



Department
of Health &
Social Care



England

Public Health Skills and Knowledge Framework (PHSKF) Review

Presented by:
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Why are we here?



We want your help in shaping the future of the PHSKF.

We want to ensure the revised framework is **practical**, supports your **day-to-day work**, and is ready to meet the **evolving challenges** facing the public health and wider workforce across the UK.

Public Health Skills and Knowledge Framework: Overview

What is the PHSKF?

The PHSKF is a **UK-wide** resource which describes the functions and activities carried out by people working to project and promote the public's health, developed through the collaboration of lead agencies in public health across the UK.

The PHSKF Provides...

1. A functional map of public health practice

2. Descriptions of work activities

3. National benchmark for workforce development

4. Tool for developing job roles and descriptions

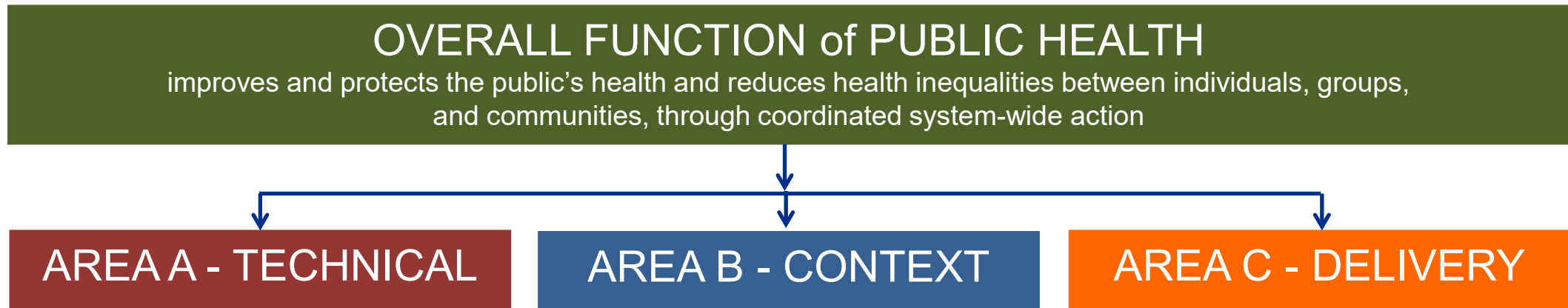
5. Common reference for education and training

