

# **Guidelines for MPH Programs in Canada July 2006**

Prepared under the guidance of the MPH Guidelines Working Group, which reports to the Public Health Human Resources Task Group

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*Provide a forum for selected leaders nominated from the Canadian graduate public health education community to prepare draft guidelines to inform the overarching definition, content, and structure of Canadian professional Masters of Public Health (MPH) programs.*

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# Guidelines for MPH Programs in Canada – July 2006

*These guidelines have been developed to inform the planning and implementation of professional, practice-oriented graduate level public health training programs in Canada. Intended to improve the level of consistency and quality of such programs, these guidelines have been influenced by existing review and accreditation criteria from other countries. These guidelines however, are **not** intended to replace extensive, formal accreditation processes.*

## Introduction

The need to strengthen the capacity of Canada's public health system has been a recurrent theme of recent reviews and reports. As a result, a number of academic institutions are at various stages of planning/implementing professional Masters level training programs in public health (MPH programs). The expanded training capacity is welcomed, but is also accompanied by an interest to ensure a sufficient level of consistency among these programs so that the MPH designation is useful and meaningful to students, employers and training programs. The program criteria outlined in these guidelines are intended to identify critical program components and are heavily influenced by existing accreditation and review criteria for such programs from other countries. Simultaneously, the Canadian Institutes of Health Research-Institute of Population and Public Health and the Public Health Agency of Canada have launched an award program for non-thesis masters of public health students. Students enrolled in MPH programs that meet the criteria outlined in this Guidelines document will be eligible for these awards.

Public health is society's response to threats to the collective health of its citizens. Public health practitioners work to enhance and protect the health of populations by identifying their health problems and needs, and providing programs and services to address these needs. Core public health system functions include population health assessment, health surveillance, disease and injury prevention, health promotion, and health protection, including the capacity to prepare for and respond to public health emergencies. A draft set of public health workforce core competencies have recently been developed in Canada and provide an excellent overview of the range of knowledge, skills and abilities required of public health practitioners.

While we don't yet have a robust system to track where public health graduates ultimately practise or what the precise demands are for such graduates, graduates of MPH programs are usually employed within the governmental public health system at the local/regional, provincial/territorial, national or international level. They may also be employed by the non-governmental sector. A MPH degree is intended to provide a scientific and practical base for professional public health practice. The particular position in which a graduate may find employment is dependent on the skills and experience acquired prior to the MPH degree, the area of specialized focus of the MPH

program, and the needs of the employing organization. In many organizations, graduate level training is often a requirement for career advancement.

Students entering MPH training often come from a variety of educational backgrounds. As with many applied graduate degrees, some previous experience provides a useful base upon which to acquire new knowledge and skills. In some situations, MPH training can also be a valuable preparatory step for entry into the workforce. For some areas of focus such as epidemiology, a Master's degree is considered entry level training. Potential employers and MPH programs can provide guidance for individual situations.

## Purpose

The intended purpose of these guidelines is to support the development of MPH programs in this country with sufficient consistency and quality to meet the public health systems' needs, and to ensure that Canadian programs are in keeping with international standards for graduate public health training. These guidelines may also be an interim step before more formal accreditation mechanisms are established. Nevertheless, as guidelines, the criteria provided here are not intended to replace existing or emerging accreditation or review processes nor limit the flexibility and innovativeness of programs. How these guidelines may be used is stakeholder dependent. For academic institutions planning on delivering a MPH program, the guidelines provide a set of criteria by which they can compare their plans. For prospective students, in the absence of a formal accreditation mechanism, the guidelines provide a set of criteria by which they can assess potential programs. For employers, the guidelines may influence decision-making regarding the provision of financial support for training or in assessing MPH graduate job applicants. These guidelines will be updated periodically to reflect experience with their use, as well as changes in workforce training needs.

## Vision

A MPH or equivalent<sup>i</sup> degree is a professional degree whose primary purpose is to prepare students for public health practice. It should prepare students with a broad mastery of the subject matter and methods necessary in the field of public health practice. It typically requires students to develop the capacity to organize, analyze, interpret and communicate knowledge in an applied manner. Furthermore, MPH graduates are expected to be able to apply knowledge in the assessment, planning, implementation and evaluation of policy and program interventions. In contrast, a research<sup>ii</sup> oriented graduate

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<sup>i</sup> Other masters' degrees in the Canadian context (eg. MHS, MHA, MHSA, MHS, MSPH, MSc) that also designate preparation for public health practice in a community setting could also be considered to be equivalent professional masters degrees provided that their primary purpose is to prepare students for public health practice and that they meet the criteria outlined in these guidelines with respect to program organization, content and capacity.

