

# MPH Practicum Handbook

Office of Public Health Studies University of Hawai'i at Manoa

(Revised January 2019)

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# A. Introduction Letter

A distinguishing feature of a Master of Public Health (MPH) degree program is the requirement of a practicum placement as a fundamental part of the curriculum. This is a requirement at all public health programs in the United States that award MPH degrees. The Office of Public Health Studies' (OPHS), purpose in featuring the practicum is to offer the students the opportunity to apply academic knowledge in partnership with community organizations and other agencies. It involves utilizing practical skills in a public health-related setting, to develop problem-solving and solution-based skills during a supervised practicum experience and in many cases "to be of service" with the partnering organization.

This handbook is intended to guide graduate MPH students, practicum preceptors, and faculty advisors through the established policies and procedures for the practicum training process and to help integrate the overall MPH program of study. Following a brief overview of the practicum, information on the linkage between practicum training and the public health competencies is provided. Students should also review the principles of professional conduct, the practicum policies and procedures, and the practicum checklist. For your reference, a list of past practicum placement sites, guidelines for completing the Form 15 (the record of your practicum training plan), and instructions for preparing your final paper and final oral presentations are also provided.

One of the primary aims of the OPHS practicum program is to incorporate the highest degree of service learning, meaning the best balance between service to the agency and learning for the student, into the practicum experience. So the practicum is seen as critical place to implement public health applied practice and learning, as well as a chance to involve a service learning exchange.

As the Practicum Coordinator, I developed this handbook to help navigate you through the practicum process in a smooth and efficient manner. In addition to your program committee chair/advisor, you are welcome to contact me for assistance with the practicum portion of your MPH degree program.

Aloha,

Lisa Kehl, MPH, MSW, LSW, TTS

Lisa Kehl

Practicum Coordinator and Assistant Specialist

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# **B. Overview of the Public Health Practicum as Applied Practice**

**OBJECTIVES.** The practicum is an intensive period of supervised practice-based training that is a key component of the MPH educational experience. It can be conceptualized in a variety of ways, each of which may be relevant to a particular set of needs, conditions, and purposes. A commonly accepted description of such programs focuses on the purpose of supplementing and extending the classroom academic program through practical opportunities with the following course objectives:

- Integrate theory with <u>practice</u> and application of knowledge;
- Provide a place outside the classroom for clarifying skills, values/beliefs, and testing methods and techniques;
- Identify potential public health problems and issues;
- Address "real world" problems through public health practice, problem solving, solutions, and service;
- Assist in defining and solving health problems by using existing data or collecting new information, and
- Stimulate or create areas for needed practice, intervention, policy, research, and investigation;

**PRACTICUM COURSE.** The practicum is carried out as a formal course entitled PH 791: Advanced Public Health Practice, for three credits. Students will enroll in PH 791 sometime during the course of carrying out their practicum experience. It is recommended to enroll in the semester that the practicum will be completed, usually fall semester after a summer practicum.

Community experiences completed before receiving the approval of the student's committee members and practicum preceptor are just community experiences and cannot be counted as the practicum. To be considered a practicum, the practicum experience must be supervised and guided by learning objectives that focus the student to apply course MPH knowledge, attitudes, and skills in the community. To receive credit for the practicum experience, the student must obtain advanced approval of all practicum placements and learning objectives via the completion of Form 15, which must be signed by the student's program committee and practicum preceptor prior to the start of any practicum training work. In addition to the Form 15, the student must obtain liability insurance from the Office of Graduate Student Academic Services (OGSAS).

**LIABILITY INSURANCE.** Student must purchase their own professional liability insurance. An excellent, low cost Student Professional Liability Insurance Program with an annual premium of \$15.00 is available. The premium is effective for one year, and insurance must be purchased before starting the practicum. The premium must be renewed if the practicum experience—from the planning phase to completion—extends beyond 12 months. Payment must be made in the form of a check or money order (no cash) payable to the University of Hawai'i and is accepted at Office of Graduate Students Services (OGSAS), Biomed D-204.

**REGISTRATION.** Many MPH students begin their 240-hour practicum during the first summer session at the end of the first year in the MPH program and complete the course in six to twelve weeks over the summer. The practicum requires the students' full-time attention and effort to complete. To spread

the course out over a longer time period, the student should make the necessary arrangements with his or her program committee and the Practicum Coordinator. The student can start the practicum with a fully signed Form 15 and paid liability insurance. The student must register for PH 791 in the semester he or she intends to *complete* (<u>not</u> begin) the practicum. PH 791 must be completed in order to earn the MPH degree and to enroll in PH 789: Integrative Seminar.

**PLACEMENT.** The practicum placement must be an approved site, and the practicum preceptor must be pre-approved and have at least a master's degree and one to two years of public health experience. Arranging for placement represents a mixture of student- and faculty-initiated actions. One source of practicum placements is the wide range of opportunities in health and community organizations, which have served as practicum training sites for former MPH students. A list of past practicum sites is available at the end of this handbook. The types of placement sites available to students in Social and Behavioral Health Sciences, Epidemiology, Health Policy and Management, or Native Hawaiian and Indigenous Health may differ, as the practical skills for the specialization areas vary. Selection of the placement site can be streamlined with the help of the student's faculty advisor and the Practicum Coordinator.

**PRACTICUM COORDINATOR.** The Practicum Coordinator, Ms. Lisa Kehl, is available to assist students, faculty and practicum preceptors during various phases of the practicum training process. Dr. Yontz maintains general practicum training information and specific information on placements which she provides via seminars, written notices, emails, and individual advising. In addition, the coordinator communicates with practicum training preceptors as needed and maintains a list of community requests for practicum students. Ms. Kehl also tracks the proper completion of the practicum forms and ensures that a grade is assigned to PH 791 course with guidance from the student's preceptor and advisor.

**MEMORANDUM OF AGREEMENT.** To strengthen the relationship between the Office of Public Health Studies (OPHS) and approved practicum training placement sites, the Practicum Coordinator will work with the students, faculty advisors and practicum preceptors to establish a Memorandum of Agreement (MOA) as the practicum agreement. The MOA will formalize the responsibilities of OPHS and the practicum site agency in relation to the practicum training experience. A sample MOA is available on page 53.

**SPECIALIZATION VARIATION.** Because of the differences between each specialization practical skills, the types of sites available to Social Behavioral Health Sciences, Epidemiology, Health Policy & Management and Native Hawaiian & Indigenous Health will be different. The faculty advisors of each specialization, as well as the Practicum Coordinator, know which sites are acceptable. The Practicum Coordinator is able to assist with placement suggestions and usually has an active list of agencies requesting practicum students. Students must meet with their permanent faculty advisor to get final approval of any desired practicum site before moving ahead with Form 15 and the other steps in the practicum process. It is at this time a second committee member must be selected and included in the development and completion of Form 15.

# C. Overview of Service Learning in the Practicum

# What is Service Learning?

"Service-learning programs are distinguished from other approaches to experiential education (i.e. clerkships, internships, fieldwork, etc.) by their intention to equally benefit the learner and the recipient of the service as well as to ensure equal focus on both the service being provided and the learning that is occurring" (A. Furco, 1996, page 2)\*\*

Service-learning programs must...

- have some academic context
- be designed in such a way that service enhances learning and learning enhances service
- strive for a balance between service to the agency/clients and student's learning

# Different forms of service-learning

While a perfect balance between service and learning is what we strive for, it is not always realistic to achieve in the early stages of a partnership. There are "degrees" of service and learning in most experiential educational programs. Some programs are more learning than service and other programs are more service than learning. Many programs can fall along a continuum between pure "volunteerism" as one extreme, and pure "internship" on the other. Programs in the middle generally contain a mix of service elements and learning elements, and each program may look different from the next. In one program, the agency is benefiting more than the student and in another program viceversa. Both are considered service-learning experiences as long as there is some evidence of learning and service designed into the program.

The following is a diagram that illustrates the continuum of service-learning experiences and helps us recognize that the beneficiary focus is a distinguishing factor between all service-learning programs.

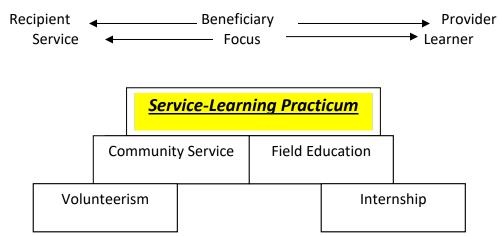


Figure 1: Distinctions among service programs (adapted from A. Furco, 1996)\*\*

Table 1: Types of Service-Learning. One is not necessarily better than the other.

Emphasis	Goals	Examples
1. Service-LEARNING**	Learning goals- primary**	Shelter allows the student to utilize data
	Service outcomes-	to practice skills in analysis but does not
(err toward internship)	secondary**	expect any reports or statistics. The
,	,	student will use the real data to learn to
		use SPSS, and will submit findings to the
		shelter but the shelter may not able to
		use all the data due to some issues with
		reliability of results.
2. SERVICE-learning**	Service outcomes- primary**	PH student's primary role is to assist the
	Learning goals- secondary**	shelter with new resident interviews
(err toward volunteerism)		and intake. He functions like another
		staff member. To reflect on his
		experience, he will write a qualitative
		report about the living conditions of the
		shelter, impressions of the program and
		what he learned about the clientele.
3. Service learning**	Service and learning goals	PH student volunteers at a soup kitchen
	are completely separate.**	to help prep food once a week. Kitchen
(equal opportunity for		is short-staffed so student is kept busy
service and learning, but		with cooking tasks but nothing is
requires separate tasks)		structured for academic learning. On
		her own time, she conducts an informal
		needs assessment through regular
		interviews with staff/clients and
		produces a report.
4. <u>SERVICE-LEARNING</u> **	Service and learning goals of	PH student will attend regular planning
	equal weight and each	meetings with shelter staff. The student
(equal and integrated	enhances the other for all	will provide a PH perspective in
tasks)	participants. **	designing the new shelter facilities by
		conducting a needs assessment and
		writing a report about PH
		recommendations/policies and
		procedures for the new facility.
		OR
		PH student is brought on board to
		analyze a homeless shelter's client data.
		His learning goal is to analyze and
		produce statistics that can be used in
		grants. Minimal interaction with clients
		and staff but student is an epidemiology
		major.  vice and Learning. Washington DC: Corporation for National Service, 1996. 2-6.

<sup>\*\*</sup>Source: Furco, Andrew: "Service-Learning: A Balanced Approach to Experiential Education." Expanding Boundaries: Service and Learning. Washington DC: Corporation for National Service, 1996. 2-6.

Figure 1. Components of Service-Learning (Yoder, 2006)

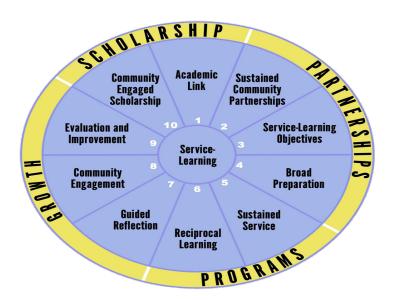


Table 2. Description of Service-Learning Components (Yoder, Cashman, & Seifer, 2009)

	Component of Service-learning	Description	
1	Academic Link	Course based, competency based, practice based	
2	Sustained Community Partnerships	<ul> <li>Engaged &amp; equal</li> <li>Long term</li> <li>Community identifies needs</li> <li>Partners provide mentor(s) to teach, monitor, &amp; evaluate</li> <li>Participate in writing objectives</li> <li>Memorandum of Agreement or Agreed Upon Partnership Guidelines</li> </ul>	
3	Service-Learning Objectives	<ul> <li>Students are clear on expectations</li> <li>Jointly formulated</li> <li>Discussed prior to the experience</li> <li>Goals should progress from clearly measurable to more complex, requiring analysis, application &amp; synthesis of new material</li> </ul>	
4	Broad Preparation	<ul> <li>For the students</li> <li>Agency</li> <li>Populations it serves</li> <li>Geographic area</li> <li>Problem-based learning cases</li> </ul>	

		For the agency	
		<ul><li>Students' capabilities</li></ul>	
		<ul> <li>Students' time availability</li> </ul>	
		<ul> <li>S-L objectives</li> </ul>	
		Course background	
		<ul> <li>Role of S-L in the academy</li> </ul>	
5	Sustained Service	Sustained amount of time & prep vs. single, short-term	
	Sustained Service	experiences	
		<ul> <li>Sufficient time to foster depth of understanding &amp;</li> </ul>	
		reflection	
		Plans for continuation distinguish from other short-term	
		community projects	
6	Reciprocal Learning	Traditional definitions of teacher and learner are	
		intentionally blurred	
		We all learn from each other and in a variety of contexts	
7	Guided Reflection	The link between service and learning	
		<ul> <li>Links experience to learning</li> </ul>	
		<ul> <li>Occurs regularly throughout the experience</li> </ul>	
		<ul> <li>Allows feedback and assessment</li> </ul>	
		<ul> <li>Fosters the exploration and clarification of value.</li> </ul>	
		<ul> <li>Occurs in multiple formats to accommodate</li> </ul>	
		learning styles (Hatcher & Bringle)	
8	Community Engagement	Emphasis is placed on developing citizenship skills and	
		achieving social change	
		Ethical Considerations	
		Cultural Awareness	
		Health Policy Activism	
		Advocacy	
		Understand one's role in community	
9	Evaluation & Improvement	Include the assessments of	
		<ul> <li>Faculty / Institution</li> </ul>	
		<ul> <li>Students</li> </ul>	
		<ul> <li>Community Partner Agencies</li> </ul>	
10	Community France of Coholombia	Populations Served     Opportunities	
10	Community Engaged Scholarship	··	
		Scholarly publications     Community Research	
		<ul> <li>Community Based Participatory Research</li> </ul>	
		<ul><li>Demonstrated positive impact on</li><li>teaching and on learning</li></ul>	
		· · · · · · · · · · · · · · · · · · ·	
		Dissemination of information	

Source: Yoder, Karen M. "A Framework for Service-Learning in Dental Education." Journal of Dental Education 2006 Feb 70(2): 115-23.

# **D. Principles of Professional Conduct**

The basic principles for a practicum lie in the understanding that MPH students in training not only represent themselves but also represent the Office of Public Health Studies and the profession of public health as a "public health professional in practical training." Each person involved in the practicum experience is expected to demonstrate responsible, ethical, and professional behavior in setting goals and objectives, meeting responsibilities and commitments, and addressing problems, issues and concerns by following these principles:

- 1. Act in accordance with the highest standards of professional integrity and personal conduct;
- 2. Strive to become proficient in professional practice and performance of professional activities:
- 3. Respect the privacy of information users and hold in confidence all information obtained in the course of professional learning and service during the practicum;
- 4. Treat colleagues and all people with respect, courtesy, fairness, and good faith;
- 5. Adhere to the commitments made to the practicum placement agency; and
- 6. Uphold and advance the values, ethics, knowledge, and function of the public health profession.<sup>1</sup>

In addition to the professional conduct principles as stated above are the ethical principles of public health behavior as stated below. Together, both sets of principles should guide the student through the practicum experience and the completion of the MPH degree program.

<sup>&</sup>lt;sup>1</sup> Source: Adapted from Case Management Practicum for Community Health Workers Handbook by Waianae Health Academy at Waianae Coast Comprehensive Health Center, Spring 2007.

# E. Principles of the Ethical Practice of Public Health\*

- 1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.
- 2. Public health should achieve community health in a way that respects the rights of individuals in the community.
- 3. Public health policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.
- 4. Public health should advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.
- 5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.
- 6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.
- 7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.
- 8. Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.
- 9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.
- 10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.
- 11. Public health institutions should ensure the professional competence of their employees.
- 12. Public health institutions and their employees should engage in collaborations and affiliations in ways that build the public's trust and the institution's effectiveness.

\*Source: "Principles of the Ethical Practice of Public Health, Version 2.2". Public Health Leadership Society: 2002.

# F. Practicum Syllabus for PH 791: Advanced Public Health Practice



# OFFICE OF PUBLIC HEALTH STUDIES GRADUATE COURSE SYLLABUS

# 1. Course Syllabus Information

a. Course Number and Title: PH 791: Advanced Public Health Practice

b. Number of Credit hours: 3 credit hours

c. Course Meeting Place and Time: TBA—Placements with community organizations

d. Prerequisite(s): Must have 15-24 credit hours of public health course work completed (see below)

### 2. Instructor Information:

a. Name: Lisa Kehl, MPH, MSW, LSW, TTS

b. Phone: 808-956-5771c. Email: kehl@hawaii.edu

d. Office Location: D202-Biomedical Sciences Building

e. Office Hours: By appointment via email

### 3. Course Description:

The Advanced Public Health Practice or usually called "Practicum" is a planned, approved, supervised and evaluated practical experience that is intended to provide MPH students an opportunity to synthesize, integrate, apply practical skills, knowledge, training learned through courses, to gain professional experience in a public health work environment and to work on public health practice projects that are of particular interest.

The Practicum (or Applied Practice) is a three-way partnership between the 1) MPH student, 2) student's UHM-Office of Public Health Studies' through the Practicum Coordinator and his/her advisor, and 3) the sponsoring agencies/organizations in which the practicum takes place under the supervision of a site preceptor. The Practicum is a 3-credit requirement during which the student works 240 hours in the community under the supervision of a site or practicum preceptor. Students can complete these hours over the summer period or spread them over a long time period if necessary.

The Practicum is guided by a set of approved policies and procedures, which are based on the needs, and resources of all parties involved. A Practicum provides the opportunity to integrate and apply classroom learning in a public health work environment, enabling you to observe and learn from professionals in the field. If you are new to the field of public health, the practicum serves as an important first step in your career with public health practice, providing an introduction to the practical skills and experience necessary for a productive and fulfilling career. If you have had prior work experience, you will find that the practicum provides the opportunity to hone your skills or to gain new experience in a different area of specialization. The practicum experience could include study design, proposal writing, primary data collection & data analysis, needs assessment, program evaluation, project development, health education trainings, policy analysis, cost effectiveness, and others.

# **3a. Prerequisites** (optional- delete if none)

# 1. Academic Prerequisites:

Students need to have completed minimum of 15-24 credits of their MPH course requirement to be considered eligible for the Practicum. It is recommended that at least 20 hours (two semesters of course work) or more credits are completed so that more public health knowledge and learning is brought into the practicum experience as applied practice.

# 2. Additional Prerequisites:

Please refer to the Practicum Handbook for a review of the complete prerequisite list at <a href="http://www.hawaii.edu/publichealth/students/students.html">http://www.hawaii.edu/publichealth/students/students.html</a>

The primary prerequisites required for the program are as follows:

- Attendance to Practicum Orientation conducted by Practice Coordinator
- Pre-approval of the Practicum by the Practicum Coordinator and Faculty Advisor prior to initiation of Practicum hours
- Enrolled in UH-OPHS liability insurance by paying \$15.00 at the OPHSAS
- Development and submission of a completed Practicum Plan on Form 15
- All signatures obtained on Form 15 including Practicum preceptor, Faculty Advisor, Second Committee member, student and clearance by the Practicum Coordinator.

### 3. Forms

All students must fill out and submit the following forms found on Public Health Website at https://www.hawaii.edu/publichealth/students/forms.html

- Form 15-Student Practicum Plan (Appendix 1)
- Form 16-Final Site Preceptor Evaluation (Appendix 2)
- Form 17-Practicum Profile and Career Advising Form (Appendix 3)
- Form 18-Practicum Profile and Career Advising Form (Appendix 3)
- Memorandum of Agreement-Practicum Agreement for the Practicum Site (Appendix 3)
- Time Sheet for Tracking MPH Practicum Service Hours (Appendix 4)
- Request Form for Organizations seeking MPH students for practicum placement (Appendix 5)
- Student Practice Course Commitment Form (Appendix 6)
- Student Profile (Appendix 7)
- Form 18-MPH Competency Attainment Tracking Form (Appendix 8)

# 4. **Student Learning Objectives:** (for the Course):

### **Course Overarching Learning Objectives**

The practicum is an intensive period of supervised practicum training that is a key component of the MPH educational experience. It can be conceptualized in a variety of ways, each of which may be relevant to a particular set of needs, conditions, and purposes. A commonly accepted description of such programs focuses on the purpose of supplementing and extending the classroom academic program through practical opportunities with the following course overarching learning objectives:

- 1. Integrate theory with <u>practice</u> and application of knowledge;
- 2. Provide a place outside the classroom for clarifying skills, values/beliefs, and testing methods and techniques;
- 3. Identify potential public health problems and issues;
- 4. Address "real world" problems through public health practice, problem solving, solutions, and service;
- 5. Assist in defining and solving health problems by using existing data or collecting new information, and
- 6. Stimulate or create areas for needed practice, intervention, policy, research, and investigation.

