2.4 PRACTICAL SKILLS. ALL GRADUATE PROFESSIONAL PUBLIC HEALTH DEGREE STUDENTS MUST DEVELOP SKILLS IN BASIC PUBLIC HEALTH CONCEPTS AND DEMONSTRATE THE APPLICATION OF THESE CONCEPTS THROUGH A PRACTICE EXPERIENCE THAT IS RELEVANT TO STUDENTS’ AREAS OF SPECIALIZATION.

2.4.a. Description of the school’s policies and procedures regarding practice experiences, including the following:

1. Selection of sites.
3. Opportunities for orientation and support for preceptors.
4. Approaches for faculty supervision of students.
7. Criteria for waiving, altering or reducing the experience, if applicable.

For a detailed description of our practicum experience for the MPH degree, see: http://publichealth.gwu.edu/academics/practicum. All necessary Practicum-related information and forms, for students and preceptors alike, can be found at this link.

During the Practicum, it is our goal for students to connect theory learned in the classroom with the reality of day-to-day work in public health. Ultimately, our aim is that students develop the practical skills in their Practicum experiences that will make them valued members of the workforce while also applying their newly developed knowledge and competencies in a non-academic setting. The Practicum is also an opportunity for our students to cultivate relationships through networking, negotiating, developing work plans, and interacting with their colleagues both within and beyond the scope of the project and work site.

1. Selection of sites

As public health diversifies, the need for interdisciplinary and inter-professional teams from across the social impact arena also grows with it. At the SPH, part of our mission is to prepare students to be impactful workers across the entire field of public health. We have sought to assure that students have opportunities to gain experience at a broad range of sites, from traditional public health settings such as government health agencies, local health centers, non-profits, and policy think tanks, to business development groups, consulting firms, building councils and other organizations.

Candidate organizations become known to us via a number of referral mechanisms. The School maintains a database of practicum opportunities. While students also interact regularly with departmental faculty and staff dedicated to advising them on the numerous practice opportunities within the School’s network. These connections are important, as site/preceptor selection can impact how the student’s
practicum plans align with the departmental and track-specific practice competencies. In addition to the departmental advisory services, the Dean’s Office, the Office of Student Affairs, the Career Center and our student organizations host networking events designed to introduce students to public health and social impact organizations, and to enhance and expand the School’s practice platform. We also directly engage relevant organizations. This year alone, meetings with NACCHO, ASTHO, APHA, HHS, and Metro Washington Council of Governments (MWCOG) promise to yield good returns for both our students and these organizations. Often it is day-to-day interactions between our faculty, staff, and outside organizations and agencies (e.g., PAHO, the DC DOH, and local and state health agencies) that generate and sustain partner interest in hosting our students for their practica.

The overall objectives in practicum plans are written in collaboration with the Preceptor and must be aligned with the learning objectives of the program and the track. Practicum site selection is done on an individual basis, meaning that the scope, focus, and approach taken in the experience will vary depending on the degree and track the student is pursuing, departmental and program considerations, and the students’ individual professional goals, interests, and objectives.

Site and preceptor applications are linked in our online system where site preceptors must provide us with basic information about the site, their physical address, points of contact, and other pertinent information to assure us the organization is a *bona fide* one. Once this information has been reviewed, the system electronically notifies preceptors as to whether or not their site and preceptor applications have been approved. This review starts at the departmental level where a Practicum Director reviews and approves the sites before the school-level review is completed by the Associate Dean for Practice. Once a site is approved, the system allows students to apply to be linked to that preceptor and site. Once this linkage is established, the student must upload a practicum plan for review by their departmental Practicum Advisor. This plan contains learning objectives that we require to be aligned with the program and track academic competencies. A Practicum may not commence until the plan is approved by the Advisor.

Practicum partners are an important part of the professional development network we build for our students, but there are internal components for that network as well. Primary among those is the Interdisciplinary Student Community-Oriented Prevention Enhancement Service (ISCOPES) program wherein students from the schools of public health, medicine, nursing, and education collaborate in a year-long, innovative, inter-professional service-learning program. ISCOPES is a volunteer workforce development opportunity, and does not serve as a Practicum site, but the skills students learn are transferred to the work they do for their Practicum and Culminating Experiences. More information about ISCOPES is available in Criteria 3.2.e- Workforce Development.

