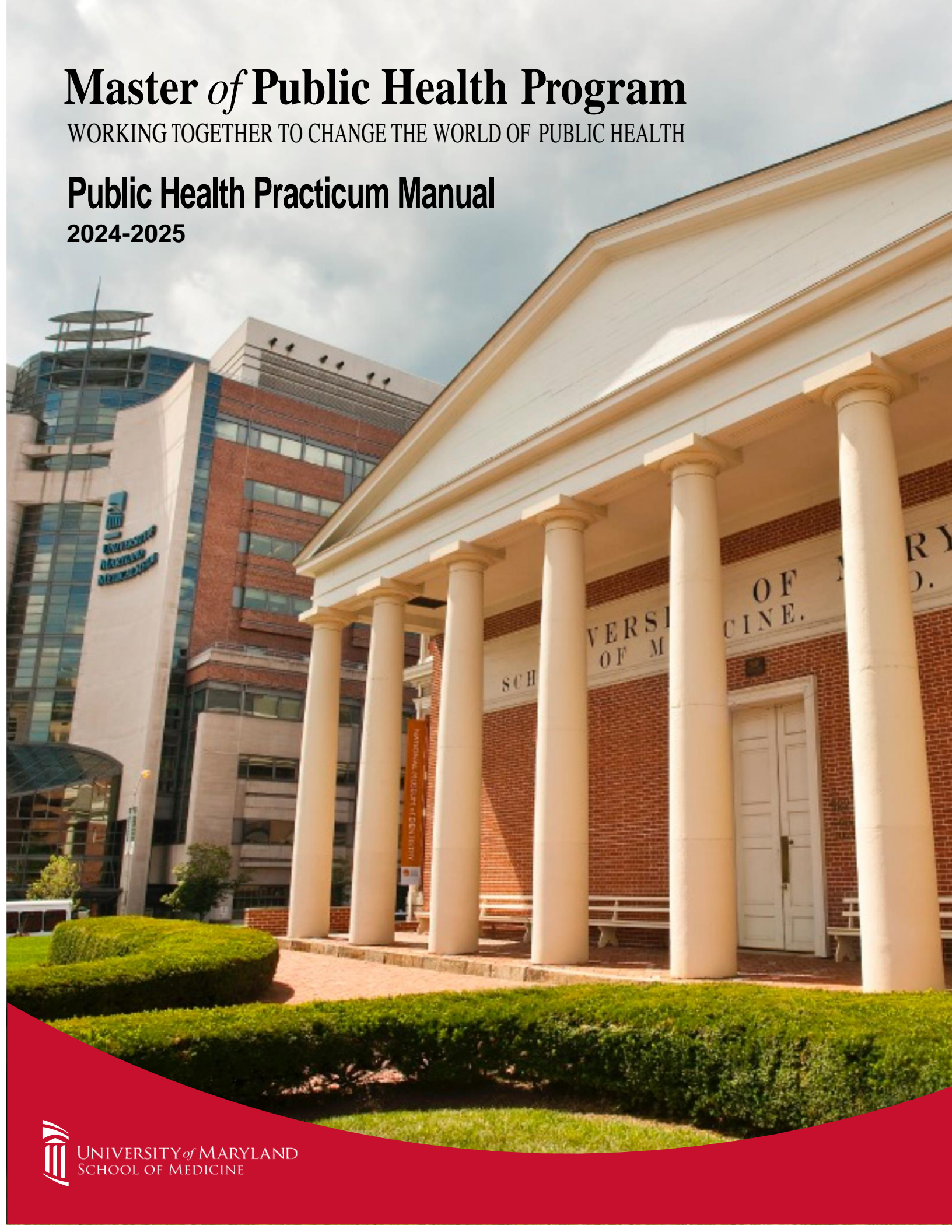


Master of Public Health Program

WORKING TOGETHER TO CHANGE THE WORLD OF PUBLIC HEALTH

Public Health Practicum Manual

2024-2025



UNIVERSITY of MARYLAND
SCHOOL OF MEDICINE

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Master of Public Health Program

