Public Health England

Protecting and improving the nation's health

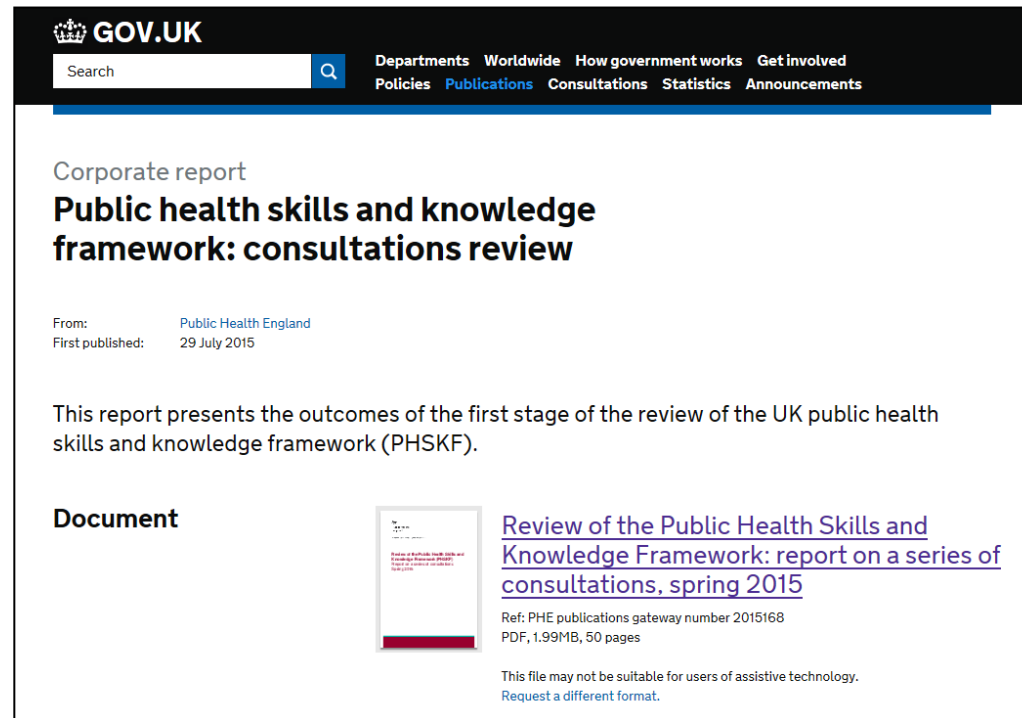# Revised Public Health Skills and Knowledge Framework (PHKSF)

Opportunity to COMMENT
December 2015

This presentation gives you -

- feedback on the consultation that took place earlier this year

- an outline of the work that we have done since

- an idea of what the revised framework looks like

- an opportunity to comment on what you see

The consultation report – Feb/Mar 2015

- this is a report on a series of workshops, and an on-line survey across the UK, where we asked the public health workforce what changes should be made to the Public Health Skills and Knowledge Framework (PHSKF)

