages:	<i>Total 6- 8 pages, excl cover sheet, abstract and references</i>
Part 1 What is the challenge?	
Part 1a. General scientific description of the challenge	
<i>Write a scientific introduction about your challenge. This means that you have to zoom out from the very specific problem pitch to reflect on the broader problem. Rely on scientific papers in PubMed and/or other scientific databases. Please note that references to grey literature, such as information from the NHG website and RIVM website or white papers are allowed and often even necessary to analyze your challenge. You have to address the following questions:</i>	
<ul style="list-style-type: none"><i>What precisely is the problem? (e.g., problem definition)</i><i>What is the magnitude of the problem? (e.g., prevalence worldwide and/or nationwide, characteristics of the problem)</i><i>What are the consequences (both short term and long term) for physical, mental and social well-being? (e.g., mortality, morbidity, impairments, societal costs).</i>	

Content

Part 1b. Analysis: targetgroup, determinants and visual representation

Extend the scientific introduction with an analysis of underlying causes or factors that influence the occurrence of the challenge. Factors or determinants do influence the problem. You have to address the following:

1. *What will be your target group? Add your persona as attachment to your paper.*
2. *Which factors or determinants influence your challenge? (e.g., individual, social and environmental determinants, or risk factors, or moderators and mediators); Please include a list of determinants and the extent to which you think they are influential and modifiable, a format will be available on Brightspace. Additionally, describe the determinants and provide a rationale for why they are related to your challenge. Sources of potential determinants and whether they are important/modifiable can be theoretical models about behavior, empirical data, or brainstorm. Base your analysis on at least for a part on scientific literature (for example, use a recent review).*
3. *Provide a graphic representation of your logic model that applies to your target population. This graphic representation is a creative work in which you clearly present your analysis of determinants.*

Part 2. Description of your intervention/innovation and how it will work

Address the following topics:

1. *What is your innovation/intervention? (How it is called, and provide a brief, but clear description)*
2. *Describe how your innovation/intervention works specifically for your target group*
 - *Which determinants are addressed and why are they relevant for your target group? (Make sure that you convince the reader that your analysis of determinants is logically related to your innovation/ intervention and that the working mechanisms are clear as well, please address all relevant aspects of your target group)*
 - *What will be the effect of your innovation/intervention, what will your target population gain from it and why? (Please align this to the aim of your intervention and be specific.)*
3. *What are strengths and limitations?*

Please provide a reflection on the strengths and limitations of your innovation/intervention from several perspectives:

 - (a) *Use scientific literature for your reflection, for example regarding previous interventions that have been evaluated to address your challenge and compare these to your innovation or intervention. Rely on at least 1 scientific paper in PubMed and/or other scientific databases.*
 - (b) *Show how you have incorporated feedback of the older individuals or your target population. .*

Part 3. Evaluation and implementation of your intervention/innovation

In this part you describe how your intervention or innovation is going to operate in real life. Address the following topics:

- *How can your intervention or innovation be evaluated? Briefly describe the hypothesis and research question, the study design, data collection methods, (statistical) analysis, ethical considerations and approval, and planning and feasibility. If applicable, you describe the intervention and control group (with in- and exclusion criteria, selection methods and number of subjects), the primary and secondary outcome measures, potential bias and confounding.*
- *How can your intervention be implemented? (Provide a brief implementation plan (e.g., who will be in charge, who are the stakeholders, what are barriers, facilitators, costs and sustainability. Use for your implementation plan the RE-AIM Model).*

Content

Conclusion

Address the following:

What is the take-home message? (Please provide a very brief, but elaborative wrap-up of your paper with a clear final statement).

Innovation video

Below you will find instructions regarding the *content* of the innovation video. This concerns the content requirements that are requested by the Older Individual. We will briefly elaborate on these instructions in the introduction session at the start of OI part 2. The rubric for OI can be found in the Appendix.

During the Living lab the CIS teachers will provide guidance on how to produce your video. In a short period of time, the groups move through the three phases of filmmaking: pre-production, filming and post-production. Students start by generating an idea together, and proceed to writing a script, drawing up a storyboard, figuring out filming locations and who will be in their film, then shooting footage, and finally editing. The many different tasks involved in the filmmaking process call for a clear division of responsibility in the groups. Please find more instructions and guidance in the pre-recorded introductory lecture and other resources published on CIS Brightspace. Students will receive instructions and guidance on the planning and (post-)production of their films via CIS Brightspace, during a workgroup on storyboarding, and through feedback on draft versions of their film.

Instructions for the innovation video OI

Choose within your group one of the innovations that will be most suitable to be presented in a video. Include the following topics in the video.

Content

Relevance

- Give a good perspective of the situation
- Make clear why it is important and urgent to address the situation and for whom

Your innovation and intervention

- Provide a clear and compelling picture of your innovation/intervention
- Make clear how it addresses the specific problem
- Describe how your innovation or intervention works

Content

Implementation/plan of action

- Make clear who is in charge and who will be the main stakeholders
- Provide a brief plan of action
- Make a concluding statement about what will be achieved with your innovation or intervention in the (near) future

Final product

The final version of your video should

- Have a coherent structure, with a clear opening, middle and ending
- Make creative use of visuals, in a way that supports the message of the video
- Integrate images, audio and text into a cohesive final product

Line Education during OI

Academic Development

Academic Development is intertwined in this module via career development working groups about LinkedIn and CV writing. In addition, a debate, two orientation visits, and mentoring sessions will be organized.

Overview of mandatory assignments AD during OI

Dates are displayed in the 'Overview important dates' scheme

- Second mentor talk and written reflection in portfolio
- Debate
- Orientation visits
 1. iZi Gezond Lang Thuis (IZI Housing)
 2. Vilans

For all orientation visits it is required to write a short reflection and to add it to your portfolio.

Communication in Science

The CIS component during this module is scheduled in the second part of the module. We will look at how to convey a strong video message which highlights a challenge faced by the ageing population and presents an innovative and implementable solution. Secondly, we will return to the structure, style and language of academic writing in writing the Innovation Paper. In both assignments peer-review will be a vital component of the module. Students will give and receive feedback both during video creation and on draft versions of the Innovation Paper.

Overview mandatory assignments CIS during OI

- Innovation paper
- Video pitch presentation

After attending the OI introductory lecture on the two assignments at the start of OI part 2, students should watch the CIS introductions to the two assignments on Brightspace. These will detail what is expected from the two final products, and which steps will be taken to arrive there. Students are asked to work their way through specific online material, and start planning for the assignments. Later on live workshops are scheduled.

An overview of the mandatory CIS deadlines is included in the 'Overview important dates' table in this module book. For a complete overview exactly what to do when, see CIS Brightspace (in particular the OI checklist).