Public Health Practicum Manual

Table of Contents

I.	Overview of the Public Health Practicum Experience	3
II.	Planning for the Public Health Practicum Experience	3
	A. Identification and Approval of a PH Practicum Field Placement Site	3
	B. PH Practicum at Work Site or Previous Field Placement Site	4
	C. Identification and Approval of a Site Preceptor	4
	D. Identification and Approval of PH Practicum Activities	4
	E. Institutional Review Board	5
	F. Development of the PH Practicum Prospectus	5
III.	Timeline for the Public Health Practicum Experience	5
	A. Registration for the PH Practicum Experience	5
	B. Duration of the PH Practicum Experience	6
	C. Site Visits and Progress Meetings	6
	D. Resolution of Issues Arising Within the PH Practicum Placement	6
IV.	Public Health Practicum Deliverables	6
	A. Reflection Paper	7
	B. Public Health Practice Experience Section of the MPH Student Portfolio	7
V.	Assessment and Evaluation of the Public Health Practicum Experience	7
VI.	Roles and Responsibilities	8
VII.	Appendix	10
	A. Core Functions and Essential Services of Public Health	10
	B. PH Practicum Competencies	10

I. Overview of the Public Health Practicum Experience

The Public Health (PH) Practicum is an intensive, immersive applied practice experience within a public health agency or organization that allows the students to put to practice what they learn in the classroom in preparation for a career as a public health professional. It represents a demonstration of the application of the knowledge and skills that have been acquired in the foundational and concentration courses taken as part of the MPH Program.

The PH Practicum includes the following five components that allow for students to develop and demonstrate attainment of public health competencies:

1. Identification of a PH Practicum placement site and on-site preceptor
2. Development of a PH Practicum Prospectus including identification of the five competencies to attain
3. Completion of a 240-hour supervised practice experience
4. Delivery of at least two products for the placement site. Examples include, but are not restricted to: project plans, grant proposals, training manuals or lesson plans, surveys, memos, videos, podcasts, multi-media presentations, spreadsheets, websites, posters, photos (with accompanying explanatory text), or other digital artifacts of learning
5. Development of a PH Practicum Reflection Paper for inclusion in the Public Health Practice Experience section of the MPH Student Portfolio

II. Planning for the Public Health Practicum Experience

Students are encouraged to meet with their faculty advisor(s) throughout their course of study to discuss potential PH Practicum ideas, vis-a-vis career goals, areas of interest, existing skills, skills to be developed/honed, etc. Students should begin the process of planning for the PH Practicum experience as early as possible, but no later than the beginning of the term prior to the one in which they plan to begin the field placement. For example, most full-time single degree students will start their practicum in Fall Block I of their second year. Therefore, planning for the practicum should begin in Spring Block II of their first year. The length of time needed for the planning process varies widely. The timeline will depend on a myriad of factors, such as whether the project is based outside of the US, requires funding and/or the student needs to be added to the IRB protocol, whether the field placement site has a lengthy clearance process, etc.

The first step in the process is to attend a PH Practicum Information Session. Students may attend these at any time after admission to the Program and may attend multiple times if desired. The sessions are held twice per term. During the Information Session, students will review PH Practicum policies and procedures and have the opportunity to ask any questions they may have.

A. Identification and Approval of a PH Practicum Field Placement Site

The PH Practicum field placement may take place in any of a wide variety of organizations that conduct public health activities, such as city, county or state health departments; federal agencies; or nonprofit organizations. A student who wishes to do a PH Practicum at his/her place of employment and/or a site in which a previous field training placement was completed may be permitted to do so provided the MPH PH Practicum experience is separate and distinct from those other activities. Details are provided in the section entitled *PH Practicum at Work Site or Previous Field Placement Site*.