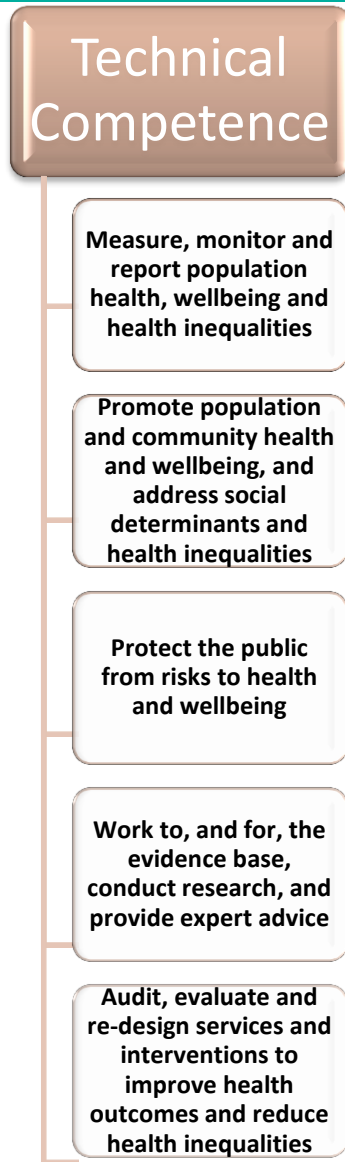Click <u>here</u> for report
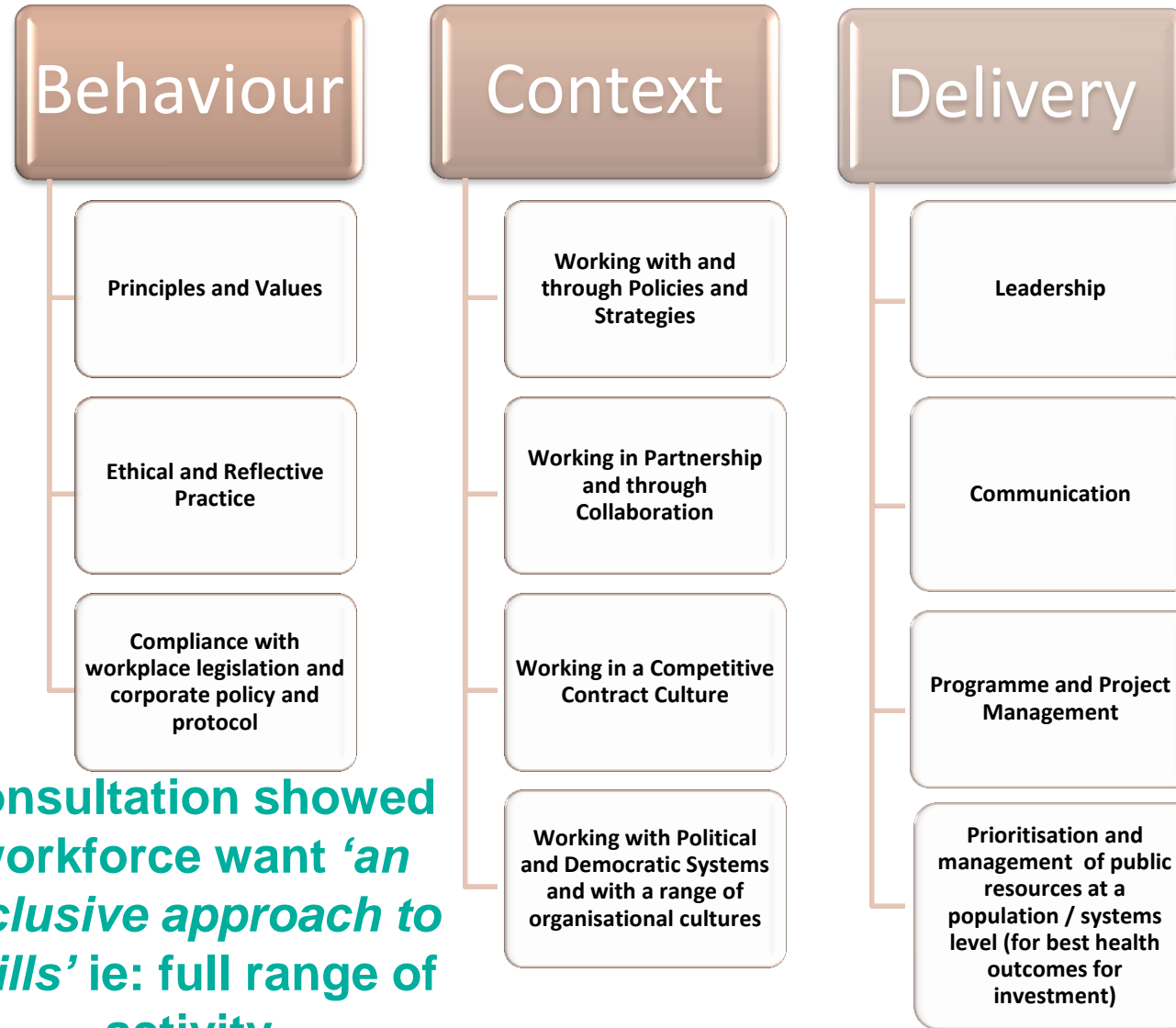(click 'open hyperlink')

What the workforce told us

The feedback we received from the workforce was that the Framework should:

