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Training the 21ST century DrPH: Innovation in practice-based curriculum

KEEP CALM I HAVE 21ST CENTURY TRAINING IN PUBLIC HEALTH

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KEEP CALM BY THE END OF THE PRESENTATION YOU WILL...

- Describe the **advanced training needs** of 21st century challenges in public health practice and research
- Compare and contrast a **competency-informed and competency-based curriculum**
- Describe the purpose and function of **prior learning assessments** for meeting the specific competency-based needs of individual students
- Describe the critical role of **academic-practice partnerships** in training advanced leaders in public health

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KEEP CALM BUT WHO WILL KEEP THE PUBLIC HEALTHY?

IOM report advanced content and skill-based training needs:

- Informatics
- Genomics
- Communication
- Cultural competence
- CBPR
- Global health
- Policy and law
- Public health ethics
- Community-health leadership

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KEEP CALM BUT WHO WILL KEEP THE PUBLIC HEALTHY?

IOM report advanced training methods:

- Flexible
- Competency-based
- Address learning styles of mid-level public health practitioners
- E-learning
- Practice oriented

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KEEP CALM WE HAVE THE DRPH CORE COMPETENCY MODEL

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KEEP CALM WHEN DEVELOPING COMPETENCY DRIVEN CURRICULUM

Competency-based post-secondary education

- Emphasis on **outcomes**
- Students advance when they **demonstrate mastery in pre-defined competencies** rather than simply completing traditional credit hours
- Benefits:
 - Workforce readiness
 - Program efficiency
 - Program effectiveness
 - Recognition of learning outside of the classroom

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KEEP CALM
WHEN DEVELOPING
COMPETENCY DRIVEN CURRICULUM


Competency-based Curricular Models


- Competency-focused:** Applies student learning assessment **within the existing seat-time** based system
- Competency-based:** **Breaks free of seat-time** to create curricular models not tied to credit hours
- Guidelines** for either include:
 - ✓ Align degree-based competencies with workplace skill requirements
 - ✓ Develop a system of reliable assessments
 - ✓ Assess through the use of rubrics rather than tests and grades earned via completion of coursework
 - ✓ Incorporate adult and student-centered learning methods

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USF DrPH Competencies




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Capstone Milestone Benchmark

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| Cluster 1: Advocacy, Leadership, and Community Engagement | | | | |
|---|---|--|--|---|
| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
| Advocacy | The ability to influence decision-making regarding policies, and practices that advance health care scientific knowledge, equity, communication, and consensus building. | Present positions on health issues, law, and policy on multiple arenas. | Analyze the impact of legislation, judicial systems, regulations, and policies on population health. | Influence health policy and program decision-making based on scientific evidence, stakeholder input, and public opinion data. |
| Leadership | The ability to create and communicate a shared vision for a positive future, inspire trust and motivate others, and use evidence-informed, community and culturally appropriate strategies to advance societal health services. | Demonstrate a commitment to public health professional values. | Influence others to achieve high standards of performance and accountability. | Promote effective strategies to address the challenges presented by public health leadership. |
| Communication | The ability to assess and use communication strategies across diverse audiences to inform and influence individual, organizational, community, and policy actions. | Discuss the inter-relationships between health communication and marketing. | Promote and lead written communication from health, academic papers, scientific articles, community press. | Collaborate with multi-disciplinary researchers, clinicians, and practitioners. |
| Community/Cultural Understanding | The ability to communicate, interact, engage and work with diverse across diverse communities and cultures for the development of programs, policies, and research. | Develop collaborative partnerships with communities, policy makers, and other relevant groups. | Engage communities in setting evidence-informed, culturally competent programs. | Implement culturally and linguistically appropriate programs, services, and research. |

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| Cluster 2: Management and Ethics | | | | |
|----------------------------------|--|---|---|--|
| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
| Management | The ability to provide locally responsible strategic and operational guidance within both public and private health organizations for achieving individual and community health and wellness. | Develop clearly building strategies at the individual, organizational, and community level. | Organize the work environment with defined lines of responsibility, authority, communication, and governance. | Apply principles of human resource management, performance in relation to strategy, and defined goals. |
| Philosophical and Ethics | The ability to identify and evaluate an ethical issue, balance the claims of personal liberty with the responsibility to protect and improve the health of the community, and act on the ethical concepts of social justice and human rights in public health research and practice. | Demonstrate cultural sensitivity on ethical discourse and analysis. | Design strategies for resolving ethical concerns in research, law, and regulations. | Evaluate issues that protect the privacy of individuals and communities involved in health programs, policies, and research. |