Students are free to select any public health agency or organization that meets their interests and career goals and must work with the PH Practicum Director to seek approval of the proposed placement site. Additionally, according to the Council on Education for Public Health (CEPH 2024) accreditation criteria, “To be appropriate for applied practice experience activities, university-affiliated settings must be primarily focused on community engagement, typically with external partners. University health promotion or wellness centers may also be appropriate.”

If a student is having difficulty identifying a field placement agency independently, the PH Practicum Director and MPH Program Director maintain contact information for agencies that have indicated an interest in hosting our students and/or have served as placement sites for previous MPH students. All such sites will have a designated site liaison and/or site preceptor(s) who will be familiar with the UMB MPH Program.

In rare situations, certain agencies may provide stipends to program “interns.” However, in general, students should neither expect to receive payment nor pay for their PH Practicum field placements outside of the costs associated with the academic course credits required. PH Practicum sites are expected to provide students with resources necessary for their work at the site. The resource requirements may vary considerably by agency and project. However, those resources may include work space, computers, office supplies, parking spots, facility identification badges, etc. The University recognizes that, in certain cases, agency resource availability may be limited. The PH Practicum Director will strive to work with the agency and the student to devise plans to accommodate them wherever possible.

B. PH Practicum at Work Site or Previous Field Placement Site

Students may wish to undertake the PH Practicum within their current or previous work site or an agency in which they have completed a previous field placement. While this is not necessarily encouraged, such a placement is permissible as long as it addresses a problem that is pertinent to the public health educational goals of the student as previously formulated with her/his advisor(s). The PH Practicum activities must have a specific scope of work that extends beyond the scope of, or is something other than, the student’s duties related to the job and/or the other field training activity. In making this determination, the PH Practicum Director will look for indicators such as: substantively different responsibilities, a field placement in a different administrative unit and supervision by a different agency staff member. Students will also be required to specifically document in the prospectus how this experience differs from previous placements or jobs at the agency.

C. Identification and Approval of a Site Preceptor

Students must nominate a site preceptor to mentor them during the project. The site preceptor must be willing and able to mentor students and must have a combination of education (minimum Masters-level required) and experience that qualifies him/her as a public health professional (with 5 or greater years of public health experience). The site preceptor must submit a resume/CV and a signed site preceptor agreement to the PH Practicum Director who is responsible for reviewing and approving the nominee. In situations where it is necessary, students may be approved to have two preceptors.

The site preceptor and PH Practicum Director will review the responsibilities and expectations of their role in supervising the PH Practicum student prior to the start of the student’s field hours.

D. Identification and Approval of PH Practicum Activities

The PH Practicum is designed to be an individualized learning experience; thus, activities therein differ according to the needs of the student. However, all PH Practica must:

1. Be consistent with the mission and values of the MPH Program.
2. Fulfill one or more of the core functions of public health (see Appendix).
3. Have pre-specified competencies to attain; three foundational competencies from at least two domains, and at least two concentration competencies (see Appendix).
4. Be relevant to the student's career goals.

Students should initially work with their site preceptor to identify the specific activities that will be undertaken during the practicum, including the two products that will be created.

After students have selected a potential PH Practicum field placement site, a site preceptor and their proposed activities, they must work one-on-one with the PH Practicum Director to identify competencies and further plan the placement site activities.

E. Institutional Review Board

All persons affiliated with UMB who conduct research with human subjects must receive Institutional Review Board (IRB) approval prior to data collection. Students should receive required training (CITI and HIPAA) if they will participate in research with human subjects. Students will work with their site preceptors and the PH Practicum Director to ensure that all required IRB clearances are received as required.

Due to the nature of the PH Practicum experience, in most cases students involved in research at the PH Practicum field placement site will work on existing projects that have already received IRB approval by the principal investigator or project Director. Inclusion of the student may require an amendment to the IRB protocol by the principal investigator or a member of his/her research team. Students should not plan for a project that requires a new IRB submission to the UMB IRB.