5. Course Schedule (Process) and Assignments with Grade Distribution: (Practicum Steps)

MPH Practicum Process Checklist and Grading Distribution for PH 791 (Fillable)

**MPH Student Name**: Click or tap here to enter text. **Specialization**: Click or tap here to enter text.

MPH Practicum ChecklistProcess Steps	Assigned Points
Submitted Form 17 and Resume     Completed and submitted Form 17 & resume to Practicum Coordinator to guide focus of the practicum placement.	3
2. Met with Practicum Coordinator to finalize the following:	3
a) Selected Practicum Placement Site	
Found a site that meets your interest	
Discussed the preceptor and placement site with your faculty committee advisor/chair	
Confirmed site offers the basic requirements for MPH specialization areas	
Met with Practicum Coordinator to complete Form 17 and file resume in OPHSAS file	
b) Selected Qualified Practicum Preceptor	
<ul> <li>Selected qualified practicum preceptor that is willing to oversee your practicum activities</li> <li>Ensured if practicum preceptor has at least a <u>master's degree</u></li> </ul>	
Assessed if Practicum preceptor has at least one-two years of experience in the field.	
Verified if Practicum preceptor has enough time to meet regularly with the student	
Sought approval preceptor by Faculty Advisor/chair and from practicum coordinator	
•	3
<ul> <li>Paid the \$15.00 premium at Office of Graduate Student Academic Services (OGSAS) in Biomed D204.</li> </ul>	
<ul> <li>Used only checks or money order are accepted; make payable to "University of Hawai'i".</li> <li>Deadline: Prior to submission of Form 15 since date needs to be listed on Form 15.</li> </ul>	
4. Signed Memorandum of Agreement (MOA)—Practicum Agreement obtained	3
Ensured practicum site has a signed Memorandum of Agreement (MOA) with OPHS	
Worked with the Practice Coordinator to have MOA generated, signed and filed	
5. Completed and collected signature on Form 15:	8
Met with preceptor and practicum coordinator for practicum content	
Completed all sections of Form 15 (typed)	
Selected second committee member	
,	
	2
•	
practicum coordinator—Form 15 starts PH 791.	
Emailed ID number to Practicum Coordinator to seek override for PH 791	
<ul> <li>Registered for PH 791: Advanced Public Health Practice in Fall semester or semester that practicum ends</li> </ul>	
	1. Submitted Form 17 and Resume  Completed and submitted Form 17 & resume to Practicum Coordinator to guide focus of the practicum placement.  2. Met with Practicum Coordinator to finalize the following:  a) Selected Practicum Placement Site  Found a site that meets your interest  Discussed the preceptor and placement site with your faculty committee advisor/chair  Confirmed site offers the basic requirements for MPH specialization areas  Met with Practicum Coordinator to complete Form 17 and file resume in OPHSAS file  b) Selected Qualified Practicum Preceptor  Selected qualified practicum preceptor that is willing to oversee your practicum activities  Ensured if practicum preceptor has at least a master's degree  Assessed if Practicum preceptor has at least one-two years of experience in the field.  Verified if Practicum preceptor has at least one-two years of experience in the field.  Verified if Practicum preceptor has an elast one-two years of experience in the field.  Verified if Practicum preceptor has enough time to meet regularly with the student sought approval preceptor by Faculty Advisor/chair and from practicum coordinator  3. Paid Liability Insurance  Paid the \$15.00 premium at Office of Graduate Student Academic Services (OGSAS) in Biomed D204.  Used only checks or money order are accepted; make payable to "University of Hawai'i". Deadline: Prior to submission of Form 15 since date needs to be listed on Form 15.  4. Signed Memorandum of Agreement (MOA)—Practicum Agreement obtained  Ensured practicum site has a signed Memorandum of Agreement (MOA) with OPHS  Worked with the Practice Coordinator to have MOA generated, signed and filed  5. Completed and collected signature on Form 15:  Met with preceptor and practicum coordinator for practicum content  Completed all sections of Form 15 (typed)  Selected second committee member  Paid Liability insurance so date can be typed on Form 15  Emailed ID number to Practicum Coordinator to seek override for PH 791  Emailed ID number to Practicum Coordinator

7. Conducted and finished practicum activities	25
<ul> <li>Logged time spent on practicum activities, did monthly blogs, and carried-out objectives &amp; deliverables</li> </ul>	
Completed full completion of practicum objectives and deliverables	
• Carried out 240 hours (total) by the end of the practicum period (usually the end of the summer)	
Submitted deliverables, practicum report, and Form 18 to preceptor, practicum coordinator,	
and committee members	
8. Posted monthly reflective blogs throughout whole practicum on time	10
(lateness will affect grade)	
Wrote and submitted monthly narrative reflective blogs on "Practicum Site Public Health"	
laulima under "Clog" tab throughout the whole practicum	
Stopped monthly blogs once deliverables and practicum report have been submitted	
9. Wrote Practicum Narrative Report	10
<ul> <li>Prepared practicum report with headings for each objective/deliverable pair</li> </ul>	
Completed written narrative practicum report about the experience at practicum site	
Documented how each set of learning objectives and deliverables have been met	
Documented how at least <u>five MPH</u> competencies got attained and/or reinforced with at least	
three from the MPH foundational competency list	
<ul> <li>Filled-in competency-assignment pairing table to certify what methods was used for competency attainment.</li> </ul>	
<ul> <li>Ensured that enough data/experience was generated for use with the capstone final paper and</li> </ul>	
final oral (if linked), which is determined by advisor.	
10. Obtained Form 16: Preceptor Evaluation of Practicum and Submitted	8
Ensured Practicum Preceptor completes the Form 16 called "Practicum Preceptor Evaluation"	
Returned Form 16 to the Practice Coordinator for processing.	
Practicum Coordinator will email copies to the faculty committee and place in OGSAS file	
11. Submitted Practicum Portfolio and Forms 15, 16, 17, & 18	10
Created MPH digital portfolio with practicum deliverables (products), practicum report, Form	
15, Form 16, Form 17, and Form 18.	
Marked the competencies on Form 18 and explain how they were completed with at least five	
MPH competencies with three from the MPH Core Foundational Competencies.	
Completed assignment Table A with the practicum report to document how each competency	
was obtained	
Document how MPH competency—MPS21: "Perform effectively on interprofessional teams"      The second of the se	
got attained with interprofessional education (IPE) tracking is applicable—(See IPE policy in	
Appendix 12)	15
12. Demonstrated good practicum management and good professional	15
communication	
Was able to complete practicum with planned time (usually one summer-12 weeks)	
Communicated well with preceptor and keep practicum coordinator well informed of progress .	
and any concerns	100
13. Finished practicum and total practicum points:	100
Completed post-Practicum feedback survey (like eCafe) that is done in Qualtrics	
Thanked preceptor for time and mentoring during the practicum experience Completed all	
<ul> <li>practicum steps</li> <li>Submitted e-version of Practicum Checklist to Practicum Coordinator</li> </ul>	
No PH 791 grade will be given until <b>all</b> steps/aspects are thoroughly completed.	

# 6. Specific Course Assignments' Guidelines & Instructions

# **Practicum Course (PH 791) Assignments & Instructions**

PH 791: Advanced Public Health Practice-Instructions for MPH Practicum Students with signed Form 15

# **I. Complete Practicum Objectives and Deliverables**

# **Instructions:**

- <u>Focus on Objectives.</u> Work with preceptor to carry out the practicum activities based on the Form 15 "agreed" objectives and deliverables. The 240 hours should be spent with a specific focus. If other activities are added be sure that there will be enough time to finish the objectives/deliverables on the Form 15. If the practicum project changes or evolves, then the Form 15 must be revised.
- <u>Produce the deliverables.</u> Deliverables are concrete products of your practicum objectives and activities. They are to be shared with your preceptor, practicum coordinator and committee members at the end of the practicum.

# <u>II. Post Monthly Reflective Blogs</u>-Due by 7<sup>th</sup> day of each month Instructions:

- Monthly blogs. Blogs will need to be posted monthly with at least one blog for every month that
  you are in your practicum. You will stop posting blogs once your practicum report has been
  submitted.
- <u>Due 7<sup>th</sup> of the each month.</u> Blogs are due by the 7th day of each month and it is the MPH student's responsibility to remember to post these blogs in Laulima under "Practicum Site Public Health" using the <u>Clog tab.</u>
- Open. Blogs do not have a maximum length so write as much as you want.
- **First person.** The monthly reflective blogs may be written in the first person or third person since these are academic blogs.
- <u>Written Communication.</u> Blogs will be utilized to understand the progress of the MPH student's practicum activities and to communicate with the practicum coordinator. These summary blogs in essence would contain content from the weekly verbal updates given to the practicum preceptor.
- <u>Paragraphs about practicum activities.</u> The general expectation is to write a narrative of at least one-two paragraphs with a few sentences in each paragraph as this is an academic learning blog. Extra blogs are welcome.
- <u>Blog Focus.</u> The basic approach to each reflective blog is to be guided by answering the following questions as listed below in Table 1:

Table 1: Reflective Blog Guide:		
Reflective Blogs Elements	Reflective Blog Question to Address:	
<ul> <li>Gaining Professional Self-awareness</li> <li>Applying Public Health Practice and Attaining Competency</li> </ul>	A. What practicum activities were accomplished? How do these experiences relate to the application and refinement of your project as well as to public health knowledge, attitudes and skills?	

# III. Write Practicum Report-Due at the end of practicum

# Instructions:

- <u>Purpose</u>—The purpose of the practicum report is to describe how practicum objectives and deliverables were met. See table 2 below for ow to focus on the purpose.
- <u>Headings.</u> Be sure to type your name, date, and "<u>Practicum Report</u>" on the top of the first page before you begin to type your report (No title page).
- **Sections.** The report should be organized into sections with a heading for each pair--"L1: learning objective and D1: deliverable".
- <u>Doubled-spaced.</u> The report should be doubled—spaced and is usually from 5-10 pages in length (there is no maximum limit), 11-12 size font for a total of at least 1200 words.
- **Formatting.** Use APA or MLA style formatting. Write the report using your best academic writing even though the report can be written in the first-person.
- <u>Insights.</u> After you explain how you have met your objectives and "paired" them with your deliverables, add a short statement for each section of your key insights (critical thinking comment) about your attained competencies and the impact on you as an emerging public health professional.
- Which competencies. Add Table A as the final section of your practicum report and complete with your specific linkage between the select MPH competencies and your practicum learning objectives and how these got reinforced. You will need to be specific on which practicum activity allowed the attainment and/or reinforcement of the each competency.
- Enough Competencies. At least <u>five</u> (5) competencies must be attained and/or reinforced during the practicum. Furthermore, <u>three</u> (3) of the competencies must be from the MPH foundational competencies as put forth by the UHM-OPHS accreditation agency called Council on Education for Public Health (CEPH). Use Table A to show at least five MPH competencies at the end of your practicum report to document the specific competency achieved and be sure three are from MPH foundational competencies.
- <u>Before Form 16.</u> The practicum report is due as you are completing the practicum during the last 220-240 hours. It is preferable to submit your practicum report before the preceptor writes the evaluation on Form 16 so that the report can be used to help assess the student's performance. Submit a practicum narrative report (document) in one joint email to all on the signature page of Form 15 in order to better be evaluated by your preceptor, advisor, committee members and practicum coordinator.
- Request Form 16. Once the practicum report is complete and submitted, it is time to seek the evaluation from your preceptor on Form 16. The student must "cut and paste" his/her objectives and deliverables into the first page of Form 16. Then email the "prepared' form to the preceptor so the preceptor can type in the evaluation checks and remarks then e-sign or print to sign. The preceptor is encouraged to submit the Form 16 directly to the practicum coordinator and copy the practicum student. The practicum coordinator will forward the completed Form 16 to the student's committee members.

Table 2: Practicum Report Guide:		
PH Practice Elements	Evaluation Question to Address:	
Public Health Practice	How have you met each one of your learning objectives and deliverables	
Accomplishments	(outcomes) as listed on your Form 15? If for any reason you have not met	
	an objective or deliverable, explain why?	
Public Health Competencies	What MPH competencies were reinforced through your learning	
	objectives and deliverables? Use Table A at the end of the report to list	
	which competencies were linked and explain how these competencies	
	were reinforced.	

Table A: Assessment of Competencies for MPH during the MPH Practicum (insert into to Practicum Report)		
Competency number and item	Course number or other educational requirements	Specific Practicum Objectives/Deliverables and/or assignment that allowed attainment of Competency
1.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
2.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
3.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
4.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
5.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
6.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	
7.	PH 791: Advanced Public Health Practice—Practicum Applied Practice	

# IV. <u>Declare Competencies</u> on Form 18 (same as in practicum report)

### Instructions:

- Form 18 Competencies. Form 18 is a valuable tracking form (form-fillable) that needs to be filled with course numbers linked for each MPH competency attained and/or reinforced during the practicum. See Appendix for Form 18. You must complete a minimum of five (5) MPH core competencies during the practicum with at least three of the five being MPH foundational competencies. These would be the same competencies as listed in Table A of the practicum report and need to be included in Form 18.
- <u>Tracking Competencies.</u> Form 18 is utilized to document MPH competency attainment in the practicum and all MPH courses. During PH 600: Public Health Foundation course, students are advised to use Form 18 to track competency attainment for all courses throughout the two-year MPH process. The fully completed Form 18 is submitted along with the MPH portfolio as a requirement for PH 789; Integrative Seminar.
- <u>Tracking Interprofessional Education (IPE).</u> One important competency to consider attaining during the practicum is "MPH21: Perform effectively on interprofessional teams". For most

students, the practicum will involve IPE activities which should be documented on Form 18. Interprofessional Education (IPE) is a requirement of all MPH students and proof of completion of at least three (3) IPE events is a prerequisite to allow for registration in PH789. See IPE policy in the appendix 12 of this handbook. Please carefully review Appendix 12 in the Practicum Handbook (pp 69-70) and NOTE that if your plan on using IPE experience from your practicum to meet our required IPE competency, please consult with the practicum advisor as this will need to be approved in advance (approximately 2 months) of registration for PH 791.

# V. Assemble Portfolio and Finish Practicum

### **Instructions:**

- <u>E-Portfolio of Assignments.</u> The MPH portfolio is assembled with the deliverables of the practicum as an e-document on a thumb drive. This is a requirement of the CEPH accreditation agency. The MPH portfolio will include at a minimum the practicum deliverables, the practicum report and practicum-related forms including Forms 15, 16, 17 and 18.
- <u>Before Form 16.</u> The practicum report is due as you are completing the practicum during the last 220-240 hours. It is preferable that the practicum report is submitted before the preceptor completes the evaluation on Form 16 so the report can be used to help assess the student's performance.
- Submission of Practicum Report and Deliverables. Submit your practicum report, deliverables, forms and portfolio in electronic form <u>via a group email</u> to the Practicum Coordinator, your OPHS faculty advisor and second committee member and the preceptor.
- <u>Time Management of the Whole Practicum</u>. There are samples of timesheets in the Practicum Handbook appendix to track your practicum hours. MPH students are on a honor system to track their own practicum hours. As a public health professional, it is important to demonstrate you can manage your objectives, deliverables, time sheets, reflective blogs and practicum report.
- <u>Professional ongoing communication.</u> All blogs and the practicum report are expected to be submitted on time with no reminders. Excessive delays in submitting your work will reduce the final grade given to you in the PH 791 practicum course. Take the initiative to keep the preceptor and practicum coordinator informed and up-to-date with your practicum progress, assignments and deliverables. The practicum report is shared with all on the signature page and is the way the student can update their advisor and second committee member.
- **Practicum Survey.** The student needs to complete a final practicum survey to give feedback about the practicum experience. This is used instead of the eCafe system as there are no field work questions within the eCafe system.
- <u>Thank the Preceptor.</u> The practicum student is expected to thank the preceptor at the end of the practicum. The Practicum Coordinator will send a "Certificate of Appreciation" and thank you letter on behalf of UHM-OPHS once the Form 16 has been received.

# 7. Grading Scale: (You must indicate whether or not you are using the "+ -" grading system)

This cours	This course will NOT use + and –grading system			
A = 90-100	Excellent, distinctive work. Demonstrates sophisticated understanding: Nuanced and insightful account, powerful and effective application of concepts, frameworks and theories discussed in class and articulated in written work.			
B = 80-89	Above average work. Demonstrates accomplished understanding: Thorough, well-documented account; adequate and apt application of concepts, frameworks and theories discussed in class and articulated in written work.			
C = 70-79	Average work, sufficient, but not distinctive. Acceptable view with some misconceptions or oversight; not fully supported; acceptable but limited application of concepts, frameworks and theories discussed in class.			
D = 60-69	Poor, insufficient work. Naïve or inadequate understanding: simplistic account and use of concepts, frameworks and theories discussed in class. Unable to articulate thoughts and ideas in written work.			
F < 60	Unacceptable work			

### 8. Course Policies:

# Policies and Procedures for MPH Practicum Experiences (Applied Practice) 1

### I. Site Selection of Practicum Placement

- A. **Policy I.A:** The selection of a practicum placement site is based on the ability of the site agency and preceptor(s) to provide the student with an exemplary experience in public health practice, specifically community engagement and interprofessional team exchange. The practicum placement site is chosen by the student and approved by the student's practicum preceptor, practicum coordinator (11-month faculty member appointment), and faculty program committee members (faculty with at least a 9-month appointment). The role of these individuals are to determine whether the site will advance the student's public health learning and competency. In addition, the practicum activities must be mutually beneficial to the placement site and the student.
- B. **Policy 1.B:** Once a practicum site is selected, a practicum agreement, also called Memorandum of Agreement (MOA), will be secured between UHM-OPHS and the practicum site's designated representative. The Practicum Coordinator works closely with the organization to ensure signatures are collected and the MOA is filed in the UHM-OPHS practicum agreement binder.
- C. **Policy I.C:** To graduate from UH-OPHS with a MPH, students must enroll in the practicum course PH 791: Advanced Public Health Practice. The practicum or applied practice placement cannot be waived for MPH students. All PH 791 requirements must be completed before entering the PH 789: Integrative Seminar, which is the MPH "capstone" course designed for developing the final paper and final oral examination.

# II. Practicum Preceptor Qualifications, Selection, and Approval Method

A. **Policy II.A:** The practicum preceptor is the designated person to provide day-to-day supervision in the practicum while the student is engaged in the practicum placement experience. Two or more preceptors

- are allowed to offer a team approach in mentoring and guiding the MPH practicum student through the practicum activities. Form 15 and Form 16 allow optional spaces for these additional preceptors. Form 15 is the student's field practicum placement and learning objectives and Form 16 is the student evaluation form to be completed by the preceptor.
- B. **Policy II.B:** Qualified practicum preceptors will hold at least a master's degree and will have one or more years of experience in the public health practice.
- C. Policy II.D: The practicum preceptors will be identified and selected based on their years of service, their exemplary practice in public health that may include epidemiology, social and behavioral health sciences, health policy and management, Native Hawaiian and indigenous health or other public health areas. Selection is also based on the ability of the preceptor's site to provide a practicum training experience that best meets the student's learning objectives and expected activity outcomes.
- D. **Policy II.D: On occasion, exceptions can be made for potential** preceptors that only hold a bachelor's degree, such as State legislative officials and Native Hawaiian leaders.
  - Procedure 1: To allow this exception, the suggested preceptor's resume or curriculum vitae is reviewed by the faculty of the student's specialization area. This faculty specialization group and the student's Practicum Coordinator decide if the suggested preceptor has enough experience, maturity, and professionalism to best support a MPH student's practicum learning.

# **III. Practicum Preceptor Orientation and Support**

- A. **Policy III.A:** The Practicum Coordinator ensures that the selected preceptor acquires an overview and orientation to the OPHS's Practicum system.
  - 1. Procedure 1: Two approaches are utilized in selecting the preceptor: 1) sharing/reviewing of the OPHS Practicum Handbook and 2) a "practicum meeting" between the student, preceptor, Practicum Coordinator, and/or student's MPH faculty committee members.
  - **2. Procedure 2:** The Practicum Coordinator usually convenes the meeting between the student and the preceptor to ensure the preceptor is familiar with practicum system and its process.
- B. **Policy III.B:** The Preceptor's responsibilities are reviewed and made available to the preceptor through three avenues—the Practicum Handbook, Form 15 (signed by the preceptor), and the Practicum Agreement--Memorandum of Agreement (MOA) between the practicum site and OPHS.
  - **1. Procedure 1:** Ongoing support is given to the preceptor through email contact, phone calls, any meetings and/or in-person exchanges as needed.
  - 2. Procedure 2: Once the practicum is completed and the preceptor has evaluated the student on the Form 16, the student will email the preceptor a thank-you letter. The Practicum Coordinator will also email the preceptor a certificate of appreciation and a MPH practicum request form for the preceptor to request another practicum student for future public health projects.

