

## **Core Competencies for Public Health Professionals**

Adopted: May 2010 <u>Preliminary Draft Revisions: April 2014</u> <u>(with edits in Track Changes)</u>

	Analytical/Assessment Skills
	Tier 2 (Mid Tier) <sup>2</sup>
	escribes the characteristics factors impacting of a population-basedthe health of a communityproblem (e.g., equity, income, educationsocial terminants, environment) [formerly 1B2]
1 <del>B3. Ge</del>	pherates variables that measure public health conditions [concept integrated into other competencies]
	ferencesUses sources of public population health and related data and information (e.g., vital statistics, electronic health records) to termine community health status and community assets [formerly 1B5]
1B <u>3</u> 6. Exa	amines the accuracy, validity, and reliabilityintegrity and comparability of data [formerly 1B6]
<u>1B4. Exar</u>	mines the comparability of data [new]
1B <u>5</u> 7. Ide	entifies gaps in data sources [formerly 1B7]
1B <u>6</u> 4. Us	es methods and instruments tofer collecting accurate, valid, and reliable quantitative and qualitative data [formerly 1B4]
1B <u>7</u> 8. Em	nploys ethical principles in the collectingen, maintainingenance, usinge, and disseminatingen of data and information [formerly 1B8]
1B <u>8</u> 11. Us	es information technology to collect, store, and retrieve data [formerly 1B11]
	alyzes quantitative and qualitative data (e.g., health needs, community assets, community input, vital statistics, electronic health records) rmerly 1B10]
1B <u>10</u> 9. Inte	erprets quantitative and qualitative data [formerly 1B9]
tol	sesses the health status of populations and their related determinants <u>factors contributing to</u> of health and illness (e.g., factors contributing health promotion and disease prevention; the quality, availability, accessibility to, and use of health services; access to affordable housing) determine community health needs [formerly 1B1]
1B12. Dete	ermines assets and resources to meet community health needs [new]
1B <u>13<del>12</del>.</u>	Uses data to address scientific, political, ethical, and social public health issues [formerly 1B12]



Policy Development/Program Planning Skills	
Tier 2	
2B1. Uses community health needs assessment to develop community health improvement plan [new]	
2B <u>2</u> 4. Analyzes information (e.g., current data and trends; proposed federal, state, and local legislation) relevant to determine needs public health policies and programsy issues (e.g., secondhand smoking policies, data use policies, HR policies, immunization part safety programs) [formerly 2B1]	
2B32. Analyzes Develops policy options for specific public health policies and programs [formerly 2B2]	
2B <u>43</u> . Determines the feasibility and expected outcomespotential implications of specific policy and program options (e.g., health, fise administrative, legal, ethical, social, political) [formerly 2B3]	<del>cal,</del>
2B4. Describes the implications of policy options (e.g., health, fiscal, administrative, legal, ethical, social, political) [concept integrate competencies]	ed into other
2B5. Recommends specific policies and programs [new]	
2B6. Establishes teams to achieve programmatic and organizational goals [new]	
2B5. Uses decision analysis for policy development and program planning [concept integrated into other competencies]	
2B <u>7</u> 6. Manages implementation of policies public healthand programs consistent with public health laws and regulations [formerly 2B	<u>36]</u>
2B7. Develops plans to implement policies and programs [concept integrated into other competencies]	
2B8. Develops policies for organizational plans, structures, and programs [concept integrated into other competencies]	
2B8. Describes how evaluation results will be used to improve policies and programs [new]	
2B9. Develops Determines mechanisms strategies to monitor and evaluate effectiveness and quality of policies and programs for th effectiveness and quality	neir
2B10. Manages implementation of policy and program evaluations [new]	