- be simplified

- have fewer levels

- avoid jargon

- have fewer descriptors

- be better aligned with other levers

- include the full range of activity carried out by individuals

- heighten the profile of certain areas eg: health inequalities

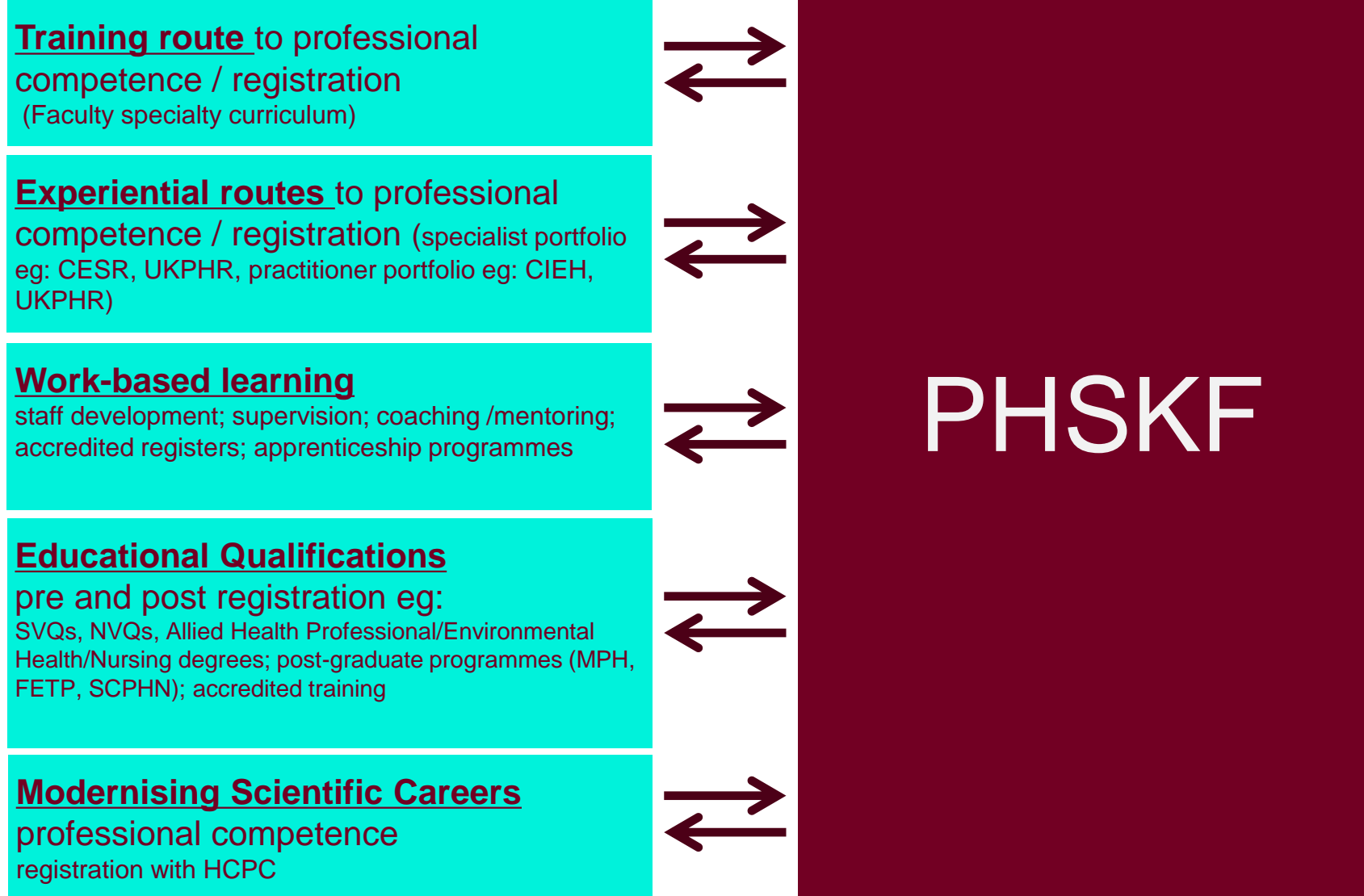| what we do	how we do it		
Technical Competence	**Behaviour**	**Context**	**Delivery**
Measure, monitor and report population health, wellbeing and health inequalities	Principles and Values	Working with and through Policies and Strategies	Leadership
Promote population and community health and wellbeing, and address social determinants and health inequalities	Ethical and Reflective Practice	Working in Partnership and through Collaboration	Communication
Protect the public from risks to health and wellbeing	Compliance with workplace legislation and corporate policy and protocol	Working in a Competitive Contract Culture	Programme and Project Management
Work to, and for, the evidence base, conduct research, and provide expert advice		Working with Political and Democratic Systems and with a range of organisational cultures	Prioritisation and management of public resources at a population / systems level (for best health outcomes for investment)
Audit, evaluate and re-design services and interventions to improve health outcomes and reduce health inequalities			

