

2017 Model Practices

Applicant Information

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Model Practice Title

Please provide the name or title of your practice: *

Preparing the Future's Workforce – An Internship Program with Purpose

Practice Categories

Model and Promising Practices are stored in an online searchable database. Applications may align with more than one practice category. Please select all the practice areas that apply.: *

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|--|--|--|--|---|
| <input type="checkbox"/> Access to Care | <input type="checkbox"/> Advocacy and Policy Making | <input type="checkbox"/> Animal Control | <input type="checkbox"/> Coalitions and Partnerships | <input type="checkbox"/> Communications/Public Relations |
| <input type="checkbox"/> Community Involvement | <input type="checkbox"/> Cultural Competence | <input type="checkbox"/> Emergency Preparedness | <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Food Safety |
| <input type="checkbox"/> Global Climate Change | <input type="checkbox"/> Health Equity | <input type="checkbox"/> HIV/STI | <input type="checkbox"/> Immunization | <input type="checkbox"/> Infectious Disease |
| <input type="checkbox"/> Informatics | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Injury and Violence Prevention | <input type="checkbox"/> Marketing and Promotion | <input type="checkbox"/> Maternal-Child and Adolescent Health |
| <input checked="" type="checkbox"/> Organizational Practices | <input checked="" type="checkbox"/> Other Infrastructure and Systems | <input checked="" type="checkbox"/> Organizational Practices | <input type="checkbox"/> Primary Care | <input checked="" type="checkbox"/> Quality Improvement |
| <input type="checkbox"/> Research and Evaluation | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Vector Control | <input type="checkbox"/> Water Quality | <input checked="" type="checkbox"/> Workforce |

Other::

Is this practice evidence based, if so please explain. :

Winnable Battles

To keep pace with emerging public health challenges and to address the leading causes of death and disability, CDC initiated an effort called Winnable Battles to achieve measurable impact quickly. Winnable Battles are public health priorities with large-scale impact on health and known effective strategies to address them. Does this practice address any CDC's seven Winnable Battles? If so, please choose from the following: *

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|---|--|--|----------------------------------|---|
| <input type="checkbox"/> Food Safety | <input type="checkbox"/> HIV in the U.S. | <input type="checkbox"/> Nutrition, Physical Activity, and Obesity | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Healthcare-associated Infections |
| <input type="checkbox"/> Motor Vehicle Injuries | <input type="checkbox"/> Teen Pregnancy | <input checked="" type="checkbox"/> None | | |

Overview: Provide a brief summary of the practice in this section (750 Word Maximum)

Your summary must address all the questions below:

- Brief description of LHD- location, demographics of population served in your community
- Describe public health issue
- Goals and objectives of the proposed practice
- How was the practice implemented/activities
- Results/Outcomes (list process milestones and intended/actual outcomes and impacts.
 - Were all of the objectives met?
 - What specific factors led to the success of this practice?
- Public Health impact of practice
- Website for your program, or LHD.