<sup>ii</sup> Research is defined as the organized and purposeful collection, analysis, and interpretation of data with the goal of exploring an issue, or investigating a particular question. Types of research particularly relevant in the context of population and public health include descriptive studies of health status, etiologic and epidemiologic studies, and evaluation of the delivery and effectiveness of public health programs.

degree program is one that, based on its learning objectives and the paths its graduates follow, prepares students for scholarly careers, particularly in academia and other research settings; it typically prepares students to investigate, acquire, organize, analyze and disseminate new knowledge in a discipline or field of study.

There are two broad categories of MPH programs that may be offered and are distinguished by their area of focus:

- **Generalist MPH:** offers a course of study to provide the student with a sound academic background in order to practise competently as a generalist in public health
- **Specialized MPH:** offers one or more courses of study in selected areas of basic public health knowledge or closely-related areas, sufficient to constitute an area of specialization. For example, a specialized MPH program may be focussed on such areas as: health promotion; community nutrition; communicable disease control; applied epidemiology; etc.

It is up to individual programs to determine whether to provide a generalist MPH program, one or more specialized programs, or some combination of the two.

## Criteria – The Public Health Program

1. **Mission. The program shall have a clearly formulated and publicly stated mission with supporting goals and objectives. The program shall foster the development of professional public health values, concepts and ethical practice.**
  - ❑ Be guided by the broad mission of public health (e.g. enhancing health in human populations through organized community effort)
  - ❑ Be comprised of a consortium of disciplines, together addressing the health of the community through instruction, research and community service
  - ❑ Prepares public health practitioners who are able to identify and assess the needs of populations; plan, implement and evaluate policies and programs to address those needs; and otherwise assure conditions that protect and promote the health of populations.
2. **Organization. The program shall provide an organizational setting conducive to teaching and learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration.**
  - ❑ The administrative structure and resources should allow the program to carry out the majority of its teaching, research and service functions.
  - ❑ One faculty/department should assume responsibility for the MPH program and have an identifiable program director to ensure internal consistency and coherence

- Core courses will normally be delivered by the home department faculty to ensure public health relevant orientation and socialization to public health culture
  - Where programs are structured as a consortium of two or more academic institutions, a lead institution must be identified and the roles and responsibilities of the partners clearly articulated.
3. **Governance. The program administration and faculty shall have clearly defined rights and responsibilities concerning program governance and academic policies.**
- Faculty should have sufficient rights and privileges to assure integrity of the program and to allow accomplishment of the program’s stated mission, goals and objectives.
  - Program faculty should have formal opportunities for input in decisions affecting admissions and progress, resource allocation, faculty recruitment and promotion, curriculum design and evaluation, research and service activities, and degree requirements.
  - Faculty recognition and incentive mechanisms need to support a practice-focussed professional degree program.
4. **Quality Management. The program shall have a quality management system to evaluate and monitor its overall efforts against its mission, goals and objectives; for assessing the program’s effectiveness in serving its various constituencies; and for planning to achieve its mission in the future.**
- The program should demonstrate how evaluation and planning contribute to quality enhancement of its programs and activities
  - There is a system in place to oversee and monitor the quality of the program over time and make changes in response to the evolving needs in public health and the requirements of students.
  - A set of quality indicators regarding teaching staff, research, teaching programs, student careers for assessing program effectiveness exist.

## **Criteria – Public Health Program Capacity**

5. **Strategic Linkages with the Public Health System. The program shall demonstrate a successful relationship with the public health community.**
- The program should be focussed on the present and future needs of employment in the field of public health (i.e. focussed on developing competencies for public health practice).

- ❑ The program should demonstrate close cooperation in various sectors of public health particularly health authorities at national, provincial/territorial, regional and/or local levels
- ❑ The program should have formal cooperation with the public health system for service and applied research (e.g. evidence of contractual agreement and/or consultancy appointments or services, and so on)
- ❑ The program should have formal cooperation with the public health system for training (e.g. joint curriculum development and course delivery opportunities, involvement in providing students with opportunities to exercise their competency through relevant practicum opportunities, etc.)
- ❑ The program should provide advice on public health implications of government policies
- ❑ The program should demonstrate a definite influence on the promotion of quality in public health and of evidence-informed public health practice.