Consultation showed workforce want *'an inclusive approach to skills'* ie: full range of activity

Positioning of the new PHSKF (system alignment)

Training route to professional competence / registration
 (Faculty specialty curriculum)

Experiential routes to professional competence / registration (specialist portfolio eg: CESR, UKPHR, practitioner portfolio eg: CIEH, UKPHR)

Work-based learning
staff development; supervision; coaching /mentoring; accredited registers; apprenticeship programmes

Educational Qualifications
pre and post registration eg:
SVQs, NVQs, Allied Health Professional/Environmental Health/Nursing degrees; post-graduate programmes (MPH, FETP, SCPHN); accredited training

Modernising Scientific Careers
professional competence
registration with HCPC

PHSKF

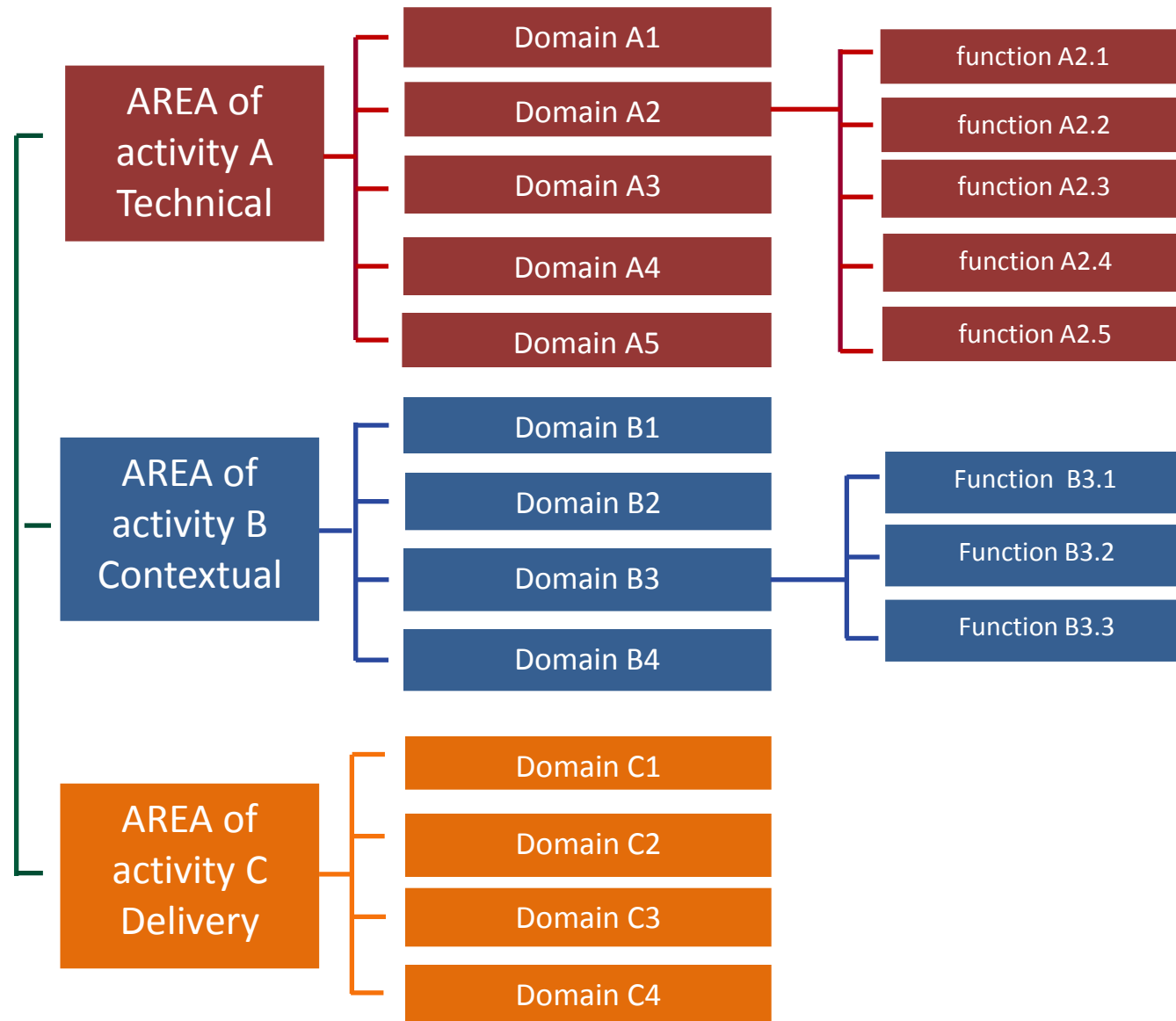# Framework to profile public health activity that -