6. Skill passport to map competency development

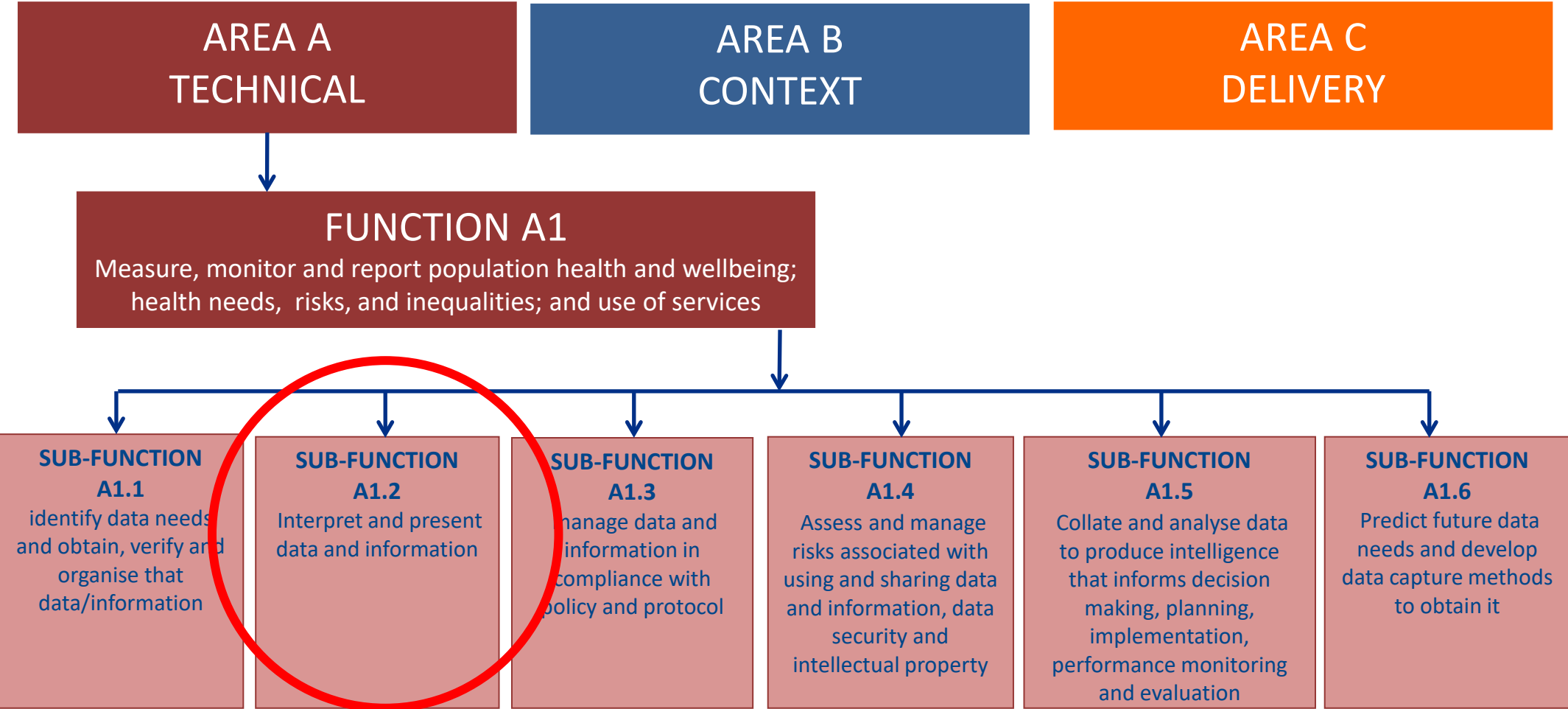
It is used by...

- ✓ **Individuals** to support career planning and competency self-assessments
- ✓ **Employers** to design descriptions and support workforce development by identifying strengths and gaps in their teams and organisations
- ✓ **Universities and Training providers** to design and review curricular

What does the PHSKF mean to PH people?