Research & Evidence

The line R&E is briefly involved in part 2 of the course. After having created your innovation, a question hour is offered to support you in designing your research plan (a study design) for evaluating whether your innovation is beneficial for your target group.

General information about the lines and descriptions of the assignments and meetings can be found later in this module book.

Week 1: Concepts of Vitality and Ageing

Lecture: Introduction Older Individual course

Location: on campus

Description

The main objective of this introduction is to provide an overview of the structure, content and general assignments of both parts of the module. Also the mini-symposium will be introduced, in which the students will teach each other about a disease or functional limitation and its impact on daily life. The students will choose a disease or chronic condition. They will work in their teams to prepare a mini lecture for the mini-symposium. Instructions for the mini-symposium can be found in this course book.

Complex health problems and frailty - dilemmas

Location: on campus

Description

With the ageing population, an increasing number of older people with multiple health problems will be depending on healthcare. Many concepts such as of frailty, vulnerability and complex health problems are developed to identify a specific group of older people in need for care. The care for people with multiple health problems needs to shift from problem-based, disease-oriented care to goal-oriented, integrated care. In this perspective, two novel concepts have been introduced: intrinsic capacity and resilience. Adding principles from intrinsic capacity and resilience to frailty assessment provides opportunities to further personalize treatment and improve outcomes by looking longitudinally at recovery potential instead of deficits.

Lecture: Health and vitality

Location: on campus

Description

In this lecture we will discuss the concepts of health and vitality. The importance of the introduction of the concept of vitality in healthcare, social welfare, and policy making is highlighted. In general, vitality started as a concept that focused primarily on physical capabilities, but it was not for long that vitality placed the emphasis predominantly on psychological characteristics such as resilience and adaptation. These characteristics, as well as the emphasis on the emic perspective of older people, contrast highly with the classical view we have (had) on health and ageing. In the lecture we will also discuss a method

Lecture: Health and vitality

Location: on campus

of doing research to the emic perspective on vitality of older people. In addition, we will look into the concept of health. The question 'What is health?' will be discussed and reviewed from different angles.

Lecture: Internship example hour

Lecturer: various guest speakers

Location: on campus

Description

To give you some inspiration for internship opportunities, this example hour is organized. There will be several speakers and presentations through which you are informed of possibilities for an internship.

Already confirmed is Niels Rood of the Municipality of Leiden. Other speakers will be confirmed later.

Selfstudy lecture, on demand

Lecture: Successful ageing in the Netherlands

Description

During this lecture Dr. [] will present her research among older people in Leiden. Her study was part of the multidisciplinary Leiden 85+ study: a research project of the Leiden University Medical Centre involving persons of 85 year old and older. During her study she interviewed 27 participants and followed 10 participants for three years. In this lecture she will describe the perspectives and experiences of older people. Specifically she will focus on the experience of ageing and concepts of successful ageing. She will describe strategies that older people drew on in their (re)definition of health and success, and the ambivalence that comes in view with this. In this she will touch upon the interaction between social norms and expectations, as well as on the way older people deal with and negotiate these norms and expectations.

Lecture: Social relations and loneliness at old age

Location: Online

Description

You will be introduced to the concept and measurement of loneliness, the main individual determinants and the social context of loneliness. Theo van Tilburg is involved in the Longitudinal Aging Study Amsterdam since almost thirty years, and he will also present findings from other studies.

Workgroup: Social relations and loneliness at old age

Lecturers: Junior lecturers

Location: Kaltura

Description

The working group is used to discuss two main topics from the mandatory literature which are briefly introduced in the lecture of Theo van Tilburg.

Lecture: Intercultural aspects of elderly care

Location: Kaltura

Description

The aging of Europe takes place in different population groups. In the coming decade, Non-Western immigrants will age in greater proportion in comparison to native people. In the Netherlands, the incidence of dementia among older immigrants will increase twice as fast compared to older native elderly and needs special attention. The goal of the lecture is to create awareness. Should we pay attention in order to ensure optimal care for ALL elderly people? Providing culture-sensitive or perhaps culture-specific health care? Some insights into the practice of dementia care.

Lecture: Cultural narratives and meanings about later life

Location: on campus

Description

To counter dominant cultural narratives that identify aging and later life with inevitable decline, gerontologists and practitioners seek to promote later life agency and empowerment. To classify older persons as only "frail" or "vulnerable" is often perceived as outdated and stigmatizing. However, a focus on meaning in later life suggests that we should also consider how we acknowledge and facilitate confrontations with existential vulnerability in old age. In this lecture, we consider how we can

Lecture: Cultural narratives and meanings about later life

Location: on campus

acknowledge and promote later life's positive potentials, while also provide symbolic resources to deal with confrontations with vulnerability. As case study, we consider the promotion of older persons' civic engagement and resources of neighbourhood informal support through community building and voluntary work.

End of life decisions

Location: on campus

Description

Old age and the end of life are two involuntary companions. Sometimes however death is welcomed because of unbearable suffering without any prospect of alleviation. Although this is not an issue exclusive to old age, many older people have views on this matter. In the Netherlands people are allowed to ask for medical help to die, if certain strict criteria are met. In the lecture the Dutch approach of euthanasia will be discussed, and applied to situations that are associated with old age (dementia, multiple geriatric syndromes, fed up with life).

Mentoring session: group A (=working group 2 during BVA)

Location: on campus

Description and preparation

Your mentor group will be the same as you mentor meeting scheduled during BVA.

For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

Practicum**Ageing suits: Perspectives of vital and vulnerable older people (VA.01-BVA)**

Location: on campus

Introduction

This Master's programme give you insights into the causes and effects of human ageing and contributes to the improvement of circumstances of older people in ageing societies. This starts with interest in the personal experiences of elderly persons. What are the perspectives of older people on ageing? How does it feel to live with impairments? What is the meaning of 'vitality' according to older people? What is the meaning of 'ageing'? What is needed in an ageing society to contribute to the circumstances of older people?

By using gerontological test clothing (GERT) you will experience yourself how difficult it is to do everyday activities like climbing stairs, tying shoelaces or reading.

For this Practicum we use the working group devision of BVA, please be aware of this.

Lecture: Reflections on ageing

Location: on campus

Description

The increasing ageing population is experienced all over the world. This has given rise to a variety of reflections on ageing in general, and older people in specific. In this lecture we will talk about the image of older people and ageing, both from an etic and an emic perspective. How do we view older people? And what do we know about the perspectives of older people themselves? Using care ethics as a theoretical underpinning, we will then reflect on what our views of older people mean for our approach to care (e.g. What is good care? And from whose perspective?) Traditional care practices will be described, as well as the more recent shift towards relational care for older people.