Policy Development/Program Planning Skills
Tier 2
2B <u>1140</u> . Incorporates Uses public health informatics practices (e.g.,) to develop, implement, evaluate, and improve policies and programs (e.g., use of data and information technology standards across the agency where applicable, and use of standard software development life cycle principles when developing new IT applications) [formerly 2B10]
2B <u>12</u> 11. Develops strategies for continuous quality improvement [formerly 2B11]
2B13. Identifies current and projected fiscal, social, political, and community health trends related to policies and programs [new]
2B14. Implements organizational strategic plan [new]



	Communication Skills
Tier 2	
3B1.	Assesses the health-literacy of populations served (e.g., overall literacy, ability to understand and use available health information, use of social media)
<u>3B2. A</u>	ddresses the literacy levels of populations served when communicating [new]
3B <mark>3</mark> 2.	Communicates in writing and orally, in person, and through electronic means, with linguistic and cultural proficiency [formerly 3B2]
3B <u>4</u> 3.	Solicits input from individuals and organizations (e.g., chambers of commerce, religious organizations, schools, social service organizations, hospitals, government, community-based organizations, various populations served) [formerly 3B3]
3B <u>5</u> 4.	Determines Uses a variety of approaches to use for disseminatinge public health information (e.g., social networksmedia, medianewspapers, newsletters, journals-blogs, town hall meetings, libraries, neighborhood gatherings) [formerly 3B4]
<u>3B6. C</u>	ommunicates to influence human behavior in order to improve health or benefit society (e.g., uses social marketing methods) [new]
3B <u>7</u> 5.	Presents demographic, statistical, programmatic, and scientific information for use byto professional and lay audiences (e.g., demographics, statistics, evidence-based strategies) [formerly 3B5]
3B <u>8</u> 6.	Applies Facilitates communication and group dynamic strategies (e.g., principled negotiation, conflict resolution, active listening, risk communication in interactions with between individuals, and groups, and organizations [formerly 3B6]
<u>3B9. D</u>	escribes how governmental public health, health care, and other partners improve population health [new]



	Cultural Competency Skills	
	Tier 2	
<u>4B1.</u> ₽	xplains-Describes the dynamic forces that contribute to cultural diversity Describes the diversity of individuals and populations served (e.g., language, culture, values, socioeconomic status, education, race, gender, age, ethnicity, sexual orientation, profession, religious affiliation, mental and physical abilities) [formerly 4B4]	
4B <u>2</u> 4.	Incorporates strategies Considers the diversity of individuals and populations served when for interacting with persons from diverse backgrounds (e.g., cultural, socioeconomic, educational, racial, gender, age, ethnic, sexual orientation, professional, religious affiliation, mental and physical capabilities)[formerly 4B1]	
4B <u>3</u> 2.	Considers how the diversity of individuals and populations served (e.g., historical and cultural experiences, socioeconomic backgrounds, languages, traditions, beliefs, practices) the role of cultural, social, and behavioral factors inimpacts the accessibility, availability, acceptability, and delivery of public-population health services [formerly 4B2]	
4B <u>4</u> 3.	Responds Addresses the diversity of individuals and populations served when providing population health services to diverse needs that are the result of cultural differences [formerly 4B3]	
<u>4B5<del>6</del>.</u> /	Assesses <u>how policies and<del>public health</del> programs address the diversity of individuals and populations served for their cultural competence</u> (e.g. <u>, customer satisfaction surveys, use of services by the target population</u> ) [formerly 4B6]	
4B <u>6</u> 5.	Describes the need for a diverse public health workforce [formerly 4B5]	