- is **system-wide** and **at scale**

- is geared towards **integration**

- takes **responsibility for leadership** at all levels

- builds capacity through the **wider workforce**

- is **outcomes driven** including the reduction of **health inequalities**

- embeds **sustainable solutions**

- supports and enables **individuals and communities to have more control** over decisions that affect them and their health and wellbeing

- is considered to be **value for money** and cost-effective

proposed areas, domains and functions

these can be used for individuals to map themselves against (no-one is likely to be able to demonstrate them all, so the map acts as a 'menu'). The functional map can also be used by employers to plot job descriptions and identify required skill sets for the workforce

Principles guiding the organisation of the Framework

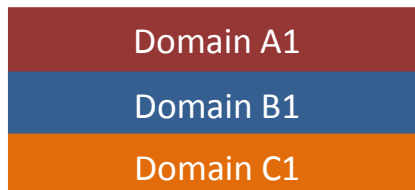| Purpose of the Framework | to provide an architecture to describe the activities and functions undertaken by the public health workforce |

| Overarching purpose for Public Health | Answers the question - *What does 'public health' do?* Eg: improves population health outcomes and reduces health inequalities between individuals, groups and communities, through coordinated system-wide action |

| AREA A | AREA B | AREA C | AREAS - show the different sections of activity ie: Technical, Contextual, and Delivery |

| Domain A1 | DOMAINS – describe a group of functions carried out by the workforce |
| Domain B1 |
| Domain C1 |

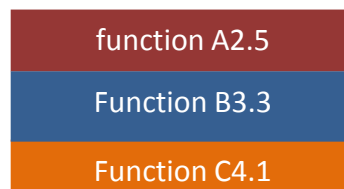| function A2.5 | FUNCTIONS – describe something that one person can do – can be attributable to an individual in their role. If the descriptor is too broad, or includes too many actions, then it may need to be split down |
| Function B3.3 |
| Function C4.1 |

Overall Purpose of Public Health

PUBLIC HEALTH

improves population health outcomes and reduces health inequalities between individuals, groups, and communities, through coordinated system-wide action

Domains of activity

A1
Measure, monitor and report population health and wellbeing, health risks, use of services, and health inequalities

A2
Promote population and community health and wellbeing, addressing the social determinants of health and health inequalities

A3
Protect the public from environmental hazards, communicable disease, and other health risks, while addressing inequalities in risk exposure and outcomes

A4
Work to, and for, the evidence base, conduct research, and provide expert advice

A5
Audit, evaluate and re-design services and interventions to improve health outcomes and reduce health inequalities

B1
Work with, and through, policies and strategies to improve health outcomes and reduce health inequalities

B2
Work collaboratively across the system to improve health outcomes and reduce health inequalities

B3
Work in a competitive contract culture to improve health outcomes and reduce health inequalities

B4
Work within political and democratic systems and with a wide range of organisational cultures to improve health outcomes and reduce health inequalities

C1
Provide leadership to drive improvement in health outcomes and the reduction of health inequalities

C2
Communicate to improve health outcomes and reduce health inequalities

C3
Design and manage programmes and projects to improve health and reduce inequalities

C4
Prioritise and manage resources at a population/ systems level to acheive equitable health outcomes an d return on investment

AREA A: Technical

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Domain A1

Measure, monitor and report population health and wellbeing, health risks, use of services, and health inequalities

A1.1 source, obtain and organise data/information

A1.2 Interpret and present data and information

A1.3 manage data and information

A1.4 Forecast data needs and develop data capture methods

A1.5 Assess and manage risks associated with using and sharing data and information, data security and intellectual property