### IV. Practicum Requirements and Approaches for Supervision of Students

- A. **Policy IV.A:** The practicum is required to be at least 240 hours in length. Extra hours are allowed. The student also has the option of extending their practicum or completing a second practicum by enrolling in PH 793: Special Practicum/Special Projects.
- B. **Policy IV.B:** Under the supervision of the preceptor, students are encouraged to complete their practicum in the summer and/or over a single semester. Flexibility is allowed to accommodate part-time/working students' schedules.
  - 1. **Procedure 1:** A fully signed Form 15 and paid liability insurance are needed to start an active practicum.
  - 2. **Procedure 2**: The student is expected to meet with the practicum preceptor regularly over the course of the practicum placement. The student is also expected to communicate/meet with the Practicum Coordinator and his/her program committee members to discuss progress on the

- practicum learning objectives and expected activity outcomes, which will be completed and signed off through Form 15.
- 3. **Procedure 3:** The student is required to post monthly summary blogs on the Laulima site (online classroom management system) to describe his/her progress. The Practicum Coordinator reads the practicum blogs and gives written feedback throughout the student's practicum.
- 4. **Procedure 4:** The student's faculty committee members are updated when the academic semester starts (e.g. August/September). Students are encouraged to complete their practicum within or by the new academic semester to reduce the student's course workload. The practicum timeline is discussed and agreed upon between the preceptor, MPH student, and Practicum Coordinator in advance. The actual enrollment in the PH 791 course is best aligned during semester when the practicum will be finished to avoid "Incompletes."
- 5. **Procedure 5:** Upon completion of the 240 practicum hours (or more), the student is required to prepare a final practicum report, provide practicum deliverables, mark MPH competencies that were obtained, and provide an assessment of the practicum placement experience describing how the learning objectives and deliverables (outcomes) were met.
- 6. Procedure 6: The MPH practicum student will need to demonstrate and document the attainment of at least five MPH competencies during their practicum experience using Form 18. At least three of the five competencies need to be foundational competencies as specified by 2016 Council on Education for Public Health (CEPH) Criteria. Additional foundational and concentration-specific competencies may also be assessed and attained. All MPH competencies will be listed in the syllabus and Practicum Handbook as a guide for the student to choose and document the more relevant attained competencies.
- 7. **Procedure 7:** Interprofessional teamwork is one of foundational MPH competencies and should be integrated in the practicum activities for each MPH student when possible. Other outside interprofessional teamwork options exist and need to be completed during, and by the end of, the practicum for tracking, assessment, and attainment for this competency.
- C. **Policy VI.C.** Students are not normally paid for their practicum training. He/she may be paid, but this must be pre-arranged with the practicum placement site and Practicum Coordinator in advance.
- D. **Policy VI.D.** Generally, Practicum placements at students' work places and/or with the student's boss are not allowed due to the high potential for conflict-of-interest. Exceptions can be made on a case-by-case bases following discussions with the student's boss, the student's program committee members, and the Practicum Coordinator. Specific documentation is encouraged in Form 15 to ensure the best experience for the student and preceptor.

# V. Evaluation of Practicum Placement Sites and Practicum Preceptors

A. **Policy V.A:** The practice placement site and practicum preceptor are evaluated as an ongoing process by the Practicum Coordinator and public health faculty members. Evaluation criteria include the following: a) how well the site met the student's desired learning objectives, b) the quality of practicum experience, c) the education (master-level or higher) of the preceptor, d) how much time and guidance the practicum preceptor was able to offer the student, e) stability of the practicum site/organization, and f) whether the expected activity outputs and deliverables (learning outcomes) were achieved.

### VI. Evaluation of Students

A. **Policy VI.A:** The MPH practicum student will need to submit several documents to the Practicum Coordinator to complete the practicum and to be evaluated. These include: i) practicum deliverables, ii) the practicum report, iii) Form 18 to check the specific attained competencies, iv) prepared Form 16 for preceptor's evaluation, and v) obtained Form 16 from preceptor (it is preferred that the preceptor email Form 16 directly to the Practicum Coordinator). The first three items become part of student's portfolio.

- B. **Policy VI.B:** The practicum preceptor is responsible for the evaluation of the MPH student's progress and outcomes during the practicum placement experience through use of Form 16.
  - 1. **Procedure 1:** The practicum preceptor must complete Form 16, which includes the student's pre-determined learning objectives and deliverables as outcomes. The practicum preceptor should give a direct and honest report of the student's level of success in completing the learning objectives, deliverables, and the activity/research outcomes.
- C. Policy VI.C: The Practicum Coordinator and faculty advisor will assign the grade for PH 791
  - 1. Procedure 1: The grade will be based on assessment of practicum deliverables, practicum summary report of activities, practicum portfolio, preceptor's Form 16 evaluation, and recommendation of Practicum Coordinator on how well the practicum project and practicum-related communication were managed by the student throughout the practicum.
  - 2. Procedure 2: The Practicum Coordinator posts all the PH 791 course grades.

# **Procedural Steps for Implementing and Completing the Practicum**

### First Semester:

- 1. The student becomes familiar with the practicum process, such as the requirements, forms/documents, deadlines, etc.
- 2. The student begins preliminary discussions with his/her faculty advisor to identify applied practice areas of interest and the MPH competencies to be strengthened.
- 3. The student attends the Practicum Coordinator's presentation on the Practicum System usually presented during PH 600: Foundations in Public Health's class time.
- 4. The student selects a permanent faculty advisor who will also serve as faculty chair of his or her MPH program committee.

### **Second Semester:**

- 5. The student schedules a practicum-matching meeting with Practicum Coordinator.
- 6. The student discusses potential placement sites with the Faculty Advisor and Practicum Coordinator. Sites under consideration may include agencies or organizations that are currently seeking students or established sites that correspond with the student's practicum plan.
- 7. The student and his or her faculty advisor select the additional faculty member(s) of the program committee.
- 8. With the help of the faculty advisor/chair and/or Practicum Coordinator, the student visits potential practicum placement sites and interviews with prospective practicum preceptors.
- 9. The student, Practicum Coordinator, and the faculty chair/advisor screen, select, and accept a practicum placement site.
- 10. The Practicum Coordinator will determine if the suggested preceptor meets OPHS requirements and is willing and able to direct the required practicum activities.
- 11. The student drafts a possible practicum plan on Form 15 identifying the desired learning objectives and deliverables relative to the practicum and further mastery of the MPH competencies. Form 15 includes the student's learning objectives and their relationship to the competencies, the scope and nature of the practicum project, and expected deliverables or outcome. The practicum plan is discussed by the student, faculty chair/advisor, preceptor, and Practicum Coordinator, ideally in a joint meeting of the parties.
- 12. The student, preceptor, faculty advisor/chair and faculty committee member(s) approve and sign Form 15. The Practicum Coordinator files the completed form in the student OPHSAS folder.
- 13. Prior to the start of the MPH student's practicum, four items must be completed: 1) a minimum of 15 to 24 MPH course credits; 2) a practicum contract for the site placement using Form 15; and 3) payment for the liability insurance, and 4) practicum agreement is signed and filed.

- a. Student liability insurance costs \$15.00 and can be purchased by check or money order at the Office of Public Health Student Academic Services (OPHSAS, Biomed D-204). This ensures that the student has liability insurance coverage for one year to cover the duration of the practicum training, and for any other service-learning experiences.
- b. With any research activities that may be considered for publication, the student also must obtain approval from the University's Committee on Human Studies through the Institutional Review Board (IRB) (applications available at <a href="https://www.hawaii.edu/irb">www.hawaii.edu/irb</a>.).
- 14. Enrollment in the PH 791 Advanced Public Health Practice course can occur in the semester that the practicum will be completed and before enrolling in PH 789: Integrative Seminar.

### **Summer Session and/or Third Semester:**

- 15. As part of PH 791, the student completes the required practicum training, which entails a minimum of 240 hours of practicum work.
- 16. Student must take responsibility to keep regular work hours, track the numbers of hours completed (see sample time sheet later in the Handbook), make up missed hours, and meet regularly with practicum preceptor (weekly or every other week). The student keeps the faculty chair/advisor informed of ongoing practicum activities on a regular basis.
- 17. The student also must complete the monthly blogs throughout the whole practicum process. Upon practicum completion, the student must submit the practicum deliverables and one practicum report to their committee members, preceptor, and Practicum Coordinator. These items will make the student's MPH portfolio.
- 18. The student is expected to fulfill responsibilities and commitments in a professional manner by being accountable, practicing good ethics and code of conduct, maintaining confidentiality, organized, and consulting faculty and other professionals when in doubt of appropriate actions to apply in certain situations.
- 19. The student should alert the Practicum Coordinator, his/her faculty chair/advisor, second committee member, and practicum preceptor at the completion of the practicum training.
- It is the responsibility of the student to ensure that the practicum preceptor completes Form 16
   (Practicum Preceptor Evaluation Form) and returns the completed form to the Practicum Coordinator for processing.
- 21. The student should send an email/letter/note of appreciation to the practicum preceptor and practicum placement site. A follow-up certificate of appreciation and letter of thanks will be officially sent by the Practicum Coordinator on behalf of the Office of Public Health Studies.
- 22. The student provides the actual deliverables, portfolio, and a practicum report to the preceptor, with copies to committee members and the Practicum Coordinator. The report should explain how the outcomes were met as required by the practicum plan (Form 15). Comments and suggestions to improve and enhance the practicum training experience within the context of the department and program requirements will be provided to the Practicum Coordinator by the student and/or the faculty chair/advisor.
- 23. The student must submit the required documentation, (Form 15, practicum report, deliverables, portfolio, and preceptor's Form 16), before the student can enroll in PH 789: Integrative Seminar.
- 24. The student is requested to complete an online practicum survey as to rate the practicum experience and to substitute for the eCAFE system since practicum indicators are not part of the eCAFE system.

### **Fourth Semester:**

- 25. The student incorporates elements of the practicum training experiences into his/her final paper and final oral presentation as guided by the student's faculty chair/advisor.
- 26. The student will designate what MPH competencies were actually met, strengthen, and even mastered during the practicum experience on the Form 18 and in the practicum report.

<sup>&</sup>lt;sup>1</sup> Revised Policies and Procedures were reviewed and cleared by the OPHS faculty members during January 11, 2018 UHM-OPHS Faculty Meeting.

### 9. University Policies for Opportunity and Accommodation:

### Equal Opportunity and Affirmative Action Policy

The University of Hawai'i is an equal opportunity/affirmative action institution and is committed to a policy of nondiscrimination on the basis of race, sex, gender identity and expression, age, religion, color, national origin, ancestry, citizenship, disability, genetic information, marital status, breastfeeding, income assignment for child support, arrest and court record (except as permissible under State law), sexual orientation, national guard absence, status as a covered veteran, pregnancy, and domestic or sexual violence victim status. This policy covers admission and access to and participation, treatment, and employment in the University's programs and activities. For more information on equal opportunity and affirmative action policies and complaint procedures for the UHM Campus, contact:

- a) Students: Lori Ideta, Interim Vice Chancellor for Students, EEO/AA & ADA Coordinator Ph. 956-3290 (V/T); Email vcs@hawaii.edu
- b) Students with Disabilities: Ann Ito, KOKUA Program Director Ph. 956-7511 (V/T); Email kokua@hawaii.edu
- c) Students & Employees: Dee Uwono, Office of Title IX Director & Coordinator Ph. 956-2299 (V/T); Email t9uhm@hawaii.edu
- d) Employees: Mark Au, EEO/AA Director, Deputy Title IX & ADA Coordinator Ph. 956-7077; Email eeo@hawaii.edu

# Disability Access

A student who may need an accommodation based on the impact of a disability is invited to contact me privately within the first weeks of the course. I would be happy to work with you and the KOKUA Program (Office for Students with Disabilities) to ensure reasonable accommodations in my course. KOKUA is responsible for facilitating accommodations for students with documented disabilities and can be reached at 956-7511 (voice/text) or in QLC 013.

# Counseling Services and Mental Health

From time to time, we all need help managing stress and life problems. Occasionally, school can seem overwhelming, especially when balancing other responsibilities such as family and work. The University's Counseling & Student Development Center (CSDC) offers support to all UHM students to assist with personal, academic and career concerns. All services are confidential. Individual, couples and group counseling services are free of charge. To schedule an appointment, visit the CSDC website at <a href="http://manoa.hawaii.edu/counseling/">http://manoa.hawaii.edu/counseling/</a> or call (808) 956-7927.

### • University of Hawai'i Student Conduct Code and Academic Dishonesty

The University expects students to maintain standards of personal integrity that are in harmony with the educational goals of the institution; to respect the rights, privileges, and property of others; and to observe national, state, and local laws and University regulations.

Academic dishonesty such a plagiarism, cheating and other forms of dishonesty will result in a failing ("F") grade for the assignment. More than one incident of academic dishonesty will result in failing ("F") grade for the course. Equally, more than one incident will also result in reporting the academic dishonesty to the UH Office of Judicial Affairs.

Student should familiarize themselves with the University of Hawai'i Student Conduct Code: http://studentaffairs.manoa.hawaii.edu/policies/conduct\_code/.

# 10. Required Text or Readings:

There are no required text books for the PH 791 course since this course is the important application and practice of public health knowledge and skills already learned in prior public health courses, textbooks, articles, and other academic sources.

# 11. Foundational & Specialization Competencies Addressed:

Any of these competencies may be reinforced during the practicum and it is the student's assignment to report which competencies got reinforced during the 240-hour practicum by documenting which and how specific competencies got attained within the practicum report.

MPH CORE FOUNDATIONAL COMPETENCIES		
MPH1.	Apply epidemiological methods to the breadth of settings and situations in public health practice. Related Courses: PH 655, 663, 791	
MPH2.	Select quantitative and qualitative data collection methods appropriate for a given public health context. Related Courses: PH 623, 655, 663, 791	
MPH3.	Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. Related Courses: PH 623, 655, 663, 791	
MPH4.	Interpret results of data analysis for public health research, policy or practice. Related Courses: PH 623, 655, 663, 791	
MPH5.	Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings. Related Courses: PH 602, 791	
МРН6.	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels. Related Courses: PH 602, 623, 791	
MPH7.	Assess population needs, assets, and capacities that affect communities' needs.  Related Courses: PH 623, 791	
МРН8.	Apply awareness of cultural values and practices to the design or implementation of public health policies or programs. Related Courses: PH 602, 648, 791	
MPH9.	Design a population-based policy, program, project or intervention. Related Courses: PH 648, 791	
MPH10.	Explain basic principles and tools of budget and resource management. Related Courses: PH 648, 791	
MPH11.	Select methods to evaluate public health programs. Related Courses: PH 648, 791	
MPH12.	Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence. Related Courses: PH 602, 791	
MPH13.	Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes. Related Courses: PH 623, 791	
MPH14.	Advocate for political, social or economic policies and programs that will improve health in diverse populations. Related Courses: PH 602, 791	
MPH15.	Evaluate policies for their impact on public health and health equity. Related Courses: PH 602, 791	
MPH16.	Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making. Related Courses: PH 648, 791	
MPH17.	Apply negotiation and mediation skills to address organizational or community challenges.  Related Courses: PH 623, 791	
MPH18.	Select communication strategies for different audiences and sectors. Related Courses: PH 623, 789, 791	
MPH19.	Communicate audience-appropriate public health content, both in writing and through oral presentation. Related Courses: PH 602, 623, 789, 791	

MPH20.	Describe the importance of cultural competence in communicating public health content.  Related Courses: PH 602, 623, 791	
MPH21.	MPH21. Perform effectively on interprofessional teams.  Related Courses: PH 600, 791, HIPE Workgroup	
MPH22.	Apply systems thinking tools to a public health issue. Related Courses: PH 602, 648, 791	

SPECIALIZATION COMPETENCIES				
EPIDEMIOLOGY				
EPI1.	Identify public health practices for disease control including surveillance, screening and outbreak investigation, including the use of biomarkers and molecular biology.  Related Courses: PH 664, 666, 669, 681, 748, 791			
EPI2.	Demonstrate proficiency in computer-based data collection, management and analysis using major statistical software and fundamental strategies for bio statistical analysis. Related Courses: PH 656, 658, 664, 747, 791			
EPI3.	Discuss how public health biology—the biological, ecological, and molecular context of public health—impacts public health practice. Related Courses: PH 666, 669, 681, 748, 789, 791			
EPI4.	Apply epidemiologic-specific theoretical constructs, research design, research methodology, and analytic strategies. Related Courses: PH 656, 664, 666, 669, 681, 747, 748, 791			
EPI5.	Develop a scientific hypothesis, beginning with a review of existing literature, and design an epidemiologic study to assess the hypothesis validly and efficiently.  Related Courses: PH 664, 666, 669, 791			
	HEALTH POLICY & MANAGEMENT			
HPM1.	Apply and critique the principles of program planning, development, budgeting, management, and evaluation in organizational and community initiatives using appropriate data sources.  Related Courses: PH 626, 658, 672, 677, 791			
НРМ2.	Determine and apply appropriate quantitative and qualitative methods, technology and analyses to improve health services, programs, policies, organizations, and/or systems. Related Courses: PH 626, 658, 672, 677, 791			
НРМ3.	Apply quality and performance improvement concepts, theories, and methods for strategic planning to improve health using appropriate data sources.  Related Courses: PH 626, 641, 658, 672, 677, 791			
НРМ4.	Cultivate and leverage leadership skills to define a vision, take initiative, provide direction, manage change, and participate in the planning, development and monitoring required to establish and achieve organizational and policy goals. Related Courses: PH 641, 672, 677, 791			
HPM5.	Describe and address major public health challenges across economic, political, administrative, legal, ethical, and social domains for organizations, initiatives, and policies.  Related Courses: PH 626, 641, 672, 677, 791			
	NATIVE HAWAIIAN & INDIGENOUS HEALTH			
NHIH1.	Describe indigenous peoples' health in a historical context including an analysis the impact of colonial processes on health outcomes. Related Courses: PH 635, 673, 674, 675, 688, 791			
NHIH2.	Critically evaluate public health policy and programs using traditional values and ancestral knowledge, balanced with scientific methodology, as they relate to improving the health of Indigenous Peoples.  Related Courses: PH 635, 673, 674, 675, 688, 728, 791			
NHIH3.	Apply the principles of economic evaluation to Indigenous programs with a particular focus on the allocation of resources relative to need. Related Courses: PH 635, 673, 674, 675, 688, 728, 791			
NHIH4.	Describe a reflexive public health practice for Indigenous peoples' health contexts.  Related Courses: PH 635, 673, 674, 675, 688, 791			

# <u>Practicum Handbook—Masters of Public Health (MPH)--August 2018</u>

NHIH5.	Design a disease prevention strategy that values and incorporates indigenous peoples' traditional knowledge. Related Courses: PH 635, 673, 674, 675, 688, 728, 791
	SOCIAL & BEHAVIORAL HEALTH SCIENCES
SBHS1.	Critique methods and instruments for collecting valid and reliable quantitative and qualitative data related to social behavioral health. Related Courses: PH 701, 702, 765, 791
SBHS2.	Design and test mechanisms to monitor and evaluate health promotion programs for its effectiveness and quality. Related Courses: PH 701, 702, 765, 791
SBHS3.	Apply behavior change theory and health promotion strategies to develop grant proposals and identify budgetary priorities. Related Courses: PH 646, 701, 702, 765, 791
SBHS4.	Incorporate ethical principles and standards in the collection, maintenance, use, and dissemination of data interactions with organizations, communities and individuals.  Related Courses: PH 646, 701, 702, 765, 791
SBHS5.	Develop and test communication strategies including technology to promote health behavior change through health interventions and programs. Related Courses: PH 701, 702, 765, 791

# Appendix 1:

# Form 15: PH 791 Advanced Public Health Practice

SUBMIT A COMPLETED COPY OF THIS FORM TO PRACTICUM COORDINATOR'S MAILBOX, BIOMED D-204, AND EMAIL kehl@hawaii.edu IN ORDER TO GET CLEARED (Override) TO REGISTER FOR PH 791.

Student Name: Click or tap here to enter text.

Area of Specialization: Click or tap here to enter text.

Faculty Advisor/Chair: Click or tap here to enter text.

Semester/Year Entered MPH: Click Here
Second Committee Member: Click here
Practicum Focus Area: Click here

Liability Insurance Paid Date: Click here

Practicum Start Date (Month/Year): Click here

Practicum Site Organization: Click here Preceptor Name and Degrees: Click here

Preceptor Job Title: Click here

Preceptor Mailing Address: Click here Preceptor Email Address: Click here

Preceptor Phone: Click here

**DESCRIPTION OF PRACTICUM SITE, PROJECT & PRECEPTOR'S BIO:** 

(Describe these areas to the **specifics** of your practicum project as a narrative)

- A. Practicum Site (describe type organization, mission and specific hosting program):
- B. Practicum Project (including focus, background, and summary of main duties/activities):
- **C. Preceptor's Bio** (with educational degrees/institutions and type of professional work experiences-must have master's degree to be preceptor):

STUDENT LEARNING OBJECTIVES: (Be sure every objective is linked to an outcome)	EXPECTED CONCRETE DELIVERABLES (outcome): (Be sure there is an measureable outcome linked to every objective)	EXPECTED ATTAINED MPH COMPETENCIES: (Be sure to link at least five MPH competencies with three being from the
LO1. Assess practicum experience throughout the process by the following means: meeting regularly with preceptor with verbal updates, posting at least monthly blogs to practicum coordinator with same content as verbal updates, obtaining practicum objectives & deliverables, and writing summary practicum report- distributed all on signature sheet and marking Form 18.	D1. Accomplish good practicum management, post monthly blogs on time, and complete practicum report and practicum deliverables, portfolio, and mark Form 18 with reinforced MPH competencies.	MPH Foundational Competencies) C1. Click or tap here to enter text.
LO2. Click or tap here to enter text.	D2. Click or tap here to enter text.	<b>C2</b> . Click or tap here to enter text.
LO3. Click or tap here to enter text.	D3. Click or tap here to enter text.	<b>C3</b> . Click or tap here to enter text.
LO4. Click or tap here to enter text.	D4. Click or tap here to enter text.	<b>C4</b> . Click or tap here to enter text.
LO5. Click or tap here to enter text.	D5. Click or tap here to enter text.	<b>C5</b> . Click or tap here to enter text.
LO6. Click or tap here to enter text.	<b>D6</b> . Click or tap here to enter text.	<b>C6</b> . Click or tap here to enter text.