750 Word Maximum

The Kent County Health Department (KCHD, www.accesskent.com/health) operates within Kent County, Michigan and serves more than 629,000 residents. Kent County's population is approximately 83% white, 10% African American, and 10% Hispanic/Latino. More than 25% of Kent County residents are under the age of 18 years and about 12% are 65 years or older. Nearly 90% of residents 25 years or older have at least a high school diploma, and more than 30% of the population 25 years and older have a bachelor's degree or higher. The median household income in Kent County is \$51,667 and the unemployment rate is 7.0% (US Census, 2014 Population Estimate). KCHD became nationally accredited through the Public Health Accreditation Board (PHAB) in September 2014. Domain 8 of the PHAB standards and measures requires that health departments are making efforts to "encourage the development of a sufficient number of qualified public health workers" (Standard 8.1, Version 1.5). KCHD received a "slightly demonstrated" score for the measure 8.1.1, which assesses a department's efforts to develop the future public health workforce. KCHD has long been a desired site for students looking to complete an internship. Historically, KCHD would receive requests and work diligently to provide students with a quality experience. This practice resulted in a high level of variability in student experiences, no system for screening students, and no formal orientation for students. These issues, coupled with the fact that there are now close to ten public health-focused degree programs within close proximity, KCHD leadership recognized the lack of a formal internship program would become a bigger problem for KCHD in the coming years. An internal workgroup was convened in August 2014 to evaluate the current situation and make informed recommendations for a better system. The initial charge of the workgroup was to: (1) provide first-class learning experiences for students, (2) develop future public health professionals, (3) advance objectives in the KCHD strategic plan, and (4) conduct research on public health issues of common interest. The workgroup completed process maps which showed disjointed efforts for handling interns. These maps were merged, and a series of recommendations were proposed in November 2014. The workgroup recommendations included: (1) establishing a point-person for handling internship inquiries, (2) creating a separate webpage for internship opportunities, (3) creating and maintaining a list of staff-proposed projects for internship opportunities, and (4) launching a time-limited application period. Following review and approval by KCHD leadership in early 2015, a lead was assigned to advance the new program. The program was developed to include an in-depth orientation process (Public Health Boot Camp), mentorship by highly-qualified public health professionals, two-way communication and networking opportunities, and structured, project-based internships with flexibility to allow students exposure to other areas of public health interests. Student experiences are continuously assessed and improvements are made to the program, as needed. Staff have provided professional references for former students as they enter the workforce. Many of the projects proposed through the internship program by staff have aligned with strategic plan goals. Students spend time conducting research, literature reviews, and assessing best-practices literature to initiate efforts toward achieving these plan objectives. To date, outcomes of the program are related to student experiences and support students have provided for KCHD strategic plan implementation. Evaluation data shows that 100% of students agreed they were taught the knowledge/skills needed for the internship, made to feel comfortable and part of the department, that their experience at KCHD was worthwhile, enjoyed their time working with KCHD staff, and would recommend KCHD as an internship site for other students. In regard to the strategic plan, students have assisted with more than 20% of the objectives contained within the plan, often through literature reviews and examination of best practices. Factors that have supported the success of this practice include support from agency leadership; support and engagement of KCHD staff to serve as preceptors and participate in the Public Health Boot Camp; the standardization and documentation of processes and procedures; the dedication of staff time to coordinating the program; and the ongoing evaluation and improvements made as a result. This internship program has impacted public health in our community by providing better learning experiences for students; supporting preceptors to serve as mentors; stronger relationships and desire to collaborate with academia; better-prepared future public health workforce; and professional development opportunities for KCHD staff.

Responsiveness and Innovation

A Model Practice must be responsive to a particular local public health problem or concern. An innovative practice must be (1) **new to the field of public health (and not just new to your health department)** OR (2) **a creative use of an existing tool or practice**, including but not limited to use of an Advanced Practice Centers (APC) development tool, The Guide to Community Preventive Services, Healthy People 2020 (HP 2020), Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH). Examples of an inventive use of an existing tool or practice are: tailoring to meet the needs of a specific population, adapting from a different discipline, or improving the content.

- Statement of the problem/public health issue
- What target population is affected by problem (please include relevant demographics)
 - What is the target population size?
 - What percentage did you reach?
- What has been done in the past to address the problem?
- Why is the current/proposed practice better?
- Is current practice innovative? How so/explain?
 - Is it new to the field of public health
 - OR**
 - Is it a creative use of existing tool or practice:
 - What tool or practice did you use in an original way to create your practice? (e.g., APC development tool, The Guide to Community Preventive Services, HP 2020, MAPP, PACE EH, a tool from NACCHO's Toolbox etc.)
- Is the current practice evidence-based? If yes, provide references (Examples of evidence-based guidelines include the Guide to