What have we learned?**Description of the lecture**

We will look back at what we have learned so far. Any questions the students have concerning the lectures can be discussed in this session. What have we learned? And how will we apply this knowledge and what does this mean for the exam?

Complex health problems and frailty: meet a patient

Location: on campus

Description

During this lecture a patient will be present. Earlier discussed concepts as vitality, frailty, intrinsic capacity and resilience will be the central topic of this lecture, but from a patients perspective. What does it mean to become more frail? What are consequences in daily life, treatment decisions and care?

Working group: watch movie together with older people

Location: on campus

Description

The film investigates the will to live. It portrays a colourful selection of 100+ year old people from all over the world. They have lived for over a century and witnessed great historical events, but instead of dwelling on the past, they look ahead. With the clock inevitably ticking, these centenarians cling to life, set new goals with a joie de vivre, refusing to admit the betrayal of their deteriorating bodies. Time is both their enemy and their friend. They have overcome diseases, lost partners and some of them survived their own children. Nevertheless, these active, curious and creative 100+ year olds are amazingly good at restarting every new day.

Together with older people we will watch this film to increase your understanding of the impact of concepts like vitality and ageing. At the end of the workinggroup we will discuss your impression of the film. The film will give you a lively illustration of personal stories and how people deal with their ups and downs.

Week 2: Common diseases and disabilities

Lecture: Personalized rehabilitation in old age – expert narrative

Location: On campus

Description

Considering the ageing population, geriatric rehabilitation is an important and growing component in the care for older people. The most commonly used definition is ‘*A multidisciplinary set of evaluative, diagnostic and therapeutic interventions whose purpose it is to restore functional ability, quality of life and social participation in frail (older) patients with disabling impairments after an (sub-)acute event or decline in function*’. This definition underlines the importance of disability, besides age. Although we do not know much of recovery patterns, we know that age alone is not a good parameter for outcome. Geriatric patients are different from younger patients that need rehabilitation in many respects. Besides having multimorbidity, their disabilities are usually complex and multi-causal. Pre-existent physical limitations are not only caused by medical reasons, but also by physiological ones, such as sarcopenia. Geriatric patients often have associated cognitive problems that compromise the ability to learn new skills. An interdisciplinary comprehensive geriatric assessment is necessary to completely map a geriatric patient’s disabilities and treatment options. On the other hand, geriatric patients do not differ from younger individuals in their recovery potential during rehabilitation.

In this lecture we will discuss geriatric rehabilitation using a patient journey (GR after hip fracture) and the International Classification of Functioning, disability and health (ICF model) as a framework. We will also elaborate on the most important challenges and the (digital) innovations that are needed.

Lecture: Common complaints in older people in general practice

Location: Kaltura

Description

This lecture gives an insight in health complaints hindering community-dwelling older persons (aged 75 and over) in The Netherlands. It describes the most common complaints and the association of these complaints with several functional measurements. The relevance of these findings for the general practitioner is discussed.

Cure shifts to care. Needs and desires become more important than just cure. Coping through adaptation, and especially assimilation and accommodation.

Lecture: Personalised care in general practice

Location: Kaltura

Description

Care for elderly in general practice is personalized care. How do we do that? What is the role of the general practitioner and the practice nurse? We will speak about the house of care and the importance of leadership. All people should have opportunities to discuss their wishes and preferences for now, and for the future, and to have these recorded in a personalized care plan. How do we act according to this care plan? What is the role of the patient? How about lifestyle and healthy ageing? Regulations in the field of cure and care are funded in different ways, so policy makers, municipalities and insurance companies play their parts.

Mentoring session: group A (=working group 1 during BVA)

Location: on campus

Description and preparation

Your mentor group will be the same as your mentor meeting scheduled during BVA.

For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

Practicum**Ageing suits: Perspectives of vital and vulnerable older people (VA.02-BVA)**

Location: on campus

Introduction

This Master's programme gives you insights into the causes and effects of human ageing and contributes to the improvement of circumstances of older people in ageing societies. This starts with interest in the personal experiences of elderly persons. What are the perspectives of older people on ageing? How does it feel to live with impairments? What is the meaning of 'vitality' according to older people? What is the meaning of 'ageing'? What is needed in an ageing society to contribute to the circumstances of older people?

By using gerontological test clothing (GERT) you will experience yourself how difficult it is to do everyday activities like climbing stairs, tying shoelaces or reading.

For this Practicum we use the working group division of BVA, please be aware of this.

Lecture: Dementia and cognitive decline

Location: Kaltura

Description

Cognitive decline is common in older individuals, and is sometimes so severe that it can be classified as dementia/major neurocognitive disorder. While Alzheimer's disease is the most prevalent and well-known form, there are several other forms as well, such as vascular dementia, dementia with Lewy bodies, and frontotemporal dementia. Though symptoms partially overlap, there are also differences between the various forms, which can be related to the different locations of neurodegeneration. This lecture will focus on the cognitive, emotional and behavioural symptoms of various forms of dementia. In addition, mild cognitive impairment/minor neurocognitive disorder, and the effect of cognitive decline on daily life functioning will also be discussed.

Lecture: Common psychiatric disorders in old age

Location: Kaltura

Description

In old age, psychiatric disorders and neuropsychiatric symptoms are quite common. They often co-occur with physical, cognitive, functional and psychosocial problems. Their presence has an enormous negative impact on the quality of life of older people. Frequently occurring psychiatric disorders in late life include delirium, depression, apathy, and anxiety. Due to cognitive decline (including dementia), somatic morbidity and polypharmacy, functional decline and decreased mobility as well as loneliness, older people are particularly vulnerable for psychopathology and behavioural problems (multimorbidity and complexity). In this lecture, common neuropsychiatric symptoms and psychiatric disorders in old age will be presented and discussed in the context of physical, cognitive, and social (dis)functioning.

Lecture: Dementia and quality of life

Location: Kaltura

Description

With no cure available, nursing home residents with dementia are at risk for a suboptimal quality of life and a loss of dignity. During this lecture, we will discuss what quality of life is, and in particular for persons with dementia. We will also touch on why it is important to ensure the quality of life of nursing home residents with dementia is maintained and preferably enhanced. However, this can be challenging due to the cognitive, communicative, and physical impairments that come with the disease progression. One example of a non-pharmacological intervention aimed at improving the quality of life of nursing home residents with dementia that will be discussed is Namaste Care.

Working group: Thesis research question and methods (for early birds and international internships) (R&E)

Location: Kaltura

Description

This working group is organised for 1) students that will do an international internship and 2) for the early birds with an internship in The Netherlands.

During this working group you will work on your research question and method.

Today multiple working groups will take place. Both for the students that are planning to do quantitative research during their internship and the students that are planning to do qualitative research. During the working group there is time to explore your research question and method with senior researchers.