# APPROVAL—SIGNATURE SHEET

aculty Advisor	/Chair, Student MPH Degree Committee:		
■ Name: Clic	ck or tap here to enter text.	Signature:	Date:
Address:	1960 East West Road Honolulu, HI 96822		
Phone No.: Click or tap here to enter text.		E-Mail: Click or tap h	here to enter text.
econd Faculty	Committee Member, Student MPH Degre	e Committee:	
	k or tap here to enter text.	Signature:	Date:
	1960 East West Road Honolulu, HI 96822		
Phone No.:	Click or tap here to enter text.	E-Mail: Click or tap he	ere to enter text.
tudent:			
	k or tap here to enter text.	Signature:	Date :
Address:	Click or tap here to enter text.		
Phone No.:	Click or tap here to enter text.	E-Mail: Click or tap he	ere to enter text.
ehl@hawaii.edu o			
■ Name and D	egrees: Click or tap here to enter text.	Signature:	Date:
Job Title: Cli	ck or tap here to enter text.	<u>.</u>	
Preceptor Orga	anization: Click or tap here to enter text.		
Address:	Click or tap here to enter text.		
Phone No.: C	Click or tap here to enter text.	E-Mail: Click or tap h	nere to enter text.
<sup>nd</sup> Preceptor (i	f applicable-optional):		
■ Name: Clic	k or tap here to enter text.	Signature:	Date:
Title: Click	or tap here to enter text.		
Address:	Click or tap here to enter text.		
Phone No.: C	Click or tap here to enter text.	E-Mail: Click or tap he	ere to enter text.
learance by Pr	racticum Coordinator:		-
	Kehl, MPH, MSW, LSW, TTS	Signature:	Date:
Address:	1960 East West Road-D104E Honolulu, HI 968	322	
Phone No.: 8	808-753-0762	E-Mail: kehl@hawaii.e	<u>du</u>
Practicum Agreement Done (date):		Cleared for Practicum	Start (date):

# Form 15: Responsibility Information for Preceptors

# Responsibilities of the Preceptor and Practicum Site Agency:

- 1. Practicum Site Agency and their staff members will provide **orientation** for the practicum student about its agency, its employees, how the agency operates, and its relationships in the community.
- 2. Practicum Site Agency will provide ample learning opportunities for practicum student especially those occasions that help the student meet the learning objectives that are designated on Form 15, the Advanced Public Health Practice Form.
- 3. Practicum Site Agency will provide Field Preceptors who will assist in establishing the learning objectives/deliverables of the student and ensure that a focused in-the-field training is given to the practicum student.
- 4. Preceptors will be available to **meet regularly** (weekly and/or every other week) with the practicum student throughout the 240 hours of practicum experience and will take time to observe the student's work and progress.
- 5. Preceptors will complete and return the **Preceptor Evaluation Form** using the OPHS's form called "Field Preceptor Evaluation Form (Form 16)," given to the faculty program advisor/chair and the Office of Public Health Studies in a timely manner (within 30 days of the practicum's completion)
- 6. Preceptor will **review the evaluation results with the student** before submitting the completed evaluation form.

# Responsibilities of the Office of Public Health Studies at the University of Hawai'i:

- 1. Office of Public Health Studies will provide liability insurance for all classified MPH students who pay the \$15.00 enrollment fee.
- 2. Office of Public Health Studies will provide the faculty member who serves as MPH student's program advisor and chair. The Faculty Program Advisor/Chair will be responsible for monitoring the student's academic progress and maintaining the liaison between the Office of Public Health Studies and the Practicum Site Agency. The Practicum Coordinator is assigned to assist all Faculty Program Advisor/Chair with monitoring, grading, communicating and deal with any inquires or problems.
- 3. The Practicum Coordinator is responsible for assigning the final grade for the student enrolled in the course called PH 791: Advanced Public Health Practice, once the practicum is completed based on the input from the student's faculty advisor and the practicum preceptor.
- 4. The Practicum Coordinator Faculty will be available for meetings and communication in order to monitor and receive updates on the practicum student's progress.
- 5. It is the responsibility of the Practicum Coordinator and/or Faculty Advisor to help resolve any problems or answer any questions that arise between the Office of Public Health Studies and the practicum site.

# Appendix 2.

University of Hawai'i \* Office of Public Health Studies \*

# Form 16: Practicum Preceptor's Evaluation Form

Evaluation of MPH Student Performance during the Practicum Experience

Student Name: Click or tap here to enter text. Specialization: Click or tap here to enter text.

# STUDENT'S LEARNING OBJECTIVES, DELIVERABLE OUTCOMES AND LINKING ATTAINED COMPETENCY

**Students:** Input (copy) your each set of your learning objectives, linking deliverables/outcomes and attained competency— as a group. One set per line in Column A as recorded on your Form 15. Insert additional rows if needed.

Preceptors: Indicate the expectation level with a check ✓ achieved by the student during his/her practicum (Columns B-E).

A	В	С	D	E
Learning Objective, Deliverable, and Attained Competency Group (Cut and paste each set here from Form 15)	Exceeds Expectation	Meets Expectation	Needs Improvement	N/A or Did Not Observe
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				
Click or tap here to enter text.				

# I. EVALUATION INDICATORS FOR PERFORMANCE AND PROFESSIONALISM

**Preceptors:** Evaluate the student's practicum performance and professional conduct below. Please provide examples in the narrative portion on page 3 to support these rankings, especially if the student exceeded or did not meet expectations. Thank you.

Pra	cticum Performance Indicators	Exceeds Expectation	Meets Expectation	Needs Improvement	N/A or Did Not Observe
1.	<b>Practicum Knowledge.</b> The student had the aptitude and knowledge to understand the duties for the assigned project.				
	<b>Responsibility to Practicum.</b> The student carried out the assigned practicum duties and completed the practicum assignments within an acceptable time limit.				
	Quality of Work. The student's final work was at an acceptable professional level.				
	Cultural Competency. The student applied awareness of cultural values and practices to the design or implementation of their public health project, policies, and/or programs (MPH8).				
Professional Performance Indicators		Exceeds Expectation	Meets Expectation	Needs Improvement	N/A or Did Not Observe
1.	Confidentiality. The student kept all documentation of study subjects confidential and, if necessary, discussed confidential information only with the appropriate supervisor.				
2.	<b>Communication Skills.</b> The student had ability to communicate audience-appropriate public health content, both in writing and/or through oral presentation (MPH19).				
3.	<b>Compliance with Regulations.</b> The student adhered to your agency's policies, procedures, rules, and regulations.				
4.	<b>Professionalism.</b> The student displayed professional behavior at all times at the work site.				
5.	<b>Appearance.</b> The student dressed appropriately for their activities.				

# **II. SUMMARY**

Overall Ratings	Exceeds Expectation	Meets Expectation	Needs Improvement
Please rate the student's overall practicum performance.			
Please rate the overall practicum experience for your agency.			
Please rate this student's competency in applying public health knowledge and skills.			

# **NARRATIVE**

Please take a few moments to write about the student's performance during the public health practicum placement and if you found the student's work to be useful for your organization. What recommendations (if any) do you suggest for the student's future professional growth?

Did you find the MPH practicum student's work to be of service to your organization?					
☐ Yes	□No	If yes, what service did it provid	le?		
Are you willin	g to be a field p	receptor and practicum site for oth	ner MPH students in the	e future?	
□Yes		$\square$ Depends on Situation and N			
Field Precepto					
Signature			Date		
Name(P	lease print)	Title			
Placement Site_					
Address					
E-Mail Address			Phone No		
Second Field I	Preceptor (if ap	plicable):			
Name (please print)		Signature		Date	
Third Field Pre	eceptor (if appli	icable):			
Name(please print)		Signature		Date	

# Appendix 3.

University of Hawai'i Mānoa \* Office of Public Health Studies

# **Practicum Memorandum of Agreement**

This Agreement made by an	d between the University of Hawai'i Manoa's Office of Public Health
Studies (OPHS) and the Prac	ticum Site Agency (Agency) as listed below on this day of the
, ,	
month of	, 20
<ul> <li>University of Hawai'l at</li> </ul>	Manoa, Office of Public Health Studies, 1960 East West Road, Biomed
•	· · · · · · · · · · · · · · · · · · ·
D202 Honolulu, Hawaii	96822-2319 Phone 808-956-5771
a Dracticum Sita Agancu	
<ul> <li>Practicum Site Agency:</li> </ul>	
	(Name, Address, Phone)

# **PURPOSE OF AGREEMENT**

• The purpose of this agreement is to establish a practice placement site called Practicum Site Agency in order to offer Master of Public Health (MPH) students at the University of Hawai'i the opportunity to engage in service-learning experiences. These practice experiences are meant to facilitate the application of the MPH students' knowledge, attitudes, perceptions, skills, and academic learning. In return, the Practicum Site Agency may utilize the services of students to assist the Agency with projects and tasks that require workforce assistance.

# **AGREEMENT**

# Responsibilities of the Office of Public Health Studies at the University of Hawai'i:

- 6. Office of Public Health Studies will provide access to liability insurance for all classified MPH students who pay the \$15.00 premium.
- 7. Office of Public Health Studies will provide the faculty member who serves as MPH student's MPH program advisor and chair. The student's Faculty Program Advisor/Chair will be responsible for monitoring the student's academic progress and maintaining the liaison between the Office of Public Health Studies and the Practicum Site Agency.
- 8. The faculty program chair of the practicum student is responsible for assigning the final grade for the student enrolled in the course called PH 791: Advanced Public Health Practice, once the practicum is completed based on the evaluation input from the practicum preceptor and the student.
- 9. The student's MPH program chair (and/or the Practicum Coordinator Faculty) will be available for meetings and communication in order to monitor and receive updates on the practicum student's progress.
- 10. It is the responsibility of the student's program chair to resolve any problems or answer any questions that arise between the Office of Public Health Studies and the practicum site agency.

  \*\*Continued on next page\*\*

# **Responsibilities of the Practicum Site Agency:**

- 7. Practicum Preceptor at the practicum site agency will provide orientation for the practicum student about its agency, its employees, how the Agency operates, and its relationships in the community.
- 8. The Agency will provide ample learning opportunities for the practicum student especially those occasions that help the student meet the learning objectives that are designated on the Form 15, the Advanced Public Health Practice Form.
- 9. The Agency will provide Practicum Preceptors who will assist in establishing the learning objectives of the student and ensure that in-the-field training is given to the practicum student.
- 10. Practicum Preceptors will be available to meet regularly (weekly and/or every other week) with the practicum student throughout the 240 hours of practicum experience and will take time to observe the student's work and progress.
- 11. Practicum Preceptors will complete "OPHS Form 16: Practicum Preceptor Evaluation" Form and review the evaluation results with the student before returning the form.
- 12. Practicum Preceptor will return the Form 16 to the student's program chair and/or the Office of Public Health Studies through the Practicum Coordinator in a timely manner (within 30 days of the practicum's completion).

# The Office of Public Health Studies and the Practicum Site Agency Agree:

- 1. This agreement remains in full force, effective as of the date signed, indefinitely until amended or terminated in writing.
- 2. Neither party shall in connection with any aspect of this agreement, discriminate against any person by reason of race, color, gender, religion, sexual preference/orientation, disability, national, and/or ethnic origin as stated in the titles and acts of the State of Hawaii (Amended Title VI of the Civil Rights Act of 1964, Age Discrimination Act of 1975, Amended Titles VII and VIII of the Public Health Service Act, Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973 and those laws relating to non-discrimination).
- 3. This agreement does not involve any financial obligation on the part of either institution to the other.
- 4. This agreement may be amended and/or terminated in writing at any time by mutual consent.
- 5. While this agreement primarily concerns about the practicum logistics, it is offered that OPHS and the Agency work and collaborate together as partners in advancing public health practice, education, research, and service through means such as service learning with trainings, presentations, research collaborations, and the sharing of knowledge, skills and technical assistance.

# APPROVED BY FOLLOWING SIGNATURES:

Kathryn L. Braun, Director, UHM-Office of Public Health Studies	Date
1960 East West Road D209 Honolulu, Hawaiʻi 96822-2319	
Practicum Preceptor and/or Administrator of Practicum Site Agency	Date

Appendix 4.
University of Hawai'i • Office of Public Health Studies

# **Time Sheet for Tracking MPH Practicum Service Hours**

Student's Name	Time Range of Practicum

Day of the Week →	Sundays	Mondays	Tuesdays	Wednesdays	Thursdays	Fridays	Saturdays
	Number of Hours <b>Ψ</b>						
Week 1							
Week 2							
Week3							
Week 4							
Week 5							
Week 6							
Week 7							
Week 8							
Week 9							
Week 10							
Week11							
Week 12							
Week13							
Week 14							
Week 15							
Week 16							
Week 17							
Week 18							
Week 19							
Week 20							
Week21							
Week 22							
Week23							
Week 24							

# Appendix 5. (Use Online Form –Fillable) University of Hawai'i \* Office of Public Health Studies

# **Organizations' Requesting MPH Students Form** For Practicum Placement/Community Service

To be completed by the intended practicum preceptor.

Name:	Title:
Degree(s) held:	(Note: Preceptors must have a master's degree or higher and 2+ years
Placement Site:	
Address:	
E-Mail Address:	Phone No.:
Description of the project the student would	be working on during the practicum:
Duties to be assigned to the student:	
Service(s) the student's practicum will provide	de for the placement site:
List possible learning objectives to focus the	
1.	
2.	
3.	
4.	
5.	
Desired start date:	
·	est:
Contact person for student(s) interested in the	his practicum placement:
Additional comments or information:	

Return to: Lisa Kehl at kehl@hawaii.edu / fax: 956-5818 / UH-OPHS 1960 East West Rd., Room D202, Honolulu, HI 96822

## Appendix 6.

# MPH Student Practicum Course (PH 791) Commitment Form

By signing below, I,	, do hereby certify that I am aware of the
following student's responsibilities in regards to the p	practicum process. It will be my sole responsibility
to meet the deadlines as determined by myself, my p	racticum preceptor, my advisor and the Practicum
Coordinator as PH 791 Instructor, Ms. Lisa Kehl.	

As a student, I am responsible for:

- 1. Paying the \$15.00 liability insurance premium at the Office of Graduate Student Academic Services (OGSAS) in Biomed D204
- 2. Meeting with the practicum coordinator to arrange for a practicum site and preceptor
- 3. Completing Form 15 appropriately:
  - a. Select second committee member to sign off on Form 15 and practicum
  - b. Submitting draft typed Form 15 to the practicum coordinator first then to faculty permanent advisor, second committee member and preceptor for approval
  - c. After approved revision on Form 15, collecting all the appropriate signatures
  - d. Submitting the final form, with signatures, to the practicum coordinator and posting a copy in your drop box on the Practicum Laulima site
- 4. Completing the full 240 hours at my practicum site
- 5. Tracking time sheet on monthly basis to practicum coordinator and advisor
- 6. Writing a monthly reflective blogs in practicum laulima until my practicum is completed and that a final practicum report and deliverables have been submitted it to the practicum coordinator, student advisor, second committee member, and preceptor.
- 7. Collecting typed Form 16 from my preceptor and submitting it to the practicum coordinator
- 8. Developing portfolio made up of my Form 15, 16, 17, 18, practicum deliverables, practicum report and IPE tracking
- 9. Tracking competencies on Form 18
- 10. Enrolling in PH 791: Advanced Public Health Practice
- 11. Completing post-practicum feedback survey online (like eCafe).

I am also aware of the availability of assistance available through the University of Hawai'i Laulima site. I have checked the website and I do have access to the Practicum Public Health Laulima Site. And I give permission to share my documents with other students and within the UH system such as Scholar Space to enhance their learning as students before me have shared.

Signed by:	Date:		
Witnessed by:	Date:		

# **Appendix 7.** (Use Online Form –Fillable)

# Form 17: MPH Practicum Student Profile and Career Advising

St	udent's Signature	Date	Practicum Coordinator's Signature Date
Co	ompleted By:		
22	. Have you submitted	current resume or CV for p	practicum site visit and OPHSAS folder? Yes or No
21	What type of job do	you hope for after graduat	ion?
20	). Are you looking for G	GTA or GRA?	
19	. How do you pay for t	cuition and your education	al cost?
18.	Do you have a job? W	/hat and where	
			n one?
			lo, What? _CarBusBikeWalk
			? Yes or No How many hours/week?
			r practicum? Start End
			er (as dream person) you would like to work with:
			3
11.	•	•	to be the focus of your practicum (just list some):
10.	Who would you consi	der as your second commi	ttee member:
9.	Who is your Faculty A	dvisor:	Permanent or Temporary?
8.	What is your specializ  ☐ Epidemiology or ☐ Social & Behaviora ☐ Health Policy and	al Health Sciences or Management or	<ul><li>□ Native Hawaiian and Indigenous health</li><li>□ Other</li><li>□ DrPH or PhD</li></ul>
7.			
6.	Phones:		Other
5.			
4.	Ethnic Background (O	ptional):	
3.			
2.	Local Address		
Ι.	Name		Nickname

## Appendix 8.

## Form 18: MPH Competency Attainment Tracking Form

(Effective Fall 2018)

Student Name:	Sem/Yr Entered:	Sem/Yr Grad:		
Spec: □EPI □HPM □NHIH □SBHS	Committee Chair:	Committee Member: _		
Practicum Site:	Practicur	n Focus:		
Preceptor Name/Degree/Job Title:				

The Form 18 is a tool to track progress in mastering the MPH competencies. Competencies are statements describing the knowledge and skills students should possess upon graduation. Knowledge and skills are assessed by means of student performance in the required course work. Application is assessed through the capstone experience, comprised of the 1) practicum, 2) final paper, and 3) final oral examination. The competencies attained during your field practicum should be documented in your practicum report and linked back to this form.

### **Instructions for Completing Form 18:**

- 1. Meet with your advisor every semester to review and discuss this form.
- 2. In the last column, enter (a) the course number(s) or learning experience/practicum through which the competency was attained/reinforced, and (b) the course's assessment activity which demonstrated your ability to perform the competency (e.g., component of a paper, presentation, test, literature review, in-class activity, or group project)
- 3. You and your advisor must sign this form upon completion and submit it to OPHSAS prior to graduation.

	MPH FOUNDATIONAL COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
MPH1.	Apply epidemiological methods to the breadth of settings and situations in public health practice.  Related Courses: PH 655, 663, 791	
MPH2.	Select quantitative and qualitative data collection methods appropriate for a given public health context.  Related Courses: PH 623, 655, 663, 791	
МРНЗ.	Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. Related Courses: PH 623, 655, 663, 791	
MPH4.	Interpret results of data analysis for public health research, policy or practice. Related Courses: PH 623, 655, 663, 791	
MPH5.	Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings. Related Courses: PH 602, 791	

	MPH FOUNDATIONAL COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
МРН6.	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels. Related Courses: PH 602, 623, 791	
МРН7.	Assess population needs, assets, and capacities that affect communities' needs. Related Courses: PH 623, 791	
МРН8.	Apply awareness of cultural values and practices to the design or implementation of public health policies or programs. Related Courses: PH 602, 648, 791	
МРН9.	Design a population-based policy, program, project or intervention. Related Courses: PH 648, 791	
MPH10.	Explain basic principles and tools of budget and resource management. Related Courses: PH 648, 791	
MPH11.	Select methods to evaluate public health programs. Related Courses: PH 648, 791	
MPH12.	Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.  Related Courses: PH 602, 791	
MPH13.	Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes. Related Courses: PH 623, 791	
MPH14.	Advocate for political, social or economic policies and programs that will improve health in diverse populations. Related Courses: PH 602, 791	
MPH15.	Evaluate policies for their impact on public health and health equity. Related Courses: PH 602, 791	
MPH16.	Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making.  Related Courses: PH 648, 791	
MPH17.	Apply negotiation and mediation skills to address organizational or community challenges. Related Courses: PH 623, 791	

	MPH FOUNDATIONAL COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
MPH18.	Select communication strategies for different audiences and sectors. Related Courses: PH 623, 789, 791	
MPH19.	Communicate audience-appropriate public health content, both in writing and through oral presentation.  Related Courses: PH 602, 623, 789, 791	
MPH20.	Describe the importance of cultural competence in communicating public health content.  Related Courses: PH 602, 623, 791	
MPH21.	Perform effectively on interprofessional teams. Related Courses: PH 600, 791, HIPE Workgroup	
MPH22.	Apply systems thinking tools to a public health issue. Related Courses: PH 602, 648, 791	

	EPIDEMIOLOGY SPECIALIZATION COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
EPI1.	Identify public health practices for disease control including surveillance, screening and outbreak investigation, including the use of biomarkers and molecular biology.  Related Courses: PH 664, 666, 669, 681, 748, 791	
EPI2.	Demonstrate proficiency in computer-based data collection, management and analysis using major statistical software and fundamental strategies for bio statistical analysis. Related Courses: PH 656, 658, 664, 747, 791	
EPI3.	Discuss how public health biology—the biological, ecological, and molecular context of public health—impacts public health practice. Related Courses: PH 666, 669, 681, 748, 789, 791	
EPI4.	Apply epidemiologic-specific theoretical constructs, research design, research methodology, and analytic strategies. Related Courses: PH 656, 664, 666, 669, 681, 747, 748, 791	
EPI5.	Develop a scientific hypothesis, beginning with a review of existing literature, and design an epidemiologic study to assess the hypothesis validly and efficiently.  Related Courses: PH 664, 666, 669, 791	