F. Development of the PH Practicum Prospectus

After the student and PH Practicum Director have met to review the preceptor's qualifications and identify the competencies to be attained, the student drafts a prospectus using the guidelines outlined in the PH Practicum Prospectus template. The prospectus should demonstrate the student's ability to outline feasible, relevant, public health activities that will enable him/her to attain the competencies and develop at least two products created uniquely for the practicum placement site.

The prospectus draft is circulated for review to the site preceptor and PH Practicum Director. Drafts will need to be revised and re-reviewed until the prospectus receives approval by both parties.

III. Timeline for the Public Health Practicum Experience

Students may begin the field placement if the following criteria are met:

1. Satisfactory completion of at least 8 core courses and 9 credits of concentration courses
2. Approval of the PH Practicum prospectus by their site preceptor and PH Practicum Director
3. Completion of any field placement site requirements, e.g. training, security clearance, etc.
4. Registration for PH782

A. Registration for the PH Practicum Experience

Students must register for four credit hours of PH782 in order to graduate. All four credits will be taken in the primary term in which the field hours are accrued.

Please note that students who are receiving financial aid or who are registered as international students are responsible for assuring that they comply with those enrollment requirements, in addition to MPH Program requirements. For details, students should contact the relevant UMB offices: Student Financial Assistance and Education Office (<http://www.umaryland.edu/fin>) or Office of International Services (<http://www.umaryland.edu/ois>).

B. Duration of the PH Practicum Experience

The PH Practicum field placement requires a minimum of 240 contact hours, exclusive of the time devoted to preparation of the PH Practicum prospectus and preparation of the PH Practicum Reflection Paper. Based on a number of factors such as the needs of the student, the preceptor and the project and/or the agency's operating hours, those 240 hours may be completed in a consolidated six-week block or spread over a longer period of time. The student and the preceptor will work together during the PH Practicum planning phase to determine the timeline for the PH Practicum. This timeline must be included in the PH Practicum prospectus for review and approval by the PH Practicum Director. During the field placement the student will maintain an activity log that documents the date, duration and activities performed. This activity log will be reviewed by the site preceptor throughout the field placement. At the completion of the PH Practicum placement, the site preceptor will be asked to certify the student's completion of the PH Practicum hours.

C. Site Visits and Progress Meetings

The PH Practicum Director will make one site visit during the course of a student's field placement. The visit will be arranged in advance with the site preceptor and will be scheduled for a time when the student is on-site and has completed approximately one quarter to one half of the field hours. The site visit allows the student to update the PH Practicum Director on his/her progress. In the site visit, there will also be a discussion of the timeline and plans for completion of the remaining field hours and reporting requirements.

In addition to the site visit at the field placement agency, student progress will be evaluated during two progress meetings with the PH Practicum Director. Ideally, one will be held soon after the student begins the field placement and the second will be held closer to the end of the project. Those progress meetings will usually take place on campus, but alternate arrangements will be made with students with out-of-town placements. In addition to the required progress meetings, the PH Practicum Director and student should remain in contact throughout the process via email, telephone, or additional in-person meetings.

D. Resolution of Issues Arising Within the PH Practicum Placement

We do not anticipate that students will encounter any major issues at the field placement sites. However, should issues arise, we recognize that the ability to resolve conflict at the work site is a valuable skill and we encourage students to work with their site preceptor to address the concerns. Should the student feel uncomfortable doing so or feel that the problem remains unresolved, he/she should immediately report the issue to the PH Practicum Director. Similarly, site preceptors should initiate contact with the PH Practicum Director should the issue require additional intervention.

IV. Public Health Practicum Deliverables

After the completion of the field placement, each student will be required to: (1) write a Reflection Paper and revise as necessary, (2) assemble materials for the Public Health Practice Experience section of the MPH Student Portfolio. The guidelines for each of these requirements are described below.

A. Reflection Paper

Upon completion of the field placement students should draft the Reflection Paper using the guidelines outlined in the PH Practicum Reflection Paper template. The Reflection Paper is both a document that describes the PH Practicum activities and the student's reflection and self-assessment of the learning experience. The Reflection Paper draft(s) will be reviewed by the PH Practicum Director. Drafts will need to be revised and re-reviewed until the reflection paper receives approval for inclusion in the MPH Student Portfolio.