2000 Word Maximum

KCHD has long been a desired site for students looking to complete an internship. Historically, KCHD would receive requests and work diligently to provide students with a quality experience. This practice resulted in a high level of variability in student experiences, no system for screening students, and no formal orientation for students. KCHD became nationally accredited through the Public Health Accreditation Board (PHAB) in September 2014. Domain 8 of the PHAB standards and measures requires that health departments are making efforts to “encourage the development of a sufficient number of qualified public health workers” (Standard 8.1, Version 1.5). KCHD received a “slightly demonstrated” score for the measure 8.1.1, which assesses a department’s efforts to develop the future public health workforce. These issues, coupled with the fact that there are now close to ten public health-focused degree programs within close proximity, KCHD leadership recognized the lack of formal internship program would become a bigger problem for KCHD in the coming years. An internal workgroup was convened in August 2014 to evaluate the current situation and make informed recommendations for a better system. The initial charge of the workgroup was to: (1) provide first-class learning experiences for students, (2) develop future public health professionals, (3) advance objectives in the KCHD strategic plan, and (4) conduct research on public health issues of common interest. The internship program has helped to address concerns related to capacity and quality, impacting both KCHD staff and student experiences with internships. Prior to this program, there were very few KCHD staff who were willing to work with interns. This is likely because the disjointed process was so burdensome and they were unsupported in their efforts. There was no guidance for what an internship should entail, or how staff should handle potential interns. Students faced some of the same challenges. There was no direct path for an internship with KCHD. Students would often reach out to whomever they could get contact information and hope that someone would accept the role of preceptor. This became even more complicated when more and more public health-focused degree programs opened in close proximity to Kent County. At this point, there are 10 programs that are geographically located near KCHD. This does not account for the online students that request internship experiences with KCHD. Many students and KCHD staff have engaged in the new internship program since its establishment. Between May 2015 and December 2016, KCHD has provided internship experiences for 36 students representing 10 unique colleges and universities. These students have been both bachelor’s level and master’s level, in a variety of different programs of study. These students have been mentored and supervised by 22 KCHD staff, many of whom have served as preceptors for multiple semesters. Preceptors have been from all four of KCHD’s Divisions, and include our Health Director, Deputy Director, Division Directors, program supervisors and program staff. In the past, internship requests would be made, and KCHD would react. Staff would often respond to student requests and work to identify possible internship projects and opportunities. The opportunities weren’t always well thought-out, and sometimes created significant burden on the staff who volunteered to work with students. Because there was no standard process, there was little consistency in student experiences, some students may have not been covered under affiliation agreements between academic institutions and KCHD, and it is unclear (and unlikely) that all students were in compliance with basic entry requirements for working with KCHD. KCHD’s internship program has helped to create a more consistent and positive internship experience for students and preceptors. Staff now have the opportunity to determine well ahead of time whether they have capacity to work with a student in a given semester. They are also able to predetermine the project that a student would be working on. Staff also have the ability to screen applicants and interview students prior to accepting them for an internship, which allows staff the opportunity to ensure the student will be a good fit before committing to the semester. This part of the process has generated interest and buy-in among KCHD staff. They are more likely to work with students because they know the semester will result in a mutually beneficial experience. As for students, they get a richer internship experience as a result of the new internship program. Prior to even being accepted to the program, they have an opportunity to select the project that best aligns with his or her public health interests, and has the opportunity to gain interview experience. They also are asked to provide a resume and cover letter. Once accepted as an intern, all students begin their internship together with an in-depth orientation to the health department and key aspects of local public health. They have great opportunities for networking with each other and KCHD staff and leaders. Since the first orientation process, we have collected evaluation data. This information has been used to make incremental improvements each time it is presented. Because the orientation process is so thorough for interns, KCHD supervisors have started to request that new employees attend, as well. Throughout the internship, students are encouraged to network with other programs in the agency and are treated very much the same as KCHD staff. Because each student is working on one major project as the basis for his or her internship, they typically have a product at the conclusion of their time at KCHD. A recent addition to the internship has been a “student research day”, where interns share their research and project outcomes with KCHD staff and other stakeholders. The internship program is innovative in that KCHD has successfully established a system for ensuring quality internship experiences for students while also making sure that staff and the organization are benefiting. Since its implementation, KCHD has received tremendous feedback about the program. Students “graduate” the program with a fulfilling experience under their belt, as well as references for future internship, schooling, and job opportunities. Another innovative aspect of this program is how KCHD has utilized it to get traction on about 20% of the organization’s strategic plan objectives. Numerous projects related to strategic plan objectives have been at least started by students. Even if students leave at the end of the semester not having completed the objective, staff are then in a better position to move forward with next steps for those objectives. Lastly, because KCHD does not require preceptors to be managers, it gives non-management staff the opportunity to gain experience supervising the work of a student. This has been a successful and innovative professional development opportunity for KCHD staff. KCHD’s internship program is loosely based around principles of the PHF’s Academic Health Department tools and the Core Competencies for Public Health Professionals from the Council on Linkages. When internship projects are proposed by staff, they must indicate which core competencies will be addressed through that project. Additionally, KCHD has developed this program in accordance with evidentiary requirements for Domain 8 of the PHAB Standards and Measures. This should assist the organization in discussing and documenting successes and improvement actions communicated through PHAB annual reports and future reaccreditation efforts. The internship program is not evidence-based, but it has been shared as a best practice with other local health departments in Michigan. In fall 2015, KCHD’s internship program was a solicited presentation at the Michigan Premier Public Health Conference.

