

The Applied Practice Experience: Bridging distance education and in-person learning

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RESULTS

BACKGROUND

The Applied Practice Experience (APE) bridges distance education and in-person learning. The APE is a required, 1-credit, 45-hour capstone course that encourages online Masters of Public Health (MPH) students to gain onsite, in-person, work experience. In their final semester, students identify a public health organization of their choosing to complete their APE. Under the supervision of the course instructors, students work closely with a Preceptor employed at their chosen organization to produce two final products that are of mutual interest to the student and the organization.

The chosen organization is typically near where the student lives or works but must be outside of their current professional role.

Typically, the APE is an on-site experience; students physically go to their chosen organization to complete the required hours of work experience. However, because many organizations have moved to remote work during the pandemic, the cohort of students in 2020 were primarily remote.

The purpose of this work is to demonstrate a model for combining in-person and remote learning strategies by analyzing reflections and feedback using qualitative data methods to identify successes and opportunities for future learning.

METHODS

We analyzed feedback from 43 students who completed their APE during Spring 2020, at the height of the COVID-19 pandemic. As part of the APE, students are required to complete a Reflective Writing Assignment. This assignment was the primary source of data for this work.

The Reflective Writing Assignment is a free-form assignment where students are asked to reflect on what their accomplishments during their APE, what they learned, how this experience influenced their professional or personal development plans, and what changes they would make to the APE.

Qualitative data analysis methods were used to identify major findings and relevant themes for measuring the success of this course. Specifically, all qualitative feedback was blinded, grouped by theme, and coded for analysis. Because of the small sample size, all coding was done manually without qualitative software.

The “on-site” Experience

“...was an invaluable learning experience as both a public health student as well as a professional”

“The opportunity to work at a strategic level in the organization has increased my interest in further leadership, policy, and strategic direction as it relates to public health.”

“This APE site influenced me going further with an MPH degree.”

“I think APE is a great opportunity to experience a career in public health and build connections.”

“The flexibility to apply and expand my MPH learnings to my current position was extremely useful and essential.”

“I think the APE was an incredible addition to the MPH program because it provided me with a chance to connect my schoolwork in an open-ended way to my career.”

Finding “on-site” Placements with Organizations

“I would recommend having a list of people interested in sponsoring students with projects already available that would be useful for their organization.”

“I had a really hard time finding an APE experience and struggling for two months until I found one I settled into.”

“Planning this APE site in the fall was very stressful because I didn’t know what state I would be living in during the spring semester.”

“I personally would have appreciated if UVM was able to match me with an organization, as opposed to have to connect with different folks on my own to pitch the unpaid preceptorship.”

“It took longer than expected to find an internship site.”

Time Commitment to the Course

“Finding the time within normal working hours to get to my APE site and meet with my preceptor was extremely difficult, as it is quite a burden to ask someone to meet and conduct work outside of normal work hours/days.”

“Finding time to devote 20 hours to an on-site, in person internship is almost impossible for me.”

“I found it a bit difficult to fully engage with this experience because I also had two other jobs concurrently with my schoolwork.”

“I found it difficult to fit in an internship while working full time and working on my Master’s degree”

APE Course Requirements

“I found it difficult to gather a thorough comprehension of what the APE should look and feel like”

“I struggled to understand the type of products that were expected, and it would have been helpful if there were more concrete examples online.”

“I wasn’t aware of this requirement until it appeared in my blackboard list of classes for fall 2019.”

“Although it became difficult to devote as much time as I wanted to the products due to COVID-19, I am grateful for the amount of support and guidance from the faculty coaches.”

Figure 1. Map of Potential APE Public Health Organizations



DISCUSSION

Overall, students enjoyed the opportunity to gain “on-site” experience through the APE. The UVM MPH is entirely online and asynchronous; however, students seemed to enjoy the opportunity not because it was a change to online learning, but because it facilitated practical public health experience. Feedback on major challenges with the APE resulted in the following changes for the 2021 cohort:

Finding a placement with an organization. Beginning in 2021, students are provided with a list of potential organizations in map form. This allows students to identify organizations near where they live, while learning about different types of opportunities. Additionally, though the APE officially begins in the Spring, students are expected to begin preparatory work in the Fall. This allows students to have more time to identify an organization and actively plan for their APE.

Understanding the course requirements. Prior to the official beginning of the course in the Spring, students have access to a Fall Blackboard Page with the syllabus, course timeline, and description of assignments and dates. Future, the APE faculty team is working more closely with MPH student advisors to advertise and plan for the APE during their final semesters.

Finding the time to complete the required 20 hours on site. Students are encouraged to discuss time management with the course instructors and their Preceptors to ensure a successful and beneficial learning environment. In addition, the increased planning for the course will likely minimize this burden. Students will likely continue to struggle with this requirement.

CONCLUSIONS

The APE provides the opportunity for a valuable learning experience outside of the classroom.

This model may be applied to other disciplines, including medicine, to allow students to independently expand and build upon the knowledge gained in the classroom.

DISCLOSURES

The authors have no disclosures to report.