B. Public Health Practice Experience Section of the MPH Student Portfolio

Students should assemble the materials to be included in the MPH Student Portfolio, which documents a full record of the PH Practicum experience and demonstrates the attainment of the PH Practicum competencies. The following elements are included in this section of the portfolio:

1. Approved PH Practicum Prospectus
2. Approved PH Practicum Reflection Paper
3. Student-developed products (at least two) for the placement site
4. Signed activity log
5. Other artifacts from the field placement such as IRB approval letters for research projects, copies of slides from onsite presentation(s) and any other relevant materials. Confidential agency and/or client information should not be included. Therefore, the site preceptor should review the artifacts before the student submits them.

V. Assessment and Evaluation of the Public Health Practicum Experience

The PH Practicum is graded on a Pass/Fail basis. The PH Practicum Director makes the final determination of the student's grade taking into consideration the site preceptor's input.

Assessment
Public Health Practice Experience section of MPH Student Portfolio: <ul style="list-style-type: none">• PH Practicum Prospectus• PH Practicum Reflection Paper• Products (2 or more) created for the practicum placement site• PH Practicum Activity Log
Supplemental criteria: <ul style="list-style-type: none">• Student takes responsibility to contact Practicum Director for progress meetings and site visit scheduling• Student evaluation of Practicum Experience• Site Preceptor evaluation

The PH Practicum experience is evaluated in multiple ways: (1) students evaluate the PH Practicum experience and (2) site preceptors evaluate the student. These evaluations are reviewed by the PH Practicum Director who uses them to improve the process and summarizes them for program-level planning and decision-making.

VI. Roles and Responsibilities

This section summarizes the steps that the student, site preceptor, and PH Practicum Director need to take before, during and after the field placement.

Student

The MPH student will be responsible for working in collaboration with his/her faculty advisor(s), the PH Practicum Director and the site preceptor to plan and implement a PH Practicum experience that best meets his/her educational and career goals.

Before the Field Placement

1. Identify a PH Practicum field placement site, preceptor and project that meet MPH Program guidelines and serves the student's career development needs.
2. In collaboration with the site preceptor and PH Practicum Director, prepare a PH Practicum prospectus that meets the MPH Program guidelines and serves the needs of the agency or organization.
3. Obtain all necessary approvals for the PH Practicum prospectus.

During the Field Placement

4. Schedule regular supervision meetings with the site preceptor.
5. Complete all PH Practicum activities included in the approved prospectus, including the creation of two products for the placement site.
6. Take advantage of other learning opportunities at the field placement site.
7. Be professional in all dealings with the agency staff and clients.
8. Document all PH Practicum activities in the activity log.
9. Keep in contact with the PH Practicum Director about progress.
10. Initiate the site visit meeting with the site preceptor and PH Practicum Director.

After the Field Placement

11. Prepare the Reflection Paper for review by the PH Practicum Director.
12. Assemble the Public Health Practice Experience section of MPH Student Portfolio

Site Preceptor

Site preceptors are integral members of the MPH Program who are responsible for helping the program to meet its instructional and service goals. A preceptor fulfills this role by serving as the field instructor for students at the PH Practicum site. Preceptors also serve the program by participating in ongoing program evaluation and improvement efforts, both informally and formally.

Before the Field Placement

1. Become familiar with the requirements of the PH Practicum as described in the PH Practicum manual.
2. Submit a current CV/resume documenting the education and experience necessary to support his/her designation as a qualified public health professional.
3. Assist the student to identify activities that meet the needs of the placement site, allow the student to attain the competencies identified in the prospectus and satisfies the MPH Program criteria.
4. Complete the site preceptor agreement.
5. Review, provide comments, and when satisfied, approve the PH Practicum prospectus.