2. Methods for approving preceptors

As the individuals responsible for the onsite management, mentorship, and evaluation of students, preceptors are carefully screened. At the SPH, this process falls to the department’s Practicum Directors.
and the Associate Dean for Practice. Prior to gaining full access to the online system, every preceptor’s profile is reviewed by a Practicum Director and then approved by the Associate Dean for Practice, similar to what is done with sites. These approvals all take place within our online system where we pay particular attention to each prospective Preceptor’s education, work history, and duration of their experience since attaining their most recent degree. Applicants with a health-related degree such as an MPH, DrPH, PhD in a public health field, MD, DO, etc. are required to have at least three years of independent work experience since attaining that degree. Those holding “non-health” masters / doctoral degrees need five years of experience; those without a master’s degree need a minimum of 10 years of work experience.

Applying this rubric to the selection of preceptors helps us ensure that the professionals we have working with our students are able to mentor them, assist in their practice endeavors, and help them develop professionally.

3. Opportunities for orientation and support for preceptors

Preceptors are introduced to the school by several methods. Some come to us directly via our networks of students, staff and faculty. We host events, such as “Practicum CONNECT” to introduce prospective preceptors to our students and practice operations. Often we identify practicum preceptors via their participation in one of our numerous research projects, at events held on campus and in the District or when we attend professional meetings. At times our students identify potential preceptors; others are identified via our extensive alumni network. Preceptors referred to us are encouraged to review the online Preceptor guidebook and the slides from our Preceptor training resources (available on our website). They also have access to all our departmental Practice Advisors.

Each Spring semester we host a live, on-campus preceptor training. Typically 15-25 preceptors attend this two-hour event where they have a chance to meet and ask questions of the Associate Dean for Practice and others. At the end of each academic year, the Dean hosts a Preceptor Appreciation luncheon where we thank our practice partners for working with our students.

4. Approaches for faculty supervision of students

Each department has at least one faculty member assigned to the function of advising and guiding students through their practicum experience along with staff members to assist with the coordination of student efforts. In smaller departments, the faculty member may also be the Practicum Director. The School provides a general student orientation for academics, practice, and research; our departments independently augment this with sessions designed to introduce students to the competencies and objectives that are specific to each area of concentration. Faculty that oversee the practicum experience have access to the online system that students use to log their hours and upload their mid-cycle reports (ERF 2.4.a: Department Practicum Directors). Hence, regardless of where the practicum is physically taking place, faculty can follow student progress and help address any issues or challenges that might arise during the practicum.
5. Means of evaluating student performance

In consultation with the department/program Practicum Director, students are required to identify up to three program competencies to target in their practicum in order to ensure a robust learning experience. After logging the required 120 hours, students are required to complete a self-assessment; a two-part Final Evaluation which includes a Practicum Report; and a Practicum Assessment. For the final Practicum Report/Evaluation, each student will:

- Outline the learning objectives targeted;
- Demonstrate how the practicum related to the relevant program/track competencies and MPH coursework;
- Illustrate ways in which the practicum offered the opportunity to gain new skills or learn new information as it relates to public health;
- Specify any challenges faced during the practicum;
- Describe the most rewarding aspects of the practicum experience;
- Explain how the practicum contributed to the development of specific career goals; and
- Share thoughts on the site/preceptor/experience.

A few examples of how students link learning outcomes (LO) with competencies include:

- **Environmental Health Competency:** Assess environmental and occupational exposures. **LO:** Use air-monitoring equipment correctly for taking meaningful workplace samples.
- **Global Health Competency:** Apply knowledge of global health patterns and determinants in support of global health research. **LO:** Conduct a needs assessment in response to avian influenza in Uganda.
- **Health Policy Competency:** Assess the methodology and quality of research results. **LO:** Synthesize and summarize health care policy news as it relates to children, low-income families, and Medicaid.

As noted above, in the Student Practicum Final Evaluation/Practicum Report & Practicum Assessment, students are asked to outline the identified learning objectives and describe to what degree they were able to meet them during the practicum experience. Examples of final practicum reports are located in ERF 2.4.a.: Student Practicum Final Evaluation/Practicum Report Samples.