Note: All other (non-early bird) students and students with an internship in The Netherlands, are expected to attend the working group which will be organized during OAS (date to be confirmed).

Lecture: Multimorbidity and polypharmacy

Location: on campus

Description

Multimorbidity is prevalent among older patients. In the Netherlands, 800.000 people use five or more different medications. 6% of the hospital admissions are directly related to medication.

In an interactive lecture the consequences of multimorbidity and polypharmacy will be discussed.

Lecture: Cancer in old age

Location : on campus

Description

Cancer is a disease of old age. Epidemiology of cancer will be discussed.

In order to optimize outcomes of older patients we need to customize treatment to individual geriatric characteristics and co-morbidity. Methods to this aim will be described.

Lecture: CVRM in old age

Location: on campus

Main topics

Cardiovascular disease, risk factors and prevention

Cholesterol and statins in old age

Combination of relevant scientific evidence, clinical judgment and the patients' values and preferences

What have we learned?**Description of the lecture**

We will look back at what we have learned so far. Any questions the students have concerning the lectures can be discussed in this session. What have we learned? And how will we apply this knowledge and what does this mean for the exam?

Working group S&C: What is your next step?

Location: Kaltura

Description

During this workshop students will think of internship and research possibilities. This workshop will give students the opportunity to share their ideas with input from the group and the junior lecturer.

Students can tell their peers their status of finding an internship and help each other to take the next step. The students who already found an internship can tell their peers how they did this.

Mentoring session: group B (=working group 1 during BVA)

Location: on campus

Description and preparation

Your mentor group will be the same as you mentor meeting scheduled during BVA.

For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

Selfstudy lecture, on demand

Lecture: Changing health behavior: from theory to intervention

Recording: Brightspace/Older Individual/lectures/part 1/Common diseases and disabilities

Description

In this lecture you will be guided through the large number of theories that specify determinants for (health) behavior (change) and try to give you a helicopter view and highlight some of the key concepts and constructs. To underscore the relevance of identifying psychological determinants of health behavior change, you will also be given a 'sneak preview' into the toolbox of a Health Psychologist and show how knowledge about these determinants can be used to develop effective interventions.

Lecture: Ageing and sexuality

Location: on campus

Description

In this lecture we will focus on a topic that is still relatively neglected. It is often assumed that sexuality is not important for the older individual. However, intimacy and sexuality are important for the quality of life of a significant part of elderly people. Because of the higher prevalence of life events, diseases and medicine consumption that may negatively influence sexuality, elderly men and women can experience problems related to sexual functioning. Unfortunately, sexual health and intimacy is often a neglected topic in health care for older individuals. Health care professionals should be alert and careful with regard to this topic, and probably even so managers and for example architects of care homes.

Working group: Determinants of health behaviour

Location: on campus

Description

In this working group we will elaborate on the knowledge about theories of health behavior that you have gained in the preceding lecture. We will focus on determinants of health behavior and we will also reflect on existing interventions and health campaigns that prompt people to change an unhealthy life style. More specifically, we will try to detect underlying theoretical assumptions about how determinants of behavior can be changed.

Working group: Perspectives of informal care givers

Location: on campus

Description

Informal care givers are persons that provide (often long-term) care or assistance, without recompense, to an older person or a person with a chronic or disabling condition. This includes partners, a parent or child, a relative or a friend. They are generally non-professionals, and more often than not, unfavorable life events direct them to this role, rather than choice.

Regardless of the cause, the informal care giver plays an important role in health systems, policy and society.

For this working group several informal care givers are invited. During the working group students will be divided into small groups and will interview these informal care givers. The end of the working group will be used for collecting the outcomes of the interviews, and reflecting on these findings as a group.

Week 3: Adaptation, coping, resilience/self-management

Lecture: Non-pharmacological interventions for fatigue and pain

Location: on campus

Description

The prevalence of persistent pain in older adults is high. Musculoskeletal pain is even the most common chronic condition in older adults with a prevalence reaching up to more than half of the population. The underlying cause of persistent pain in older adults may be diverse. As far as treatment is concerned, a multi-modal approach including both pharmacological and non-pharmacological approaches has been recommended. Non-pharmacological interventions include physical and occupational rehabilitation, cognitive-behavioural interventions and physical activity-based interventions. Next to pain, fatigue is also a common complaint among older adults and an important reason for consulting a medical doctor. Although fatigue can be related to a medical or psychiatric condition, or a medical treatment (such as radiation or chemotherapy), it is not always possible to identify a clear cause for this symptom. Fatigue among older adults is often not fully understood, and, as a consequence, under-treated. Fatigue may be managed from a biomedical perspective, which implies identifying and treating any underlying pathological condition that may be responsible for fatigue. Alternatively, psychological interventions may equally contribute to the treatment of fatigue as studies on fatigue among older adults have demonstrated that lifestyle factors (especially physical activity) and psychological factors have a prominent effect on the experience of fatigue.

Lecture: Patient-Clinician communication in progressive disease

Location: on campus

Description

Clinician-communication lies at the heart of medicine, especially in settings such as progressive illnesses where the stakes are consistently high. Communication serves several key functions, such as i) providing information; ii) demonstrating empathy; and iii) enabling decision-making. It has the power to influence patient outcomes for the better. While communication is always important, effective communication with older people faced with progressive illnesses poses specific barriers, because age is associated with cognitive, physical and social changes and can involve the inclusion of surrogate decision-makers. In this lecture we will explore which communication can help older patients 'to know' (information) and 'feel known' (empathy), while also supporting effective decision-making. We focus not only on the art, but specifically on the evidence-base of communication in order to support patients and their loved ones at the moment this matters most.

Mentoring session: group B (working group 2 during BVA)

Location: on campus

Description and preparation

Your mentor group will be the same as you mentor meeting scheduled during BVA. For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

Mentoring session: group C (working group 1 during BVA)

Location: on campus

Description and preparation

Your mentor group will be the same as you mentor meeting scheduled during BVA. For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

Lecture: eHealth interventions for healthy aging and independent living

Location: Kaltura

Description

Nowadays there is a wide availability of eHealth applications, ranging from patient portals with online treatment modules to monitoring apps and home automation (i.e., 'domotics'). This lecture will first provide an overview of why eHealth is especially important for healthcare for the elderly. The lecture will focus on eHealth requirements, what is needed when developing and implementing eHealth for this target group? (i.e. the design's usefulness and 'usability'). An essential factor herein is the broad set of skills which are necessary to properly use eHealth; these skills are called digital health literacy or eHealth literacy skills. I will present two measures to test eHealth literacy among this target group. We will discuss the necessary steps to overcome thresholds, improve eHealth literacy, followed by how their motivation for eHealth use can be improved. Finally, this lecture will provide an overview of state-of-the-art eHealth applications for the elderly such as current websites and portals, mHealth (mobile apps), tele/video-communication, domotics, and wearables.