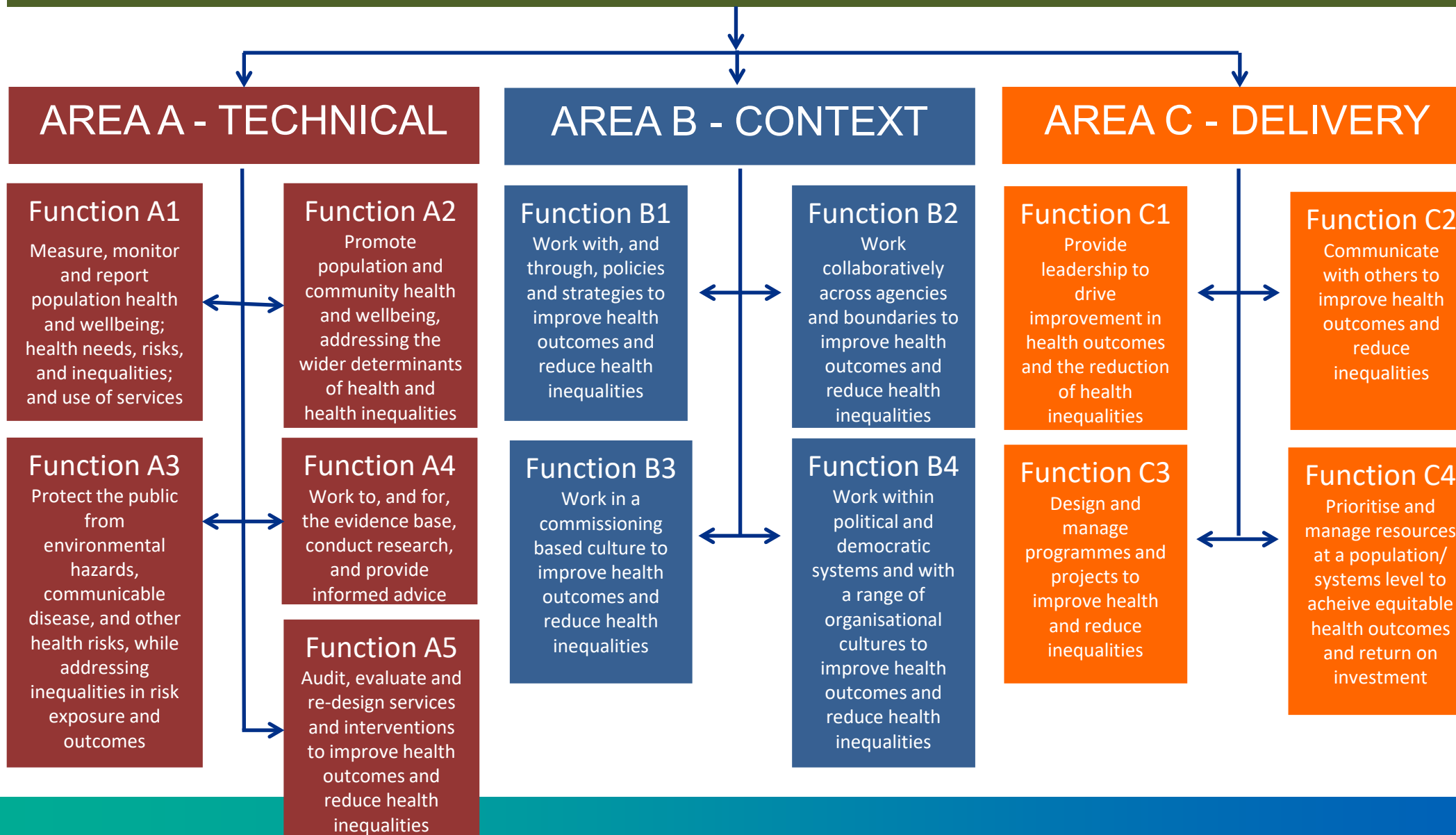


Areas, functions and sub-functions as they are now:



OVERALL FUNCTION of PUBLIC HEALTH

improves and protects the public's health and reduces health inequalities between individuals, groups, and communities, through coordinated system-wide action