**6. Resources. The program shall have adequate resources to fulfill stated mission and goals including instructional, research and service objectives.**

- ❑ The program should have a clearly defined faculty which, by virtue of its size, multi-disciplinary nature and complement, educational preparation, practice experience, and teaching and research competence, is able to fully support the program's mission, goals and objectives. Specifically, the program should:
  - Require faculty with professional experience and demonstrated competence in public health practice and pedagogical skills
  - Reflect a balance within faculty members' workload between:
    - Direct teaching and tutoring;
    - Service to the profession and the broader public health community;
    - Program administration;
    - Innovation, course development and the production of teaching materials; and,
    - Research and publication
- ❑ The Program must have a central core of faculty to sustain curricular requirements:
  - This includes at least 3 full-time faculty, who are trained and experienced in public health (including an associated sub-discipline) and devote the majority of their time to the MPH program. At least one of these full-time core faculty should have current or previous public health practice experience.<sup>1</sup>
  - To assure a broad ecological perspective, the faculty complement will need to draw on various disciplines, regardless of the size of the student body. Teaching public health is labour intensive and will generally require low student/faculty ratios.

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<sup>1</sup> These criteria will need to be reassessed and possibly changed over time.

- Programs should be aware of the additional faculty requirements that additional specialty streams require. An additional set of core faculty is required for each specialty MPH program offered.
- Programs should have sufficient academically-linked practica supervisors and learning experiences to be capable of providing a range of structured practica appropriate to the size and focus of the program.

## Criteria – Public Health Program Content

### 7. **Competency-Based Learning. MPH programs must address core content areas and competencies basic to public health.**

- The content of the program should reflect the needs for knowledge, skills and abilities (i.e. competencies) for practice in public health, addressing the core functions of public health:
  - Population health assessment
  - Public health surveillance
  - Disease and injury prevention
  - Health promotion
  - Health protection (including public health emergency preparedness)

With respect to identifying the necessary competencies for MPH graduates:<sup>i</sup>

- Programs should be informed by the recently developed Canadian set of public health workforce core competencies.<sup>ii</sup> Based on the above core public health functions, the competency set has 62 competency statements clustered into 7 domains (See Appendix A for actual competencies):
  - Core public health sciences
  - Analysis and assessment
  - Policy development and program planning
  - Partnership and collaboration
  - Communication
  - Socio-cultural competencies
  - Leadership and systems approaches
- Programs may also find it useful to consider the list of competencies for MPH graduates that have been developed by the U.S. Association of Schools of Public Health. See Appendix B for further details.

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<sup>i</sup> Public health functions are broad and their fulfilment require multiple competencies from multiple domains. This is why none of the core public health functions (e.g. health promotion, public health surveillance, etc.) are shown as domains in either the U.S. MPH or Canadian core competency sets.

<sup>ii</sup> The Canadian set of core competencies is still in draft form, although currently being used in a variety of ways. It should be noted that these core competencies were written to reflect the common set of knowledge, skills and abilities for *all* public health practitioners, and therefore not with a specific focus on MPH graduates. Graduates would be expected to have relatively higher levels of proficiency for many competencies and may also be required to meet additional competencies not considered “core” for the entire workforce.

- Recognizing that there are a variety of ways in which competencies can be acquired, programs will need to map out how the competencies will be achieved by graduation (e.g. courses, projects, practicum, seminar series, etc.)
- In order to address the identified set of competencies, programs will need to strike a practical balance between breadth and depth.

**8. Duration. An MPH degree program must be at least 42 semester credit units<sup>i</sup> and include an appropriate practicum experience supervised by a qualified preceptor.**

- If participating full-time, such a program would typically require 16 or more months of study. Many MPH students will likely study on a part-time basis, which would obviously take longer. Some students may take a combination of full and part-time study (e.g. 1 year of full-time study completing required courses and practicum, and completing remaining requirements on a part-time basis).
- A program is expected to provide the equivalent of: 2 semesters of courses, 1 semester of practicum, and 1 semester of additional learning experiences (e.g. additional courses, guided study, practicum, project, culminating experience, etc.). See Appendix C for more detailed examples.
- Prior professional degrees or substantial public health work experience may offset a limited number of credit units. That said, this must be assessed on an individual basis and must be competency-based and specific to the requirements in the MPH curriculum.<sup>ii</sup>
- All students must develop practice-based skills in public health
  - A practicum is a planned, supervised and evaluated practice experience with well-defined learning objectives, procedures and evaluation criteria usually involving a learning contract with the on-site preceptor, student and academic program (See Appendix D for details)
  - A practicum needs to be of sufficient duration and be taken for earned credit (12 weeks minimum, 16 or more weeks ideally) to allow meaningful exposure to public health practice and opportunity to develop/apply public health competencies.
  - Supervision by a qualified preceptor who is a public health practitioner