	Community Dimensions of Practice Skills	
	Tier 2	
<u>5B1.</u> Di	stinguishes the role <u>s and responsibilities</u> of governmental and non-governmental organizations in the delivery of providing community population health services (e.g., federal agencies; state, tribal, local, and territorial health departments; non-profit organizations; community- based organizations) [formerly 5B7]	
5B <u>2</u> 4.	Assesses Identifies existing community linkages and relationships and partnerships (e.g., hospitals, community health centers, schools, community-based organizations)among multiple factors (or determinants) affecting that impact health within a community [formerly 5B1]	
<u>5B3. Ide</u>	entifies relationships and partnerships that may be needed to improve health within a community (e.g., the interplay between individual, relationship, community, and social factors —te[-Social-Ecological Model]) [new]	
5B <u>4</u> 3.	Establishes linkages relationships and partnerships within key stakeholders a community (e.g., partners serving same populations, academic institutions, policy makers, customers/clients) [formerly 5B3]	
5B <u>5</u> 4.	Facilitates <u>discussion and collaboration <del>and among</del> partners<del>hips</del> to <u>improve health within a communityensure participation of key</u> stakeholders [formerly 5B4]</u>	
5B <u>6</u> 5.	Maintains and strengthens partnerships with key stakeholders to improve health within a community (e.g., coalition building) [formerly 5B5]	
5B <u>7</u> 6.	Uses group processes to advanceEngages community members (e.g., focus groups, talking circles, mobilizing through planning partnerships)involvement to improve health within a community (e.g., input in developing and implementing community health assessments and improvement plans, feedback about programs and services) [formerly 5B6]	
5B <u>8</u> 9.	Uses community input when developing, implementing, and evaluating public health policies and programs [formerly 5B9]	
<u>5B9. Us</u>	es community input to improve policies and programs [new]	
<u>5B10</u> 8.	Negotiates-Illustrates howfor the use of community assets and resources (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions) can be used to improve health within a community [formerly 5B8]	
<u>5B11<del>2</del>.</u>	Collaborates in community-based participatory research efforts [formerly 5B2]	
5B1 <u>2</u> 0.	Promotes public health policies, programs, and resources that improve health within a community (e.g., explains information to the community through community meetings) [formerly 5B10]	



	Public Health Sciences Skills
	Tier 2
6B1.	Discusses the scientific foundation of the field of public health
6B2.	Distinguishes prominent events in the history of the public health profession (e.g., smallpox eradication, development of vaccinations, infectious disease control, safe drinking water, emphasis on hygiene and hand washing, access to health care for people with disabilities)
6B3.	Relates public health science-skills (including, but not limited to, biostatistics, epidemiology, environmental health sciences, health services administration, and social and behavioral health sciences) to the three Core Public Health Functions and Ten-10 Essential Services of Public Health Services
6B4.	Applies the basic public health sciences (including, but not limited to, biostatistics, epidemiology, environmental health sciences, health sciences administration, and social and behavioral health sciences) to public health policies and programs
<u>6B5<del>6</del>.</u>	Retrieves scientific evidence (e.g., research findings, case reports, community surveys) from a variety of text-print and electronic sources (e.g., PubMed, Journal of Public Health Management and Practice, Morbidity and Mortality Weekly Report, The World Health Report) to support decision-making [formerly 6B6]
6B <u>6</u> 5.	Conducts a comprehensive <u>Rreviews</u> of the scientific evidence related to a public health issue, concern, or interventionin developing, implementing, and evaluating policies and programs [formerly 6B5]
6B7.	Determines the limitations of research findingsevidence (e.g., data accuracy, validity, reliability, sample size, bias, limitations of data sources, generalizability sample size, subject selection, importance of observations and interrelationships)
6B8.	Determines-Identifies the laws, regulations, policies, and procedures for the ethical conduct of research (e.g., patient confidentiality, protection of human subjects-processes, Americans with Disabilities Act)
6B9.	Contributes to building the scientific evidence base of public health (e.g., Academic Health Departments, Practice-Based Research Networks)
<u>6B10.</u>	Establishes partnerships between practice and academic organizations to improve education, research, and the delivery of population health services [new]