During the Field Placement

6. Provide the level of orientation to the agency necessary for the student to function efficiently.
7. Provide the student with the agreed-upon resources necessary to complete the PH Practicum activities.
8. Supervise and provide feedback to the student during the field placement, including regular meetings with the student at least once each week (or once per 40 hours).
9. Certify documentation of the student's field hours in the activity log at the midpoint of the field placement.
10. Allow the student to maximize learning at the placement site by including the student in relevant meetings, introducing him/her to a variety of public health professionals, and exposing him/her to other projects being undertaken at the placement site.
11. Communicate with the PH Practicum Director about any unforeseen issues that might arise during the placement, including student performance concerns, inability to complete preceptor responsibilities, etc.
12. Participate in the site visit meeting.

After the Field Placement

13. Complete a summary evaluation of the student using the form provided.
14. Certify completion of the field hours in the activity log.
15. Approve artifacts to be included in the MPH Program Portfolio.
16. Provide input to the MPH Program to assist with program evaluation, including suggesting ways in which to maximize our ability to prepare our students for careers in public health, ways to improve the PH Practicum experience, etc.

PH Practicum Director

The PH Practicum Director is a faculty member of the MPH Program and has overall responsibility for administration of the PH Practicum experience. The PH Practicum Director reports to the MPH Program Director and the MPH Curriculum Committee on matters related to PH Practicum design and evaluation.

Before the Field Placement

1. Assist in planning the student's PH Practicum experience.
2. Determine the acceptability of activities, placement sites and site preceptors.
3. Review, provide comments, and when satisfied, approve PH Practicum prospectus.

During the Field Placement

4. Monitor student progress during the PH Practicum (includes two progress meetings with students and one site visit).
5. Assist with problem-solving at the PH Practicum site if any problems arise.

After the Field Placement

6. Review, provide comments, and when satisfied, approve Reflection Paper.
7. Review contents of the Public Health Practice Experience section of the MPH Student Portfolio.
8. Submit PH Practicum final grade.
9. Solicit and take action on evaluations received from students and site preceptors.

VII. APPENDIX

A. Core Functions and Essential Services of Public Health

Suitable projects for the field placement will fulfill one or more of the three functions of public health, as articulated in The Future of Public Health by the Institute of Medicine (1988): assessment, policy development or assurance. The activities subsumed under these three functions were developed under the auspices of the Public Health Functions Project and produced as the following Ten Essential Public Health Services, updated 2020 (<https://www.cdc.gov/publichealthgateway/publichealthservices/essentialhealthservices.html>):

1. Assess and monitor population health status, factors that influence health, and community needs and assets
2. Investigate, diagnose, and address health problems and hazards affecting the population
3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
4. Strengthen, support, and mobilize communities and partnerships to improve health
5. Create, champion, and implement policies, plans, and laws that impact health
6. Utilize legal and regulatory actions designed to improve and protect the public's health
7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
8. Build and support a diverse and skilled public health workforce
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
10. Build and maintain a strong organizational infrastructure for public health

B. PH Practicum Competencies

As the applied practice experience for the MPH Program, the PH Practicum enables the student to integrate learning from across the curriculum and apply it in a professional setting. In the PH Practicum experience, students will undoubtedly further develop any number of program foundational and concentration competencies; those will vary based on the activities undertaken. However, all students will be required to identify and attain five competencies; three foundational competencies from at least two domains, as well as two competencies specific to their concentration area.

Foundational Public Health Competencies

Evidence-based Approaches to Public Health

1. Apply epidemiological methods to settings and situations in public health practice
2. Select quantitative and qualitative data collection methods appropriate for a given public health context
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate
4. Interpret results of data analysis for public health research, policy, or practice

Public Health & Health Care Systems

5. Compare the organization, structure, and function of health care, public health, and regulatory systems across national and international settings
6. Discuss the means by which structural bias, social inequities, and racism undermine health and create challenges to achieving health equity at organizational, community and systemic levels

