

BACKGROUND

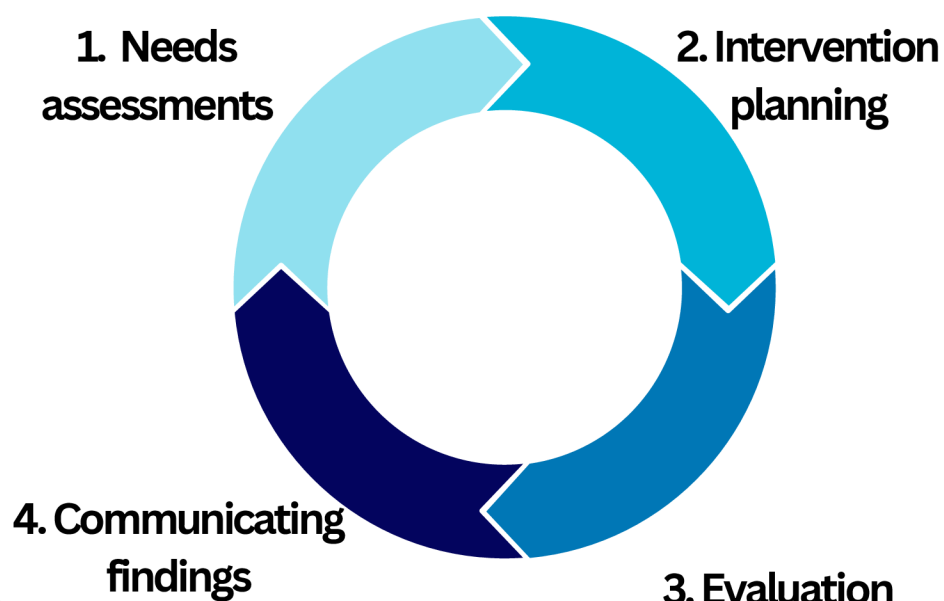
- Medical education often teaches public health conceptually, leaving graduates less prepared to apply prevention and population health principles in clinical practice.
- Public Health in Practice (PHiP) was developed to bridge this gap — connecting classroom learning with real-world population health action and system leadership.

AIM

- Strengthen undergraduate exposure to prevention, inequalities, and population health management.
- Integrate practice-based, interprofessional learning within medical education.
- Align learning outcomes with NHS, United Kingdom Public Health Register (UKPHR), and Faculty of Public Health (FPH) workforce priorities.
- Develop prevention-ready clinicians capable of applying public health principles in practice.

MODULE STRUCTURE

- Target group: Year 4 MBBS students
- Format: Hybrid workshops and community engagement sessions
- Led by: Advanced public health practitioners and consultants



ASSESSMENT

- Poster and presentation: Students identify a real-world health need through a health needs assessment, then design a logic model outlining an evidence-based intervention and evaluation plan, underpinned by core public health principles.
- This provides practical evidence aligned with UKPHR specialist registration expectations and supports the FPH 2025–2030 workforce strategy.

DISTINCTIVE FEATURES



Practice-based learning

Students apply public health concepts to live local priorities through system-informed case studies.



Co-delivery with practitioners

Sessions are led by AHPs and consultants, embedding ICS and local authority perspectives.



Community engagement

Students attend VCSE-led discussions to understand lived experiences and co-production in action.



Mutual benefit

Practitioners develop CPD and UKPHR portfolio evidence, while students gain authentic system experience.

ALIGNMENT



FACULTY OF
PUBLIC HEALTH



KEY OUTCOMES

- Strengthened learning in prevention, inequalities, and population health management.
- Authentic collaboration with local public health teams and communities.
- Enhanced practitioner development and CPD opportunities.
- Alignment with NHS and FPH workforce goals.
- Scalable national model for embedding prevention into medical curricula.