	Financial Planning and Management Skills
	Tier 2
7B1.	Interprets how the interrelationships of local, state, and federal public health, and health care, and other organizations that influence health work with one another to provide population health services and programssystems for public health program management
<u>7B2.</u>	Describes how public health and health care services and programs are funded [new]
7B <u>3</u> 2.	Interprets how governmental the organizational structures, functions, and authorities of local, state, and federal-public health is structured, functions, and is authorized to provide agencies for public health services and programs management [formerly 7B2]
7B <u>4</u> 3.	Develops partnerships with government agencies within authority to take action to addressthe federal, state, and local levels of government that have authority over public population health needs (e.g., childhood immunizations, natural disasters) situations or with specific issues, such as emergency events [formerly 7B3]
7B <u>5</u> 4.	Implements policies and the judicial and operational procedures of the governing body and/or administrative unit that oversees the operations of the public health organization (e.g., board of health, chief executive's office, tribal councils) [formerly 7B4]
7B <u>6</u> 7.	Develops strategies for determining programmatic budget (e.g., priorities, revenue sources) priorities based on federal, state, and local financial contributions [formerly 7B7]
7B <u>7</u> 5.	Develops a programmatic budget [formerly 7B5]
7B <u>8</u> 6.	Manages programs within current and forecasted projected budget constraints (e.g., sustaining a program when government funding is cut) [formerly 7B6]
7B <u>9</u> 10.	Prepares proposals for funding from external sources [formerly 7B10]
7B <u>10</u> 8.	Evaluates program performance (e.g., outputs, outcomes, processes, return-on-investment) [formerly 7B8]
7B <u>11</u> <del>9</del> .	Uses evaluation results to improve performance [formerly 7B9]
7B1 <u>2</u> 4.	Applies basic human relation skills interpersonal skills to the management of organizations, motivateion of personnel, and resolveution of conflicts [formerly 7B11]



Financial Planning and Management Skills
Tier 2
7B1 <u>3</u> 2. Applies public health informatics skills to improve operations of programs and the organization -business operations (e.g., business process analysis, enterprise-wide information planning) [formerly 7B12]
7B143. Negotiates contracts and other agreements to provide for the provision of services [formerly 7B13]
7B154. Uses financial analysis methods (e.g., cost-effectiveness, cost-benefit, and cost-utility analysis, return on investment) to in programmatic prioritizeation and make decisions- about policies and programsmaking [formerly 7B14]



	Leadership and Systems Thinking Skills
	Tier 2
8B1.	Incorporates ethical standards of practice <u>(e.g., Public Health Code of Ethics) as the basis ofinto</u> all interactions with <u>individuals.</u> organizations, <u>and communities<del>, and individuals</del></u>
8B2.	Incorporates systems thinking into Demonstrates how public health practice organizations, health care organizations, and other organizations work individually and with others to impact health within a community
8B3.	Participates Engages with stakeholders-individuals and organizations toin identifying key values and a shared vision as to guideing principles for _community action (e.g., emphasis on prevention, health equity for all, excellence and innovation)
8B4.	Analyzes internal and external problems facilitators and barriers that may affect the delivery of the 10 Essential Public Health Services
8B5.	Promotes individual, team, and organizational learning opportunitiesprofessional development (e.g., competency assessment, training, mentoring, peer advising, coaching)
8B6.	Establishes mentoring, peer advising, coaching or other personal professional development opportunities for the public health workforce
8B7.	Contributes to the measuring, reporting and Creates a process for continuous improvement of individual and organizational performance
8B8.	Modifies organizational practices in consideration ofto anticipate and address changes (e.g., in the public health system, and the larger social, political, and economic, scientific) environment that may impact the health of the community

<sup>2</sup> *Tier 2 – Program Management/Supervisory Level.* Tier 2 competencies apply to public health professionals with program management or supervisory responsibilities. Specific responsibilities of these professionals may include program development, implementation, and evaluation; establishing and maintaining community relations; managing timelines and work plans; and presenting arguments and recommendations on policy issues.

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To provide feedback on these draft revisions, please contact Council on Linkages Project Manager Kathleen Amos at kamos@phf.org.