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<sup>i</sup> Semester credit unit: a course requiring 1 hour of classroom lecture per week for a semester would be typically equivalent to 1 semester credit. Semesters typically have 12 weeks of active teaching with additional time for examinations. Therefore, a course with 3 hours of classroom lectures per week with an additional 2-2.5 hours of study for every hour of classroom work would typically be a 3 semester credit course. Therefore a 12 semester credit workload is approximately “full-time”. Credit values for practica are dependent on duration and academic intensity. According to CEPH, a full-time placement for 12-16 weeks may be awarded 6 semester credits. A practicum with 400 contact hours with a significant written project may be awarded 6-9 semester credits.

<sup>ii</sup> Off-setting of program requirements for areas only in which competency is assessed and demonstrated maintains the integrity of the degree. Alternative, more abbreviated programs may exist for individuals seeking a less intense training program. The intent of these guidelines is to provide criteria for MPH degree programs.

- A practicum must be different from an existing job and preferably in a separate organization
- A practicum ideally includes local, provincial/territorial or national formal public health setting
- A culminating experience is also to be included that requires synthesis and integration of theory, principles, knowledge and experiences applied to a situation approximating some aspect of professional practice
  - Many different models are possible, including written or oral comprehensive examinations, supervised practice experiences, a major written paper or an applied research project, the development of case studies, among others.
- If part of the program is provided through distance education, then the program must:
  - Be consistent with the mission of the program and within the program's established areas of expertise
  - Be guided by clearly articulated student learning outcomes that are rigorously evaluated
  - Be subject to the same quality control processes that other degree programs in the university are
  - Provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics of adult learners
  - Provide some structured opportunity for face-to-face interactions with students.

# Appendix A: Canadian Public Health Workforce Draft Core Competencies

## 1 - Core Public Health Sciences Domain

### A public health practitioner is able to...

- 1.1. *Understand the historical development, structure, and interaction of public health and health care systems at the local, provincial/territorial, national, and international levels*
- 1.2. *Understand the concepts of health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of, and decision making about, health services*
- 1.3. *Apply the basic public health sciences including behavioural and social sciences, biostatistics, epidemiology, environmental public health, and prevention of chronic and infectious diseases and injuries*
- 1.4. *Identify and apply basic research methods used in public health*
- 1.5. *Develop a lifelong commitment to rigorous critical thinking*
- 1.6. *Identify and retrieve current relevant scientific evidence*
- 1.7. *Review and critically appraise the evidence for public health interventions*
- 1.8. *Identify the role of evidence in developing health policies and programs and appropriately apply evidence*

## 2 - Analysis and Assessment Domain

### A public health practitioner is able to...

- 2.1. *Define a problem*
- 2.2. *Identify relevant and appropriate data and information sources*
- 2.3. *Collect accurate quantitative and qualitative primary data when secondary data is unavailable*
- 2.4. *Identify community assets and available resources*
- 2.5. *Determine appropriate uses and limitations of both quantitative and qualitative data*
- 2.6. *Evaluate the integrity and comparability of data and identify gaps in data sources*
- 2.7. *Obtain and interpret information regarding risks and benefits to the community*
- 2.8. *Partner with communities to validate and attach meaning to collected quantitative and qualitative data*
- 2.9. *Make relevant inferences from quantitative and qualitative data*
- 2.10. *Recognize how the data illuminates ethical, political, scientific, economic, and overall public health issues*
- 2.11. *Identify relationships, trends, and patterns in health assessment information and make appropriate recommendations on further investigations or actions that should be taken*
- 2.12. *Understand cost-effectiveness, cost-benefit, and cost-utility analyses*
- 2.13. *Apply ethical principles to the collection, maintenance, use, and dissemination of data and information*
- 2.14. *Apply data collection processes, information technology applications, and computer systems storage/retrieval strategies*