For the Practicum Assessment, each student rates the practicum experience, provides feedback on the materials, and rates the support they received while engaged in this aspect of their education.

The Practicum Final Evaluation/Practicum Report & Practicum Assessment serves as a tool for the Practicum Director and Faculty Advisor to evaluate the student’s work. It is also an opportunity to document the success achieved in the engagement with the practicum site.
Site Preceptors submit an evaluation assessing each student’s performance. See ERF 2.4.a.: Preceptor Evaluation Form and Preceptor Evaluation Samples. The final decision regarding the student’s grade is made by the faculty member serving as the department’s Practicum Director. This decision is based upon the student’s Final Evaluation and the Site Preceptor’s Evaluation. Follow these links to learn about some representative MPH student practicum experiences: http://publichealth.gwu.edu/departments/environmental-and-occupational-health/practice-experience and http://intrahealth.tumblr.com/post/130284642728/empowered-health-workers-powerful-health-systems.

6. Means of evaluating practice placement sites and preceptor qualifications

Prior to receiving practice placement, Site Preceptors are required to submit a Practicum Site Application and a Site Preceptor Application; these are reviewed at both the department and the school levels. To be approved, Site Preceptors must demonstrate substantial experience in public health (or related disciplines), the ability to actively engage students in their work, commitment of time to contribute to a student’s professional development, and the willingness to provide constructive feedback and guidance.

When a practice placement is completed, students evaluate the site, preceptor, and the practicum experience as a whole via completion of the “Final Evaluation” ERF 2.4.a.: Practicum Student Evaluation Form. Examples of Student Evaluations are included in ERF 2.4.a.: Student Practicum Evaluation Samples. This information is considered in future years when approving sites for future practice placements.

7. Criteria for waiving, altering or reducing the experience, if applicable.

The SPH has a diverse student body with some graduate students coming to us with years of experience in public health or related fields. We strongly encourage all students to pursue a practicum; many of our students complete internships in addition to the required practice experience. After consultation with their academic and practice advisors, some of our more experienced students take the opportunity to seek other elective credits by using their prior work experience to waive the Practicum and replace it with courses that better serve their professional and academic development needs.

In order to do this, students are asked to complete the Practicum Experience Equivalency form – available here: http://publichealth.gwu.edu/practicum/download/PEE.pdf – in which special attention is paid to the work they were engaged in and how that work aligns with the competencies of their academic program. We also consider their length of service in the field.

Note: The Practicum requirements are essentially the same for all of the tracks of the MPH, regardless of delivery modality. The Practicum guide, preceptor guide and reporting requirements are the same across all programs and are included in the ERF. Briefly stated, the practicum is a planned, supervised and evaluated practice experience in the student’s field of study within public health designed to achieve certain learning objectives. It consists of 120 hours of real-world work experience completing tasks on-site that is then evaluated by both the supervising preceptor in the field in conjunction with the GW Practicum Coordinator.
MHA Degree

Practice experiences in the MHA program occur over the entire duration of the two-year program. An emphasis on experiential learning and community service are particular strengths of the program. From the very beginning, students are provided the opportunity for professional development. On Fridays, one of three professional enhancement experiences is offered: 1) Executive in Residence (EIR), where outside executives come to campus to discuss their own professional roles and careers; 2) site visits to local organizations of all types; and 3) professionalization time, wherein program faculty provide instruction on relevant skills, attire, work behavior, etc.

In addition, MHA degree candidates in our residential program are required to complete an administrative residency or an internship. Both are structured and monitored experiences that include on-site mentors and on-campus faculty advisers. Based on advisement, counseling, introspection, and career goals, students are assisted by faculty, a Residency Director, alumni mentors, and executives in residence (EIRs) to identify a suitable field experience and find an appropriate preceptor and organization. The process builds on students’ work experience and courses taken in the didactic portion of the Program.

The field experience consists of either a nine-credit Residency or a three-credit Internship. There are two MHA focus areas that require the field experience of a Residency: 1) Acute and Ambulatory Care Management; and 2) Post-acute Care Management (includes Long Term care). There are three focus areas that require the field experience of an Internship: 1) Information Systems and Financial Management; 2) Operations Management; and 3) Strategic Management and Policy. See more at: http://publichealth.gwu.edu/programs/health-administration-mha.

