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

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• 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

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

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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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

USF DrPH Competencies

- Advocacy
- Leadership
- Community Engagement
- Evidence-Informed Public Health
- Management
- Ethics

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Capstone
Milestone
Benchmark
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

Prior Learning Portfolio

- 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

Thank You!
### Cluster 1: Advocacy, Leadership, and Community Engagement

<table>
<thead>
<tr>
<th>Domains</th>
<th>Definitions</th>
<th>Benchmark Competency Knowledge/Comprehension</th>
<th>Milestone Competency Apply/Analyze</th>
<th>Capstone Competency Evaluate/Create</th>
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</thead>
<tbody>
<tr>
<td><strong>Advocacy</strong></td>
<td>The ability to influence decision-making regarding policies, and practices that advance health using scientific knowledge, analysis, communication, and consensus building</td>
<td>Present positions on health issues, law, and policy in multiple sectors</td>
<td>Analyze the impact of legislation, judicial opinions, regulations, and policies on population health</td>
<td>Influence health policy and program decision making based on scientific evidence, stakeholder input, and public opinion data</td>
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<tr>
<td><strong>Leadership</strong></td>
<td>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</td>
<td>Demonstrate a commitment to public health professional values</td>
<td>Influence others to achieve high standards of performance and accountability</td>
<td>Promote effective strategies to address the challenges presented to public health leadership</td>
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<tr>
<td><strong>Communication</strong></td>
<td>The ability to assess and use communication strategies across diverse audiences to inform and influence individual, organization, community, and policy actions</td>
<td>Discuss the inter-relationship between health communication and marketing</td>
<td>Prepare oral and written communications from briefs, position papers, scientific articles, community pieces</td>
<td>Integrate health literacy concepts in all communication and marketing initiatives</td>
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<tr>
<td><strong>Community/Cultural orientation</strong></td>
<td>The ability to communicate, interact, engage and work with people across diverse communities and cultures for development of programs, policies, and research</td>
<td>Develop collaborative partnerships with communities, policy makers, and other relevant groups</td>
<td>Conduct community-based participatory intervention and research projects</td>
<td>Implement culturally and linguistically appropriate programs, services, and research</td>
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</table>
| **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                | Apply principles of human resource management  
Organize the work environment with defined lines of responsibility, authority, communication, and governance  
Implement strategic planning process  
Guide organizational decision making and planning based on internal and external environmental research | 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

<table>
<thead>
<tr>
<th>Domains</th>
<th>Definitions</th>
<th>Benchmark Competency Knowledge/Comprehension</th>
<th>Milestone Competency Apply/Analyze</th>
<th>Capstone Competency Evaluate/Create</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Analysis</td>
<td>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</td>
<td>Interpret quantitative and qualitative data following current scientific standards</td>
<td>Apply theoretical and evidence-informed perspectives from multiple disciplines in the design and implementation of programs, policies, and systems</td>
<td>Design needs and resource assessments for communities and populations</td>
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<tr>
<td></td>
<td></td>
<td>Synthesize information and derive pertinent implications from multiple sources for research and practice</td>
<td>Translate research-informed approaches to public health practice</td>
<td>Evaluate the performance and impact of health programs, policies, and systems</td>
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<tr>
<td>Components</td>
<td>Description of Component</td>
<td>General Evaluation Criteria</td>
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<tr>
<td>Cover page</td>
<td>Name, academic advisor, practice-based mentor, contact information, start date</td>
<td>• Statement and description of learning including specific details and insights;</td>
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<td></td>
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<td>• Documentation of meaning in performance and behavior;</td>
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<td>• Description and analysis of the context in which the DrPH competencies and outcomes were developed;</td>
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<td>Letter of Intent</td>
<td>Addressed to the COPH DrPH AAC the letter of intent includes the following:</td>
<td>• Interpretation, analysis and transference of knowledge, learning competencies, outcomes, and personal attributes into leadership roles;</td>
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<td></td>
<td>• Competencies you intend to request prior learning</td>
<td>• Synthesis of data and experiential situations for use in problem-solving and decision-making areas;</td>
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<td></td>
<td>• Area(s) of expertise you intend to demonstrate</td>
<td>• Association of professional knowledge and/or core competencies embedded in the learning experiences to concepts, theories, and research pertaining to the DrPH.</td>
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<td></td>
<td>• Number of credits requested to earn via prior learning</td>
<td>• Evidence of achievement of each competency and learning outcome.</td>
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<tr>
<td>Table of Contents</td>
<td>Sections of the portfolio by page number</td>
<td>• Demonstration of competency in writing.</td>
<td></td>
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<tr>
<td>Competencies &amp;</td>
<td>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.</td>
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<tr>
<td>Learning outcomes</td>
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<tr>
<td>Course Syllabi</td>
<td>A syllabus for each course pertaining to your portfolio content.</td>
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<tr>
<td>Documentation</td>
<td>The evidence submitted to support achievement of competencies and associated learning outcomes. Documentation must specifically be identified with each competency and learning outcome.</td>
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<tr>
<td>CV</td>
<td>Updated CV</td>
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<tr>
<td>Unofficial Transcripts</td>
<td>Unofficial graduate transcripts</td>
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<tr>
<td>References</td>
<td>Standard APA format and referencing.</td>
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