Lecture: eHealth in long term care

Location: Kaltura

Lecture: What have we learned

Location: Kaltura

Description

We will look back of course. What have we learned? And how will we apply this knowledge and what does this mean for the exam?

Workshop: LinkedIn and Career Orientation (AD)

Location: on campus

Description

LinkedIn is a valuable platform for finding interesting career paths of alumni and other professionals with a similar background. Also it is a virtual place for meeting future employers and encountering interesting organizations. During this workshop you will learn how to create a good LinkedIn profile. After your LinkedIn profile is established, we will demonstrate how you can build and expand your professional (online) network. Furthermore, we will show how you can seek for information on LinkedIn regarding career possibilities of professionals with similar backgrounds and/or university degree. We encourage you to create a LinkedIn account **before** the workshop. Please **bring your laptop**. This will allow you to put information into practice where possible during this workshop.

Workshop: Workshop CV writing (AD)

Location: on campus

Description

Did you know most recruiters only spend 10 seconds at your CV before deciding whether you are a valuable candidate? In this interactive workshop we will share guidelines on how to draft a good CV. We will help you on how to create structure, the Do's and Don'ts, yet also how to personalize your CV.

Mentoring session: group C (*working group 2 during BVA*)**Description and preparation**

Your mentor group will be the same as you mentor meeting scheduled during BVA. For the description of the mentoring preparation and assignment during OI, please refer to the Brightspace of Academic Development/Portfolio/Mentoring or to the line book of Academic Development.

DEADLINE: submit presentation mini-symposium (group assignment)

Via BrightSpace/OI/Course Tools/Assignments.

Mini-symposium

Location: on campus

Introduction and aim

Chronic diseases and functional limitations are common in older people. Therefore, you have to acquire knowledge about these diseases or limitations and their impact for older people. During this day, the students will teach their fellow students by giving a mini lecture about a common disease in older people and the impact of this disease on daily life. The students create a fictional case of an older individual with a disease, they explain the disease and the related impairments, and they apply the Positive Health model to analyse the impact of the disease on the chosen fictional case. At the end of each lecture, the students will provide each other with peer feedback.

Bring your presentation on a USB stick and bring your laptop.

A sandwich lunch will be provided for during the break.

Instruction

The OI minisymposium consists of 6 interactive team presentations. All team members will have to participate.

The presentation itself will take 15-20 minutes and than 10 minutes for interactive discussion and feedback from the audience on the lecture and the fictional case you used.

Creativity in the presentation and the interactive discussion will be appreciated!

Week 4: Exam

Lecture: Advance care planning/proxy decision making

Location: Kaltura

Description

When reaching old age, many people have formed ideas about what they find important and what they might want to hold on to in the last phases of life. Even more often people have ideas about they do not want to happen to them. We try to honor these wishes due to the principle of respect for autonomy, but have to acknowledge that people sometimes lose the ability to decide for themselves. In those situations it may help if people have made their wishes explicit in a document with advance wishes. But in all cases we want people and their particular view of life to be represented in the decision making process by someone who is intimately familiar with the patient. But how should we think about self-determination for one's future self? Is it possible to decide what should happen to you when you yourself have gone through a process that invariably changed you? How should other people apply your ideas to unforeseen situations?

In this lecture we will explore the possibilities and difficulties of influencing what happens to one's future self and how health care professionals can help older people to do so.

Lecture: 60 minute question hour

Location: Kaltura

Description

Any questions the students have concerning the lectures and the exam can be discussed in this session.

Essay Exam

Location: home

Description

The exam will be based on the literature and the materials presented and discussed in the lectures during part 1 of the Older Individual course. It will test your knowledge and understanding of the impact of health, diseases, impairments and social relations on wellbeing, vitality and ageing. Moreover, your ability to apply theories and models on a self constructed fictional case will be examined. Use of other sources are not prohibited.

The assignment will be published in Brightspace at 09.00 am. In case Brightspace is not working, you will receive the instructions for the essay via e-mail. The address used will be the email connected to your Brightspace account (your university email address).

DEADLINE: retake feedback assignment (AD) and alternative assignment debate BVA (AD)

Via BrightSpace/AD/Assignments



Part 2 Older Individual

Design Thinking Phase 'Understand'

Lecture: Introduction to the Living lab

Location: on campus

Description

During this lecture the outline and assignments of part 2 of this module will be explained. Also, an overview of deadlines will be presented.

Lecture: Pitches & questions

Location: On campus

Description

To ensure that you will work on a topic that is an actual challenge for older people, we will invite a social partner to present actual issues for which they require help. They will explain the problem and the contextual factors. They will invite students to ask clarifying questions. During the Living Lab you will join forces and design an intervention or an innovation for one of these challenges during the Living Lab.

Workgroup step 1: choosing challenge and making groups

Lecturers: Junior lecturers

Location: On campus

Description

In the lectures until now and the previous pitch, you came across challenges that elderly people experience with concern to ageing and vitality. We ask you to take these lectures and pitch as a point of departure to reflect on a specific challenge that you would like to address in this part of the course.

You are free to choose a specific challenge that you would like to address (provided there are sufficient fellow students that share your interest to form a specific subgroup). However, take into account that you focus on the meso level, that is challenges that are not too narrow-focused, but which are also not too distant from an older person. Further, it is important to focus on challenges that seem modifiable.

Finally, an important note to keep in mind for this phase of your design: *Try to avoid thinking about solutions when you select your challenge!* This may sound inefficient and uncomfortable, but it is

Workgroup step 1: choosing challenge and making groups

Lecturers: Junior lecturers

Location: On campus

essential for this first phase of building an intervention/innovation that you solely focus on the challenge whereas your forthcoming ideas for an intervention or innovation remain in blurry fogs.

After discussing potential challenges, we will form subgroups that focus on one specific challenge related to vitality and ageing. Subgroups consist of 3-4 students. During the next part of the course you will stay together with your subgroup and deepen your understanding of that specific challenge.

However, you will develop ideas for *your own innovation*. Finally, you will work on two products: a group video which you will pitch together and an individual innovation paper.

We want you to reflect on what can be your contribution to the team and how you are going to collaborate during this course. For this purpose we ask you to create a collaboration canvas, which is basically a collaboration agreement. Together with your team you will decide on your goal, so what do you want to achieve with regard to the challenge.

Orientation visit IZI woningen

Description

In The Hague they have designed a smart home that offers a lot of technical devices to make it possible to live longer at home. An older person and a volunteer of the organisation will guide you through the house and show you all the smart technical innovations.

