

Improving Public Health Intelligence

Making use of PHKSF for workforce development

Sonya Scott

Consultant in Public Health NHS GGC

Sonya.scott2@ggc.scot.nhs.uk

Outline

- Public Health Intelligence (PHI) Review
- Workforce related findings and recommendations
- Using PHSKF in implementation

Definition of Public Health Intelligence

“the surveillance and monitoring of population health and the determinants of health and wellbeing; support for evidence-based practice; and assessment of the effectiveness of policies, programmes and services”.

A photograph of a long, straight dirt road stretching into the distance under a cloudy sky. The road is flanked by dry, scrubby vegetation. The sky is filled with soft, white clouds, and the overall lighting is warm and golden, suggesting a sunrise or sunset. The text is overlaid on the upper half of the image.

WITHOUT DATA

YOU'RE JUST ANOTHER PERSON

WITH AN OPINION

W. EDWARDS DEMING

Improving PHI in Scotland: A Participatory Process

- Three facilitated face-to-face events
- Two video conferences
- 143 stakeholders
- NSS, NES, ScotPHO, all territorial boards, HSCPs, third sector and others.
- Thematic analysis

Workforce related findings

- Small proportion of core workforce in dedicated technical roles
- Vast majority of technical staff in national boards
- Formally trained specialists comprise very small proportion of overall workforce
- Variability in technical knowledge and skill amongst core staff particularly at territorial board level.

Workforce related recommendations

- Articulate levels of knowledge and skills required for delivering effective public health intelligence.
- Audit core public health staff to identify availability of existing knowledge and skill to identify gaps and training needs
- Review current training provision to ensure we are able to meet needs.

How can PHKSF help with this?

PHKSF provides:

- Functional areas in which we operate to deliver on outcomes
- Statements that describe the functions to be carried out in the course of our practice
- A reference for standards of practice
- A benchmark for workforce planning and development

Functional and Sub-Functional Areas relevant to Public Health Intelligence

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

- Identify data needs and obtain, verify and organise data and information
- Collate and analyse interpret and present data and information to produce intelligence that informs decision making, planning , implementation, performance monitoring and evaluation
- Predict future data needs and develop data capture methods to meet them.

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

- Access and appraise evidence gained through systematic methods and through engagement with wider research community.
- Critique published and unpublished research, synthesise the evidence and draw appropriate conclusions
- Report and advice on implications of the evidence base for the most effective practice and delivery of value for money
- Apply research techniques and principles to the evaluation of local services and interventions to establish local evidence of effectiveness

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

- Conduct economic analysis of services and interventions against health impacts, inequalities and return on investment
- Appraise new technologies, therapies, procedures and interventions and the implications for developing cost-effective equitable services

PHKSK can be used to

- To articulate levels of knowledge and skills required by creators and translators of public health intelligence.
- Audit core workforce
- To identify workforce development needs

Next Steps

- PHI workstream of shared services programme meets 22 March
- Knowledge and skills audit
- Knowledge and skills profile
- Workforce development recommendations

Thank you for listening