A1.6 Collate and analyse data to produce intelligence that informs decision making, planning, implementation and evaluation

AREA A: Technical

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Domain A2

Promote population and community health and wellbeing, addressing the social determinants of health and health inequalities

A2.1 Influence community action by <u>empowering communities</u>, using participatory, engagement and asset-based approaches

A2.2 <u>Advocate</u> for public health principles and action to improve the determinants of health and wellbeing

A2.3 Design universal provision and interventions while <u>responding proportionately</u> to levels of need within the community

A2.4 Implement <u>sustainable</u> and multi-facetted programmes, interventions or services across agencies to address complex problems

A2.5 Facilitate <u>change</u> (behavioural and/or cultural) in organisations, communities and individuals

AREA A: Technical

PUBLIC HEALTH

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Domain A3

Protect the public from environmental hazards, communicable disease, and other health risks, while addressing inequalities in risk exposure and outcomes

A3.1 Assess and manage international, national or local hazards and risks to health

A3.2 Assess and manage outbreaks, incidents and single cases of contamination and communicable disease, locally and across boundaries

A3.3 Target and implement nationwide interventions designed to off-set ill-health (eg: screening, immunisation)

A3.4 Plan for emergencies and develop national or local resilience to a range of potential threats

A3.5 Mitigate risks to the public's health using different approaches such as legislation, licensing, policy, education, fiscal measures

AREA A: Technical

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Domain A4

Work to, and for, the evidence base, conduct research, and provide expert advice

A4.1 Access and appraise evidence gained through systematic methods and through engagement with the wider research community

A4.2 Critique published and un-published research, synthesise the evidence and draw appropriate conclusions

A4.3 Design and conduct public health research based on current best practice and involving practitioners and the public

A4.4 Report and advise on the implications of the evidence base and its implementation for the most effective practice and the delivery of value for money

A4.5 Identify gaps in the current evidence base that may be addressed through research

AREA A: Technical

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Domain A5

Audit, evaluate and re-design services and interventions to improve health outcomes and reduce health inequalities

A5.1 Conduct economic analysis of health services and interventions against health outcomes, inequalities in health, and return on investment

A5.2 Appraise new technologies, therapies, procedures and interventions and their implications for health inequalities and service development

A5.3 Engage in stakeholder co-design and co-production, to develop integrated and equitable person-centred services

A5.4 Develop and implement protocols and procedures, integrating national 'best practice' guidance into local delivery systems

A5.5 Quality assure, audit, and evaluate services and interventions and contribute to the evidence base

AREA B: Context

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Domain B1

Work with, and through, policies and strategies to improve health outcomes and reduce health inequalities

B1.1 Appraise and advise on global, national or local strategies in relation to the public's health and health inequalities

B1.2 Assess the impact of health and other policies and strategies on the public's health and health inequalities

B1.3 Develop and implement action plans, with, and for specific groups and communities, to deliver outcomes identified in strategies and policies

B1.4 Influence or lead on policy development and strategic planning across organisations, to identify opportunities to promote health, improve access, and reduce inequalities in response to changing health needs and risks

B1.5 Monitor the progress and outcomes of strategy and policy implementation

AREA B: Context

PUBLIC HEALTH

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Domain B2

Work collaboratively across the system to improve health outcomes and reduce health inequalities

B2.1 Identify and influence key stakeholders to engage them with health and wellbeing outcomes and health inequalities

B2.2 Build constructive relationships across sectors, settings and functions, to create environments that support health and wellbeing

B2.3 Work across agencies to build shared leadership and integrate resources to achieve change with, and for individuals, groups and communities

B2.4 Collaborate with groups and communities to build community resilience, empowering them to take greater control over factors that impact on equality of opportunity and health outcomes

AREA B: Context

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Domain B3

Work in a competitive contract culture to improve health outcomes and reduce health inequalities

B3.1 Set commissioning priorities, understanding the economic case for investment and securing the best value for money

B3.2 Identify key performance indicators that show improved health outcomes, reduced inequalities and/or the impact on factors that determine health and wellbeing

B3.3 Commission services and interventions in ways that involve end users in decision making and support community interests

B3.4 Integrate commissioning with other groups and organisations to provide person-centred interventions and services that improve equity of access

