

Health Policy

NEWSLETTER

MSN/MPH Dual Degree Program to Be Offered at TJU

In its 2003 report, *Who Will Keep the Public Healthy? Educating the Public Health Professionals for the 21st Century*,¹ the Institute of Medicine (IOM) challenged educational institutions to fundamentally change the preparation and training of health care professionals in order to address the needs of diverse populations in a climate of healthcare reform. In addition, our nation's preventive health agenda for the next decade, *Healthy People 2020*, is on the horizon. It will emphasize assessment of major risks to health and wellness, changing public health priorities, and emerging technologies related to health preparedness and prevention.² Nursing has a legacy of involvement in disease prevention and health promotion activities dating back to the days of Florence Nightingale, who asserted that nurses providing preventive care required "more training" than those providing "sick" care.³

Against this backdrop, beginning in fall 2009, Thomas Jefferson University's Schools of Nursing and Population Health will collaborate to offer a joint graduate degree – Master of Science in Nursing (MSN) / Master of Public Health (MPH). The purpose of the MSN/MPH degree is to provide an opportunity for nurses to integrate advanced practice nursing with public health research and practice. Advanced practice nurses (APNs) are prepared at the MSN level and typically include: clinical nurse specialists, adult, pediatric, and subspecialty nurse practitioners, nurse anesthetists, community health nursing specialists and information systems nurse specialists. The MPH program augments traditional advanced practice nursing concepts with coursework in behavioral and social public health theory and application, biostatistics and data analysis, advanced epidemiology, environmental health, policy advocacy, and program planning and evaluation models.

Nursing leaders are calling for increased proficiency and involvement of nurses in addressing public and population health policies. For example, Hansen-Turton et al. evaluated the impact of master's prepared advanced practice nurses (APNs) in successfully advocating for recent nursing-related legislative reforms in

Pennsylvania.⁴ They urged nurses and APNs to continue to develop advocacy skills and speak with a unified voice in order to build strong relationships with policy makers, civic leaders, business leaders and policy advocates.

The MSN/MPH dual degree builds on the population-focused competencies required for health care and public health providers in the 21st century, with increased emphasis on leadership skills and developing and implementing population-based and community programs.^{5,6} A 2007 qualitative study by Robertson and Baldwin queried 10 APNs working in community-health positions and identified five defining characteristics of their roles: advocacy; involvement in policy setting at local and state levels; leadership centered on empowerment and a broad sphere of large-scale program planning; project management; and partnership building.⁵ Other researchers have noted that if public health activities are to continue to be a driving force behind the improvement of population health status, decisions regarding the allocation, management and the administration of public health resources must be driven by an informed, competent, public health workforce.⁷ As the largest group of health care providers, nurses and APNs must be capable of contributing to the discussion.

The combined MSN/MPH degree provides value-added education for APN graduate students who plan to seek leadership positions in public health agencies, serve as directors of community-based programs, participate in grant writing to support population and community-based programs, work in global health initiatives and / or become educators in academic institutions. This dual degree program will appeal to professional nurses and APN graduate students who have a strong interest in:

- * Community systems
- * Public health (local, national and international)
- * Health care reform legislation
- * Health care quality and safety
- * Health policy
- * Population health management

- * Injury control and prevention
- * Disease prevention and health promotion
- * Public health and community-based participatory research

MSN students are eligible to transfer 6 to 12 credits into the MPH program, depending upon the MSN track in which they are enrolled. In addition to the public health core areas of statistics, epidemiology, behavioral and social theories, environmental health, public health policy, and the US health care system, Jefferson's MPH program includes elective courses in cultural competency, health communication, GIS mapping, and global health. The MPH requires a community clerkship experience which can be combined with the MSN clerkship where appropriate, and a final Capstone project.

Both the MPH and MSN programs are available on a full-time or part-time basis. Typically, MSN/ MPH students take many of their nursing courses prior to beginning their public health studies. Interested students may apply to both schools simultaneously or they may apply to one school first and upon acceptance, apply to the second school. For further information about the MSN/MPH dual degree program, contact the Jefferson School of Nursing at 215-503-5090 or the School of Population Health at 215-503-0174. ■

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REFERENCES

1. Gebbie K, Rosenstock L, Hernandez LM, eds. *Who Will Keep the Public Healthy? Educating the Public Health Professionals for the 21st Century*. Institute of Medicine of the National Academies. Washington, DC: The National Academies Press;2003.
2. The Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2020. Phase I Report. *Healthy People*. October 28, 2008. <http://www.healthypeople.gov/hp2020/advisory/PhaseI/PhaseI.pdf>. Accessed July 23, 2009.
3. Pfetscher S, de Graff K, Tomey AM et al. Florence Nightingale. In: A Marriner-Tomey, MR Alligod, eds. *Nursing Theorists and Their Work*. 4th ed. St. Louis, MO: Mosby;1988:74.
4. Hansen-Turton T, Ritter A, Valdez B. Developing alliances. How advanced practice nurses became part of the prescription for Pennsylvania. *Policy, Politics, & Nursing*.2009;10(1):7-15.
5. Robertson JE, Baldwin, KB. Advanced practice role characteristics of the community/public health nurse specialist. *Clin Nur Spec*. 2007; 21(5):250-254.
6. Council on Linkages: Core Competencies for Public Health Professionals. Public Health Foundation Web site. <http://www.phf.org/link/core-061109.htm>. June 11, 2009. Accessed July 23, 2009.
7. Scutchfield, FD, Bhandari, MW, Lawhorn, NA, Ingram, RC. Public health performance. *Am J Pre Med*, 2009; 36(3): 266-272.