The LHD should have a role in the practice's development and/or implementation. Additionally, the practice should demonstrate broad-based involvement and participation of community partners (e.g., government, local residents, business, healthcare, and academia). If the practice is internal to the LHD, it should demonstrate cooperation and participation within the agency (i.e., other LHD staff) and other outside entities, if relevant. An effective implementation strategy includes outlined, actionable steps that are taken to complete the goals and objectives and put the practice into action within the community.

- Goal(s) and objectives of practice
- What did you do to achieve the goals and objectives?
 - Steps taken to implement the program
- Any criteria for who was selected to receive the practice (if applicable)?
- What was the timeframe for the practice
- Were other stakeholders involved? What was their role in the planning and implementation process?
 - What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s)
- Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Otherwise, provide an estimate of start-up costs/ budget breakdown.

5000 words maximum

Enter the LHD and Community Collaboration related to your practice (5000 words maximum): *

The initial charge of the workgroup in this practice was to: (1) provide first-class learning experiences for college and university students, (2) develop future public health professionals, (3) advance objectives in the KCHD strategic plan, and (4) conduct research on public health issues of common interest. An internship program such as this had never existed at KCHD, so the program had to be developed from the ground up. To achieve Goal 1, lead staff created a step-by-step process for both students and potential preceptors to follow. On the preceptor side of the process, KCHD staff are asked to submit project proposals that are transformed into "job descriptions" which are posted to the KCHD website for a time-limited period of time. During this time, colleges and universities are notified of the postings and are asked to share with students throughout the school. Approaching the internships in this way has ensured incoming students a primary project of focus. Some of these projects have been substantial enough to engage students in KCHD's work for up to two full semesters, as some students have stayed beyond their internship to complete their capstone hours with KCHD, as well. This process for students is similar to a normal hiring process, whereby students apply for the project or projects that they are interested in during the application window. At this time, they are asked to complete an internship application form and provide a cover letter, resume, and any documentation regarding the internship process for their academic program. KCHD preceptors review complete applicants and interviews with potential interns are conducted. Before the student even begins his or her internship, s/he is being provided valuable interview experience. If selected for an internship, students are required to attend an internship orientation that spans two half-days. During this orientation process, students are required to provide additional documentation, such as proof of TB testing, proof of flu vaccination, compliance with the recommended immunization schedule, and documentation of a background check. Typically, KCHD will conduct the background checks on incoming students. To achieve Goal 2, KCHD has ensured quality internship projects under the supervision of quality preceptors to develop future public health professionals. Many of the staff who serve as preceptors have hosted numerous students over time and are seasoned mentors. Staff provide students with guidance and coaching to help them develop professional skills and to bridge the gap between what is learned in academia and practice. Many of the students who have completed their internship at KCHD have went on to find positions within public health. They have been able to leverage their experience and connections at KCHD to help them secure these positions. Efforts to achieve Goal 3 have focused on posting internship projects that align with the goals and objectives contained within KCHD's strategic plan. KCHD's agency strategic plan includes items of interest or urgency that have been identified as priorities, but are often above and beyond the day-to-day work of staff working at the department. Through experience, staff have learned the value of working with interns to begin work on important projects that may otherwise not get the traction that they need to move forward. Goal 4 has been achieved as a consequence of the overall internship program's organization and implementation. Because staff are developing projects of interest and posting them for students to apply to, KCHD has had numerous opportunities to conduct research projects on issues of common public health interest. For example, students have worked with KCHD staff to determine the impact of using "hook-up" apps on STI and HIV risk; to assess health literacy of clients utilizing services within KCHD clinics and other FQHCs in our community; to determine areas of improvement for the public pool program; to field test public health emergency messaging; and many other projects. The creation of the internship program from start to implementation took many strategic steps. Once given approval by the Health Officer to move forward with implementation of recommendations made by the internal committee, the lead for this project went to the Quality and Performance Manager. Under the leadership of the Quality and Performance Manager, the process proposed through the recommendations report was finalized and a strategy for transitioning these recommendations into a functioning program was undertaken. The transition included determining a process for receiving, processing, and organizing learning requests; creating a set of required documentation and criteria for student applications; and developing a system for devising learning plans, setting "entry requirements" for learners, and creating the content for the public health orientation process for student learners. Once these pieces were in place and had the support of KCHD leadership, the Quality and Performance Manager worked with the county's website developer to create a webpage for the internship program information, including application guidelines and a place to post available internships (https://www.accesskent.com/Health/hd_internship.htm). The Quality and Performance Manager then communicated to KCHD staff the new process for bringing in interns. A handbook for preceptors, timelines, and on-site training for those interested in working with interns were provided. Prior to the launch of the program, a resource list of college and university programs relating to public health was compiled, including contact information. Notice of the new KCHD internship program process and requirements was communicated to