Planning & Management to Promote Health

7. Assess population needs, assets, and capacities that affect communities' health
8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs
9. Design a population-based policy, program, project, or intervention
10. Explain basic principles and tools of budget and resource management¹
11. Select methods to evaluate public health programs

Policy in Public Health

12. Discuss the policy-making process,² including the roles of ethics and evidence
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes
14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations³
15. Evaluate policies for their impact on public health and health equity

Leadership

16. Apply leadership and/or management principles to address a relevant issue⁴
17. Apply negotiation and mediation skills to address organizational or community challenges⁵

Communication

18. Select communication strategies for different audiences and sectors
19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation
20. Describe the importance of cultural competence in communicating public health content

Interprofessional and/or Intersectoral Practice

21. Integrate perspectives from other sectors and/or professions to promote and advance population health⁶

Systems Thinking

22. Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative⁷

Concentration Competencies

Community and Population Health

1. Use theories and models from social and behavioral science to address individual, community and population health in public health research and practice.
2. Engage with diverse partners (e.g., community residents, governmental public health agencies, healthcare organizations, educational institutions, and/or nonprofit agencies) to promote health equity in populations at the local, state, national, and/or international level.
3. Design and advocate for evidence-based, sustainable interventions that align with urban community health needs.
4. Employ health survey research methodology to critique existing survey data and construct a novel survey instrument to measure population health metrics.
5. Use appropriate communication media with linguistic and cultural proficiency to disseminate relevant public health information to stakeholders.

Epidemiology

1. Apply epidemiologic methods and principles to the design of observational studies.
2. Participate in the design and planning of a clinical trial.
3. Use advanced multivariable statistical methods to answer public health research questions.
4. Conduct secondary data analysis using large, public-access datasets.
5. Critically evaluate the strengths and limitations of epidemiologic research.

Global Health

1. Analyze the roles, relationships, and resources of the entities influencing global health.
2. Apply ethical approaches in global health research and practice.
3. Apply monitoring and evaluation techniques to global health programs, policies and outcomes.
4. Propose sustainable and evidence-based multi-sectoral interventions, considering the social determinants of health specific to the local area.
5. Design sustainable workforce development strategies for resource-limited settings.
6. Assess the burden of communicable and non-communicable causes of morbidity and mortality worldwide.
7. Advocate for interventions to improve the health of immigrant and refugee populations.

¹“Resource management” refers to stewardship (planning, monitoring, etc.) of resources throughout a project, not simply preparing a budget statement that projects what resources will be required.

²This competency refers to technical aspects of how public policies are created and adopted, including legislative and/or regulatory roles and processes, ethics in public policy making, and the role of evidence in creating policy.

³This competency refers to the ability to influence policy and/or decision making, such as through stakeholder mobilization, educating policy makers, etc. Ability to argue in support of (or in opposition to) a position, as in a standard debate, is not sufficient. Students must produce a product that would be part of an advocacy campaign or effort (e.g., legislative testimony, fact sheets, advocacy strategy outline, etc.).

⁴Such principles may include creating a vision, empowering others, fostering collaboration, and guiding decision making.

⁵“Negotiation and mediation,” in this competency, refers to the set of skills needed when a common solution is required among parties with conflicting interests and/or different desired outcomes. Such skills extend beyond the level of negotiation required in a successful intra-group process; effective communication within a work group or team is more closely related to competency 16.

⁶This competency requires direct engagement (in-person or online) between the student and an individual or individuals in a profession or sector other than public health; students must combine the external sector/profession’s perspective and/or knowledge with their own public health training to complete a task, solve a problem, etc. Role-playing, in which public health students assume the identity of an individual from another profession or sector to which they do not already belong, is not an acceptable substitute for actual engagement with an individual or individuals from a profession or sector outside of public health.

⁷Systems thinking tools depict or map complex relationships, demonstrating, for example, how component parts of a system interact with and influence one another. Examples include causal loop diagrams, systems archetypes, network analyses, and concept maps. Logic models and evidence tables are not sufficient to address this competency.