2025/26 PHSKF Steering Group



Office for Health
Improvement
& Disparities



UK Health
Security
Agency



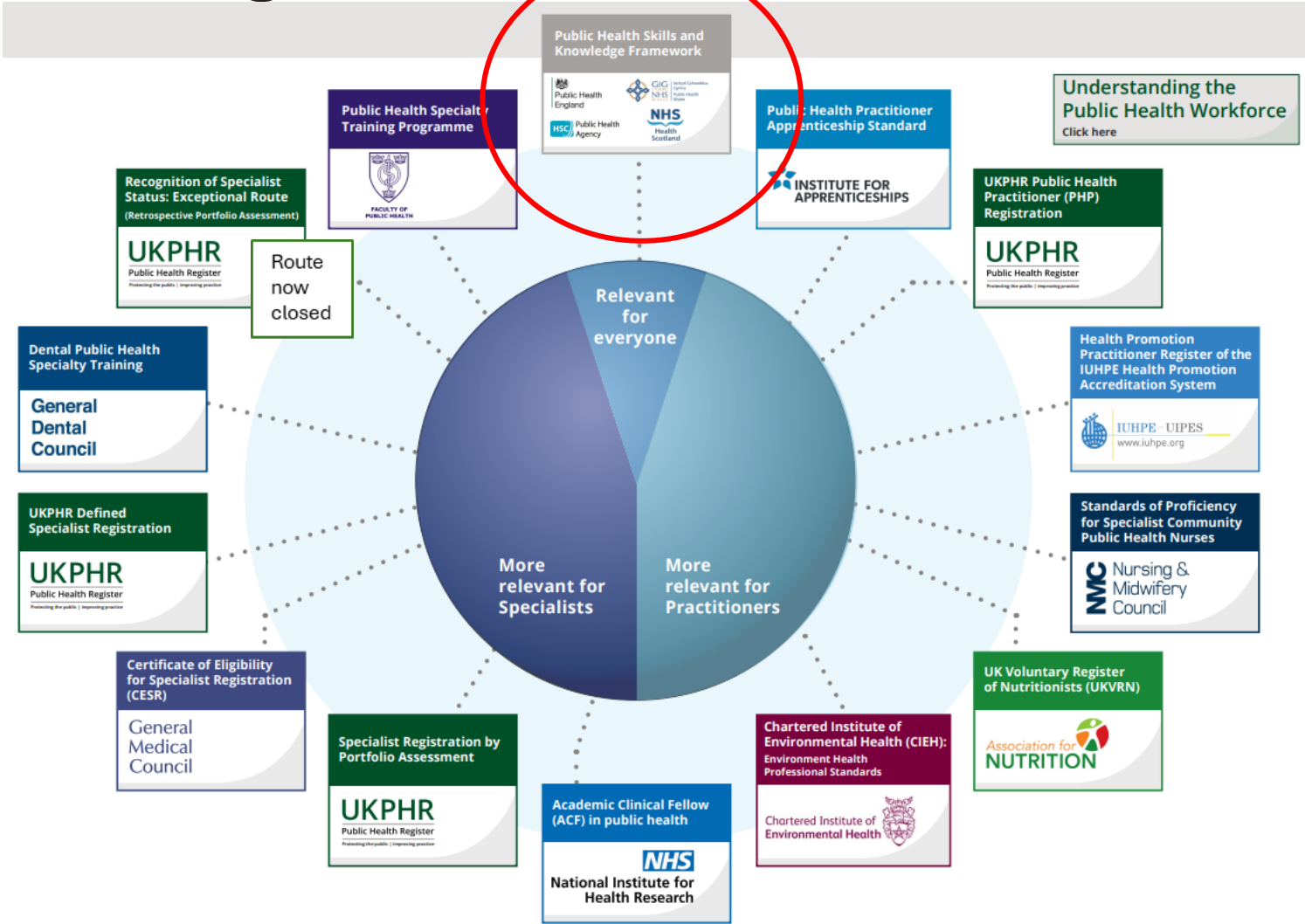
Chartered Institute of
Environmental Health



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Public Health Skills and Knowledge Framework: What it means for the Public Health Workforce

Where does it fit with other Frameworks, including routes to professional registration?



International Comparisons:

Core Competencies for Public Health Professionals (USA)

1. Data Analytics and Assessment Skills	2. Policy Development and Program Planning Skills
4. Health Equity Skills	5. Community Partnership Skills
3. Communication Skills	6. Public Health Sciences Skills
7. Management and Finance Skills	8. Leadership and Systems Thinking Skills

Levels of Responsibility:

- **Tier 1:** Front Line and Programme Support
- **Tier 2:** Programme Management and Supervisory
- **Tier 3:** Senior Management and Executive Leadership

WHO-ASPHER Competency Framework for the European Region (2020)

1. Science and Practice	2. Promoting Health
3. Law, Policies & Ethics	4. One Health & Health Security
5. Leadership and Systems Thinking	6. Collaboration and Partnerships
7. Communication, Culture and advocacy	8. Governance and Resource Management
9. Professional Development & Reflective Ethical Prac.	10. Organisational Literacy and Adaptability

Levels of Proficiency:

- **Level 1:** Expert
- **Level 2:** Proficient
- **Level 3:** Competent

Core Competencies for Public Health in Canada (2024)