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| Cluster 3: Evidence-Informed Public Health | | | | |
|--|---|---|---|--|
| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
| Critical Analysis | The ability to synthesize and apply evidence-informed research and qualitative data following current scientific standards. | Interpret quantitative and qualitative data following current scientific standards. | Synthesize information and derive pertinent implications from multiple sources for research and practice. | Design needs and resource assessments for communities and populations. |
| | | | Apply theoretical and evidence-informed perspectives from multiple disciplines in the design and implementation of programs, policies, and systems. | Evaluate the performance and impact of health programs, policies, and systems. |
| | | | Translate research-informed approaches to public health practice. | |

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COMPETENCY
DRIVEN
CURRICULUM


Prior Learning Assessment and Recognition

- Assesses competencies that occur **outside** of the **traditional credit hour**
- Enables **program tailoring**
- Students more likely to stay in and complete programs
- Assumptions:**
 - Learning can and does take place outside of the classroom
 - Educational practices that force adults to repeat learning is inefficient, costly, and unnecessary


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| Competency | Description of Competency | General Evaluation Criteria |
|-------------------------|--|---|
| Cover page | Name, academic advisor, section-based number, contact information, date | • Intention and description of learning including specific details and insights |
| Letter of intent | Addressed to the COPI/DPI/AAC the letter of intent includes the following: <ul style="list-style-type: none"> Competencies you intend to request prior learning Areas of expertise you intend to demonstrate Number of credits requested to earn via prior learning | • Documentation of mapping to performance and behavior |
| Table of Contents | Sections of the portfolio by page number | • Description and analysis of the context in which the DPH competencies and outcomes were developed |
| Competencies & Outcomes | It narrates their previous specific details and insights from past experiences and make systematic, logical connections to the theories and concepts of the DPH competencies and associated courses to which credit is sought | • Integration, analysis and synthesis of knowledge, learning, competencies, outcomes, and personal attributes into leadership roles |
| Course Syllabi | It includes for each course pertaining to your portfolio courses the syllabus, including the intended achievement of competencies and associated learning outcomes. Documentation must specifically be identified with each competency and learning outcome | • Evidence of steps to an experiential outcome for each problem-solving and decision-making arena |
| CV | Detailed CV | • Articulation of professional knowledge within core competencies embedded in the learning experience to concepts, theories, and research pertaining to the DPH |
| Official Transcripts | Official academic transcripts | • Evidence of achievement of each competency and learning outcome |
| References | Standard APA format and referencing | • Demonstration of competency in writing |

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Competency-focused Mentoring

- Academic mentor**
 - Evaluate achievement of curricular competencies
- Practice-based mentor**
 - Develop and expand knowledge and skills through direct and indirect exposure to a range of advanced public health activities including leadership

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- ✓ advanced training needs of 21st century public health practice and research
- ✓ competency-informed and competency-based curriculum
- ✓ prior learning assessments
- ✓ academic-practice partnerships



KEEP CALM
I'M COMPETENT IN
ADVANCED PUBLIC HEALTH

Thank You!

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Cluster 1: Advocacy, Leadership, and Community Engagement

| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
|--|--|---|---|---|
| Advocacy | The ability to influence decision-making regarding policies, and practices that advance health using scientific knowledge, analysis, communication, and consensus building | Present positions on health issues, law, and policy in multiple sectors | Analyze the impact of legislation, judicial opinions, regulations, and policies on population health | Influence health policy and program decision making based on scientific evidence, stakeholder input, and public opinion data |
| Leadership | The ability to create and communicate a shared vision for a positive future; inspire trust and motivate others; and use evidence-informed contextually and culturally appropriate strategies to enhance essential public health services | Demonstrate a commitment to public health professional values | Influence others to achieve high standards of performance and accountability | Promote effective strategies to address the challenges presented to public health leadership Collaborate with multi-disciplinary researchers and practitioners |
| Communication | The ability to assess and use communication strategies across diverse audiences to inform and influence individual, organization, community, and policy actions | Discuss the inter-relationship between health communication and marketing | Prepare oral and written communications from briefs, position papers, scientific articles, community pieces Guide an organization in setting communication goals, objectives, priorities, and strategies | Integrate health literacy concepts in all communication and marketing initiatives |
| Community/ Cultural orientation | The ability to communicate, interact, engage and work with people across diverse communities and cultures for development of programs, policies, and research | Develop collaborative partnerships with communities, policy makers, and other relevant groups | Conduct community-based participatory intervention and research projects Engage communities in creating evidence-informed, culturally competent programs | Implement culturally and linguistically appropriate programs, services, and research |

