Contact Information

Student Name: ___________________________ Date: ___________

Student email and phone: ________________________________

Agency Name: ___________________________ Field Instructor: ________________________________

Field Instructor email and phone: ________________________________

Practicum Schedule

Start date: ___________ End date: ___________

Number of practicum hours per week: ___________ Days student will be expected on-site (please circle)? M T W Th F S Su

Additional notes on schedule:

Learning Contract Overview:

The Public Health Practicum allows students to build upon their coursework by applying public health principles to experiences in the workplace and building professional skills. When identifying practicum activities, please think about ways in which students can be actively learning about the organization as a whole and acquiring knowledge of the organization’s culture (e.g. meeting key people, attending meetings, participating in professional development opportunities, etc.) and the community it serves.

The student and Field Instructor should review and complete the following Learning Contract together in person during the first week of practicum and submit it to the Pacific University Public Health Practicum Coordinator for review and approval. The contract is an agreement among the student, Field Instructor, and Pacific University Public Health Program. Field Instructors will evaluate student performance based on the activities and skills written in the contract.

The contract has three sections:

I. **Scope of Work:** How does the organization and the student’s work within it fit into the larger public health system?

II. **Public Health Core Competencies:** Which *professional skills* will the student be building during the field placement?

III. **Basic Competencies:** Skills expected of all Pacific University students engaged in field learning.
I. **Scope of work:** We recognize that organizations participating in public health work provide a range of services. In the section below, please identify **one or more** services the student will participate in, based on the work done by your organization.

### 10 Essential Public Health Services *(See Appendix A for descriptions and examples of the Essential Public Health Services)*

- **Monitor** health status to identify community problems (public health surveillance)
- **Diagnose and investigate** health problems and health hazards in the community
- **Inform, educate, and empower** people about health issues
- **Mobilize** community partnerships to identify and solve health problems
- **Develop policies and plans** that support individual and community health efforts
- **Enforce laws and regulations** that protect health and ensure safety
- **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable
- **Assure** a competent public health and personal healthcare workforce
- **Evaluate** effectiveness, accessibility, and quality of personal and population-based health services
- **Research** for new insights and innovative solutions to health problems
II. Public Health Core Competencies: We recognize that organizations participating in public health work provide a range of opportunities for professional skill building. In the section below, please identify **three or more** skill areas or “domains” the student will be developing competencies within, based on the work done in the organization.

**Public Health Core Competencies** *(See Appendix B for lists of sample competencies that fall under each of the eight domains)*

- [ ] Analysis/Assessment
- [ ] Policy Development/Program Planning
- [ ] Communication
- [ ] Cultural Competency
- [ ] Community Dimensions of Practice
- [ ] Public Health Sciences
- [ ] Financial Planning and Management
- [ ] Leadership and Systems Thinking
Description of activities/projects related to sections I and II: What will the student be doing during the placement? Please consider the 10 Essential Public Health Services and Public Health Core Competencies identified on pages 2 and 3 when developing a plan for activities/projects.

Please note: timelines, deliverables, and work plans related to the fulfillment of practicum activities should be communicated with the student directly.
III. Basic Competencies: What skills are students expected to have already?

All students should be able to:

- Arrive to the worksite and related events on time
- Dress and groom appropriately for the setting
- Seek assistance when appropriate (from Field Instructor, Practicum Coordinator, and Instructional Faculty depending on the circumstance)
- Seek and act upon input from colleagues and supervisors
- Fulfill commitments and meet deadlines
- Take initiative: proactively identify opportunities for learning and relationship building and discuss them with the Field Instructor
- Know and adhere to university and host agency rules and norms
- Demonstrate clear and respectful written and oral communication appropriate to the audience
- Maintain appropriate records and documentation
- Act as an ambassador of Pacific University and trainee of the host organization
- Discuss a population-based approach to health issues

I agree to pursue the activities and objectives outlined in this Learning Contract to the best of my ability and understand that the contract will serve as the basis for evaluating student performance. I agree that any substantial revisions made to the Learning Contract will be confirmed by all parties in writing. I will retain a copy of this contract for my records.

