2014 Core Competencies for Public Health Professionals

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Overview

What are the Core Competencies for Public Health Professionals and how are they being used?

How have they changed?

Is there anyone out there who can help with their use?!?!
Council on Linkages Between Academia and Public Health Practice

To improve public health practice, education, and research by:

- Fostering, coordinating, and monitoring links among academia and the public health and healthcare community;
- Developing and advancing innovative strategies to build and strengthen public health infrastructure; and
- Creating a process for continuing public health education throughout one’s career.

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20 National Public Health Organizations:
- American Association of Colleges of Nursing
- American College of Preventive Medicine
- American Public Health Association
- Association for Prevention Teaching and Research
- Association of Accredited Public Health Programs
- Association of Public Health Laboratories
- Association of Schools and Programs of Public Health
- Association of State and Territorial Health Officials
- Association of University Programs in Health Administration
- Centers for Disease Control and Prevention
- Community-Campus Partnerships for Health
- Health Resources and Services Administration
- National Association of County and City Health Officials
- National Association of Local Boards of Health
- National Environmental Health Association
- National Library of Medicine
- National Network of Public Health Institutes
- National Public Health Leadership Development Network
- Quad Council of Public Health Nursing Organizations
- Society for Public Health Education

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We improve the public’s health by strengthening the quality and performance of public health practice

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Core Competencies for Public Health Professionals

- Are a set of skills desirable for the broad practice of public health

- Reflect characteristics that staff of public health organizations may want to possess as they work to protect and promote health in the community

- Are designed to serve as a starting point for practice and academic organizations to understand, assess, and meet training and workforce needs
Core Competencies for Public Health Professionals

8 Domains:
- Analytical/Assessment Skills
- Policy Development/Program Planning Skills
- Communication Skills
- Cultural Competency Skills
- Community Dimensions of Practice Skills
- Public Health Sciences Skills
- Financial Planning and Management Skills
- Leadership and Systems Thinking Skills

3 Tiers:
- Tier 1 – Front Line Staff/Entry Level
- Tier 2 – Program Management/Supervisory Level
- Tier 3 – Senior Management/Executive Level
Who Uses the Core Competencies?

- ~60% of State Health Departments (ASTHO, 2014)
- ~26% of Local Health Departments (NACCHO, 2013)
- >90% of Academic Public Health Programs (Council on Linkages, 2006)

Core Competencies are also used by:
- CDC
- HRSA’s Public Health Training Centers
- TRAIN affiliates
- Healthy People 2020
- Public Health Accreditation Board
- Others…….
Uses of the Core Competencies

- Job descriptions
- Performance objectives
- Performance reviews and evaluations
- Workforce competency/needs assessments
- Workforce development plans
- Training plans
- Course review and development
- Discipline-specific competencies
- Preparing for accreditation – PHAB Standards and Measures Domain 8
PHAB Accreditation

Version 1.0

Standard 8.2: Assess staff competencies and address gaps by enabling organizational and individual training and development opportunities

Measure 8.2.1 A: Maintain, implement and assess the health department workforce development plan that addresses the training needs of the staff and the development of core competencies

Version 1.5

Standard 8.2: Ensure a competent workforce through the assessment of staff competencies, the provision of individual training and professional development, and the provision of a supportive work environment

Measure 8.2.1 A: Workforce development strategies
Brief History of the Core Competencies

- April 2001: Original set adopted
  - Specified skill levels
  - Difficult to measure – intentional
  - Decision to revisit every 3 years
  - Widespread use
  - Demonstrated benefits and validity

- May 2010: 1st revision adopted
  - Three tiers
  - More measurable
  - Turned focus to tool development

- June 2014: 2nd revision adopted
  - Addresses new concepts – accreditation and health reform
  - Clarifies and simplifies many competencies
Core Competencies Review and Revision Process

- **March 2013**: Council on Linkages votes to initiate review process
- **March 2013**: Public comment period begins
- **Sept 2013**: Council on Linkages votes to initiate revision process based on initial feedback
- **Dec 2013**: Public comment period ends
- **Jan 2014**: Core Competencies Workgroup begins revisions
- **Jan – May**: Feedback and drafts shared publicly
- **June 2014**: Council on Linkages unanimously adopts revised Core Competencies
Feedback Received – Over 1,000 Comments

➤ Retain 8 domains
➤ Clarify and simply individual competencies
➤ Assure each competency is truly only one competency
➤ Add new concepts – health reform, accreditation, social marketing
➤ Add more examples
➤ Reorder competencies in a more logical order
➤ Don’t move competencies from one domain to another
➤ Add another tier
➤ Help with use of the Core Competencies
Clarify and Simplify

2010: Applies communication and group dynamic strategies (e.g., principled negotiation, conflict resolution, active listening, risk communication) in interactions with individuals and groups (3B6)

2014: Facilitates communication among individuals, groups, and organizations (3B7)
Add More E.G.s

2010: Negotiates for the use of community assets and resources (5B8)

2014: Explains the ways assets and resources (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs) can be used to improve health in a community (5B9)
Reduce Jargon

2010: Incorporates systems thinking into public health practice (8B2)

2014: Explains the ways public health, health care, and other organizations can work together or individually to impact the health of a community (8B3)
Add New Concepts

2010:

2014: Advocates for the role of public health in providing population health services (8B10)

2014: Ensures development of a state/Tribal/community health improvement plan (e.g., describing measurable outcomes, determining needed policy changes, identifying parties responsible for implementation) (2C1)
Expand on Concepts

▷ **2010:** Develops mechanisms to monitor and evaluate programs for their effectiveness and quality (2B9)

▷ **2014:** Explains the importance of evaluations for improving policies, programs, and services (2B10)

Evaluates policies, programs, and services (e.g., outputs, outcomes, processes, procedures, return on investment) (2B11)

Implements strategies for continuous quality improvement (2B12)
Other Decisions

- Kept 8 domains – number and topic areas
- Reordered individual competencies
- Competencies were not moved from one domain to another
- Greater assurance that each competency only represents one competency
- Development of an additional tier – under discussion
- Tools are being revised and developed
Resources and Tools to Support Use

Existing:

- Crosswalk of 2010 and 2014 Core Competencies
- Self-assessment instruments
- Job descriptions
- Workforce development plans
- Examples of use

Coming Soon:

- Revised prioritization sequence
- Checklist for course providers
- FAQs
- Others?
You’ve Heard from Us... Now It’s Your Turn!

1. How are you or your organization using the Core Competencies?

2. What questions do you have about the revised Core Competencies?

3. What would help you or your organization use the Core Competencies?
Still Have Questions?

► Upcoming Webinar:
  ► ASPPH – January 28th, 2-3 pm EST

► Stay Informed:
  ► Council on Linkages Update – jnichols@phf.org
  ► PHF E-News – www.phf.org/AboutUs/Pages/Email_Newsletters.aspx

► Email Questions: kamos@phf.org
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Furthering academic/practice collaboration to assure a well-trained, competent workforce and strong, evidence-based public health infrastructure
- Council on Linkages Between Academia and Public Health Practice
- Core Competencies for Public Health Professionals
- Academic Health Department Learning Community

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