The link below gives an insight in all the technical devices. The video is in Dutch, but you can put on a function that generates English subtitles in Youtube. The subtitles are not always accurate, but they will help you. <https://technologievoorthuis.nl/izi-woning/>

We try to plan this activity on 10 and/or on 12 January. However it is not confirmed yet.

We will visit in small groups, most likely via registration in Brightspace.

Thanks for not making any other plans until the dates are confirmed.

Working group step 2a: Presenting analysis challenge

Lecturer: Junior lecturers

Location: on campus

Description of the lecture

This session is focused on an analysis of the problem/challenge. You have started writing part 1a of your individual draft to analyze your challenge and what is needed. In this workgroup all teams will present

Working group step 2a: Presenting analysis challenge

Lecturer: Junior lecturers

Location: on campus

their findings to their fellow students and teachers. We will discuss the findings to emphasize with the challenge and to totally understand the challenge.

Working group step 2b: Discuss your challenge with older people

Lecturer Junior lecturers

Location: on campus

Description of the lecture

This session is focused on empathizing. You have presented your analysis of the challenge with fellow students and staff. Now you will discuss your findings with older people.

Lecture: IJsfontein: modern media to enlarge the understanding and knowledge of old age.

Location: On campus

Description of the lecture

IJsfontein is an Amsterdam based studio that designs and develops educational and serious games and playful learning experiences. Their products cover themes from healthcare to history and from science to social awareness. One of IJsfonteins most well-known projects is Into D'mentia: an interactive roleplaying project in which an informal caregiver or participant can experience how it could be to have to live with dementia. This program is recently transformed and expanded into two interactive virtual reality experiences (using Oculus Quest VR goggles). Experiencing the first person perspective and the interactive scenario, based on scientific research, has proven to change the vision of formal and informal caregivers on how to give care. Into D'mentia also proves that using technology does not stand in the way of arousing emotions.

Orientation visit IZI woningen

Description

In The Hague they have designed a smart home that offers a lot of technical devices to make it possible to live longer at home. An older person and a volunteer of the organisation will guide you through the house and show you all the smart technical innovations.

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We try to plan this activity on 10 and/or on 12 January. However it is not confirmed yet.

We will visit in small groups, most likely via registration in Brightspace.

Thanks for not making any other plans until the dates are confirmed.

Re-take exam BVA

DEADLINE: submit part I draft 1 of innovation paper, including questions (via Brightspace CIS)

Orientation visit Vilans

Description

Vilans is the national organization of expertise on long term care, with a subdivision on elderly care, and aims to improve long term care by performing research, sharing knowledge and providing advice.

Organizing client centred care is considered as starting point. Establishing client centred care requires collaboration with care institutes, other partners in the field of welfare and living, informal caregivers, and the clients themselves. During the online orientation visit, the students will get an impression of Vilans as organization, the work/projects of Vilans, and its employees.

Logistics

You can travel by train to Utrecht Central station. From there you can travel onwards by tram or bus and we will exit at stop Kanaleneiland. For detailed instructions, see <https://www.vilans.nl/contact/>

Workshop step 3: Discuss progress in analysis of determinants, logic model, persona and innovation

Lecturer: Junior lecturers

Location: Kaltura

Description of the lecture

During this meeting, each team will have a separate timeslot for a meeting with the lecturers to discuss the progress. Each subgroup will present their powerpoints to the staff and the other team members.

Design Thinking Phase ‘Explore’

Workgroup step 4: Making a prototype

Location: on campus

Description

In this session, we will continue the ongoing design process of design thinking. We will use some tools to understand so-called touchpoints and the challenges from the end-user’s perspective. Then, we will try to translate the needs and wishes of the end-user to tailored solutions. Finally, we will learn about “prototyping tools” to visualize the solutions and discuss with the end users as early as possible. You will need this prototype amongst others to communicate in an efficient and stimulating way about the concept of your innovation during the co-creation session with older individuals.

Lecture: Technification of ageing

Location: on campus

Description of the working group

In this lecture we will investigate the relation between technology and ageing. In recent years billions of Euro’s have been invested in gerontechnology. The uptake of these technologies in the lives of older people has been relatively little. Recent studies at the intersection of social gerontology and STS (science and technology studies) shed light on why this is the case. Making use of concepts and theories from these fields we will discuss the design and (non-)use of gerontechnologies and ask questions about whether innovation for older people and for instance forcing older people to use technologies is the right thing to do.

NSE clarification

Description

In this short 15 minute session, the management of the master V&A will give a short update on the results of the NSE (annual national student survey) of the previous year and will ask the students to fill in the questionnaires which are distributed online via the MFLS. We need your support to obtain as much responses as possible. The NSE is used by potential students to decide which study they would like to do. So the more students complete the survey, the more reliable the data and the better potential students know what to expect of our master’s programme.

Workgroup step 5: Cocreation innovation with members of Elderly Council

Location: on campus

Description

Getting acquainted with members of your target population is important for designing interventions that suit their needs and preferences. Otherwise, there is little chance that your innovation or intervention will provide sustainable solutions for the challenge you are working on. Nowadays, we even gradually become aware that we do not just want to consult our target population and ask whether they like what we are designing for them, but also involve them as partners in the process.

Cocreation refers to a strategy that brings together different stakeholders. The objective is to obtain a blend of different perspectives in jointly creating interventions or innovations. Older individuals volunteer to give you the possibility for receiving feedback on your prototype. We strive for an intimate 'consultancy setting' in which subgroups are allocated to different members to discuss their prototype. Please do not try to 'sell' your intervention or innovation, but instead be open to constructive feedback.

DEADLINE: Submit tentative division of filming tasks in group (via Brightspace CIS)

Working group: Storyboarding (CIS)

Location: on campus

Description

Students will come to class with some rough ideas on how to translate their challenge and innovation to an audiovisual message. The class will offer a chance to brainstorm, workshop existing ideas, and move toward more concrete plans in the form of a storyboard.

Design Thinking Phase ‘Materialize’

Question hour step 6: Making a plan for evaluation (by registration)

Location: Kaltura

Description

Dr. Stella Trompet is available to discuss the work plan to evaluate or study the intervention you have created.

The final work plan (see part 3 of the instructions for the innovation paper) has to contain all the following elements: the hypothesis and research question, the study design, data collection methods, (statistical) analysis, ethical considerations and approval, and planning and feasibility. If applicable, you describe the intervention and control group (with in- and exclusion criteria, selection methods and number of subjects), the primary and secondary outcome measures, potential bias and confounding. In total the description of the work plan will take up approximately ½ an A4-page of your paper, so every element can be described briefly.

DEADLINE: submit 2nd draft of innovation paper (via Brightspace CIS)

DEADLINE: submit peer feedback innovation paper (via Brightspace CIS)

Working group: Writing clinic (CIS)

Location: on campus

Description

Students will have completed the second draft of SSA2 prior to this class. We will look in-depth at specific areas for improvement. Working in small groups, students will be guided through the review process-enabling them to hone their communication skills and improve their Innovation Paper. Specific aspects of academic writing will be addressed, based on need, and individual tutor feedback will be given.