1. Public Health Sciences	2. Communication
3. Assessment and Analysis	4. Partnerships and Collaboration
5. Policy Development and Analysis	6. Leadership
7. Program Planning, Implementation and Evaluation	8. Health Equity and Social Justice
9. Public Health Advocacy	10. Ethical and Reflective Practice

No Role or Proficiency Levels

How can you use the PHSKF? Example

C2	Communicate with others to improve health outcomes and reduce health inequalities	Is this relevant for your role? Y/N	What is your level of capability? 0-4	What is your level of confidence? 0-4	Is this a development need? Y/N
C2.1	Manage public perception and convey key messages using a range of media processes				
C2.2	Communicate sometimes complex information and concepts (including health outcomes, inequalities and life expectancy) to a diversity of audiences using different methods				
C2.3	Facilitate dialogue with groups and communities to improve health literacy and reduce inequalities using a range of tools and technologies				
C2.4	Apply the principles of social marketing, and/or behavioural science, to reach specific groups and communities with enabling information and ideas				
C2.5	Consult, and listen to individuals, groups and communities likely to be affected by planned intervention or change				

Part 1: Gather Insights on Current and Future PHSKF



20 minutes

Part 1: Consider how The PHSKF would be useful for you

Objective: To understand how the existing PHSKF could be helpful for you, what could work well, what could be improved based on your experience, and what its future purpose and structure could be.

Breakout Activity:

1. Step 1: Think about our discussion just now about the PHSKF, and how a framework could be relevant to you and your career. What do you think this framework is useful for you? What are its strengths and weaknesses?
2. Step 2: Look ahead at what a future PHSKF should include. What do you think this framework should look like? Is there any particular characteristic of it that would make it easier for you to use it at your work or position?

Step 1: Strengths and Weaknesses of Current PHSKF

Strengths (what works well?)

Prompt: What parts of the PHSKF are most useful in your role? What feels clear and valuable?

Weaknesses (what doesn't work well?)

Prompt: What feels confusing, complex, or not needed?

Step 2: Making the future PHSKF Work in Practice

What is should look like

Prompt: What would make it easier to use? What should be removed?

How can it be used?

Prompt: what would make the PHSKF part of 'how we do things?' Where could it be used – for example, when we think about training?

Plenary 1



Step 1:

1. What parts of the PHSKF feel clear, accessible, or most useful?
2. What feels confusing, overly complicated, outdated or not fit for purpose?

Step 2:

1. How is the PHSKF currently being used across organisations and roles?
2. What needs to change to make the PHSKF part of everyday practice?
3. What formats or structures would make it more accessible?
4. Do we need levels of proficiency and if so, what would this look like?
5. Where should it sit within organisational processes such as CPD, recruitment or supervision?

Part 2: Skills and knowledge needed for the future



20 minutes

Part 2: Skills and knowledge needed for the future

Objective: To identify and prioritise the skills and knowledge that will be critical for the public health workforce over the next decade.

Breakout Activity:

1. Step 1: There are a lot of things that could impact how we work in the future. Changes in technology, society, the environment, and politics could change how we do things. Even changes in values, for example, one thing being taboo now, but accepted in the future, could impact our work. Can you think of future changes, problems or innovations that could impact the way you work in 10 years?
2. Step 2: Think about all you just shared now. Which of these do you think would be of high, medium or low priority for you and your colleagues at work to develop in the next 10 years?

Step 1: Emerging Public Health Topics & Challenges

Looking ahead over the next 10 years, identify external factors that could reshape public health practice. Using the STEEP-V framework add driver under the relevant heading. Keep ideas brief, specific, and focused. Add as many as you wish.

Social

Prompt: How are demographic, behavioural or societal shifts influencing public health needs?

Technological

Prompt: What emerging or evolving technologies could reshape public health practice?

Economic

Prompt: How might economic trends, funding pressures or workforce affordability impact public health?