### **3 - Policy Development and Program Planning Domain**

*A public health practitioner is able to...*

- 3.1. *State policy options and write clear and concise policy statements*
- 3.2. *Articulate the health, economic, administrative, legal, social, and political implications of each policy option*
- 3.3. *State the feasibility and expected outcomes of each policy option*
- 3.4. *Utilize current techniques in decision analysis and health planning*
- 3.5. *Decide on the appropriate course of action*
- 3.6. *Develop a plan to implement policy, including goals, outcome and process objectives, and implementation steps*
- 3.7. *Monitor and evaluate implementation of interventions for their intended and unintended effects, costs, quality, and acceptability*
- 3.8. *Develop and present a budget*
- 3.9. *Develop strategies for determining budget priorities*
- 3.10. *Identify, interpret, implement, and understand the limitations and uses of public health laws, regulations, and policies*
- 3.11. *Prepare for and contribute to the management of incidents, outbreaks and emergencies*

### **4 - Partnership and Collaboration Domain**

*A public health practitioner is able to...*

- 4.1. *Describe the role of governments and community partners in the delivery of public health services*
- 4.2. *Identify how public bodies and private organizations and practitioners operate within a community*
- 4.3. *Establish and maintain linkages with community leaders and other key stakeholders*
- 4.4. *Solicit input from individuals and organizations*
- 4.5. *Support governments and community partners in their efforts to improve community quality of life*
- 4.6. *Utilize leadership, team building, negotiation, and conflict resolution skills to build community partnerships*
- 4.7. *Collaborate with governments and community partners in common and coordinated efforts*
- 4.8. *Advocate for individuals and communities on aspects which will improve their health and wellbeing*
- 4.9. *Facilitate a dialog among governments and community partners about strategies to attain and sustain healthier communities*

## **5 - Communication Domain**

*A public health practitioner is able to...*

- 5.1. *Communicate clearly and concisely*
- 5.2. *Listen to others in an unbiased manner, respect points of view of others, and promote the expression of diverse opinions and perspectives*
- 5.3. *Provide health status, demographic, statistical, programmatic, and scientific information tailored to professional and lay audiences*
- 5.4. *Understand social marketing principles and consumer behaviour*
- 5.5. *Use the media, advanced technologies, and community networks to receive and communicate information*
- 5.6. *Advocate for public health programs and resource*

## **6 - Socio-Cultural Competencies Domain**

*A public health practitioner is able to...*

- 6.1. *Utilize appropriate methods for interacting sensitively, effectively, and professionally with persons with diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and persons of all ages, gender, health status, and lifestyle preferences*
- 6.2. *Identify the role of diverse population characteristics in determining the delivery of public health services*
- 6.3. *Develop and adapt policies and program delivery that responds to diversity in population characteristics*
- 6.4. *Understand the importance of a diverse public health workforce*

## **7 - Leadership and Systems Approaches Domain**

*A public health practitioner is able to...*

- 7.1. *Know public health organization mission and priorities*
- 7.2. *Operationalize the mission of the organization within personal or unit scope of work.*
- 7.3. *Identify internal and external issues that may impact delivery of essential public health services (i.e., strategic planning)*
- 7.4. *Ethically manage self, people and resources*
- 7.5. *Help create key values and shared vision and use these principles to guide action*
- 7.6. *Understand and support the contribution of other government and community partner programs relative to achieving the public health vision and mission*
- 7.7. *Understand and incorporate international best practices*
- 7.8. *Contribute to team and organizational learning*
- 7.9. *Contribute to improvements in the workplace environment (improve work activities, recommend improvements to plans)*
- 7.10. *Contribute to development, implementation, and monitoring of organizational performance standards*

## Appendix B: U.S. Association of Schools of Public Health MPH Competencies

In June 2006, the ASPH released version 2.1 of their MPH graduate competencies.<sup>i</sup> Two sets of competency domains are provided. One set of domains is based on the five “disciplines” or topics expected of MPH programs, which are identified in the Council on Education in Public Health accreditation criteria for MPH programs and Schools. An additional set of “cross-cutting” competency domains have also been identified.

<b>Discipline-Specific</b>	<b>Cross-Cutting Competencies</b>
<ul style="list-style-type: none"><li>• Biostatistics</li><li>• Environmental health sciences</li><li>• Epidemiology</li><li>• Health policy and management</li><li>• Social and behavioural science</li></ul>	<ul style="list-style-type: none"><li>• Communication and informatics</li><li>• Diversity and culture</li><li>• Leadership</li><li>• Public health biology</li><li>• Professionalism</li><li>• Program planning</li><li>• Systems thinking</li></ul>

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<sup>i</sup> ASPH Education Committee. Master’s degree in public health core competency development project. Version 2.1. October 2004 – June 2006. 2006. Available from: <http://www.asph.org/UserFiles/FinalVersion2.1.pdf>

## **Appendix C – Illustrative Examples of MPH-type Programs in Canada**

Examples of three existing MPH-type programs are provided here to show how the proposed criteria would apply. The main body of the guidelines indicate that a program would typically be 16 or more months in duration (if full-time study), with two semesters of coursework, a practicum semester, and an additional semester of flexible learning experiences. While these guidelines identify a minimum of 45 semester credits, many existing programs surpass this threshold.