HEALTH	POLICY & MANAGEMENT SPECIALIZATION COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
НРМ1.	Apply and critique the principles of program planning, development, budgeting, management, and evaluation in organizational and community initiatives using appropriate data sources. Related Courses: PH 626, 658, 672, 677, 791	
НРМ2.	Determine and apply appropriate quantitative and qualitative methods, technology and analyses to improve health services, programs, policies, organizations, and/or systems. Related Courses: PH 626, 658, 672, 677, 791	
НРМЗ.	Apply quality and performance improvement concepts, theories, and methods for strategic planning to improve health using appropriate data sources.  Related Courses: PH 626, 641, 658, 672, 677, 791	
HPM4.	Cultivate and leverage leadership skills to define a vision, take initiative, provide direction, manage change, and participate in the planning, development and monitoring required to establish and achieve organizational and policy goals. Related Courses: PH 641, 672, 677, 791	
НРМ5.	Describe and address major public health challenges across economic, political, administrative, legal, ethical, and social domains for organizations, initiatives, and policies.  Related Courses: PH 626, 641, 672, 677, 791	
	NATIVE HAWAIIAN & INDIGENOUS HEALTH SPECIALIZATION COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.
NHIH1.	Describe indigenous peoples' health in a historical context including an analysis the impact of colonial processes on health outcomes. Related Courses: PH 635, 673, 674, 675, 688, 791	
NHIH2.	Critically evaluate public health policy and programs using traditional values and ancestral knowledge, balanced with scientific methodology, as they relate to improving the health of Indigenous Peoples.  Related Courses: PH 635, 673, 674, 675, 688, 728, 791	
NHIH3.	Apply the principles of economic evaluation to Indigenous programs with a particular focus on the allocation of resources relative to need. Related Courses: PH 635, 673, 674, 675, 688, 728, 791	
NHIH4.	Describe a reflexive public health practice for Indigenous peoples' health contexts. Related Courses: PH 635, 673, 674, 675, 688, 791	

Student's Signature

NHIH5.	Design a disease prevention strategy that values and incorporates indigenous peoples' traditional knowledge. Related Courses: PH 635, 673, 674, 675, 688, 728, 791				
	SOCIAL & BEHAVIORAL HEALTH SCIENCES SPECIALIZATION COMPETENCIES	COURSE NO. AND ASSESSMENT ACTIVITY.			
SBHS1.	Critique methods and instruments for collecting valid and reliable quantitative and qualitative data related to social behavioral health. Related Courses: PH 701, 702, 765, 791				
SBHS2.	Design and test mechanisms to monitor and evaluate health promotion programs for its effectiveness and quality.  Related Courses: PH 701, 702, 765, 791				
SBHS3.	Apply behavior change theory and health promotion strategies to develop grant proposals and identify budgetary priorities. Related Courses: PH 646, 701, 702, 765, 791				
SBHS4.	Incorporate ethical principles and standards in the collection, maintenance, use, and dissemination of data interactions with organizations, communities and individuals.  Related Courses: PH 646, 701, 702, 765, 791				
SBHS5.	Develop and test communication strategies including technology to promote health behavior change through health interventions and programs.  Related Courses: PH 701, 702, 765, 791				
Accep	Accepted By:				

Faculty Advisor's Signature

Date

Date

# Appendix 9.

# **Signed Memorandum of Agreements (MOA) List for Practicum Placement Sites**

(Updated December 21, 2017)

Table 1: Signed Memorandum of Agreements for Practicum Placement Sites					
	Practicum Placement Site	MOA Signed by	Date		
1	Quentin Burdick Rural Interdisciplinary Health Program	Janice Shoultz, DrPH, (Program Director)	5/15/07		
2	Honolulu Heart Program	Beatrice Rodrigues (Principal Investigator)	8/29/07		
3	Pacific Health Research Institute	Chien-Wen Tseng, MD, (Physician Investigator)	9/14/07		
4	Waianae Coast Comprehensive Health Center	Richard Bettini (CEO)	10/1/07		
5	Kalihi Palama Health Center	Doris Segal Matsunaga, MPH, (Director of Health Ed)	10/1/07		
6	Kokua Kalihi Valley Comprehensive Family Services	David Derauf, MD, (Executive Director)	10/1/07		
7	Tripler Medical Center	Holly Olson, MD, (Director Medical Education)	11/1/07		
8	Castle Medical Center	Dale Northrop (VP of Finance)	12/1/07		
9	Hawai'i Department of Health	Susan Jackson (Deputy Director)	4/1/08		
10	Ifakara Health Research and Development Center (Tanzania)	Hassan Mshinda, MD, (IHRDC Director)	4/21/08		
11	National Kidney Foundation of Hawai'i	Glen Hayasida, PhD (CEO)	5/1/08		
12	Catholic Charities—Mary Jane House	Faye Ramos (Resident Coordinator)	5/5/08 & 5/13/10		
13	Health Care for All Hawai'i	Jory Watland (Director)	5/9/08		
14	Waikiki Health Center	Sheila Beckman (Executive Director)	3/23/09		
15	Center for Island Climate Adaptation and Policy	Maxine Burkett (Director)	5/18/09		
16	Honolulu Quarantine Station-CDC	Jennifer Brooks, MPH (Regional Director)	7/1/09		
17	Coalition for Tobacco Free Hawai'i	Deborah Zysman, MPH, (Executive Director)	9/1/09		
18	Kapi'olani Children and Women Medical Center	Romelyn Stein, MPH (Operations Manager)	9/8/09		
19	Papa Ola Lokahi—Imi Hale	JoAnn Tsark, MPH (Research Director)	9/10/09		
20	Aloha Medical Mission	Ann Miller (Executive Director)	10/1/09		
21	Department of Defense-Hawai'i Counterdrug Support	Lt. Col. Tamah-Lani Noh (Counter Drug Coordinator)	10/1/09		
22	UH Mānoa- CTAHR/HNFAS	Rachel Novotny, PhD, RD (Investigator)	10/26/09		
23	Pacific Health Research Institute	Kamal Masaki, MD (Investigator)	12/1/09		
24	UH- Board of Publications	Jay Hartwell, MS (Student Media Advisor)	1/7/10		
25	Hawai'i Medical Service Association (HMSA)	Richard Chung, MD (Senior Vice President)	2/15/10		
26	Planned Parenthood of Hawai'i	Sonia Blackiston (Director of Education and Training)	5/1/10		
27	Hawai'i Center on AIDS	Dominic Chow, MD, (Medical Director, Clint Spencer Clinic)	5/5/10		
28	U.S. Department of Health and Human Services, Office of Women's Health	Kay Strawder, JD (Women's Health Coordinator)	5/7/10		
29	Veterans Affairs- Sierra Pacific Veterans Integrated Services Network (VISN) 21	Enrico Camara, MD (Associate Chief of Staff) et.al.	5/12/10		
30	Hawai'i Alliance for Community-Based Economic Development (HACBED)	Bob Agres, Jr. (Executive Director)	5/13/10		
31	Cancer Control Research Center of Hawaii	Kevin Cassel, MS, Cancer Control Education Coordinator	6/1/10		
32	Shriners Hospitals for Children- Honolulu Hospital	Douglas Maxwell (President)	6/14/10		
			-,,		

33	Infections Limited Hawaii	Alan Tice, MD, FACP, Director	8/1/10
34	The National Children's Study	Elizabeth McFarlane, MPH, PhD, Investigator	8/23/10
35	Hawaii State Capitol Senator	Rosalyn Baker, State Senator	2/1/11
36	Atherton YMCA	Donna Prather, MS, MA, Executive Director	2/15/11
37	UH-Center on Disability	Holly Manaseri, PhD, Assistant Specialist	2/15/11
38	Hamakua Health Center	Susan Hunt, MHA, Executive Director	3/1/11
39	Papa Ola Lokahi's Native Hawaiian Epidemiology	Maile Taualii, PhD, Director	5/1/11
40	Life Foundation	Paul Groesbeck, JD, Executive Director	5/1/11
41	American Health Society, American Stroke Association	Lori Suan, MPH, Executive Director	5/15/11
42	International Rescue Committee & Suburban Washington Resettlement Center	Vanda Lerdboon, MPH, Program Manager	6/1/11
43	Pacific Island Health Officer Association	Michael Epp, Executive Director	6/1/11
44	PACT in Myanmar	Erica Tubbs, MPH, Deputy County Director	7/1/11
45	Area Health Education Center (AHEC) with JABSOM	Kelley Withy, MD, PhD, AHEC Director	8/1/11
46	Hawaii State Capitol—Office of Governor	Beth Giesting, MS, Health Care Transformation Coordinator	11/1/11
47	Hawai'i State Department of Health-Maui District Health Office	Lorrin Pang, MD, MPH, District Head	1/1/12
48	UH-Center on Disability HI-PRAISE Program	Rebecca Ozaki, PhD, PI and Researcher	2/1/12
49	Hawai'i Youth Network Services	Judith Clark, MPH, Executive Director	2/1/12
50	Kalikolehua El Sistema (Music Education for Social Change)	Louise King Lanzilotti, CEO and Artistic Director	5/15/12
51	Ocean View Family Health Clinic	Vickie Crosby, APRN, FNP-C	6/1/12
52	TeleHealth Research Institute at JABSOM	Joseph Humphry, MD	6/1/12
53	UH-Department of Human Nutrition, Food & Animal Science	Corilee Watters, M.SC, RD, PhD, C.N.S.C, Researcher & Professor	6/1/12
54.	American Congress of Obstetrics and gynecology (ACOG) Hawai'i Section	Ray Busse, MD, ACOG Section Chair	9/1/12
55.	Mental Health American of Hawai'i (MHAH)	Antonia Alvarez, LSW, Youth Suicide and Bullying Prevention Coordinator	1/1/2013
56.	Stretch Your Imagination	Brynne Caleda, M.Ed, RYT, Project Director	1/1/2013
57.	Centers for Disease Control and Prevention-Honolulu Quarantine Stations	Tai-Ho Chen, MD, CDC Quarantine Medical Officer	3/1/2013
58.	University of Hawai'i Children's Center (UHMCC)	Leilani Au, M.Ed. Project Director	4/1/2013
59.	Executive Office on Aging – DOH	Wesley Lum, PhD, Executive Director	4/1/2013
60.	Seattle Indian Health Board	Ralph Forquera, MPH, Executive Director	4/1/2013
61.	Farm to Keiki	Tiana Kamen, BA, Director	5/1/2013
62.	Hawai'i Youth Diversion System (HYDS)	Karen Umemoto, PhD-Project Director	5/1/2013
63.	Guam – Micronesian AHEC	Karen Cruz , RN, MPH , Program Manager	5/1/2013
64.	Hawai'i Tumor Registry – UH Cancer Center	Michael Green , CTR, Program Coordinator	5/1/2013
65.	Hawai'i's Caring Communities Initiative for Youth Suicide Prevention – UH Dept. of Psychiatry	Deborah Goebert, DrPH, HCCI Principal Investigator	5/1/2013
66.	Nan Chang University – School of Public Health	Zhaokang Yuan, PhD, Dean and Professor	5/1/2013
67.	Pacific Cancer Programs – Dept. of Family Medicine and Community Health	Mavis Nitta, MPH, CHES, Program Manager	5/1/2013
68.	Consuelo Foundation	Jon Matsuoka, PhD, President	5/1/2013
69.	CHOW Project	Heather Lusk, BA, MSW, Executive Director	5/1/2013
70.	CorePower Yoga	Michelle Rathke, MS	5/1/2013
70.	Corer ower roga	Whenche Nathke, Wis	3/1/2013

71.	Fort Shafter – 18 <sup>th</sup> Medical Command	LTC Rebekah Sarsfield, APRN	5/1/2013
71.	Hui No Ke Ola Pono	Joey Gonsalves, Executive Director	8/20/2013
72.	Hawai'i Endoscopy Center	Scott Kuwada, MD	9/1/2013
73.	Kapi'olani Medical Center for Women and Children	Reni Soon, MD	11/1/2013
74.	UH Cancer Center	Gertraud Maskarinec, MD, PhD	1/1/2014
75.	Juntendo University Dept. of Public Health	Takeshi Tanigawa, MD, PhD, Professor	3/13/2014
76.	Kapi'olani Community College Kupuna Education Program & Kupuna Mentoring Systems  Cullen Hayashida, PhD, Professor		4/1/2014
77.	UH Hilo Center for Rural Health Science  Karen L. Pellegrin, PhD, MBA, Director and Founding Director		4/1/2014
78.	НСАР	Joseph Llamas, MPH, Health Education Specialist	4/1/2014
79.	University Health Services Health Promotion	Lisa Kehl, MSW, MPH, LSW, Prevention Specialist/ Counselor	5/1/2014
80.	Wuhan University School of Public Health Dept. of Epidemiology	Qiqiang He, PhD, Associate Professor	5/1/2014
81.	Republic of Palau Ministry of Health , Bureau of Public Health	Inger Appanaitis, MPH, Accreditation Coordinator	5/1/2014
82.	International Health Providers Medical Group, LLC	Florence Lizama, MD	5/1/2014
83.	Medical – Legal Partnership for Children in Hawai'i	Dina Shek, JD, Legal Director	5/1/2014
84.	UH JABSOM – Pediatrics	Loren Yamamoto, MD, MPH, MBA, FAAP, FACEP	5/1/2014
85.	Taipei Hospital, Ministry of Health and Welfare	Peter WS Chang, MD, MPH, ScD, FRCP, Professor	5/1/2014
86.	lmi Ho'ola	Winona Lee, Director	5/1/2014
87.	Waianae Coast Comprehensive Health Center	Lisa Duke, PhD, Clinical Psychologist	5/1/2014
88.	Ho'omaka Hou Learning Center	Annabelle Stone, MPH, Director	5/1/2014
89.	Institute for BioTechnology Futures	Kim Abramson, MS, President	6/24/2014
90.	Hawai'i State Department of Health	Linda Rosen, MD, MPH, Director of Health	6/26/2014
91.	Kyorin University – Graduate School of International Cooperation Studies	Masatoshi Okawa, Director	6/26/2014
92.	Hawai'i State Department of Health STD/AIDS Prevention Branch Adult Viral Hepatitis Prevention	Peter Whiticar, PhD, Branch Chief	6/30/2014
93.	Waianae Coast Comprehensive Health Center	May Okihiro, MD, MS, Pediatrician	6/30/14
94.	DOH - Communicable Disease Control Directorate	Paul Effler, MD, PhD	7/1/2014
95.	Halau Nalu	Rebekah Matagi – Walker, Director	7/1/2014
96.	University of Hawai'i William S. Richardson School of Law	Andres Freeman, JD	7/2/2014
97.	Ka Papahana Kuaola	Kihei Nahale'a, Director	7/7/2014
98.	University of Hawai'i Department of Psychiatry, Research Division	Earl Hishinuma, PhD, Professor and Associate Chair of Research	12/17/14
99.	Kula Hospital and Clinic	Darren Kasai, MHA, Assistant Administrator and Nicole M. Apolina, MD – Medical Director	1/22/2015
100.	University of Hawai'i Cancer Center - Hawai'i Tumor Registry	Brenda Hernandez, MPH, PhD, Director	3/19/2015
101.	Children's Healthy Living Program for Remote Underserved Minority Populations in the Pacific Regions	Rachel Novotny, PhD, Director of Program	3/19/15
102.	Kapi'olani Medical Center of Women and Children Department of Obstetrics, Gynecological and	Jennifer Salcedo, MD, MPH, MPP, FACOG, Assistant Professor	3/25/2015

	Women's Health Division of Family Planning with UH – JABSOM		
103.	University of Hawai'i – Fall Prevention Project	Phoebe Hwang, MS, DrPH Candidate	4/8/2015
104.	Naval Health Clinic Hawai'i	CDR Marlene L. Sanchez	4/24/2015
105.	Hawai'i State Department of Health	Virginia "Ginny" Pressler, MD, MBA, FACS Director of Health	4/27/2015
106.	Kimanya Ngeyo Foundation	Nicholas Smith, MA, PhD, BMBCh, BA (Oxon), MRCGP	4/27/2015
107.	Hawai'i State Department of Health	Betty Wood, MPH, PhD, DOH Planner, Epidemiologist	4/27/2015
187.	Hawai'i State Department of Health	Don Hayes, MD, MPH, CDC, Assigned Epidemiology	4/28/2015
109.	Center on Family College of Tropical Agriculture and Human Resources	Marianne Berry, PhD, Director	4/30/2015
110.	Hawai'i State Department of Health	Noella Kong, MA, State Adolescent Health Coordinator	5/1/2015
111.	Hawai'i State Department of Health	Karen Krahn, MS, Operation Oversight Administrator	5/4/2015
112.	Hawaiian Mission Academy School	Dennis Kingma, MS, Principal	5/11/15
113.	Albuquerque Area Indian Health Board, Inc. Southwest Tribal Native American Research Centers of Health (NARCH)	Kevin English, PhD	7/1/2015
114.	U.S. Pacific Command (PACOM)	Lt. Col Elizabeth Erickson, MD, Chief of Strategic Health Engagement Operations	7/1/2015
115.	Portland State University School of Community Health	Kelly Gonzales, PhD, Assistant Professor	7/1/2015
116.	Papaku no Kameha'ikana	Auli'i Hirohara	7/1/2015
117.	Waianae Coast Comprehensive Health Services	Kyle Kaliho, Psy.D	8/1/2015
118.	Ke Kula 'O Samuel M. Kamakau Laboratory Public Charter School	Ivy Meahilahila Kelling, PhD	8/1/2015
119.	Hawai'i Pacific Health	Carl W. Hinson, Director, Workforce Development	4/1/2016
120.	University of Hawai'i – Department of Student Housing Services	Matt Markham, M.Ed, Coordinator for Leadership and Programming	4/1/2016
121.	Hawai'i State Department of Health – Primary Prevention Branch Program	Heidi Hansen – Smith, BA, Program Manager	5/1/2016
122.	God's Country Waimanalo	Hina Ho – Lastimosa, MSW, Director of Operations	5/1/2016
123.	Hawai'i District Health Office/ Hilo	Jason De La Cruz, MPH, Health Educator and Planner	5/1/2016
124.	University of Hawai'i – JABSOM ; Office of Biostatistics and Quantitative Health Sciences	Jim Davis, PhD, Core Senior Epidemiologist/ Biostatician	5/1/2016
125.	Office of Hawaiian Affairs (OHA)	Kealoha Fox, MA, PhD (c), Executive Manager	5/1/2016
126.	Clinical Samaritano in Nicaragua - AMOS Health & Hope;	Laura Parajon, MD, MPH, Medical Director	5/1/2016
127.	Mailikukahi Aina Momona Academy	Lee Ann Punua, Ed.M., Executive Director	5/1/2016
128.	University of Hawai'i – Cancer Center	Loic Le Marchand, MD, PhD, Clinical Professor	5/1/2016
129.	Malama Loko Ea Foundation	Rowena Estores, MS, Speech/ Language Pathologist	5/1/2016
130.	Mental Health America of Hawai'i	Trisha Kajimura, MPH, Executive Director	5/1/2016

131.	Center of America Indian and Minority Health University of Minnesota – Duluth  Mary Owen, MD		
132.	UH West Oahu - Sustainable Community Food Systems	Albie Miles, PhD	5/1/2016
133.	Ke Ola Mamo	Joelene Lono, MSW	5/1/2016
134.	Mau'oulaulani	Michael Pang, MS, Executive Director	8/1/2016
135.	Kapiolani Medical Center of Women and Children, Education Department	Carrie Shiraki – Sakaino, PhD, Educational Liaison	9/1/2016
136.	Bios Integrated Corporation	Ryan Lee, MD and Miki Wong, MACO, RD, YFT	2/1/2017
137.	Kokua Kalihi Valley – Pacific Survivor Center	Nicole Littenberg, MD, MPH, Co – founder, Board Chair	4/1/2017
138.	Hawaii Research Institute John Hopkins Bloomberg School of Public Health	Nicole Rosendaal, BScPT, MSc, Senior Research Program Coordinator	4/1/2017
139.	City of Hope – Dept. of Diabetes, Endocrinology, & Metabolism	Raynald Samoa, MD, Lead Researcher and Physician	4/1/2017
140.	UH Manoa – CTAHR	Rachel Novotny, PhD, RDN, LD, Interim Dean and Director of Research	5/1/2017
141.	University College Dublin School of Nursing, Midwifery & Health Systems	Amanda Phelan, DNS, MSc, PhD, Associate Dean of Global Engagement	5/1/2017
142.	Kaiser Permanente	Sally Lee, RN, MSN, VP, Clinical Operations	5/1/2017
143.	American Heart Association – American Stroke Association Hawaii Division	Lori Suan, MPH, Executive Director	5/1/2017
144.	UH Manoa – Center on Aging	Margaret A. Perkinson, PhD, Director	5/1/2017
145.	Child and Family Service	Patti Bates, MSW, Executive Vice President & Chief Performance Officer	7/1/2017
146.	American Heart Association/ American Stroke Association Hawai'i Division – Wester States Affiliate	Lani Go – Keala, BBA, Executive Director	5/1/2018
147.	Hawai'i Children Action Network	Deborah Zysman, MPH, Executive Director	5/1/12018
148.	Hawai'i Health & Harm Reduction Center	Heather Lusk, MSW, Executive Director	5/1/2018
149.	Hawai'i Primary Care Association	Robert Hirokawa, DrPH, Chief Executive Officer	5/1/2018
150.	UH Mānoa - Coastal Policy and Community Development – Department of Urban and Regional Planning	Danielle Spirandelli, PhD	5/1/2018
151.	Sustain Hawai'i	Malia Smith, MA, EdD	5/1/2018
152.	Women at Risk International	Rachel Olexa, MA	5/1/2018