Environmental

Prompt: What environmental changes or climate-related factors will affect population health?

Political

Prompt: How could policy shifts, governance, or political priorities shape public health work?

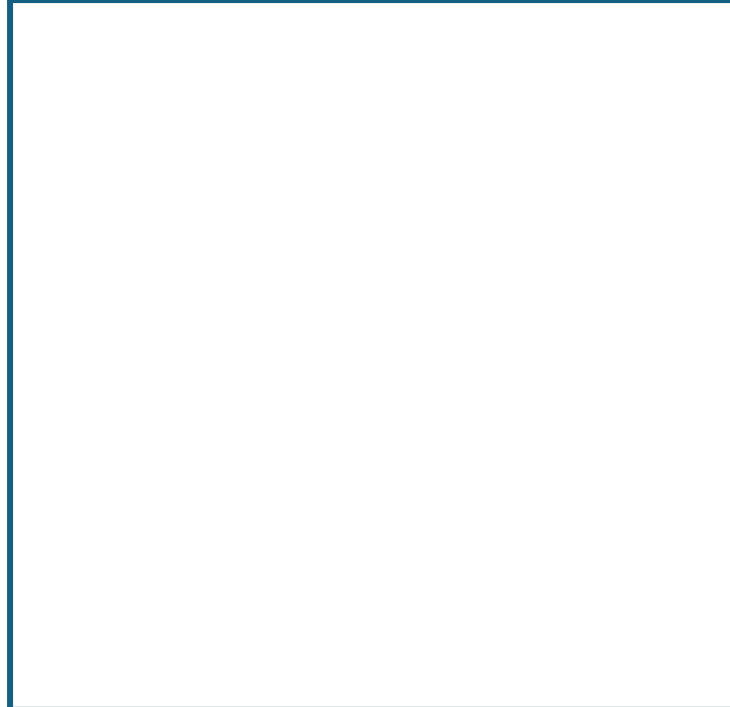
Values/others

Prompt: What cultural values, ethical considerations or organisational expectations will drive future public health approaches?

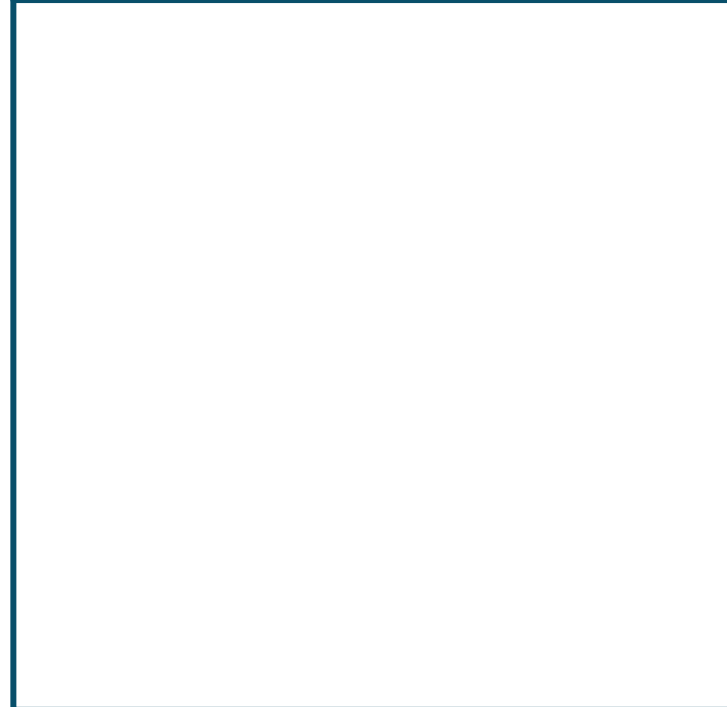
Step 2: Prioritising Public Health Topics & Challenges

Consider the knowledge and skills needed in response to these drivers. As a group, move each driver into one of the priority buckets - low, medium, or high - based on how important it will be for the public health workforce to develop these skills over the next decade.