Lecture step 7: Implementation

Location: on campus

Description

For a successful implementation you have to be aware of all people, professionals and organizations that are directly or indirectly involved in your intervention or innovation or that may have an influence on how it will be used in daily life.

Workgroup regarding step 7: Making a stakeholders analysis

Location: on campus

Description

For a successful implementation you have to be aware of all people, professionals and organizations that are directly or indirectly involved in your intervention or innovation or that may have an influence on how it will be used in daily life. In this working group you will make an analysis of such stakeholders that may play a key role in implementing your intervention and you will be able to discuss your application of the RE-AIM model

Assessment: Debate The Older Individual

Location: on campus

Description

Following the theory and techniques learned in the previous debate, today a debate will be organised on topics of The Older Individual. The students will participate in the debate and they will get a grade.

Working group: Plenary Q&A session innovation paper (CIS)

Location: CIS Kaltura channel

Description

This online “walk-in” session offers students the chance to ask any questions they might still have about writing their paper.

DEADLINE: hand-in Innovation Paper (via Brightspace CIS and OI)

Working group: Video Feedback Session (CIS)

Location: on campus

Description

This class will give students the opportunity to share and workshop their group videos with input from the group and tutors.

DEADLINE: hand-in Innovation Video (via Brightspace CIS and OI)

Closing event: Presentation of innovations to elderly board and pitchers UNCZH

Location: on campus

Description

Today you will hold your final video presentation of your innovation to an online delegation of the elderly board, pitchers, peers as well as members of the master's team.

Further information and instructions on the innovation pitches will be given during the CiS working groups.

Network event / Closing drinks OI

Location: on campus

Corona measures permitting, drinks are organised to celebrate the completion of the OI module, for students, master team members and guests participating in the presentation session of this afternoon.

Rubrics OI

Innovation paper

Part		Not sufficient	Satisfactory	Good	Excellent
	Title	Unclear or poorly stated	Satisfactory stated title	Complete title, well related to the paper	Complete, attractive title, well related to the paper
	Abstract	Missing or too long or too short or does not contain several key elements (e.g., background, description of target group, innovation, and implementation).	Abstract contains all core elements (e.g., background, description of target group, innovation, and implementation). The different parts of the abstract could be proportionated better.	Well written with relevant background, description of target group, innovation, and implementation. Core elements are in proportion to each other.	Excellently written, clear and concise abstract with highly relevant background, description of target group, innovation, and implementation. Core elements are in proportion to each other.
1a	Scientific introduction	Challenge or perspective on the problem definition is missing, not clear or inadequately formulated. No references to literature or inadequate references.	Gives satisfactory perspective on the problem. Description is understandable, although the structure can be improved. Uses adequate, but only limited references to literature.	Gives a good and wider perspective on the problem in its scientific context. States why the challenge is important to study. Uses relevant references to literature.	Gives a clear and in-depth perspective on the problem in its scientific context. What is known and what is unknown. Clearly states why the challenge is important to study. Uses highly relevant references to literature. Well suited for the course.

Part		Not sufficient	Satisfactory	Good	Excellent
1b	Analysis of the determinants & visual representation	Description of determinants is missing, unclear or important key determinants are lacking. Analysis of determinants is missing, unclear or inadequate. The visual representation is missing or unclear or lacks important key determinants.	Determinants are adequately described. Key determinants are included. Rationale for selecting determinants is satisfactory but could be described with more detail. The visual representation is satisfactory.	A good range of relevant determinants, including key determinants are clearly described, categorized and where possible, based on scientific literature. The rationale for selecting determinants is clear and the target group is included in the rationale. The visual representation is good and adequate.	Excellent analysis of all relevant determinants, where possible based on scientific literature. The rationale for selecting determinants is very clear and well fine tuned to the target group. The visual representation is very clear and comprehensive.
2	Innovation	It remains unclear how the innovation is related to the challenge or the logic model or it does not become fully clear what the innovation actually is or how it is supposed to work. The rationale for why this innovation fits the target group is missing or remains unclear.	Innovation is based on the challenge and logic model and main elements, including working mechanisms are satisfactory described. The rationale for why this innovation fits the target group is given, but how it is tailored to the target group could have been made more clear.	Innovation is adequately based on the challenge and logic model. Description is clear and comprehensive. The working mechanisms that are presented are adequate. It becomes clear how the innovation is tailored to the target group.	Innovation is clearly based on the challenge and logic model and is clearly presented in a structured and comprehensive way. The working mechanisms are adequate and well described. The rationale for why the innovation fits the target group is clear and appealing.

Part		Not sufficient	Satisfactory	Good	Excellent
	Discussion about innovation	Not relevant to the innovation or poorly structured. No or poor connection to the challenge. No or poor connection to other research. Strength and weaknesses of the innovation are lacking or remain unclear.	Satisfactory discussion of the innovation and strength and weaknesses of the innovation are described. Reference to the scientific literature is sufficient.	Well written, well structured discussion of the innovation in relation to the challenge. Strength and weaknesses are discussed. There is an adequate reflection on how the innovation relates to the scientific literature.	Very well written discussion of the innovation in relation to challenge. Strength and weaknesses and potential bias are discussed and put into a comprehensive scientific perspective. Excellent structure.
3	Study design for future research	Research question is missing or not relevant to the innovation or inadequately formulated. Not suited or poorly suited for investigation of the research question or not described or poorly described. Not applicable or poorly used method.	Satisfactorily formulated research question although it could be more clear or relates relatively implicitly to the innovation or intervention. Method reasonably suited for investigation of the research question and sufficiently described.	Well-stated research question; relates to the innovation or intervention. Method well suited and applicable for investigation of the research question.	Clearly stated research question. Is challenging and innovative and applies well to the innovation or intervention. Method well suited and clearly described with correct references if applicable. Correct method for investigation of the research question. Clearly applicable and innovative.
	Implementation plan	Implementation plan is lacking or not feasible. Responsibilities are poorly arranged. Barriers and facilitators are not or vaguely mentioned.	Implementation plan is mainly feasible, although some parts are questionable. Discussion of some responsibilities, barriers and facilitators.	Implementation plan is feasible. Responsibilities for implementation are described. Most of the barriers and facilitators are discussed.	Very feasible implementation plan. Responsibilities for implementation are well described. A well-thought description of barriers and facilitators.