# Appendix 10.

# MPH Practicum Student List: 2006-2018 (Updated December 30, 2018)

				Preceptor Job	Ī	
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
		2006-2	2007 School Year		•	
1.		Kokua Kalihi Valley – MCH		MCH Coordinator		
	Darlene Cowan	Program	Kay Hansen, MPH		EPI	Katz A
2.		DOH – Outbreak Control		Chief		
	Tania Ellis	Division	Paul Effler, PhD	Epidemiologist	EPI	Imrie A
3.		DOH HIV/AIDS Prevention		Screening MD		
	Jinlan Li	Program	Alan Katz, MD		EPI	Katz A
4.		Kapiolani Medical Center for		Researcher		
	Deepannita Roy	Women & Children	Marian Melish		EPI	Grove J
5.	Dennis Taaffe	Pacific Research Institute	Lon White, PhD	Researcher	EPI	Imrie A
6.		Cancer Research Center of	Gertrude	Professor		
	Kyle Watanabe	Hawaii	Maskarinec, PhD		EPI	Katz A
7.		Quentin Burdick Rural Health		Project Director		
	Lehua Choy	Project	Jan Shoultz, DrPH		SBHS	Maddock J
8.				Pediatrics MD		
		Infant Development,		Placement		
	Dorothy James	Environmental & Lifestyle	Chris Derauf, MD	Director	SBHS	Baruffi G
9.	Angela			Grant Manager		
	Miyamoto	Executive Office on Aging	Elvira Lee, MS		SBHS	Braun K
10.	Patricia Wright	Cancer on Disability	Jean Johnson, MS	Project Manager	SBHS	Nigg C
11.		DOH – Outbreak Control		Medical		
	Melody Ando	Division	Paul Effler, PhD	Coordinator	EPI	Grandinetti A
12.		Healthy Mothers, Healthy	Nancy Partika,	Executive Director		
	Nandar Aung	Babies	PhD		SBHS	Baruffi G
13.		Quentin Burdick Rural Health		Program Director		
	Taryn Lee	Project	Jan Shoultz, DrPH		SBHS	Maddock J
14.		Kokua Kalihi Valley – MCH	Kathy Hansen,	MCH Coordinator		
4=	Dana McCrudy	Program	MPH		SBHS	Maddock J
15.	Jaan Dan	Cancer Research Center of	Lisa Sanchez	Researcher	CDLIC	Nigg C
	Joan Pan	Hawaii	Johnson, MS 2008 School Year		SBHS	Nigg C
		2007 =	2006 SCHOOL Feat			
16.			Elizabeth Tam,	Principle		
	Reid Hoshide	JABSOM Vog Research Project	MD	Investigator	EPI	Houck P
17.		-		Professor of		
		Pacific Health Research	Beatriz Rodrigues,	Geriatric		
	Kristen Wong	Institute	MD, PhD	Medicine	EPI	Grove J
18.	Janna Varras	U.S. Navy Environmental and	Joseph Sliman,	Lieutenant	EDI	Humaite 5
10	Janna Young	Prevention Medicine Unite 6	MD, PhD	Commander	EPI	Hurwitz E
19.		Kokua Kalihi Vallov Cultural	Kathy Brennan, MSN and Emmy	Nurse Practitioner and Coordinator		
	Yuka Jokura	Kokua Kalihi Valley – Cultural Bridges Program	Davison	and Coordinator	SBHS	Maddock J
20.	Jermy – Leigh	Kalihi Palama Health Center	Davison  Doris Segal	Dir. Of Health	EPI	Grandinetti A
20.	Domingo	Kanini Falania Health Centel	Matsunaga, MPH	Education and	LFI	Granumetti A
	5011111160		acsanaga, wii 11	Community		
				Relations		
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				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
21.	Peter Ikre	Kohala Research Clinic	Dominic Chow,	Clinical	EPI	Grandinetti A
			MD	Consultant		
22.	Stephanie Mont	DOH – Epidemiology Branch	Arlene Buchholz,	Hawaii State	EPI	Imrie A
			DVM	Veterinarian		
23.	Angelina Ahedo	Quentin Burdick Rural Health	Jan Shoultz, DrPH	Program Director	SBHS	Maddock J
2.4		Project		D D' 1	CDLIC	
24.	Jane Chung – Do	Quentin Burdick Rural Health Project	Jan Shoultz, DrPH	Program Director	SBHS	Maddock J
25.	Ngozi Erondu	Pacific Health Research	Chien – Wen	Physician	SBHS	Yontz V
		Institute	Tseng, MD	Investigator		
26.	Lauren Gentry	Quentin Burdick Rural Health Project	Jan Shoultz, DrPH	Program Director	SBHS	Braun K
27.	Sarabibi	UCLA – Department of Public	Roger Deters, PhD	Professor of	SBHS	Braun K
	Thuzarwin	Health		Medicine and		
	Mayet			Epidemiology		
	Indyce	2008 –	2009 School Year			
20	1411		T	l 5: .		14.
28.	Kristopher Coontz	Health Care for All Hawaii	Jory Watland, MS	Director	EPI	Katz A
29.	Laura Hsu	JABSOM Vog Research Project	Elizabeth Tam,	Principle	EPI	Grove J
			MD	Investigator		
30.	Jamie Kopera	Quentin Burdick Rural Health Project	Jan Shoultz, DrPH	Program Director	SBHS	Maddock J
31.	Sharon Bartlone	Wellness and Lifestyle Medical	Beth Davidson,	Director	SBHS	Braun K
		Center– Castle Medical Center	MPH	26666.	020	
32.	Curtis Jamison	Regional Comprehensive	Neal Palafox, MD,	Director and PI	SBHS	Nigg C
		Cancer Control Program – UH JABSOM	MPH	260.0. 44	02.10	88
33.	Daniela Kittinger	Sustainable Saunders Initiative	Shanah Trevenna,	Project	SBHS	Maddock J
	Daniela Kittinger	Sustainable Sauraers initiative	PhD	Coordinator	35/13	Widdaock
34.	Erika Kwock	Governor Linda Lingle's Policy	Nani Medeiros,	Deputy Policy	SBHS	Nigg C
	LIIKA KWOCK	Office	MS	Advisor	30113	INISS C
35.	Joseph Llamas	Quentin Burdick Rural Health	Jan Shoultz, DrPH	Program Director	SBHS	Grandinetti A
	Joseph Llamas	Project	Jan Shoultz, Dirin	Trogram Director	35113	Grandinetti A
36.	Amalie Monlux	National Kidney Foundation	Glen Hayashida,	Executive Director	SBHS	Nigg C
	Timane memax	"""	MS & Ann	and Operations	020	88 0
			Kawakara	Manager		
37.	Sonya Niess	Mary Jane – Program	Pamela Indo,	Manager and	SBHS	Yontz V
	Jonya Mess	l liary same i rogram	MSW & Rebecca	Educator	35113	101112
			Cuba	244545		
38.	Ziwen Wang	Youth Outreach – Waikiki	Jeff Kaplan, MPH	Program Director	SBHS	Braun K
		Health Center				
		2009 –	2010 School Year			
39	Kristen Mitchell	DOH – PRAMS	Don Hayes, MD,	CDC assigned	EPI	Hurwitz E
			MPH	Epidemiologist		
40.	Iris Tokuyama	DOH – State Laboratory	Kris Whelen, PhD	Division Chief	EPI	Katz A
- '		Division	1		1	

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
41.	Pedro Haro –	Counterdrug Support Program	Lt. Col Tamah	Coordinator	SBHS	Yontz V
	Arvizu	with Hawaii State Department	'Lani Noh			
42.	Disibi Danaiana	of Defense Ifakara Health Research and	A la al color a a re	Dinastan	CDLIC	Heinrich K
42.	Riziki Ponsiano	Development Center	Abdulnoor Mulokozi, MD	Director	SBHS	Heinrich K
43.	NFN Rahmawati	DOH – WIC Services	Melanie	Section Chief and	SBHS	Braun K
<b>43</b> .	NEN Railliawati	DOTT - WIC SERVICES	Murakami , MPH, RD& Lyn Salamanca, MS, RD	Coordinator	35113	Diauli K
44.	Nyo Aye	WCCHC	Mary Oneha, APRN, PhD	Chief Operations Officer	EPI	Hurwitz E
45.	Christina Marzo	Quentin Burdick Rural Health	John Casken, PhD,	Program Manager	EPI	Grandinetti A
		Project	RN			
46.	Chelsi Urabe	DOH – Come Health	Ann Pobutsky,	Chronic Disease	EPI	Hurwitz E
			PhD	Epidemiologist		
47.	Kristin Wertin	HICORE= Hawaii Initiative for Childhood Obesity Research & Education	May Okihiro, MD and Romelynn Stein, MPH	HICORE Director and HICORE Operations Manager	EPI	Grandinetti A
48.	Julienne Yamamoto	Youth Outreach – Waikiki Health Center	Jeff Kaplan, MPH	Program Director	EPI	Hurwitz E
49.	Xiao – Song Zeng	DOH – PRAMS & Family Health Services Division	Don Hayes, MPH, MD	CDC assigned Epidemiologist	EPI	Katz A
50.	Masako Matsunaga	UH – CTAHR	Rachel Novotny, PhD	Professor, Principle Investigator	EPI	Katz A
51.	Amy Doff	UH – Center for Island Climate Adaptation and Policy	Maxine Burkett, PhD	Director	НРМ	Juarez D
52.	Charles Douglas	Fudan University School of Public Health	Yingyao Chen, PhD	Researcher	НРМ	Maddock J
53.	Rebecca Knight	Fudan University School of Public Health	Xiaohua Ying, PhD	Assoc. Professor of Health Economics	НРМ	Maddock J
54.	Michael Robinson	Quentin Burdick Rural Health Project	John Casken, PhD, RN	Program Manager	SBHS	Yontz V
55.	Elaine Austin	Quentin Burdick Rural Health Project	Jan Shoultz, DrPH	Program Director	SBHS	Maddock J
56.	Elise Davis	lmi Hale – Papa Ola Lokahi	JoAnne Tsark, PhD	Director	SBHS	Sy A
57.	May Rose Dela Cruz	Hawaii Air National Guard	Lt. Col. Tamah Lani Noh	Counterdrug Coordinator	SBHS	Maddock J
58.	Sheryl	DOH- Diabetes Prevention and	Valerie Ah Cook,	Program	SBHS	Yontz V
	Yoshimura	Control Program	MPH	Coordinator		
		·	2011 School Year			
59.	Vanessa Cunanan	Honolulu Heart Program – Honolulu Asia Aging Study	Kamal Masaki, MD	Investigator	EPI	Grandinetti A
60.	Nicole Taniguchi	Imi Hale – Papa Ola Lokahi	JoAnn Tsark, PhD	Co – Project Director	HPM	Maddock J

	S. 1	D DI		Preceptor Job	_	
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
1.	Eleanor Huey	Waianae Coast Comprehensive Center (WCCHC)	Rachelle Enos, MPH, LMT	Research Coordinator	SBHS	Yontz V
52.	Somporn	Aloha Medical Mission	John (Keoni)	Clinic Director	SBHS	Yontz V
	Naklang		Deveraux, MD	Cillic Director		
3.	Jill Tamashiro	UH – Service Learning	Atina Pascua, MS	Executive Director	SBHS	Yontz V
4.	Chuyen Vu	Youth Outreach – Waikiki Health Center	Jeff Kaplan, MPH	Program Director	SBHS	Sy A
5.	Didik Yudianto	Waikiki Health Center – Adult Homeless	Darlene Hein, MPH	Director of Community Services	SBHS	Keller S
66.	Brandyn Dunn	Infections Limited Hawaii	Alan Tice, MD, FACP	Infectious Disease Specialist	EPI	Katz A
57.	Erin Imada	CDC Honolulu Quarantine Station	Vicky Rayle & Jennifer Brooks, MS	OIC and Asst. Chief of Policy	EPI	Li D
58.	Neeva Lemmel – Duerr	Shriners Hospital for Children	Ellen Raney, MD and Shelley Gregory, RN	Chief of Staff and Education/ Research Coordinator	EPI	Katz A
59.	Laarni Sumibcay	DOH – Diamond Head STD	Yuanshan (Sandy) Qiu, PhD	HIV/AIDS Surveillance Coordinator	EPI	Lu Y
70.	Kristin Tomita	Veterans Affairs Pacific Islands Health Care Systems (VAPIHCS)	George Ross, MD	Associate Chief of Staff	EPI	Li D
71.	Lisa Lute	CO Excellence – Tripler	Kate Gayer, MD & Noelani Wilcox	Coordinator and PHN, Branch Chief	НРМ	Sentell T
'2.	Heather Luther	HRSA – MCHB Internship (GSIP)	Don Hayes, MD, MPH	CDC Assigned Epidemiologist	НРМ	Juarez D
'3.	Sharde Mersberg	PIHOA	Greg Dever, MD	Human Resources for Health Coordinator	НРМ	Sentell T
74.	Sheryl Okamura	Waianae Coast Comprehensive Health Center (WCCHC)	Mary Oneha, DNS	Chief Operations Officer	HPM	Sentell T
75.	David Schaeffer	State Legislator & Queens Cancer Center Oncology Services	Rosalyn Baker & Debra Wong, MS	Director of QMC Cancer + Oncology Services	НРМ	Juarez D
76.	Sara Takeshi	HMSA – Quality, Service & Recognition Programs	Cathy Yamaguchi	Program Manager	НРМ	Juarez D
77.	Angela Atkins	Youth Outreach – Waikiki Health Center	Jeff Kaplan, MPH	Program Director	SBHS	Yontz V
'8.	LaShanda Eller	Planned Parenthood of Hawaii	Romy Nochi and Sonia Blackiston	Nurse Practitioner and Director of Education and Training	SBHS	Nigg C
79.	Lyndsay Haywood	National Children's Study JABSOM	Elizabeth McFarlane, PhD	Investigator	SBHS	Maddock J

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
80.	Han Huynh	Mary Jane Program – Catholic	Faye Ramos	Residential	SBHS	Yontz V
		Charities		Program		
				Coordinator		
81.	Lisa Kehl	Coalition Tobacco Free Hawaii	Deborah Zysman,	Executive Director	SBHS	Yontz V
			MPH			
82.	Diana Kim	UH – Board of Publications – Ka	Jay Hartwell, MS	Student Media	SBHS	Maddock J
		Leo O Hawaii		Advisor		
83.	Kyaw Tun	UH – Cancer Center	Kevin Cassel,	Cancer Control	SBHS	Keller S
			DrPH	Education		
				Coordinator		
		2011 –	2012 School Year			
84.	Kristen Mitchell	DOH – PRAMS	Don Hayes, MD,	CDC Assigned	EPI	Hurwitz E
			MPH	Epidemiologist		
85.	Melanie	Coalition for Tobacco Free	Deborah, Zysman,	Executive Director	EPI	Li D
	Skievaski	Hawaii	MPH			
86.	Aifili Tufa	Native Hawaiian Epidemiology	Maile Taualii, PhD	Director	EPI	Grandinetti A
		Center				
87.	Xiao – Song Zeng	DOH – PRAMS & Family Health	Don Hayes, MD,	CDC Assigned	EPI	Katz A
		Services Division	MPH	Epidemiologist		
88.	Thomas Yokota	DOH – Disease Outbreak &	Sarah Park, MD	Chief	EPI	Grandinetti A
		Control Division				
89.	Arlene Ige	Hawai'i State Legislative Office	Sen. Rosalyn	Senator	HPM	Yontz V
		#230	Baker			
90.	Roella Foronda	HICORE= Hawai'i Initiative for	May Okihiro, MD	Director and	SBHS	Maddock J
		Childhood Obesity Research &	and Romelynn	Operations		
		Education	Stein	Manager		
91.	Heather (Mathis)	DOH – Office of Planning	Betty Wood, PhD	Planner and	SBHS	Nigg C
	Glow		& Danette	Branch Chief		
			Tomiyasu, MPH			
92.	Trisha Kajimura	Life Foundation	Paul Groesbeck,	Executive Director	SBHS	Yontz V
			JD			
93.	Jeremy Porter	DOH – Adult Viral Hepatitis	Heather Lusk, BA	Hepatitis C	EPI	Katz A
		Prevention		Coordinator		
94.	Sara Tanabe	Shriners Hospital	Andi Kubota, MSN	Director of	EPI	Partika N
			and Shelly	Patient Care		
			Gregory	Services and		
				Education and		
				Research		
0.5				Coordinator		
95.	Nicole Valcour	Hawaii Center for AIDS	Dominic Chow,	Medical Director	EPI	Lu Y
06	Mohomora	VMCA of Honolulu Addition	MD Danna Brathar	Evenutive Discreti	11004	Toucli: N#
96.	Mohammad Masudul Alam	YMCA of Honolulu Atherton Branch	Donna Prather, MS	Executive Director	HPM	Taualii M
97.	1	Pali Momi Medical Center	Jen Chahanovich,	Chief Operating	HPM	Maddock
51.	Stephanie Lee	raii ivioiiii iviedicai Center	MBA	Chief Operating Officer	TIVI	Maddock J
98.	Chelsea	Hawai'i State Governor's Policy			HPM	Sontall T
50.	Okamoto	Hawai'i State Governor's Policy Office	Debbie Shimizu, MSW	Legislative Liaison	TIVI	Sentell T
99.	Rufina	DHHS Regional Women's	Kay Strawder,	Health	HPM	Partika N
JJ.	Teregulova	Health Coordinator	PhD	Coordinator	TIFIVI	raitina IV
	reregulova	ricaitii coolulliatoi	טוו ז ן	Coordinatol	1	

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
100.	Khin Aung	Kokua Kalihi Valley	Megan Inada, MPH	Program Coordinator	SBHS	Braun K
101.	Bryan Juan	PIHOA	Greg Dever, MD	Human Resources for Health Coordinator	SBHS	Keller S
102.	Eunhee Park	HICORE= Hawaii Initiative for Childhood Obesity Research & Education	May Okihiro, MD and Romelynn Stein	Director and Operations Manager	SBHS	Yontz V
103.	Janice Quach	Kokua Kalihi Valley	Jared Christenot, MPH	Quality Assurance Officer	SBHS	Keller S
104.	Annabelle Stone	American Health Association (1) Papa Ola Lokahi (2)	Lori Suan and JoAnn Tsark, MPH	Executive Director and Research Director	SBHS	Yontz V
105.	Alain Takane	Hamakua Health Center	Susan Hunt, MHA	CEO	SBHS	Nigg C
106.	Alanna White	International Rescue Committee	Vanda Lerdboon, MPH and Katja Ericson	Program Manager  – Health and Special Needs Care Coordinator	SBHS	Sy A
		2012-	2013 School Year			
107.	Johanna Anderson	DOH – Family Health Services Division	Don Hayes, MD, MPH	CDC Assigned Epidemiologist	EPI	Katz A
108.	Dana Black	Waikiki Health Center	Marc Gannon, MSW, MBA	Chief Administrative Officer	НРМ	Taualii M
109.	Shanna Ludzia – Whelan	Governor's Office – Health Transformation Office	Beth Giesting, MPH	Healthcare Transformation Coordinator	НРМ	Sentell T
110.	Ann Chang	American Congress of Obstetrics and Gynecology (ACOG)	Raydeen Burse, MD	Sectional Chair, ACOG	НРМ	Sentell T
111.	Margo Beemer	Ocean view Family Health Center	Vickie Crosby, APNP	Family Nurse Practitioner	SBHS	Yontz V
112.	Reni Aukai Yuki Soon	Imi Hale – Papa Ola Lokahi	JoAnn Tsark	Project Director	SBHS	Yontz V
113.	Christine Beyers	UH – Center on Disability Studies	Rebecca Ozaki, PhD and Ritabelle Fernandes	Principle Investigator and Co Principle Investigator	EPI	Li D
114.	Zi Fu	Wuhan University	Shi Yue Li, PhD	Professor	EPI	Lu Y
115.	Mary Guo	Wuhan University	Shi Yue Li, PhD	Associate Professor	EPI	Grandinetti A
116.	Miya Hayashi	Hawaii Center for AIDS	Dominic Chow, MD	Medical Director	EPI	Katz A
117.	Douglas Watters	DOH – Disease Outbreak Control Division	Sarah Park, MD, FAAP	Branch Chief	EPI	Hurwitz E
118.	Andrea Correa	Hawai'i Youth Services Network	Judith Clark, MPH	Executive Director	НРМ	Sentell T