college and university stakeholders, who then shared information with interested students. The first cohort of students were brought into KCHD through the program in the fall 2015 academic semester. Prior to the first cohort beginning their internships, KCHD staff worked to develop content for the student orientation process. This included developing a curriculum and presentations for a variety of topic areas, including: KCHD Policies, Procedures, and Internship Logistics; Overview of the Health Department; The Public Health System; Community Health Assessment and Improvement Planning; Public Health Accreditation; Epidemiology Overview; Grant Writing and Seeking Funding Sources; and Health Equity. All topic areas were derived from input gathered from former interns who had worked with KCHD. Staff participated in a review and vetting of information included in the content for each of the orientation sessions. When the orientation process was launched, it was named the Public Health Boot Camp. Various KCHD staff have participated in the delivery of Boot Camp content. Following each Boot Camp session evaluation information has been collected to inform improvements to the process after each iteration. When students have completed the orientation process, preceptors take the lead in making sure students have an enjoyable and fulfilling experience during their time at KCHD. While each student has a core project to work on, KCHD does work to ensure that students have opportunities to interact with other parts of the agency, if they have interest. At the conclusion of internship experiences, evaluation data is once again collected from students to improve the overall internship process. From concept to implementation, it took roughly one year for KCHD's internship program to come to fruition. The initial convening and discussions to determine issues with the current process took place in August 2014. During the months following, a few additional meetings were held, recommendations were drafted and shared with stakeholders, and were approved by the Health Officer in April 2015. Once approved, the Quality and Performance Manager had the program up and running for student applications by May 2015, with the first cohort of students attending the Public Health Boot Camp in August 2015. Many of the key stakeholders for this program have included KCHD leadership and staff. However, it would not be a successful program without the involvement of students and their respective colleges and universities. KCHD's Health Officer and Deputy Health Officer gave initial charge to explore the possibilities and ultimately the final blessing to move forward with recommendations to establish the internship program. KCHD staff who serve as preceptors are the critical component in making this program work. They develop internship opportunities, participate in orientation and serve a critical role for the students while they are working in their internship. Preceptors play the supervisory role for students, but also provide mentorship while serving as the link between interns and their universities during their experience at KCHD. Beyond KCHD staff, former student interns and local colleges and universities have been instrumental in getting the internship program to where it is today. Former interns helped to shape the content of the orientation process and have provided continuous feedback about the Public Health Boot Camp and internship process so that improvements can be made, where necessary. Some students have come back to KCHD to serve on a student panel for new student cohorts to share their experience and give the new students tips on how to have a successful internship experience. Staff and faculty at local colleges and universities have been the conduit through which internship information flows to students. Without these contacts, it would be challenging to recruit interns. KCHD has worked directly with colleges and universities to make sure that the internship experiences offered to students align with their academic goals, as well as goals of KCHD. With the quick growth of public health programming from colleges and universities in the area, it has been important to KCHD to ensure local students have a quality experience. KCHD is in regular contact with local academic programs, always looking for new and innovative opportunities to collaborate. KCHD currently has a formal "Academic Health Department" agreement with Michigan State University's College of Human Medicine and has worked with Calvin College's Center for Social Research on community initiatives. In turn, Calvin College has provided training in GIS mapping and other software programs for some of our interns and staff. Additionally, KCHD staff have been adjunct faculty for public health courses in Grand Valley State University's master's in public health program and more recently have engaged with leadership from Western Michigan University's new master's in public health program to determine ways to collaboratively address community need, including leveraging student workers to promote public health in Kent County. Fortunately, the development and implementation of KCHD's internship program has required little additional resources beyond staff time and web development. Primary internship program coordination was assigned to an existing position within KCHD, with a small amount of administrative support from another existing position. KCHD did work with the County's website administrator/developer to create a webpage for the internship program. This included staff time of a web developer through the contracted agency that manages the County's website. This person also created a logo for the internship program, as well as a fillable application form and landing page for those seeking internship opportunities. Regular updates are communicated to this contracted agency when new projects are made available for student applicants or update information needs to be added to the site.