B3.5 Provide interventions and services, working constructively with the commissioning authority to support monitoring processes and adaptable delivery

AREA B: Context

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Domain B4

Work within political and democratic systems and with a wide range of organisational cultures to improve health outcomes and reduce health inequalities

B4.1 Support democratic processes and use them to promote health and wellbeing and reduce inequalities

B4.2 Operate within the administration and reporting processes that underpin political and democratic systems

B4.3 Respond constructively to political tensions and encourage a focus on the interests of the public's health

B4.4 Help individuals and communities to have more control over decisions that affect them and promote health equity, equality and justice

B4.5 Work to understand, and help others to understand, decision-making and accountability in a political context

AREA C: Delivery

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Domain C1

Provide leadership to drive improvement in health outcomes and the reduction of health inequalities

C1.1 Act with integrity, consistency and purpose, and continue one's own personal development (self)

C1.2 Work with others, build relationships, encourage contribution and sustain commitment to deliver shared objectives (others)

C1.3 Adapt to change, manage uncertainty, solve problems, and align clear goals and lines of accountability (change)

C1.1 Establish a network of leaders and followers engaged in improving health outcomes and reducing inequalities across the system (system)

C1.5 Provide vision, shape thinking, inspire shared purpose, and influence the contributions of others in the system to improve health and address inequalities (direction)

AREA C: Delivery

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Domain C2

Communicate with others to improve health outcomes and reduce inequalities

C2.1 Manage public perception and convey key messages using a range of media processes

C2.2 Communicate sometimes complex information and concepts (including health outcomes, inequalities and life expectancy) to a variety of audiences using different methods

C2.3 Engage in dialogue with groups and communities to improve health literacy and reduce inequalities using a range of tools and technologies

C2.4 Apply the principles of social marketing in a range of settings and communities to reach specific groups and communities with enabling information and ideas

C2.5 Consult with individuals, groups and communities likely to be affected by planned intervention or change

AREA C: Delivery

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Domain C3

Design and manage programmes and projects to improve health and reduce inequalities

C3.1 Identify stakeholders, agree requirements and project schedule(s) and identify measures for outputs/outcomes (Plan)

C3.2 Manage project schedule(s), resources, budget and scope, accommodating changes within a robust change control process (Do)

C3.3 Track project progress against schedule(s) and regularly review quality assurance, risks, and opportunities, to realise benefits and outcomes (Review)

C3.4 Seek independent assurance for plans and processes within organisational governance frameworks (Governance)

AREA C: Delivery

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Domain C4

Prioritise and manage resources at a population/ systems level to acheive equitable health outcomes and return on investment

C4.1 Identify, negotiate and secure sources of funding

C4.2 Align and deploy resources towards clear strategic goals and objectives

C4.3 Manage financial controls within one's own organisation, area of work, and/or across partnerships, alliances and networks

C4.4 Develop workforce capacity, and mobilise the system-wide paid and volunteer workforce, to deliver public health priorities at scale

C4.5 Design, implement, and/or quality assure education and training programmes, to build a skilled and competent workforce

C4.6 Adapt capability by providing ongoing learning and development systems for the workforce

C4.1 Assess, negotiate and secure sources of funding

A2.1 Influence community action by empowering communities, using participatory, engagement and asset-based approaches

A2.4 Facilitate change (behavioural and/or cultural) in organisations, communities and individuals to promote health

B1.2 Develop and implement action plans, with, and for specific groups and communities, to deliver outcomes identified in strategies and policies

Community-based worker

C2.3 Engage in dialogue with groups and communities to improve health literacy and reduce inequalities using a range of tools

A1.1 source, obtain and organise data/information

B2.2 Build constructive relationships across sectors and functions, to create environments that support health and wellbeing

B4.3 Help individuals and communities to have more control over decisions that affect them and promote health equity, equality and justice

C1.1 Act with integrity, consistency and purpose, and continue one's own personal development

Please read through these slides and feedback on the following questions:

- Has the framework missed out any aspects of public health practice?

- does each area adequately describe what people do in public health?

- can you see yourself in this framework – could you demonstrate your role from this 'menu' of activities?

Feedback via:

- the select survey questionnaire:

https://surveys.phe.org.uk/PHSKFreview

- or send general comments to:

sp-phskf@phe.gov.uk