

October 2017 Proposal to develop a new apprenticeship standard

Page 1: Proposal to develop a new apprenticeship standard

Q1. Please confirm that you have read the "How to" guide for Trailblazers on gov.uk (see link here), that you are content that this proposal meets all the criteria for final approval set out within it and that you have discussed the proposal with a relevant Route Relationship Manager within the Institute (Please specify who).

I have read the 'how to' guide for Trailblazers on gov.uk? Yes

Name of my Relationship Manager

Bhavena Patel

Q2. Name of proposed trailblazer group

Public Health Practice

Q3. Are you an existing Trailblazer Group already with approval to develop other standard(s)? If yes or partly, please provide full details.

No

Q4. Name of proposed apprenticeship standard(s).

Public Health Practitioner (PHP)

Q5. Is this a proposed core and options standard? If yes, please give the titles for each of the options.

No

Q6. How many standards are you proposing to develop? Please be aware that commitment from at least 10 employer members for each proposed standard is required.

One in the first instance

Q7. Will there be a requirement for additional new standards to be developed in the future? If so, please provide brief details of what these will be.

We are aware of an employer appetite for a level 3/4 public health associate standard, to support the development of NHS Health Trainers/Live-well Coaches, Care Navigators, Healthy Living Pharmacy Assistants, Health Mentors, Social Prescribers, Wellbeing Support Workers, and others, but the feasibility of this will be explored at a later date. While all of these role titles are different, the skills, knowledge and behaviours will be the same ie: could be supported by a single standard.

Q8. Have you submitted a proposal for an apprenticeship standard in this role(s) before? If yes, please give details below including comments from the (pre April 2017) DfE approvals panel or the Institute.

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No

Q9. Please insert details about each proposed standard below.

	Name of occupation	Proposed level of the standard	Proposed as a degree apprenticeship?	Intended to replace/partly replace an existing apprenticeship Framework? [if so please give details]	Do you expect any age restrictions to apply to this standard?	Estimated annual take-up across entire relevant sector(s) (This is separate to the number of apprentices that each individual employer group member will take on)	When do you estimate this apprenticeship would be ready to deliver starts?
1	Public Health Practitioner	Level 6	Yes	No	No	100+	September 2018
2	-	-	-	-	-	-	-
3	-	-	-	-	-	-	-
4	-	-	-	-	-	-	-
5	-	-	-	-	-	-	-
6	-	-	-	-	-	-	-
7	-	-	-	-	-	-	-
8	-	-	-	-	-	-	-
9	-	-	-	-	-	-	-
10	-	-	-	-	-	-	-

Q10. <https://www.gov.uk/government/publications/apprenticeship-standards-in-development> Please provide any relevant information below regarding potential overlap with other Trailblazer standards published or in development. It is important that you review your proposal against all other apprenticeships published and in development to confirm there is no significant overlap, in overall occupation or in the content of potential skills/knowledge/behaviours. Where there is potential of any overlap, we ask that you contact the existing Trailblazer(s) before submitting a new proposal to discuss whether the existing standards would cover your needs (or email apprenticeship.trailblazers@education.gov.uk). Please then provide below full details of any possible overlap identified, interaction with relevant Trailblazers, and any relevant further detail explaining why this occupational role is sufficiently unique to still justify separate apprenticeship standard. The existing list of standards in development, is here [The list of existing published standards and Trailblazer contact details](#), is here

There is no standard that has been published or is in development for the occupation of Public Health Practitioner. There is inevitably overlap in some areas of skills and knowledge that are common to healthcare

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occupations but we are satisfied that the occupation of public health practitioner has a sufficiently unique combination and breadth of discrete skills, knowledge and behaviours to meet the IfA requirements for a separate standard. The detail of these skills, knowledge and behaviours are described in the response to Q.12

Other healthcare roles such as nursing, dental and allied health professionals may have a public health element to them but these will be focused on defined clinical interventions at an individual level or with groups such as children or families. Public Health Practitioners will not generally undertake clinical interventions, but focus on prevention and risk management at a population level.

We are sighted on the EOI currently in development for an Environmental Health Practitioner (EHP), and we are satisfied that the EHP is engaged within different settings eg: commercial, and focuses significantly on legislation, compliance, enforcement, prosecution and court action and licencing, none of which would be activities expected of a PHP.

