



Core Competencies for Public Health Professionals Report

April 11, 2017

Overview

The [Core Competencies for Public Health Professionals](#) (Core Competencies) reflect foundational skills desirable for professionals engaged in the practice, education, and research of public health and are used in education, training, and other workforce development activities across the country. The [current version of the Core Competencies](#) was released on the [Council on Linkages Between Academia and Public Health Practice \(Council\) website](#) in June 2014.

Update on Usage of the Core Competencies

The Core Competencies and related resources and tools continue to be used within health departments, academic institutions, and other public health organizations. The [2016 National Profile of Local Health Departments](#) study conducted by the [National Association of County and City Health Departments](#) (NACCHO) reports a 73% increase in use of the Core Competencies among local health departments since the study was last completed in 2013 – with usage growing from 26% to 45%. In addition to an overall increase in usage, the NACCHO study highlights increases in use of the Core Competencies for assessing training needs, developing training plans, writing position descriptions, and conducting performance evaluations, with use for training plans and position descriptions doubling between 2013 and 2016. Data from the [Association of State and Territorial Health Officials' Profile of State Public Health](#) conducted in 2012 shows that more than 50% of state health departments use the Core Competencies, and [information collected by three Council member organizations in 2016](#) show that approximately 92% of academic public health and public health nursing programs use the Core Competencies.

The Core Competencies are also used by national organizations such as the [Centers for Disease Control and Prevention](#), the [Health Resources and Services Administration](#), [Public Health Training Centers](#), and the [Public Health Accreditation Board](#), and are built into the [TRAIN Learning Network](#), which currently reaches more than 1.3 million learners, to facilitate access to competency-based training.

Usage of the Core Competencies is highlighted by the frequency with which these resources are accessed through the Council website. Since the June 2014 release of the current version, the Core Competencies have been accessed more than 121,000 times, and resources and tools have been accessed more than 232,000 times. The [Core Competencies Workgroup](#) continues to focus on resources and tools to support this use, including developing a new tool for helping to determine essential Core Competencies for job descriptions and enhancing collections of [job descriptions](#) and [workforce development plans](#) that incorporate the Core Competencies. Examples of such job descriptions and workforce development plans, as well as other examples of how public health professionals and organizations are using the Core Competencies, are always welcome by email to Janelle Nichols at jnichols@phf.org. Ongoing development and promotion of the Core Competencies and related resources and tools is planned to ensure that these resources continue to reach the widest audience possible.

Core Competencies Review Cycle

The Council has a long-standing commitment to the public health community to ensure that the Core Competencies remain current and continue to reflect the reality of working in public health. One way that this is accomplished is by considering whether there is a need to revise the Core Competencies every three years. As noted above, the current version of the Core

Competencies was released in 2014, and usage of the Core Competencies is widespread and continuing to grow. In addition to use within health departments and academic institutions, the Core Competencies are playing a role in broader workforce development efforts including the [Public Health Workforce Interests and Needs Survey](#) (PH WINS); the recent revision of the [Council on Education for Public Health's accreditation criteria](#) and the [National Board of Public Health Examiner's Certified in Public Health \(CPH\) exam](#); and the development of discipline-specific competencies, such as [those](#) of the [Quad Council Coalition of Public Health Nursing Organizations](#).

As discussed at previous Council meetings, the Council has received requests to consider lengthening the review and revision cycle for the Core Competencies to minimize disruption and allow time for organizations and individuals to integrate the latest Core Competencies into their work before revisions are made. The Council must balance the needs of those relying on the Core Competencies with responsiveness to changes in the field in order to ensure continued use. With the three year anniversary of the current version of the Core Competencies in June, the Council is asked to consider whether significant enough changes have occurred in the public health field to necessitate potential revision of the Core Competencies or whether the current version of the Core Competencies is likely to meet the anticipated needs of the near future. It should be noted in this discussion that a decision not to begin the review and revision process at the present time does not mean that the Council must wait another three years before revisiting this question again, as this can be done at any time.

Competencies for Population Health and Performance Improvement Professionals

Additional examples of the use of the Core Competencies in developing specialized competency sets are the [Priority Competencies for Population Health Professionals](#) being developed by the [Public Health Foundation](#) (PHF) and [Association for Community Health Improvement](#) and the [Competencies for Performance Improvement Professionals in Public Health](#) being developed by PHF. The Priority Competencies for Population Health Professionals describe desired skills for population health professionals and are primarily designed for non-clinical hospital, health system, public health, and healthcare professionals engaged in assessment of population health needs and development, delivery, and improvement of population health programs, services, and practices. The development of these competencies began in early 2015 and is relying on the Core Competencies as key for helping hospitals and health systems in identifying and building knowledge and skills that support improved population health. These competencies are currently open for public comment in draft form; feedback will be used to refine this competency set and can be sent to Kathleen Amos at kamos@phf.org.

The Core Competencies Workgroup has recently formed a subgroup to support the refinement of the Competencies for Performance Improvement Professionals in Public Health. Based on the Core Competencies and the [Core Competencies for Performance Improvement Managers](#), these competencies aim to offer additional guidance in performance improvement for individuals with responsibilities for accreditation, quality improvement, performance management, or community improvement in public health. Anyone interested in joining the Subgroup on Performance Improvement Competencies can contact Julie Sharp at jsharp@phf.org.

With the Core Competencies serving as a backbone for competency development efforts such as these, a question has been raised of whether the Council should become involved in recognizing competency sets that are based on the Core Competencies and, if so, whether there are particular guidelines or criteria a set of competencies must meet before receiving Council recognition. If the Council is interested in considering this, the Core Competencies Workgroup could be charged with exploring these questions and report back to the Council at a future Council meeting.

Core Competencies Workgroup Members

Co-Chairs:

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- Janet Place, Arnold School of Public Health, University of South Carolina

Members:

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- Sandra Anyanwu-nzeribe
- Sophia Anyatonwu, Texas Department of State Health Services, Region 7
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