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
119.	Doreen Mandari	PIHOA at Honolulu, Hawaii	Michael Epps, MS	Executive Director	HPM	Partika N
120.	Mililani Trask – Batti	Native Hawaiian Epidemiology Center	Nicole Taniguchi, MPH	Project Assistant	НРМ	Taualii M
121.	Katie Amato	Hawai'i Initiative for Childhood Obesity Research and Education (HICORE)	May Okihiro, MPH	Director	SBHS	Nigg C
122.	Ivan Chik	PIHOA at Republic of Palau – Palau Community College	Giuseppe Cuboni, MD	Training Director	SBHS	Maddock J
123.	Annie Hiller	Telehealth Research Institute	Joseph Humphry, MD	Primary Care Physician	SBHS	Yontz V
124.	Brandon Kobashigawa	UH – Center or Disabilities Studies	Holly Manaseri, PhD	Assistant Specialist	SBHS	Sy A
125.	Meghan McGurk	VA – Health Promotion and Disease Prevention	Yvonne Geesey, JD, MSN	Program Manager	SBHS	Maddock J
126.	Melissa Oshiro	DOH – Injury Prevention	Therese Argoud, MPH and Stan Michaels, MFA	Program Manager and Coordinator	SBHS	Yontz V
	<u> </u>	2013-2	014 School Year		•	1
127.	Rachel Corrado	UH – Dept. of Human Nutrition, Food and Animal Science	Corilee Watters, PhD	Assistant Professor, Nutrition, and Research	EPI	Hurwitz E
128.	Vance Kawakami	CDC – Honolulu Quarantine Station	Tai – Ho Chen, MD	CDC Quarantine Medical Officer	EPI	Katz A
129.	Thomas Salek	CHOW Project ( Needle Exchange)	Heather Lusk, MSW I	Executive Director	EPI	Katz A
130.	Joy Brann	DOH – Maui District Office	Lorrin Pang, MD	Maui District Health Officer	НРМ	Maddock J
131.	Marina Hitosugi- Levesque	Telemedicine – JABSOM – AHEC	Kelley Withy, MD	Professor, Dept. Complementary/ Alternative Medicine	НРМ	Sentell T
132.	Laura Flynn	CorePower Yoga	Michelle Rathke, MS	Researcher and Yoga Instructor	SBHS	Nigg C
133.	Minami Konishi	UH – Cancer Center	Kevin Cassel, DrPH	Education Coordinator	SBHS	Yontz V
134.	Jay Armenta	Stretch Your Imagination	Brynne Caleda, Med, RYT	Executive Director	EPI	Cooney R
135.	Maile Corpus	DOH – PRAMS & Family Health Service Division	Don Hayes, MD, MPH	CDC Assigned Epidemiologist	EPI	Cooney R
136.	Soleana Demapan	UH – Cancer Center Registry	Michael Green, CTR	Program Coordinator and Operations Manager	EPI	Cooney R
137.	Nicole Deville	PIHOA – Republic of Palau	Inger Appanaitis, MPH and Travis Singeo, PhD	Accreditation Coordinator and Consultant	EPI	Hurwitz E

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
138.	Matthew	DOH – Developmental	Ann Pobutsky,	Research	EPI	Lu Y
	Katekaru	Disabilities Division	PhD	Statistician/ Social		
				Epidemiologist		
139.	Thomas Lee	Nan Chang University – School	Zhaokang Yuan,	Professor and	EPI	Katz A
		of Public Health	PhD	Dean		
140.	Lisa Takeuchi	DOH- STD/AIDS Prevention	Peter Whiticar,	Branch Chief	EPI	Lu Y
444		Branch	MPH	5 5		- 1
141.	DeAnna Basques	Seattle Indian Health Board &	Ralph Forquera,	Executive Director	HPM	Taualii M
142.	ta a ali	Urban Health Institute	MPH	D. Jelie II e elele	11004	C D
142.	Jocelyn Constantino	Fort Shafter – 18 <sup>th</sup> Medical Command	Rebekah Sarsfield	Public Health Nurse	HPM	Canyon D
143.	Yuna Johnson	JABSOM – AHEC	Kelley Withy, MD	Executive Director	HPM	Canyon D
	fulla Jolilison		Kelley Withly, Mid		ПРІVІ	•
144.	Francine Naputi	U. of Guam	Karen Cruz, MPH	Program Director	HPM	Taualii M
145.	Dioreme	Pacific Cancer Programs at	Mavis Nitta, MPH	Program Manager	HPM	Sentell T
	Navasca	JABSOM				
146.	Tasha Tydingco	Veteran's Affairs – Rural Health	Kevin Hitosis, DNP	Primary Care	HPM	Sentell T
		Training Initiative		Nurse Practitioner		<u> </u>
147.	Ashley Morisako	UHM Children's Center	Leilani Au, Med	Education	NHIH	Delormier, T
140		(UHMCC)		Coordinator		T 1" N 4
148.	Chad Noble –	Consuelo Foundation	Jon Matsuoka,	President & CEO	NHIH	Taualii M
149.	Tabiolo Kimiko Wilson	UH – Department of Psychiatry	DSW Deborah Goebert,	Principle	NHIH	Delormier, T
145.	KIIIIKO WIISOII	On – Department of Psychiatry	DrPH	Investigator	INDID	Delorifier, I
150.	Kristina Bifulco	Mental Health America of	Antonia Alvarez,	Director	SBHS	Chung – Do J
130.	Kristilla bilaico	Hawaii	MPH	Director	30113	Chung Do s
151.	Sage King	Kokua Kalihi Valley	Puni Johnson,	Program	SBHS	Chung – Do J
	8	Comprehensive Family Services	MFA	Coordinator		
152.	Eric Lee	DOH – Executive Office on	Heather Chun,	Lifespan Respite	SBHS	Yontz V
		Aging	MSW	Care Project		
				Coordinator		
153.	Elizabeth Marsh	DOH – Public Health Nursing	Joan Takamori,	Branch Chief	SBHS	Yontz V
		Branch	MSN			
154.	Bridgitte	UH – Department of Urban and	Tai – Ann Miao,	Program Director	SBHS	Yontz V
	McInerny	Regional Planning	MS			
155.	Kimberly Takata	DOH – Executive Office on	Heather Chun,	Lifespan Respite	SBHS	Nigg C
		Aging	MSW	Care Project		
				Coordinator		
		2014 –	2015 School Year			
156.	Angeline Cook	Taipei Hospital Ministry of	Peter Chang, PhD	Professor,	EPI	Hurwitz E
		Health and Welfare		Medical Advisor		
157.	Heather Drood	Hui No Ke Ola Pono	Joey Gonsalves	Executive Director	HPM	Taualii, M.
158.	Christopher	Guam Modical Hospital	Eloropsia Lizama	Research	NHIH	Delormier, T.
150.	Carbullido	Guam Medical Hospital	Florencio Lizama, MD	physician	INDID	Delormer, 1.
159.	Tamara Smith	Hawaii Youth Services Network	Judith Clark, MPH	Executive Director	SBHS	Nigg, C.
	Talliala Sillial	Tidwall Touth Services NetWORK	Jacien Clark, Wil II	EXCEUTIVE DIFECTOR	35113	11166, C.

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
160.	Andrew	JABSOM – Dept. of Pediatrics	Loren Yamamoto,	Professor and		
	Kuriyama		MD, MPH, MBA,	Associate Chair of		
			FAAP, FACEP	Pediatrics	EPI	Grandinetti, A.
161.	Cecine Nguyen	Chow Project	Heather Lusk,	Executive Director		
			MSW		EPI	Grandinetti, A.
162.	Kayne McCarthy	Wuhan University School of		Associate		
		Public Health	Qiqiang He, PhD	Professor	EPI	Hurwitz, E.
163.	Kristyn Schuller	Nan Chang University – School	Dr. Zhaokang	Dean and		
		of Public Health – China	Yuan	Professor	EPI	Katz, A.
164.	Matthew Lim	DOH – Adult Viral Hepatitis	Peter Whiticar,	Branch Chief		
		Prevention	MA		EPI	Hurwitz, E.
165.	Eric Batangan	Veteran's Affairs Rural Health		Psychiatrist		
		Training Initiative	Joan Gill, MD		HPM	McFarlane, E.
166.	Jacy Miyaki	Waikiki Health Center –		Director of		
		Friendly Neighbors	Kent Anderson	Preventive Health	HPM	Canyon, D.
167.	James	Ministry of Health, Republic of	Inger Appanaitis,	Accreditation		
	Masterson	Palau	MPH	Coordinator	HPM	Sentell, T.
168.	Jubilee Felsing	Kula Hospital and Clinic	Nicole Apoliona,	Medical Director		
	Ellison	·	MD		HPM	Sentell, T.
169.	Michelle	West Australia Health	Paul Effler, MD,	Medical		
	Quensell	Department	MPH	Coordinator	HPM	Sentell, T.
170.	Ronald Filomeno	Juntendo University School of	Takeshi Tanigawa,	Professor		
		Medicine – Public Health	MD, PhD		HPM	Maddock, J.
171.	Chanley Malia	Ka Papahana Kuaola		Director		
	Purdy		Kihei Nahalea		NHIH	Taualii, M.
172.	Joseph Cadiz	Halau Nalu	Rebekah Matagi	Director		
			Walker		NHIH	Taualii, M.
173.	Nicole Fujioka –	Waianae Coast Comprehensive	May Okihiro, MD,	Pediatrician		
	Krzyska	Health Center	MS		NHIH	Delormier, T.
174.	Ruth Leau	American Samoa Community	Daniel Mageo	Dean and Director		
		College – ASCC	Aga, PhD	Associate Director		
		_	Aufa'i Areta, MA		NHIH	Delormier, T.
175.	Samantha	Imi Ho'ola		Director		
	Kodama		Winona Lee		NHIH	Delormier, T.
176.	Chelsea Marie	Honolulu Community Action	Joseph Llamas,	Health Education		
	Pulido	Program	MPH	Specialist	SBHS	Buchthal, V.
177.	Eric Lee	DOH – Executive Office of		Lifespan Respite		
		Aging	Heather Chun,	Care Project		
			MSW	Coordinator	SBHS	Yontz, V.
178.	Jennifer Fonseca	Hawaii Youth Services Network		Executive Director	60116	
470			Judith Clark		SBHS	Maddock, J.
179.	Jennifer Lyman	Waianae Coast Comprehensive		Behavioral Health	CDLIC	
400		Health Center	Lisa Duke, PhD	Provider	SBHS	Chung – Do, J.
180.	Jessica Fabrigas	DOH – Executive Office on		Lifespan Respite		
		Aging	Heather Chun,	Care Project		1
40:			MSW	Coordinator	SBHS	Yontz, V.
181.	Maya Uemoto	Kapiolani Medical Center for		Assistant		
		Women & Children		Professor and	601:5	],
			Reni Soon, MD	Physician	SBHS	Yontz, V.

		1
Title	Spec	Advisor
in, Director		
	SBHS	Nigg, C.
a, Professor	CDLIC	
	SBH2	Yontz, V.
n, Assistant		
	NHIH	Taualii, M.
	NHIH	Delormier, T.
e, Director	CDLIC	Buchthal, V.
Professor and	30113	Bucilliai, v.
	EPI	Grandinetti, A.
c Statistician	EPI	Cooney, R.
Program		
D, Specialist &	EPI	Wu, Y.
Epidemiologist		
	EPI	Katz, A.
, Professor		
Accesiate	ED!	Cura nadina akki: A
	EPI	Grandinetti, A.
o, Professor		
Branch Chief &	EPI	Katz, A.
Coordinator		,
Epidemiological	EPI	Wu, Y.
·		
-		
	FPI	Cooney, R.
		cooney, it.
Research		
Assistant	EPI	Grandinetti, A.
, Professor		
BRFSS	EPI	Hurwitz, E.
	11014	Comball T
	HPM	Sentell, T.
-		
	n, Professor  Assistant Professor  School Principal Director  Professor and Chair Research Statistician Program D, Specialist & Epidemiologist Assistant Professor  Branch Chief & Coordinator  Epidemiological Specialist V and Supervisor for Epidemiology and Surveillance Section Professor  Associate Chair of Research Assistant Professor	n, Director  a, Professor  Assistant Professor  SBHS  School Principal Professor and Chair  Research Statistician Program D, Specialist & EPI Professor  Assistant Professor  Branch Chief & EPI Coordinator  Epidemiological Specialist V and Supervisor for Epidemiology and Surveillance Section  Professor  BRFSS Coordinator/ Professor  BRFSS Coordinator/ Project Director  U, Chief of Strategic Health Engagement Operations and Chief of Force  SBHS  NHIH  NHIH  ENGESSOR  EPI  SBHS  EPI  EPI  EPI  EPI  EPI  HPM  HPM  HPM  HPM  HPM  HPM

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
198.	Marlon Chinichi Gibo	Naval Health Clinic Hawai'i	Marlene Sanchez, MD, MPH	Director of Public Health	НРМ	Canyon, D.
199.	Jon Orenstein	State of Hawaii – Dept. of Health, Behavioral Health Administration	Karen Krahn, MS and Michael Endres, PhD	Operations Oversight Administrator and Research Statistician	НРМ	McFarlane, E.
200.	Nabil Vargha	Kimanya Ngeyo Foundation	Nicholas Smith, MD	General Medical Practitioner and Global Link Coordinator	НРМ	Canyon, D.
201.	Danelle Cooper	School of Community Health, Portland State University	Kelly Gonzales, PhD	Assistant Professor	NHIH	Delormier, T.
202.	Blane Garcia	Wai'anae Coast Comprehensive Health Center	Kyle Kaliko Chang, Psy.D, MSW	Clinical Psychologist	NHIH	Delormier, T.
203.	Winnie Lindstrom	Ke Kula'o Samuel M. Kamakau Laboratory Public Charter School	Ivy Meahilahila Kelling, PhD	Kahu Director	NHIH	Taualii, M.
204.	Danner Peter	Southwest Tribal Native American Research Center – Albuquerque, New Mexico	Kevin English and Ayn Whyte	Principle Investigator and Program Manager	NHIH	Taualii, M.
205.	Joanna Stallsmith	Hawaii Department of Health	Donald Hayes, MD, MPH	CDC Assigned Epidemiologist	NHIH	Taualii, M.
206.	Kamuela Werner	Institute for BioTechnology Futures	Kim Abramson, MS	President	NHIH	Taualii, M.
207.	Katherine Watson Braden	Hawai'i/ Pacific Basin Area Health Education Center (AHEC)	Kelley Withy, MD	Director	SBHS	Chung – Do, J.
208.	Megan Lea Cagasan	Hawaii State Department of Health – The Maternal Child Health Branch	Noella Kong, MA	Coordinator	SBHS	Nigg, C.
209.	Danilyn Goya	The Executive Office on Aging	Jody Mishan, MFA	Coordinator of Alzheimer's State Plan	SBHS	Yontz, V.
210.	Kathleen Johnson	Youth Services Network	Judith F. Clark, MPH	Executive Director	SBHS	Braun, K.
211.	Sun Ja Kim	Kapiolani Medical Center for Women and Children	Jennifer Salcedo, MPH, MD & Mary Tschann, MPH	Assistant Professor & Junior Researcher	SBHS	Chung – Do, J.
212.	lan Joseph Lagua	Kapiolani Medical Center for Women and Children	Jennifer Salcedo, MPH, MD & Mary Tschann, MPH	Assistant Professor & Faculty Junior Researcher	SBHS	Yontz, V.
213.	Sand'e Nitta	Kokua Kalihi Valley, Maternal Child Health Department	Wayne Buch, MA	Healthy Tomorrows Program Coordinator	SBHS	Yontz, V.

	Church Name	Due stierre Discourant Cita	Duccoutou	Preceptor Job	S	Advisor
214.	Jasmine Pang	Hawaii State Fall Prevention Consortium	Preceptor  Phoebe Hwang, MS,	Title DrPH Candidate, Dept. of Public Health Studies	Spec SBHS	Advisor Nigg, C.
215.	Elisabeth Seamon	Queens Medical Center for PILOT ACP Outpatient Clinic	Lori Protzman	Advanced Care Planning Coordinator	SBHS	McFarlane, E.
		2016 –	2017 School Year			
216.	Yvette Sasha Amshoff	UH Cancer Center	Unhee Lim, PhD	Associate Professor	EPI	Grandinetti, A.
217.	Aileen Ferrer	DOH – Adult Viral Hepatitis Program	Thaddeus Pham, BS	Prevention Coordinator	EPI	Katz, A.
218.	Jessica Filippoli	Nanchang University, China	Dean Zhaokang Yuan, MPH, PhD	Dean	EPI	Lu, Y.
219.	Lauren Kida	UH Manoa – Dept. of Psychiatry	Earl Hishinuma, PhD	Professor	EPI	Katz, A.
220.	Kathleen Feb Pareja Plaza	University of Hawaii Cancer Center	Kevin Cassel, DrPH	Assistant Professor	EPI	Wu, Y.
221.	Maryssa Sadako Shigesato	UH Manoa – Dept. of Obstetrics and Gynecology	Mary Tschann, MPH, PhD	Junior Researcher	EPI	Hurwitz, E.
222.	Peggy Sin Lu Su	DOH – Disease Control Division	Arielle Colon, MPH	Influenza Surveillance Coordinator	EPI	Wu, Y.
223.	Katherine Yang	District Health Office Hilo	Jason De La Cruz, MPH	Health Educator and Planner	EPI	Cooney, R.
224.	Kristi Cook	DOH – Maui District Health Office	Lorrin Pang, MD, MPH	Maui District Health Officer	EPI	Katz, A.
225.	Robert Protzman	CHOW Project	Leilani Maxera, MPH	Manager	EPI	Katz, A.
226.	Yvette Lacobie	UH – Cancer Center	Unhee Lim, PhD	Associate Professor	EPI	Grandinetti, A.
227.	Adriano Sabagala	Kokua Kalihi Valley Comprehensive Family	Doris Matsunaga, MPH	Maternal and Child Health Director	EPI	Hurwitz, E.
228.	Anaeliz Colon	Kapiolani Medical Center for Women and Children	Mary Tschann, MPH, PhD	Project Manager and Researcher	НРМ	Fan, V.
229.	Georgia McCullough	AMOS Health & Hope	Laura Parajon, MD, MPH	Medical Director	НРМ	Fan, V.
230.	Ciera Pagud	Office and Hawaiian Affairs	Kealoha Fox, MA, PhD (c )	Executive Manager and Special Assistant to the CEO, Health Director	НРМ	Sentell, T.
231.	Shandhini Raidoo	QMC – OB/ GYN Division of Family Planning and Family Treatment Center	Jennifer Salcedo, MD, MPH, MPP	Assistant Professor	НРМ	Sentell, T.
232.	Zeyana Saad – Jude	Hawaii Pacific Health	Melinda Ashton, MD, FAAP	Senior Vice President, Chief Quality Officer	НРМ	McFarlane, E.

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
233.	Jazmine Beebe	Mailikukahi Aina Momona Academy	Lee Ann (Anuenue) Punua, Med	Executive Director	NHIH	Delormier, T.
234.	Asha Leigh Bradley	University of Minnesota – Duluth	Mary Owen, MD	Director	NHIH	Taualii, M.
235.	Jessica Casson	Ke Ola Mamo	Joelene Lono, MSW	Executive Director	NHIH	Taualii, M.
236.	Kristy Peshlakai	NAIS Shiprock Service Unity, PHN Department	Angelina Smith, RN, BSN, MSN	Nurse Lactation Specialist	NHIH	Delormier, T.
237.	Jetney Kahaulahilahi Vegas	Ka Honua Momona International	Noelani Yamashita, MA	Executive Director	NHIH	Delormier, T.
238.	Ryan Artero	Mu'olaulani	Michael Pang, MS	Executive Director	SBHS	Taualii, M.
239.	Amanda Martinez	Mental Health America of Hawaii	Trisha Kajimura, MPH	Executive Director	SBHS	Chung – Do, J.
240.	Russell Park	University of Hawaii West Oahu	Albie Miles, PhD	Assistant Professor	SBHS	Chung – Do, J.
241.	Sabhyta Sabharwal	God's Country Waimanalo	Ilima Ho – Lastimosa, MSW	Director of Operations	SBHS	Chung – Do, J.
242.	Andrew Stridiron	Kapiolani Medical Center for Women and Children – Education Dept.	Carrie Shiraki – Sakaino, BA, MA, PhD	Education Liaison	SBHS	Sugimoto- Matsuda, J.
243.	Russell Park	UH – West Oahu	Albie Miles, PhD	Assistant Professor	SBHS	Yontz, V.
244.	Ruth Pitt	JABSOM	James Davis, PhD	Core Senior Epidemiologist/ Biostatistician	SBHS	Yontz, V.
		2017-2	018 School Year			
245.	Kristen Valencia	UH – Department of Obstetrics and Gynecology	Mary Tschann, MPH, PhD (C)	Assistant Professor and Junior Researcher	EPI	Cooney, R.
246.	Loren Fujitani	DOH – Adult Viral Hepatitis Prevention Program	Thaddeus Pham, BS	Coordinator	EPI	Grandinetti, A.
247.	Samantha Nakamura	UH – Department of Ob – Gyn	Jennifer Salcedo, MD, MPH, MPP and Mary Tschann, MPH, PhD (c)	Assistant Professor and Junior Researcher	EPI	Hurwitz, E.
248.	Christine Crosby	DOH – Disease Outbreak Control Division	David Johnston, MPH	Epidemiologist	EPI	Katz, A.
249.	Laura Elliot	UHM – Department of Psychiatry	Early Hishinuma, PhD	Professor	EPI	Lu, Y.
250.	Fang Yuan	Fudan University, School of Public Health	Dr. Chaowei Fu, PhD	Professor	EPI	Lu, Y.
251.	Yuito Okada	Kokua Kalihi Valley	Doris Matsunaga, MPH	Director	EPI	Wu, Y.