Student’s Signature: ____________________________ Date: ____________

Practicum Field Instructor’s Signature: ________________ Date: ____________

Practicum Coordinator’s Signature: ________________ Date: ____________
### Appendix A – Descriptions and examples of Essential Public Health Services

(For more information see [http://www.cdc.gov/nphpsp/essentialservices.html](http://www.cdc.gov/nphpsp/essentialservices.html))

<table>
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<tr>
<th>Essential Public Health Service</th>
<th>Description and examples</th>
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| **Monitor** health status to identify community problems (public health surveillance) | Assessment of community wide health status and its determinants, including the identification of health threats and the determination of health service needs.  
- Surveillance: timely collection, analysis, and publication of information on access, utilization, costs, and outcomes of personal health services  
- Vital statistics  
- Conducting surveys of health status of communities or specific high risk groups |
| **Diagnose and investigate** health problems and health hazards in the community | Epidemiologic identification of emerging health threats such as: patterns of infectious and chronic diseases and injuries, environmental hazards, and other health threats.  
- Field epidemiology and epidemiologic investigation of disease outbreaks  
- Epidemiologic investigation of patterns of chronic disease and injury  
- Public health laboratory / rapid screening and high volume testing |
| **Inform, educate, and empower** people about health issues | Social marketing and media communications for providing accessible health information resources.  
- Health education campaigns, such as comprehensive state tobacco programs  
- Free, mobile health screening initiatives  
- Active collaboration with health care providers to reinforce health promotion messages and programs  
- Community-based, school, church, and worksite health education programs (e.g., stress reduction seminars; parenting support groups for enhancing mental health; and health fairs) |
| **Mobilize** community partnerships to identify and solve health problems | Convening and facilitating groups and associations in undertaking preventive, screening, rehabilitation, and support programs.  
- Coalition building  
- Convening stakeholders for listening sessions or consensus building  
- Organizing community volunteers to address an important community issue or advocate for policy change |
| **Develop policies and plans** that support individual and community health efforts | Systematic community-level and state-level planning for health improvement, development and tracking of measurable health objectives, and development of codes, regulations, and legislation.  
- Development, planning, monitoring objectives for Active Living by Design program which focuses on land use, public transit, non-motorized travel, public spaces, parks, trails, and architectural practices that advance physical activity  
- Policy establishment, (ongoing) implementation, and tracking of newborn screening program for PKU and other genetic and congenital diseases |
| **Enforce laws and regulations** that protect health and ensure safety | Enforcement, evaluation, and revision of laws and regulations designed to protect health and safety to assure that they reflect current knowledge and best practices and in order to encourage compliance.  
- Monitoring quality/regulation of medical services (e.g., laboratory, nursing homes, home health care)  
- FDA drug approval and food safety  
- Enforcement of clean air standards  
- Investigation of hazards, preventable injuries, and exposure-related diseases identified in occupational and community settings |
| **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable | Outreach or enabling services that provide coordinated or enhanced system of care to populations with limited access or barriers; providing culturally and linguistically appropriate materials and staff to assure linkage to services; providing ongoing case management or care coordination  
- Providing transportation services to health care or health promoting services  
- Targeted health information to high risk population groups  
- Consumer education and assistance applying for an existing programs  
- Services to fill gaps (e.g., Federal Supplemental Food Program for Women, Infants, and Children—WIC for Medicaid-enrolled pregnant women, infants, and children under the age of 5) |
| **Assure** a competent public health and personal healthcare workforce | Education and training for personnel to meet the needs for public and personal health services. Efficient processes for licensure of professionals and certification of facilities. Adoption of continuous quality improvement and lifelong learning.  
- Licensure of physicians, nurses, and other health professionals  
- Continuing education through the availability of online certificate and other training programs |
| **Evaluate** effectiveness, accessibility, and quality of personal and population-based health services | Ongoing evaluation of health programs and community-based programs to assess program effectiveness.  
- Evaluation or assessment of community-based education programs, community mobilization efforts, training programs, administrative systems, social marketing campaigns |
| **Research** for new insights and innovative solutions to health problems | Public health research.  
- Health services research  
- Cost-effectiveness research  
- Epidemiologic studies, including cross-section, case-control, and cohort studies  
- Community intervention research |
### Domain: Analysis/Assessment
- Describes factors affecting the health of a community (e.g., equity, income, education, environment)
- Identifies quantitative and qualitative data and information (e.g., vital statistics, electronic health records, transportation patterns, unemployment rates, community input, health equity impact assessments) that can be used for assessing
- Identifies gaps in data
- Describes assets and resources that can be used for improving the health of a community (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs)