A required three-credit course, Field Problem Studies (HSML 6271), is the internship consisting of work experience guided by a qualified preceptor on selected management and planning issues and problems occurring in health services facilities, programs, and agencies. The field experience option is primarily for advanced masters and doctoral students. The residency is a year-long work experience guided by a qualified preceptor. Periodic written progress reports and a written major report or selected field projects are required for completion.

MHA students in our Executive MHA program are not required to complete an administrative residency, as explained below.

Site and preceptor selection and vetting

Residency and internship sites are chosen from the ACHE website, http://www.ache.org/postgrad/directory.cfm, as well as previously successful sites and via referral from our alumni network. All sites and preceptors are reviewed by the program’s experiential committee, which currently includes Drs. R. Burke, Masselink and Friedman. To orient preceptors, we require that they participate in an orientation webinar conducted by our faculty.
Evaluation of sites

New sites are visited by one of our full-time faculty members. During this visit, the faculty member will meet with the senior management and ascertain relevant resources for students to successfully complete their residency/internship. We also ask to review the organization’s annual report. Many times these organizations report that internships and residencies are part of their community benefit that is required by the Affordable Care Act.

Evaluation of Student Performance

Prior to starting an experiential learning module, students must create a project proposal that meets the approval of the MHA program faculty. During the experience, students in both the residency and internship programs are required to complete monthly and semester reports, which are reviewed by their faculty mentors. Preceptors are also required to evaluate the students. Finally, while students are at a residency site, one of the faculty members conducts a site visit to ascertain student progress and professionalism, as well as the work environment of the site. These site visits can either be in person or through the web, as often occurs with sites that we have used before.

Executive MHA

As noted earlier, the Executive MHA is unique in that students must already have at least three years of work experience in a relevant healthcare organization and be currently employed in such a setting in order to matriculate into the program. (Relevant work experience is determined by departmental faculty). Much of the curriculum and many of the required assignments are directly linked to the student’s work environment. Consequently, there is no required practice experience, such as an internship or residency.

DrPH

The DrPH achieves the practice experience through both course work and extra-curricular requirements. In PUBH 8402, Leadership in Public Health Practice and Policy, students focus on principles of public health practice and policy with a focus on the interdisciplinary and strategic application of skills, knowledge and competencies necessary both to perform public health core functions and to enhance the capacity to perform these functions.

Students are also required to complete four credits of professional leadership courses; PUBH 8415, Instructional Leadership, a two-credit course; and PUBH 8413, a research leadership course. In PUBH 8415, students participate in a range of activities designed to develop and enhance their teaching skills. These activities include course development; teaching master’s level courses; acting as a teaching assistant for undergraduate or introductory graduate courses; advising students about their class performance; evaluating student performance; and developing remedial programs for students. In the research leadership course, students participate in a range of activities designed to develop and enhance their research methods and analytical skills. These activities include participating in the development and submission of sponsored research proposals; being formally affiliated with a research project; assuming
responsibility for completing a real-world research project; and engaging in empirical data collection and analysis efforts.

Professional Enhancement Requirement
All degree-seeking students must also complete a Professional Enhancement requirement. Students must participate in eight hours per degree program of advisor pre-approved Public Health-related lectures, seminars, and symposia related to their field of study. Professional Enhancement activities supplement the academic curriculum and help prepare students to participate actively in their professional communities. Opportunities for professional enhancement are regularly publicized via the SPH Listserv and through departmental communication and advisors. Students must submit documentation of Professional Enhancement activities to the Office of Student Records: [http://publichealth.gwu.edu/academics/forms](http://publichealth.gwu.edu/academics/forms).

2.4.b. Identification of agencies and preceptors used for practice experience for each of the last three years.

The table below shows the number of students in the residential and online MPH tracks completing the practicum. The full list of agencies and preceptors is located in [ERF 2.4.b.: Practica Agencies](http://publichealth.gwu.edu/academics/forms).