Evaluation

Evaluation assesses the value of the practice and the potential worth it has to other LHDs and the populations they serve. It is also an effective means to assess the credibility of the practice. Evaluation helps public health practice maintain standards and improve practice. Two types of evaluation are **process** and **outcome**. Process evaluation assesses the effectiveness of the steps taken to achieve the desired practice outcomes. Outcome evaluation summarizes the results of the practice efforts. Results may be long-term, such as an improvement in health status, or short-term, such as an improvement in knowledge/awareness, a policy change, an increase in numbers reached, etc. Results may be quantitative (empirical data such as percentages or numerical counts) and/or qualitative (e.g., focus group results, in-depth interviews, or anecdotal evidence).

- What did you find out? To what extent were your objectives achieved? Please re-state your objectives.
- Did you evaluate your practice?
 - List any primary data sources, who collected the data, and how (if applicable)
 - List any secondary data sources used (if applicable)
 - List performance measures used. Include process and outcome measures as appropriate.
 - Describe how results were analyzed
 - Were any modifications made to the practice as a result of the data findings?

2000 Words Maximum

Please enter the evaluation results of your practice (2000 Words Maximum): *

Evaluation information has been helpful as KCHD has determined whether initial goals for this program were achieved. The following summary describes what we have learned to date about the achievement of the four stated goals: (1) Provide first-class learning experiences for college and university students: 100% of students agreed that they were taught the knowledge/skills needed for the internship, that they were made to feel comfortable and part of the department, that their experience with KCHD was worthwhile, that they enjoyed their time working with KCHD staff, and that they would recommend KCHD as an internship site for other students. Further, 95% of students agreed that their problem solving skills were facilitated by their internship experience and that their experience with KCHD was positive. Finally, 90% of students reported that their internship experience met their expectations. (2) Develop future public health professionals: KCHD has not yet established a mechanism for systematically capturing the impact of the internship program on the public health workforce. However, anecdotal information collected through messages received from former interns about the positions they have secured following their internship at KCHD leads the department to believe that the internships are contributing in a positive way to the future of public health. For example, one MPH student was hired for an emergency preparedness coordinator position at another local health department in our region, while another student secured a position with a nonprofit organization to work on health literacy in healthcare following her internship conducting health literacy research at KCHD. (3) Advance objectives in the KCHD strategic plan: Data collected through the internship program and the agency performance management system indicates that students have assisted KCHD in getting a number of strategic plan strategies underway. Of the 34 objectives in the plan, 20% (7) of them have been worked on in some capacity by student interns. (4) Conduct research on public health issues of common interest: Many of the students who have worked with KCHD have conducted research on topics of interest to both staff and the student. Many of the projects that students work on require a level of literature review and evaluation of evidence-based practices. To showcase this work, KCHD recently added an additional required component to the internship experience that allows students to share their research and project outcomes with KCHD staff and other stakeholders. As previously discussed, KCHD conducts evaluations at the conclusion of the Public Health Boot Camp as well as at the conclusion of an intern's experience with the department. Primary data is the main source of information for this program. Surveys are used to collect primary data from students at the conclusion of the Public Health Boot Camp and at the conclusion of each student's internship experience. Data pertaining to student involvement is gathered through the agency's performance management system on a quarterly basis. During the application process, data are collected regarding completeness and timeliness of applications, too. All sources of evaluation data for this program are collected and utilized by the program coordinator (Quality and Performance Manager). Some of the key performance measures for the internship program include agree/disagree questions such as: I was taught the knowledge/skills needed for the internship; my problem-solving skills were facilitated by the experience; I was made to feel comfortable and part of the department; my experience at KCHD was positive; my experience at KCHD was worthwhile; I enjoyed working with KCHD staff; my experience met my expectations. We also ask whether the student would recommend KCHD as an internship site for other students. Students provide feedback about their project and their preceptor, as well. Other key measures relate back to the student experience of the public health boot camp experience. Evaluation data are collected through paper surveys and then is input into an Excel database. It is analyzed using Excel, and findings are used to improve the internship experience for future student cohorts. Data regarding strategic plan implementation is collected through quarterly reports that are submitted by strategic plan leads to the Quality and Performance Manager. These data are reviewed, and input into the Excel performance management tracking database. More detailed data are recorded in the quarterly reporting template. Data from evaluation surveys has led to a few modifications to the Public Health Boot Camp, such as a change in the length of the Boot Camp from one full day to two partial days. Content of the Boot Camp has been slightly modified to address student suggestions for more interactive sessions. Changes to the internship website have also occurred as a result of the data collected during the student application process to help clarify instructions and to eliminate some of the issues with incomplete applications for internships.