### **University of Alberta – MPH Program with specialization in Health Policy and Management**

Required Courses:

- Introduction to Health Systems and Health Policy
- Fundamentals of Public Health
- Statistical Methods in Health Research or Biostatistics
- Introduction to Health Care Finance
- Introduction to Health Care Economics
- Management and Design of Health Care Organizations
- Epidemiology Methods 1
- Law Course (2 options)

Project in Public Health Sciences - Students develop and complete a project in public health sciences under the supervision of the appropriate faculty member over two terms.

Field Practicum – 16 weeks

Participate in Student Seminar Series (weekly) and Departmental Rounds (weekly)

Stated duration of minimum 2 years if full-time study

### **University of Toronto – MHSc Program**

Required Courses:

Term 1:

Introduction to Public Health  
Epidemiology 1  
Biostatistics 1  
Canadian Health Care System  
Introduction to Public Health Sciences  
Public Health Research Skills  
Elective course

Term 2:

Epidemiology 2  
Biostatistics 2

Scientific Overviews  
Health Trends and Surveillance  
Elective Course

Summer practicum – 12-16 weeks full-time

Year 2, Term 1 +/- 2:

Seminar in Applied Epidemiology - students present their practicum findings to the entire class.

Elective course(s)

Second practicum - optional

### **Université de Montréal – MSc (santé communautaire)**

Bloc A: Cours obligatoires – 23 crédits:

Fondements et éthique en santé publique

Atelier de biostatistique

Raisonnement scientifique/santé publique

Sciences humaines/sociales en santé publique

Planification et évaluation en santé

Santé et environnement

Introduction OU Concepts de base en biostatistique

Concepts de base OU l'analyse épidémiologie

Pratique de la santé publique

Bloc B: Cours à option – 16 crédits dont 3 crédits fortement recommandés en approches qualitatives

Bloc C: Stage ou travail dirigé – 15 crédits.

## Appendix D – Practicum Guidelines

Practice-based learning is a core element of professional masters training in public health. As such, the practicum is a critical program component. Its overall objective is to provide a student with an educational and training opportunity in the field of public health to integrate the course work and further the development of practical skills.

As stated in the main body of the guidelines, practica are to be a semester in duration (i.e. 16 weeks). Learning objectives are to be identified for all practica. These should be developed and agreed to by the student, practicum preceptor, and program’s faculty advisor. The specific learning objectives should be guided by the overall objectives of the practicum.

The practicum guidelines should also outline the responsibilities of the student, the faculty advisor and the on-site practicum preceptor. How the practicum is to be evaluated should be described. “Documentation is required that indicates the agreement between the student, the faculty advisor, and the placement-site preceptor. This written agreement, or learning contract, describes and defines the working relationships between the student and the host agency or organization. The agreement explains the student’s learning objectives and interests, as well as the needs and opportunities of the host agency or organization ... [it is] a tool for communicating, monitoring and evaluating the practicum. Remuneration to the student may or may not be involved.”<sup>i</sup>

The ASPH document provides the following checklist for learning contracts and provides a sample contract:

- ❑ Provide the complete name, title, address and phone number of the preceptor from the sponsoring organization and the faculty advisor
- ❑ Briefly describe the sponsoring organization and divisions with which the student will be most closely affiliated
- ❑ Describe the specific work the student will be performing, as well as the student’s responsibilities and expected outcomes designating individual student responsibilities if possible
- ❑ Identify the issue and problems the student will be addressing
- ❑ Describe any data to be gathered or used in completing the project and affirm that the preceptor will make these data available to the student as needed
- ❑ List the skills and knowledge that the student will use for the project
- ❑ Describe the new knowledge and skills that the student should expect to gain and apply
- ❑ Describe technical needs of the project, including copying and computer time, and define how these needs will be met
- ❑ Other issues: (e.g. remuneration, time flexibility)

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<sup>i</sup> Association of Schools of Public Health: Demonstrating excellence in practice-based teaching for public health. Washington: ASPH, 2004.