				Preceptor Job		
	Student Name	Practicum Placement Site	Preceptor	Title	Spec	Advisor
252.	Michelle Vien	DOH – Medical Marijuana Registry Program	Tamara Whitney, MBA	Specialist	EPI	Wu, Y.
253.	Ghazaleh Moayedi	UH – Department of Ob – Gyn	Jennifer Salcedo, MD, MPH, MPP, FACOG	Assistant Professor	HPM	Fan, V.
254.	Sasha Madan	UHM – Extension on Maui CTAHR, Extension's Aging and Intergenerational Program	Heather Greenwood – Junkemeier, MS	Associate Extension Agent	HPM	Fan, V.
255.	Melissa Hamada	Injury Prevention Advisory Committee	Deborah Goebert, DrPH	Professor and Associate Director of Research	HPM	McFarlane, E.
256.	Jessi Cadorna	Kaiser Permanente Hawaii	Sally Lee, RN, MSN	Vice President Clinic Operations	НРМ	McFarlane, E.
257.	Brieana Williams	Center on Aging	Margaret Perkinson, PhD	Director	HPM	Pirkle, C.
258.	Alyssa Foster	Hawaii Youth Services Network	Judith Clark, MPH	Executive Director	HPM	Pirkle, C.
259.	Chevelle Davis	University College of Dublin	Amanda Phelan, BNS, MSc, PhD	Associate Dean	HPM	Sentell, T.
260.	Landen Muasau	City of Hope	Raynald Samoa, MD	Assistant Professor	NHIH	Taualii, M.
261.	Sarah Hipp	Johns Hopkins University Hawai'i Research Institute	Nicole Rosendaal, BScPT, MSc	Senior Research Program Coordinator	SBHS	Chung – Do, J.
262.	Michelle Tong	JABSOM	Jolene Muneno, Med, MS	Director	SBHS	Nigg, C.
263.	Joel Tome	American Heart Association	Lori Suan, MPH	Executive Director	SBHS	Nigg, C.
264.	Hailey Pedersen	DOH - Maternal Child Health Branch	Noella Kong, MA	Coordinator and Program Specialist	SBHS	Nigg, C.
265	Inji Kim	Pacific Survivor Center	Nicole Littenberg, MD, MPH	Co – Founder	SBHS	Schweitzer, R.
		2018 – 2	2019 School Year			
267.	Chad Au	UHM – Center on the Family – Data Center	Ann Pobutsky, PhD	Statistical Analyst	EPI	Hurwitz, E.
268.	Kelsi Howard	UHM – Dept. of Urban and Regional Planning	Danielle Spirandelli, PhD	Assistant Professor	EPI	Katz, A.
269.	Margaret Morris	Hawaii Children Action Network	Deborah Zysman, MPH	Executive Director	SBHS	Yontz, V.
270	Trina Jones Artis	Papa Ola Lokahi	Emily Makahi, MSW	Grants and Data Coordinator	NHIH	Taualii, M.

## Appendix 11.

# The MPH Capstone—Culminating Experience Guidelines

(From Student Handbook)

The capstone experience is made of three items: 1) the practicum, 2) the final paper, and 3) final orals. In the master of public health (MPH) degree program, the strategy to assure that students are able to integrate their classroom experiences with the realities of practice of public health in the field is met by the culminating experience. Prior to graduation, all MPH students participate in a practicum, and prepare a final paper and a final oral examination presentation as a trio capstone or culminating experience.

As with other milestones in the student's program of study, the final paper and oral presentation are guided by the faculty members including student's appraisal of the student's attainment of program and specialization competencies. Although the final paper and final oral examination presentation may be based (or not) on the student's practicum, all MPH students are required to integrate and synthesize a broader scope into a "final paper" than the practicum itself. The final paper and final oral examination presentation are the final opportunities for students to demonstrate the mastery of the program, and what core & specialization competencies have been mastered, and demonstrate their preparedness for the professional workforce. Each specialization has their own guiding outline for the requirement of the final paper and final orals as follows. See below for recommended outline for A. Epidemiology, B. Social Behavior Health Sciences, C. Health Policy and Management, D. Native Hawaiian and Indigenous Health, E. Final Oral Format, and F. Title Page Format.

## A. Recommended Outline: Final MPH Paper in Epidemiology

The paper starts with a title page. There is a specific format required for the MPH final paper title page (please see the Student Handbook for instructions). The title page is followed by an abstract. The text comes next, and is generally organized into four sections: introduction, methods, results, and discussion. The reference section follows the text of the paper. The following is a summary of how to organize material for content within the final paper:

#### **Title Page**

#### Abstract:

The abstract is limited to 200 words and should provide the context or background for the study and state the study's objective or purpose, basic methodological procedures (e.g., selection of study subjects, analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

#### Introduction

- Summarize the problem or topic under discussion
- Outline the purpose and objective of the paper
- Literature Review
- Define the problem and present information on incidence and prevalence nationally, locally, and in relation to special populations (if applicable)
- Discuss the causes or determinants of the problem (consider biological, behavioral, social, cultural, environmental, and policy determinants)
- o Incorporate your area of focus and learning objectives during your fieldwork experience

#### Methods

o Articulate your method/approach

- o Include where relevant: sample size considerations/calculations; selection of participants; statistical methods used **Results** 
  - Present your findings

#### **Discussion** (includes conclusions)

- Compare your findings to the literature
- O Discuss strengths and limitations of your approach/findings. Include where bias or confounding may have been introduced; how this was addressed; and the possible impact of identified bias/confounding on your findings
- o Suggest recommendations for public health
- Public Health Implications
- O DO NOT JUST REPEAT YOUR RESULTS IN THE DISCUSSION SECTION

#### References

- Cite proper references throughout the paper (do not use footnotes)
- List all references at the end of the paper using standard and consist format like MLA (preferred)

References should be numbered consecutively in the order in which they are first mentioned in the text and cited in the text using superscript numbers. In the reference section, please list your references in the style adapted by the National Library of Medicine for its databases: <a href="www.nlm.nih.gov/bsd/uniform">www.nlm.nih.gov/bsd/uniform</a> requirements.html. Tables and figures can either be placed within the results section or after the reference section [with a parenthetical notation in the text alerting the reader where the table would be placed within the text: i.e., (Table 1)].

A key purpose of the final paper and presentation is for you to demonstrate mastery of epidemiologic concepts and integration of learning with practice. It is useful to keep this in mind in the preparation of your final paper. Suggested paper length ranges from 15 to 40 pages depending on the public health area of focus. Throughout the paper, you are expected to demonstrate the following abilities:

- Access, use, interpret, and properly cite the public health and biomedical literature.
- Evaluate the quality and comparability of data.
- Correctly identify research designs used in public health, including advantages and limitations of specific designs.
- Identify where bias and confounding may be introduced into a study, how they can be prevented or controlled, and the impact they might have a study's findings. Identify gaps in research. Communicate clearly.

## B. Recommended Outline: Final MPH Paper in Social Behavior Health Sciences

The Social and Behavioral Health Science (SBHS) final paper is one of three requirements of capstone experience in the MPH degree. The final paper is critical piece of academic writing that needs to show the integration of the students' course work with the ability to critical review, evaluate, apply, and synthesize their learning around a selected public health area of focus.

For Social and Behavioral Health Sciences students, several different paper approaches are possible. These include the following:

- 1) **Literature Review**. Carry out an extensive literature review of the academic articles on a key public health focus especially including evidence-based interventions with discussion of what is working, what is needed and what should be the next steps. Use the outline below.
- 2) **Project Data**. Write a paper based on results from in-depth data collection and/or analyze during the practicum like from a need assessment, evaluation project, or some research project using main outline headings like abstract, introduction, methods, findings, discussion, results, recommendations, and references.
- 3) **Program Showcase.** Write a paper that showcases a unique public health project or program that you experience (like through your practicum) or where you work or volunteered using main outline headings like introduction,

program/project history and structure, program process and outcomes, discussion of program's value and purpose, recommendations, and references,

4) **Healthy People 2020 Solutions**. Write a paper to develop leading-edge public health solutions for a specific public health focus found in Healthy People 2020 using the outline below.

#### **Possible Outline Components:**

**Title Page** 

#### **Table of Contents**

#### 1. Abstract

The abstract is limited to 200 words and should provide the context or background for the paper and state the paper's purpose, main themes, and discussion points of the paper. It should emphasize linkages and integration made around your public health area of focus.

#### 2. Introduction

- Present public health area of focus including why and how this is worthy public health focus
- State purpose of the paper and the approach of paper.

#### 3. Presentation of the Public Health (PH) area of focus

- Present important details of public health focus like definition and critical aspects
- Summarize a relevant literature review articles
- Discuss the impact of the focus on public health levels of individuals, families, community, and society.

#### 4. Interventions Strategies that Address the PH Focus

- Give a brief summary of existing interventions—what works, what might work, what does not work, what isn't known and is still needed
- Provide overview of any theories and conceptual frameworks found to be useful in the literature concerning the public health focus.

#### 5. Discussion

- Discuss and compare what is consider the best evidence-based interventions, theories, and promising practices and why
- Discuss limitations, and challenges of your focus area

#### 6. Public Health Recommendations and Implications

- List and describe suggest recommendations for future public health solutions in dealing with the PH focus
- Describe the public health implications
- Summarize the key points of the paper

#### 7. References

- Cite proper references throughout the paper (do not use footnotes)
- List all references at the end of the paper using standard and consist format like APA (preferred)

#### Expectations throughout the paper, demonstrate your ability to:

- Work closely with your advisor to be sure to choose the best paper approach
- Paper's narrative length is best focused in a range of double-spaced 20-30 pages. Any longer length needs to be agreed by your advisor.
- Access, use, and properly cite the all public health and social behavioral literature and online resources (avoid any plagiarism)
- · Identify gaps in the literature and related research and make recommendations based on that.
- Evaluate and present the quality and comparability of data.
- Communicate clearly, logical, precisely, and effectively and be sure to include linkages to public health implications.
- Write professionally in complete and academic sentences and paragraphs with proper grammatical usage

### C. Recommended Outline: Final MPH Paper in Health Policy and Management

The Health Policy and Management (HPM) final paper is a requirement of the MPH capstone. Its purpose is to allow students to demonstrate mastery of health policy and/or management concepts as they integrate learning with practice. The ability to critically evaluate and synthesize a specific public health issue should be evident.

#### **Topic of Study**

The capstone paper will focus on a meaningful analysis of a particular topic area and should be determined in consultation with your advisor. The topic need not be linked directly to the practicum and you will not need to include in-depth discussion of the practicum in this final paper or the presentation. It may be a more efficient use of time to link the topic area for this capstone analysis with the practicum. In fact, the analysis for the final paper can be the deliverable from your practicum experience. It is okay to do a practicum on one topic and a capstone paper on a different topic.

#### **Type of Paper**

The type of paper you choose will depend on your area focus (policy or management) and your interest area and future career goals. While this project will be the outcome of your independent work, you should work closely with your advisor, and potentially your second committee member, starting from the conception of this paper to make sure you are meeting the goals of this paper and demonstrating your MPH competence. Many formats are possible such as a policy analysis, a policy proposal, a strategic plan, a case study, an organizational evaluation, a cost-effectiveness analysis or a survey.

#### **Format of Paper**

This paper must be written for a particular target journal. Provide the formatting instructions for the journal you are targeting for this paper as an appendix. Ensure that the paper complies with these instructions.

#### **Advice for Success**

Successful students will:

- Demonstrate their ability to access, use and properly cite public health literature
- Display critical analysis skills as they identify gaps or conflicts in the literature and related research
- Show they understand how public health data can be collected, collated, interpreted, disseminated and acted upon
- Reflect on policy and/or management challenges and opportunities as they explain how their new knowledge should be used within multidisciplinary and multi-tiered health systems
- Communicate clearly, logical, precisely, concisely and effectively
- Try to include information related to core HPM competencies

#### **Suggested HPM Final Paper Outline**

The following outline provides guidance on how to structure and present this paper. The type of study you select will impact on the structure of the paper, so modify this format in consultation with your advisor as required.

Bear in mind that following this outline will result in a paper that is potentially publishable. Publications are empowering and good for careers.

- 1. Title Page
  - o Upper half: Title of paper, date, word count, author and contact details, target journal
  - Lower half: Structured Abstract (not more than 200 words)
    - Introduce the study with brief background material and state the purpose
    - State the basic methods (e.g., selection of study subjects, analytical methods)
    - State the main findings (giving specific effect sizes and their statistical significance)
    - State the principal conclusions and their importance
- 2. Introduction (~2-3 pages)
  - o Introduce the specific policy and/or management topic and contextual background information
  - o Explain the significance of this issue by presenting information from the literature
  - Describe critical challenges and important policy and/or management gaps in the literature
  - o Clearly state the purpose of the paper (investigate a gap and provide new information)
- 3. Methods (~2 pages)
  - O What was the process of the analysis?

- O What was the setting in which the work was undertaken?
- o Sample size considerations, participant selection, statistical methods, ethics, etc.
- 4. Results (length depends on the amount of data and its presentation)
  - Present research findings and their analysis
  - o Present graphical and tabled presentation of data
- 5. Discussion (~3 pages)
  - Discuss the importance of the results without repeating the results in detail use new summary tables or figures if complicated comparisons are necessary
  - o Compare findings to the literature, but do not introduce new ideas
  - o Describe the public health implications and challenges
  - State limitations of the study
  - Make policy and management recommendations for research and practice
- 6. References (generally >10, but this depends on the type of paper check the journal)
  - Cite and reference using author instructions from the desired 'target journal' for this paper
- 7. Appendices
  - Include other background information, copies of your data collection instrument, etc.

# D. Recommended Outline: Final MPH Paper for Native Hawaiian and Indigenous Health (NHIH)

The final paper is one of three requirements of the capstone experience for the MPH degree. The final paper is a critical piece of writing that shows the integration of the student's course work with their practicum experience, and the ability to critically evaluate, apply, and synthesize their learning around a selected Indigenous public health area of focus.

For NHIH students, two approaches are possible:

**Data Analysis Manuscript:** Write a paper based on results from a data collection and/or analysis for example, a needs assessment, an evaluation project, or a research project. Text should be organized under main outline headings: abstract; introduction; methods; findings or results; discussion; public health implications; and references.

**Project/Program**: Write a paper on unique public health project or program that you experienced (e.g., practicum, place of work, volunteer) using main outline headings: introduction; program/project history and structure; program process and outcomes; discussion of program's value and purpose; recommendations for program/project improvement; implication for public health practice; and references.

#### **Possible Outline Components:**

#### Title Page (See Appendix A, page 57 for format instructions)

#### **Table of Contents**

#### **Abstract**

The abstract is limited to 200 words and should provide the context or background for the paper and state the paper's purpose, main themes and discussion points of the paper. It should link and integrate your learning and experience with your particular public health area of focus.

#### Introduction

Present the public health area of focus explaining why and how this is a worthy public health focus for the health of Indigenous Peoples.

#### Presentation of the Public Health (PH) area of focus

Present important details of the public health focus such as definitions and critical aspects. Present a relevant literature review.

Discuss how the public health focus impacts or is related to multiple levels; individuals; families or other collectivity; community; and society.

#### Interventions Strategies that Address the PH Focus

Give a brief summary of existing interventions – what works, what might work, what does not work, what isn't known and is still needed.

Provide an overview of any theories and conceptual frameworks found to be useful in the literature concerning the public health focus.

Methods – Provide a description of the methods used to collect data, analyze and interpret data.

Findings /Results - present the relevant finding or results from your analysis.

#### Discussion

Discuss and compare what is considered the best evidence-based interventions, theories, and promising practices and why. Discuss limitations, and challenges of your focus area. Compare your experience to what you found in the literature concerning your focus area.

#### **Public Health Recommendations and Implications**

List and describe suggested recommendations for future public health solutions in dealing with the PH focus. Describe the public health implications. Make comparisons across programs/interventions/policy implications for Indigenous Peoples, specific to practicum and special practicum.

Summarize the key points of the paper.

#### References

Cite proper references throughout the paper (do not use footnotes).

List all references at the end of the paper using standard and consistent format like APA (preferred). Expectations throughout the paper, demonstrate your ability to:

Work closely with your advisor to be sure to choose the best approach.

Access, use, and property cite the public health and social and behavioral literature (avoid any plagiarism) Evaluate and present the quality and comparability of data.

Identify gaps in the literature and related research and make recommendations based on that. Communicate clearly, logically, precisely, and effectively.

Write professionally in complete and academic sentences and paragraphs with proper grammatical usage.

## E. Format of Final Oral Presentation/ Examination—Epidemiology, SBHS, HPM & NHIH

- Work with your advisors to identify a 60-minute time slot for your final presentation.
- Check the room reservation calendar at htts://sites.google.com/site/ogsas204/ for room availability and email OPHSAS at ophsas@hawaii.edu to reserve a room.
- Provide date, time room number, and title of your final presentation to the instructor and to OPHSAS at least two
  weeks prior to your presentation date.. OPHSAS will prepare an announcement that will be posted and that you
  can use to invite colleagues and friends.
- Your 60-minute exam includes 20 minutes for your presentation; 30 minutes are for audience and faculty questions and photos if desired. Do not read your paper and slides to the audience. Be sure to prepare a power-point presentation that highlights the major points of your paper.

### F. TITLE PAGE FORMAT FOR FINAL PAPER

These are the guidelines you should follow when preparing your final paper or project report for submission to your committee chairperson. Final papers are retained and thus, it is important that the elements listed here are included on your title page (the actual wording and order may come from your faculty advisor).

#### • TITLE

- These are the key words that students and others will use for retrieving the paper by subject.
- Students are encouraged to give clear descriptive titles that signify the content of the paper.
- In the case of a field training report, it is helpful to include the field training site in the title.

#### • STUDENT'S FULL NAME

• Use the following format: First Name - Middle Initial/Name - Last Name (in that order).

#### SUBMISSION STATEMENT

- A statement such as the following is required by some programs: Submitted to the University of Hawai'i at Mānoa-Office of Public Health Studies In Partial Fulfillment of the Requirements for the Master of Public Health Degree in \_\_\_\_\_\_ (Specialization Area)
- The Office of Public Health Studies, University of Hawai'i at Mānoa, degree sought, and area of specialization must be included in this statement.
- Consult with your adviser for additional requirements, if any.

#### • COMMITTEE MEMBERS

- List your program committee members' names and degrees.
- Your program committee chair should be listed first.

#### • GRADUATION DATE

• The month and year of graduation.

#### **SAMPLE TITLE PAGE**

An Evaluation of HIV Prevention Programs in the State of Hawai'i:

by

John Q. Public

Submitted to the
University of Hawai'i at Mänoa
Myron B. Thompson School of Social Work
Office of Public Health Studies
In Partial Fulfillment of the Requirements for the
Master of Public Health Degree
in (indicate specialization)

Committee Members: Joan G. Brown, MD, MPH Richard Tom, MPH, MD

May 2014

## Appendix 12.

# Policy and Procedures for Interprofessional Education (IPE) Competency Attainment for MPH Students

Interprofessional education (IPE) competency (MPH competency 21): "Perform effectively on interprofessional teams," will be met by having all MPH students involved in 3 interprofessional exercises using a "portfolio" strategy:

- 1) All MPH students will complete an introductory "TeamSTEPPS" online module during PH600. TeamSTEPPS was developed by Department of Defense's Patient Safety Program in collaboration with the Agency for Healthcare Research and Quality. It is an evidence-based teamwork system designed for health care professionals and is scientifically rooted in more than 20 years of research and lessons from the application of teamwork principles.
- 2) Two additional interprofessional team exercises will be selected from several options including:
  - a) Participation in an interdisciplinary simulation exercise with students from the schools of nursing, medicine, social work, and pharmacy. One such exercise focuses on how to optimize the discharge to home from the hospital of an elderly patient with the support of family and community resources.
  - b) Participation in an ambulatory care exercise with other professional students from the schools of medicine, nursing, social work, and pharmacy, to optimize a treatment and care plan for a client at a federally qualified community health center which includes family and community resources.
  - c) Participation in an Extension for Community Health Outcomes (ECHO) Project collaborative learning exercise. ECHO exercises cover a wide array of topics including eating disorders, ADHD, diabetes care, and care of the geriatric patient. The topic under discussion is presented by a content expert. This is followed by a case presentation, review, and interprofessional group discussion.
  - d) Participation in a Homeless Outreach & Medical Education (HOME) Project learning experience. Public Health students will work with students from the schools of medicine, nursing, social work and pharmacy to develop guidance and recommendations using community resources for homeless individuals and families.
  - e) Participation with an interprofessional team as during the practicum placement activities. This will need to be REVIEWED <u>AND APPROVED</u> by the Hawaii Interprofessional Education (HIPE) Workgroup <u>IN ADVANCE</u> of student starting her/his activities. This activity is documented on the MPH student's Form 15 as learning objective and with the deliverable to be documented in practicum blogs and portfolio.

f) Other IPE experiences will need to be reviewed and approved by the Hawaii Interprofessional Education (HIPE) Workgroup before being counted towards this competency

#### **Tracking of completed activities:**

MPH Student Portfolio will be used to document completion of all 3 components of MPH competency 21.

- 1. TeamSTEPPS completion will be tracked by the instructor of PH600. In order to successfully complete PH600, the student must complete the TeamSTEPPS module and generate a certificate of completion. The instructor of PH600 will be responsible in insuring all students submit a certificate of completion. Certificate will be included in the MPH student portfolio.
- 2. Upon completion of the 2 IPE approved team exercises, the student will provide proof of successful completion of IPE exercises with evidence submitted as part of the practicum portfolio and documented on the MPH Student Form 18.
- 3. Proof of completion of the IPE competency is a prerequisite to allow registration into PH 789: Integrative Seminar.