### Domain: Policy Development/Program Planning
- Contributes to development of program goals and objectives
- Contributes to implementation of organizational strategic plan
- Identifies current trends (e.g., health, fiscal, social, political, environmental) affecting the health of a community
- Gathers information that can inform options for policies, programs, and services (e.g., secondhand smoking policies, data use policies, HR policies, immunization programs, food safety programs)

### Domain: Communication
- Identifies the literacy of populations served (e.g., ability to obtain, interpret, and use health and other information; social media literacy)
- Communicates in writing and orally with linguistic and cultural proficiency (e.g., using age-appropriate materials, incorporating images)
- Solicits input from individuals and organizations (e.g., chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community based organizations, various populations served) for improving the health of a community
- Conveys data and information to professionals and the public using a variety of approaches (e.g., reports, presentations, email, letters)

### Domain: Cultural Competency
- Describes the concept of diversity as it applies to individuals and populations (e.g., language, culture, values, socioeconomic status, geography, education, race, gender, age, ethnicity, sexual orientation, profession, religious affiliation, mental and physical abilities, historical experiences)
- Describes the ways diversity may influence policies, programs, services, and the health of a community
- Describes the effects of policies, programs, and services on different populations in a community
- Describes the value of a diverse public health workforce

### Domain: Community Dimensions of Practice
- Describes the programs and services provided by governmental and nongovernmental organizations to improve the health of a community
- Recognizes relationships that are affecting health in a community (e.g., relationships among health departments, hospitals, community health centers, primary care providers, schools, community-based organizations, and other types of organizations)
- Collaborates with community partners to improve health in a community (e.g., participates in committees, shares data and
| Public Health Sciences | • Retrieves evidence (e.g., research findings, case reports, community surveys) from print and electronic sources (e.g., PubMed, Journal of Public Health Management and Practice, Morbidity and Mortality Weekly Report, The World Health Report) to support decision making  
• Recognizes limitations of evidence (e.g., validity, reliability, sample size, bias, generalizability)  
• Describes evidence used in developing, implementing, evaluating, and improving policies, programs, and services |
|---|---|
| Financial Planning and Management | • Adheres to organizational policies and procedures  
• Describes public health funding mechanisms (e.g., categorical grants, fees, third-party reimbursement, tobacco taxes)  
• Describes how teams help achieve program and organizational goals (e.g., the value of different disciplines, sectors, skills, experiences, and perspectives; scope of work and timeline) |
| Leadership and Systems Thinking Skills | • Incorporates ethical standards of practice (e.g., Public Health Code of Ethics) into all interactions with individuals, organizations, and communities  
• Describes public health as part of a larger inter-related system of organizations that influence the health of populations at local, national, and global levels  
• Describes the ways public health, health care, and other organizations can work together or individually to impact the health of a community  
• Participates in professional development opportunities  
• Describes the impact of changes (e.g., social, political, economic, scientific) on organizational practices |

Core Competency examples retrieved from the Council on Linkages between Academia and Public Health Practice, 2014