Sustainability

Sustainability is determined by the availability of adequate resources. In addition, the practice should be designed so that the stakeholders are invested in its maintenance and to ensure it is sustained after initial development (*NACCHO acknowledges that fiscal challenges may limit the feasibility of a practice's continuation.*)

- Lessons learned in relation to practice
- Lessons learned in relation to partner collaboration (if applicable)
- Did you do a cost/benefit analysis? If so, describe.
- Is there sufficient stakeholder commitment to sustain the practice?
 - Describe sustainability plans

1500 Words Maximum

Please enter the sustainability of your practice (2000 Words Maximum): *

Many important lessons have been learned as a result of implementing this program at KCHD. First, the success of this program is largely attributed to strong leadership support and engagement of KCHD staff as preceptors for students, as well as presenters for the Public Health Boot Camp sessions. Another key lesson learned through this program is the importance of continuous evaluation and quality improvement efforts. While there is a good process in place now, KCHD recognizes that there is always room for improvement and it is important to measure those small, incremental improvement efforts. Additionally, engagement of colleges and universities that house public health-related programs is critical to recruiting students with an interest in the projects KCHD staff propose as internship projects. Regular communication about application requirements and deadlines is important to make sure students are applying to projects during the open time period. KCHD did not complete a cost-benefit analysis for this program. The program was created and implemented with minimal additional costs to the organization. It was simply a smart reorganization of existing efforts to improve efficiencies and outcomes related to internship experiences. The internship program at KCHD has strong leadership commitment and support behind this program, as the Health Officer and Deputy Health Officer highly value and understand local public health's role in shaping the future public health workforce. Staff buy-in for serving as preceptors and participating in the Public Health Boot Camp each semester is growing each semester, with more projects being proposed and more volunteers for presenters during the Boot Camp. KCHD is confident in the sustainability of this program, because it is organized, well-documented, and the system for the program is clearly in place. A detailed preceptor manual is available to all KCHD staff who are interested in serving as a preceptor. The manual offers guidance for being a preceptor, as well as more generalized information about the internship program so that if/when a new staff person will need to take over implementation of the program, it should be seamless.

Additional Information

How did you hear about the Model Practices Program?: *

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|---|---|--|--|--|
| <input checked="" type="checkbox"/> I am a previous Model Practices applicant | <input type="checkbox"/> At a Conference | <input checked="" type="checkbox"/> NACCHO Website | <input type="checkbox"/> Public Health Dispatch | <input type="checkbox"/> Colleague in my LHD |
| <input type="checkbox"/> Model Practices brochure | <input type="checkbox"/> NACCHO Exhibit Booth | <input type="checkbox"/> NACCHO Connect | <input type="checkbox"/> Colleague from another public health agency | <input type="checkbox"/> E-Mail from NACCHO |
| <input type="checkbox"/> NACCHO Exchange | | | | |