Part		Not sufficient	Satisfactory	Good	Excellent
	Conclusion/recommendation	Missing or not satisfactorily related to innovation or target group.	States a reflection on the innovation or innovation and the target group in general.	States well formulated recommendations on the use of the innovation or intervention and how it suits the target group.	Appealing and realistic recommendations on the use of the innovation or intervention and its implications for the target population. Very well formulated.
	References (as a whole)	Missing, irrelevant, too basic or poorly organized references.	Satisfactory use of mostly adequate references in the correct order	Good use of relevant references properly referred to in the text. All references in the correct order and the same format.	Clearly relevant references used, skilfully referred to in the text. All references in the correct order and the same format.
	Persona (Attachment)	Persona is missing, description is incomplete or not at all reflective of the target population.	Satisfactory, but somewhat 'flat' description. It could be more clear from the persona why this is a typical user within the specified target group.	Good description with sufficient details that makes clear why the persona is a typical user of the specified target group. Only minor aspects are underdeveloped or missing.	Excellent and lively persona. Very good description that makes fully clear why the persona is a typical user of the specified target group.

Rubric for video pitch about innovation

	Not sufficient	Satisfactory	Good	Excellent
Relevance	Not (sufficiently) clear why addressing the challenge is important or urgent and why it is relevant for the selected target population or the target population remains unclear.	Gives satisfactory perspective on the why addressing the challenge is important and urgent, and why this is relevant for the selected target population.	Gives a good perspective on why addressing the challenge is important and urgent and why it is relevant for the selected target population.	Clear and compelling explanation of why the challenge is important and should be urgently addressed, and it is fully clear why the challenge is especially relevant for the selected target population.
Innovation	It remains unclear how the innovation is related to the challenge or it does not become fully clear what the innovation actually is. Illustrations with faults or missing.	Innovation is based on the challenge and is illustrated. The rationale for the innovation for the subgroups is described. Satisfactory illustration.	Innovation is adequately based on the challenge and is adequately presented. Adequately structured and well-illustrated. The rationale for the specific subgroups and expected outcomes are adequately explained.	Innovation is clearly based on the challenge and is clearly presented. Clearly structured and well-illustrated. The rationale for the specific subgroup and expected outcomes are clearly explained.
Reflection on implementation/ plan of action	Plans of implementation are lacking or not feasible. Responsibilities are poorly arranged. Plan of action is lacking or only vaguely mentioned.	Plans for implementation are mainly feasible, although some parts are questionable. Satisfactory presentation of the plan of action.	Plans for implementation are feasible. Responsibilities for implementation are clear. The plan of action is good.	Very feasible implementation plans. Responsibilities for implementation are well mentioned. A well-thought presentation of the plan of action.

	Not sufficient	Satisfactory	Good	Excellent
Discussion with audience about video	Poor preparation. Answers are not clear and not suitable for the audience.	Preparation is adequate. Answers sometimes lack accuracy, but seem to suit the audience satisfactorily.	Good preparation and accurate answers, which suit the audience.	Strong preparation and clear well considered answers, which suit the audience very well.

Assessment matrix OI

CREDITS Line
<ul style="list-style-type: none">• Credits will only be given if besides passing each exam/summative assignment, the formative assessments (listed below) are also completed.• Per year, each line consists of 5 credits.• If an assessment is done too late without permission of the study-advisor, the maximum grading will be lowered (grading at most 7.0)• If a student failed for an assessment, the student will get a retake or revision or has to fulfil an alternative assignment. In case of revisions or alternative assignments, the maximum grading will be at most 7.0• The written essay exam is a take home essay exam from 9 a.m. till 5 p.m.• On behalf of the examiner, the written assignments (written essay exam and innovation paper) will be assessed by a staff member. If there is doubt about pass/fail or if a student fails, a second staff member will also assess the assignment. These assessments are discussed in a consensus meeting in which the grade is determined by the two staff members.• Additionally, as validation, a second staff member will assess a random sample of 10-20% of the assignments (written essay exam and innovation paper separately). In case this validation reveals a large discrepancy (≥ 2 points) in one of the assignments, all the corresponding assignments (written essay exam or innovation paper) will be assessed by a second staff member. The examiner will determine the final grades, in general as the mean of the two grades.• Please note, in this assessment plan only compulsory assessments are mentioned. The other (formative) activities are described day-by-day in the course book.• Every result will be registered in the Grade Center and converted in a grade in Usis when all components are completed.

CREDITS Course: Older Individual: 10 ECTS					
Assessment	Weighing (%)	Passing the Assessment is compulsory? (Yes/No)	Result expressed as:	Cut-off score (pass / fail)	Resit / Retake (Yes/No)
Written essay exam	50%	Yes	Grade	5.5	Yes, March 2024
Innovation paper	40%	Yes	Grade	5.5	Yes, March 2024
Innovation video pitch (group assignment)	10%	Yes	Grade	5.5	Yes, March 2024
Mini symposium diseases	-	Yes	Completed	-	Alternative assignment

Assessment plan OI

Learning outcomes	Learning objectives The student:	Formative assessment (->feedback)	Summative assessment (->credits)
Knowledge and understanding K2-has subject specific knowledge and understanding of somatic, psychological, functional and social mechanisms in older individuals, including healthy ageing and vitality;	is able to describe common diseases and impairments in older people	Mini-symposium Working groups and (peer) feedback sessions	Written essay exam
	is able to explain how somatic, psychological, functional and social mechanisms are related to vitality		
Applying knowledge and understanding A1-is able to critically analyse the challenges, shortcomings and opportunities in the fields of biology of vitality and ageing, older individuals and organisation of an ageing society;	is able to apply and review the value of the concepts such as risk and resilience factors, vitality in older age, and multidisciplinary interventions for older persons as a response to challenges to health and well-being		
	is able to analyse problems in light of multimorbidity		

Learning outcomes	Learning objectives The student:	Formative assessment (->feedback)	Summative assessment (->credits)
A3 -is able to tackle complex problems in the field of vitality and ageing by designing innovative solutions;	is able to apply the knowledge regarding intervention development to find a solution for a specific challenge that addresses the influencing factors of the challenge	Working groups and (peer) feedback sessions	Innovation paper Innovation video pitch (group assignment)
	is able to identify barriers and facilitators for implementing an intervention or innovation		
Judgement J1 - is able to base his or her decisions on the available scientific evidence and analyses of international practices, taking ethical and societal perspectives into account;	is able to critically establish the value and applicability of scientific results and studies for the older population	Working groups and (peer) feedback sessions	Innovation paper
	is able to analyse and identify the underlying mechanisms of challenges to vitality in older age		
	is able to explain the process of developing, implementing and evaluating innovations or interventions for ageing individuals		
J2 - values the perspectives of older people and is able to revise prior judgments accordingly	is able to take the perspectives of older people into account in considering strengths and limitations of an intervention or innovation.		Innovation paper Innovation video pitch (group assignment)