### Table: 2.4.b.: Number of MPH Practica Completed

<table>
<thead>
<tr>
<th></th>
<th>AY2012-13</th>
<th>AY2013-14</th>
<th>AY2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential</td>
<td>285</td>
<td>242</td>
<td>238</td>
</tr>
<tr>
<td>MPH@GW</td>
<td>New program – none</td>
<td>7</td>
<td>110</td>
</tr>
<tr>
<td>Total</td>
<td>285</td>
<td>249</td>
<td>312</td>
</tr>
</tbody>
</table>

All of the MHA residential students must complete either a residency or an internship. A list of residency and internship sites for 2014 for the MHA can be found here: [http://publichealth.gwu.edu/content/master-health-administration-residency-and-internship-sites](http://publichealth.gwu.edu/content/master-health-administration-residency-and-internship-sites)

2.4.c. Data on the number of students receiving a waiver of the practice experience for each of the last three years.

The number of MPH@GW students receiving waivers is relatively higher than the residential program since these students are, on average, older and have far more working experience. All residential MHA students must complete a residency or internship plus thesis option so there are no waivers, and as explained above, the executive MHA program does not include a residency.
### Table 2.4.c.: Practica Waivers

<table>
<thead>
<tr>
<th>Department</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>EOH</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>EPI/BIO</td>
<td>0</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>EXNS</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GH</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>HPM</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>PCH</td>
<td>3</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>MPH@GW</td>
<td>N/A</td>
<td>N/A</td>
<td>19</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>7</td>
<td>9</td>
<td>28</td>
</tr>
</tbody>
</table>

2.4.d. Data on the number of preventive medicine, occupational medicine, aerospace medicine and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.

Not Applicable.

2.4.e. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

This criterion is met.

**Strengths:**

- Large and diverse practicum and preceptor opportunities in a variety of settings.
- Strong connections with federal agencies such as HRSA, HUD, FDA, EPA, USDA, Pentagon, national organizations such as APHA, NACCHO, and ASHTO, and global health organizations including WHO, IMF, the World Bank, and PAHO make it easier to place students who live, work, and study in close proximity to these agencies all year round.
- ISCOPES - Interdisciplinary health focused service-learning initiative that places GW students and employees from various fields of study as well as community partners and neighbors from the DC Metro Area in inter-professional learning communities to address bigger picture health issues through smarter service.
- Department-specific advising.
- Since the last CEPH accreditation, we have added the Office of Practice and hired an Associate Dean of Practice.
- Bi-annual reception for all the preceptors.
- Formalized online structure to assess sites, preceptors and students.
- Obtain full state authorization for training students in the MPH@GW program before accepting students from that specific state.
- In the past three years, 99% of our preceptors have indicated that they would be interested in hosting another SPH student.
Challenges:

- The current practicum database is cumbersome, overly complicated, and challenging to search.
- The “Office of Practice” sees the potential to improve the student practice experience across the full spectrum including internships, practicum experiences, and integrating practice into coursework and culminating experiences.
- Increased enrollment in the MPH@GW will require the vetting of additional practicum sites and preceptors.
- We would like to garner travel funds to support students wishing to travel abroad for their practica.
- We have an opportunity to better coordinate academic, practice and career advising services.

Future Plans:

- Migration of practicum data to our newly developed Simplicity (GWorks) database.
- Continued development and definition of scope for our Practice Office.
- Building on our existing Practicum Advisory Committee*, establish an Academic Public Health Practice Committee to coordinate practicum efforts and governance across our six departments, and to identify and implement best practices school-wide.
- Explore novel practice partnerships via new funding streams and business models.
- Raise the profile of outstanding practice partnerships by featuring them in SPH publications, events, website, etc.

*Practicum Advisory Committee

Pierre Vigilance, MD, MPH, chair
Ann Goldman, MA, MPH & Toni Thibeaux, MPH - Epi / Bio
Lara Cartwright Smith, JD, MPH - Health Policy & Management
Peter LaPuma, PhD, MBA, MS & Sabrina McCormick, PhD, MA - EOH
Kelley Vargo, MS, MPH & Sarah Kennedy, MPH – MPH@GW
Shaneka Thurman, MS – Global Health
Kim Robien, DNsc, MS & Loretta DiPietro, PhD, MS, MPH – ExNS
Karyn Pomerantz, MLS, MPH & Tamara Henry, EdD, MA – PCH