Cluster 2: Management and Ethics

| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
|-----------------------------------|---|---|---|---|
| Management | The ability to provide fiscally responsible strategic and operational guidance within both public and private health organizations for achieving individual and community health and wellness | Develop capacity-building strategies at the individual, organizational, and community level | <p>Apply principles of human resource management</p> <p>Organize the work environment with defined lines of responsibility, authority, communication, and governance</p> <p>Implement strategic planning process</p> <p>Guide organizational decision making and planning based on internal and external environmental research</p> | Evaluate organizational performance in relation to strategic and defined goals |
| Professionalism and Ethics | The ability to identify and analyze an ethical issue; balance the claims of personal liberty with the responsibility to protect and improve the health of the population; and act on the ethical concepts of social justice and human rights in public health research and practice | Demonstrate cultural sensitivity in ethical discourse and analysis | Design strategies for resolving ethical concerns in research, law, and regulations | Develop tools that protect the privacy of individuals and communities involved in health programs, policies, and research |

Cluster 3: Evidence-Informed Public Health

| Domains | Definitions | Benchmark Competency Knowledge/Comprehension | Milestone Competency Apply/Analyze | Capstone Competency Evaluate/Create |
|--------------------------|--|---|---|---|
| Critical Analysis | The ability to synthesize and apply evidence-informed research and theory from a broad range of disciplines and health-related data sources to advance programs, policies, and systems promoting population health | <p>Interpret quantitative and qualitative data following current scientific standards</p> <p>Synthesize information and derive pertinent implications from multiple sources for research and practice</p> | <p>Apply theoretical and evidence-informed perspectives from multiple disciplines in the design and implementation of programs, policies, and systems</p> <p>Translate research-informed approaches to public health practice</p> | <p>Design needs and resource assessments for communities and populations</p> <p>Evaluate the performance and impact of health programs, policies, and systems</p> |

| Components | Description of Component | General Evaluation Criteria |
|---|---|--|
| Cover page | Name, academic advisor, practice-based mentor, contact information, start date | <ul style="list-style-type: none"> • Statement and description of learning including specific details and insights; • Documentation of meaning in performance and behavior; • Description and analysis of the context in which the DrPH competencies and outcomes were developed; • Interpretation, analysis and transference of knowledge, learning competencies, outcomes, and personal attributes into leadership roles; • Synthesis of data and experiential situations for use in problem-solving and decision-making areas; • Association of professional knowledge and/or core competencies embedded in the learning experiences to concepts, theories, and research pertaining to the DrPH. • Evidence of achievement of each competency and learning outcome. • Demonstration of competency in writing. |
| Letter of Intent | Addressed to the COPH DrPH AAC the letter of intent includes the following: <ul style="list-style-type: none"> • Competencies you intend to request prior learning • Area(s) of expertise you intend to demonstrate • Number of credits requested to earn via prior learning | |
| Table of Contents | Sections of the portfolio by page number | |
| Competencies & Learning outcomes | A narrative that provides specific details and insights from past experiences and make systematic, logical connections to the theories and concepts of the DrPH competencies and associated courses in which credit is sought. | |
| Course Syllabi | A syllabus for each course pertaining to your portfolio content. | |
| Documentation | The evidence submitted to support achievement of competencies and associated learning outcomes. Documentation must specifically be identified with each competency and learning outcome. | |
| CV | Updated CV | |
| Unofficial Transcripts | Unofficial graduate transcripts | |
| References | Standard APA format and referencing. | |