Low Importance

A large empty rectangular box with a dark blue border, intended for listing public health topics and challenges of low importance.

Medium Importance

A large empty rectangular box with a dark blue border, intended for listing public health topics and challenges of medium importance.

High Importance

A large empty rectangular box with a light green border, intended for listing public health topics and challenges of high importance.

Plenary 2

Step 1:

1. Which changes do you think will reshape public health practice most over the next 10 years?
2. Ask the other groups to chip in with any additional areas not covered or if they wish to expand on the points raised so far.

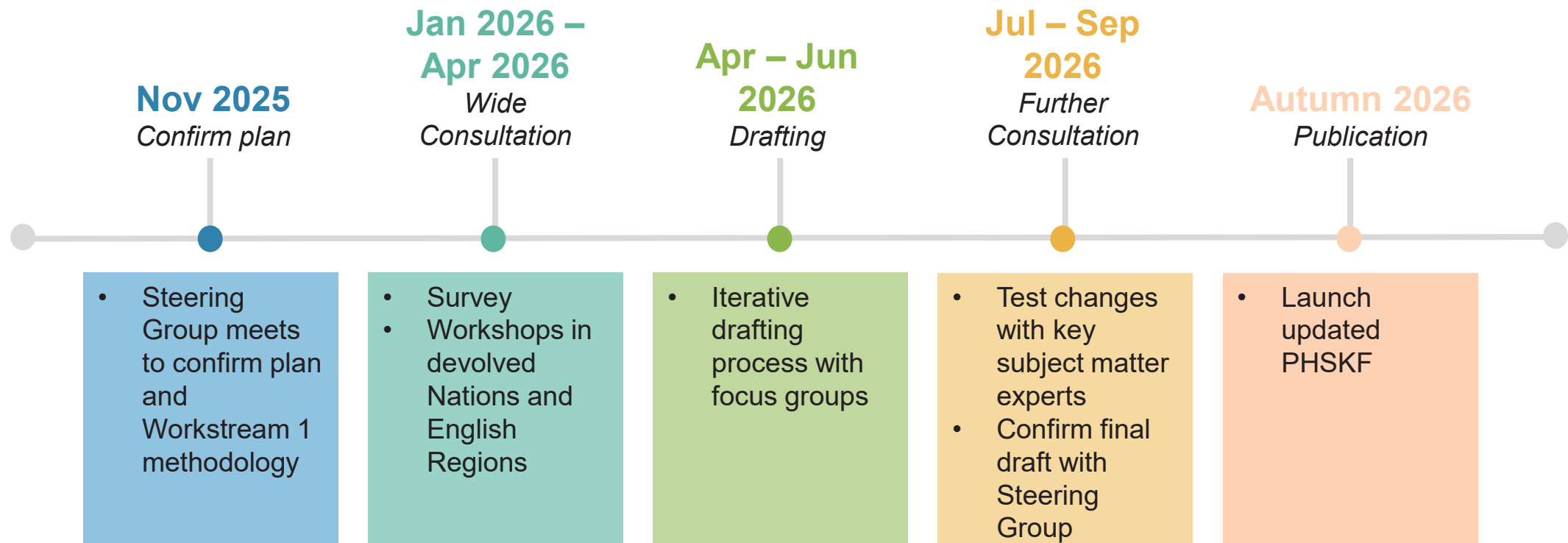
Step 2:

1. Why have you put these areas in the high priority bucket?
2. Were there any skills that you were unsure of where to place them?
3. Ask if other groups agree with these priorities.
4. Ask if other groups identified any other high priority areas that have not been discussed so far.



Next steps

Aim: To review and update the Public Health Skills and Knowledge Framework to ensure it is practical, relevant to the current public health context, and supports the core and wider public health workforce in developing the skills and capabilities needed to protect and promote the public's health.





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Thank you!

If you have any questions or concerns, please contact:
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