



Crosswalk of the Strategic Skills for the Governmental Public Health Workforce, Core Competencies for Public Health Professionals, and Competencies for Population Health Professionals: Methodology

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This crosswalk maps the [Core Competencies for Public Health Professionals](#) (Core Competencies) and the [Competencies for Population Health Professionals](#) (Population Health Competencies) to the [Strategic Skills for the Governmental Public Workforce](#) (Strategic Skills). These three competency/skill sets provide structure and guidance for workforce development within state, tribal, local, and territorial health departments.

Competency/Skills Sets

The Core Competencies are developed by the Council on Linkages Between Academia and Public Health Practice and are a consensus set of skills for the broad practice of public health, as defined by the Essential Public Health Services. They represent foundational skills desirable for professionals engaging in the practice, education, and research of public health. The Core Competencies were first released in 2001; the most recent revision of this competency set occurred in 2014. The June 2014 version of the Core Competencies was used in this crosswalk.

The Population Health Competencies are a set of skills desirable for population health professionals. These competencies are based on the Core Competencies and are primarily designed for hospital, health system, public health, healthcare, and other professionals engaged in assessment of population health needs and development, delivery, and improvement of population health programs, services, and practices. The Population Health Competencies were released by the Public Health Foundation (PHF) in March 2019.

The Strategic Skills are a set of broad skills for the governmental public health workforce designed to complement specialized, discipline-specific skills and knowledge. “These strategic skills are consistent with the consensus set of Core Competencies for Public Health Professionals and identify training priorities within these competencies where training is needed” (de Beaumont Foundation, [Building Skills for a More Strategic Public Health Workforce: A Call to Action](#), 2017, page 14). The Strategic Skills were released by the de Beaumont Foundation and its National Consortium for Public Health Workforce Development in July 2017.

Crosswalk Development

The crosswalk illustrates connections between the Strategic Skills, Core Competencies, and Population Health Competencies and aims to show the competencies needed to perform a specific Strategic Skill. PHF completed this competency/skill mapping, with input from the Region 2 Public Health Training Center (PHTC) and the de Beaumont Foundation, from February through June 2020. The following steps were used for developing the crosswalk:



- The list of Strategic Skills and their definitions were extracted from the *Building Skills for a More Strategic Public Health Workforce: A Call to Action* report from the de Beaumont Foundation (the definitions are found in Appendix II). The relevant definitions were combined with each Strategic Skill, reviewed, and broken down into their component elements. This was done in order to separate out the individual concepts contained within a Strategic Skill, so that competencies could be mapped to the individual concepts. PHF shared the breakdown of the Strategic Skills with the Region 2 PHTC and the de Beaumont Foundation for feedback before proceeding with the competency mapping.
- The Core Competencies were mapped to each component element of the Strategic Skills. In doing this, the aim was to indicate the Core Competencies needed to do a particular Strategic Skill. Tier 2 of the Core Competencies was used for the mapping, with competencies drawn from Tier 3 only when no equivalent competency existed at the Tier 2 level. An initial mapping was completed, reviewed, and revised.
- The mapping was compared to the [Open Source Competency Map for Public Health Strategic Skills](#) developed by the PHTCs that mapped the first three Strategic Skills and the Core Competencies, and the mapping was revised.
- The mapping was reviewed, component by component, challenging assumptions about inclusion or exclusion of specific competencies. After a second review, if the competency was determined to be appropriately mapped, it remained in the crosswalk. For competencies added during this second review, assumptions about those competencies were challenged during the Population Health Competencies mapping process.
- The Population Health Competencies were mapped to the Core Competencies and to the Strategic Skills. In doing this, the aim was to indicate the Population Health Competencies needed to do a particular Strategic Skill. An initial mapping was completed.
- PHF shared the draft mapping of the Core Competencies and the initial draft mapping of the Population Health Competencies with the Region 2 PHTC and the de Beaumont Foundation for feedback.
- The initial Population Health Competencies mapping was reviewed and revised, using a process similar to that noted above for the Core Competencies mapping.
- The Core Competencies mapping was reviewed and revised a third time based on the mapping of the Population Health Competencies to the Strategic Skills.
- The Core Competencies and Population Health Competencies were reviewed an additional time to determine the competencies that had not been mapped to any Strategic Skills. Unmapped competencies were noted at the end of the crosswalk.
- The lists of competencies in the crosswalk were organized. For each Strategic Skill component, the relevant competencies from the Core Competencies were listed in the order that they appear in the Core Competencies. Competencies that reflect the same or similar concepts in the Core Competencies and Population Health Competencies were listed next to each other. Because competencies covering the same or similar concepts in the Core Competencies and Population Health Competencies are not necessarily in the same order in the two competency sets, the competencies from the Population Health Competencies included in the crosswalk are not necessarily in the same order as they appear in the Population Health Competencies.



- The crosswalk was reviewed one final time, component by component, to address any outstanding questions or concerns and again challenge assumptions about inclusion or exclusion of specific competencies.

The resulting crosswalk repeated individual Core Competencies and Population Health Competencies multiple times due to the mapping process where all relevant competencies were noted for each component of the eight Strategic Skills. This comprehensive crosswalk was more than 60 pages.

Once this comprehensive crosswalk was completed, a consolidated version was developed that recombined the component elements of the Strategic Skills and eliminated duplicate competencies that had been mapped multiple times to individual components of the Strategic Skills.

Limitations

This crosswalk reflects the versions of the Strategic Skills, Core Competencies, and Population Health Competencies available at the time the crosswalk was created. As these competency/skill sets are revised, the crosswalk should be updated to reflect the changes to the competency/skill sets.

In developing the crosswalk, where definitions or intent were not clear, interpretations were made about the definitions and intent of the Strategic Skills, Core Competencies, and Population Health Competencies. At times, the PHF team noted specific interpretations to clarify a component element of a Strategic Skill. Different interpretations of intent and definitions than those made by the PHF team could have led to different mapping.

These three competency/skill sets contain related, but not identical, concepts. Although the competencies and Strategic Skills relate to each other, there often are differences in the specific focus and scope between the various competency/skill statements. As the Core Competencies and Population Health Competencies were mapped to the Strategic Skills, rather than the reverse, the crosswalk is meant to reflect the competencies needed to do a Strategic Skill. Depending on the specific Strategic Skill, some elements of a competency that is mapped to that Strategic Skill may not be directly relevant or additional competencies may be needed for an individual to successfully perform a Strategic Skill. Therefore, if training is developed related to a specific competency, but that training only addresses part of the competency, it may provide the knowledge needed to perform the Strategic Skill or it may not. In addition, being able to perform a Strategic Skill does not necessarily mean that an individual has attained all of the competencies that are mapped to that Strategic Skill.

Additional Information

This crosswalk was developed in early 2020 by PHF in collaboration with the Region 2 PHTC at the Columbia University Mailman School of Public Health and in discussion with the de Beaumont Foundation. Questions or feedback can be shared with PHF at competencies@phf.org.

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