Q11. Please provide a full description below of what the occupational role involved (or roles in the case of a proposed core and options standard). The information you provide here is crucial to our assessment of whether the occupational role is suitable for an apprenticeship, so please be as comprehensive as possible, and always refer to the criteria and guidance set out in the "How to" guide for Trailblazers. In particular, the information should include: Main duties and responsibilities - please set out clearly what someone in this occupation will actually be doing; the range of environments/sectors/industries in which someone in this occupation could work; a summary of key competencies/skills etc required for full occupational competence; how the occupational role typically fits within the wider work hierarchy; who would they be working with, and what is the usual relationship between the roles.

How the role fits within the wider work hierarchy

A Public Health Practitioner (PHP) is a member of the professional public health workforce across the UK. PHPs can be professionally registered with the UK Public Health Register (UKPHR) on completion of a retrospective portfolio that is independently assessed against agreed national standards, and approved through the quality assurance systems stipulated by the UKPHR. Registration is voluntary.

PHPs usually report to senior practitioners or Public Health Specialists and Consultants eg: in local authorities or in Public Health England* (PHE); or in provider organisations, within the management structure of commissioned Health and Wellbeing services. PHPs are autonomous and work closely with their public sector partners both within their employing organisations and beyond, and may find themselves in situations where they are providing leadership and direction where they have no direct authority. They will work with any partner or agency in any sector, that is committed to the ethical and equitable delivery of public health outcomes and they will proactively work to initiate, develop and maintain these partnerships. Being able to work collaboratively is a key skill-set.

*Public Health England (PHE) is a civil service executive agency of the Department of Health formed in April 2013. The role of PHE is to protect and promote people's health and to provide independent expert advice to the government. PHE employs over 5,500 people across England, many of whom are public health professionals. PHE also provides direct delivery of health protection services across England. The role of PHE is explained on the GOV.UK website here (<https://www.gov.uk/government/organisations/public-health-england/about>)

Range of environments/sectors/industries

PHPs are employed in local authorities; across Public Health England (PHE) (national/centres/regions); by

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NHS Trusts (both acute and community); by private sector providers; and by the voluntary, community, and social enterprise (VCSE) sector. PHPs can work on both the commissioning side of public health service delivery, and the delivery/provider side so they operate within the context of either commissioning services, or tendering for contracts.

The PHP workforce is made up of individuals from a broad range of backgrounds. This is desirable because Public Health practice requires a multi-disciplinary skill set. PHPs may have previous knowledge and experience in areas such as health psychology; human sciences; physiology and nutrition; health informatics; epidemiology and science; human geography; anthropology; social science; public service administration and public policy; health care; and many others

The role of the PHP is demonstrated through case studies and videos on the Health Careers website here (<https://www.healthcareers.nhs.uk/explore-roles/public-health/roles-public-health/public-health-practitioner>).

Examples include:

- Teenage pregnancy - working on the teenage pregnancy strategy, by engaging with local people to develop and deliver projects and activities, particularly relating to sex and relationship education.
- Public Health Analyst - analyses public health data and intelligence to inform strategy and the design and implementation and evaluation of interventions and services
- Substance misuse - providing information and support with drug, smoking or alcohol issues, which may include counselling, motivational interviews etc
- Public health nutrition – an expert in food and nutrition, develop and evaluate nutrition services that can help bring about positive changes in people's lives
- Health improvement – contribute to local programmes which can help bring about lifestyle and behavioural change eg stop smoking, diet and exercise, and influence policy in relation to the social determinants of health and well-being.
- Health protection - receive notifications about communicable diseases. Eg hospital-acquired infections, measles, TB, flu etc and then interpret, prioritise and act on them, work directly with consultants in health protection to identify, investigate and monitor outbreaks of infection or communicable diseases in the community

Main duties and responsibilities

PHPs focus on population health, and the prevention, risk assessment, and risk management of both infectious and non-infectious diseases and ill-health, and the prevention of premature deaths. They also work to optimise the health of the population through the surveillance and promotion of health and wellbeing, and the monitoring and prevention of health inequalities, to improve healthy life expectancy.

More specifically, they will :

- support the development, monitoring and review of health improvement programmes, including the commissioning of these programmes, working with other specialists and colleagues to improve health and reduce health inequalities
- work collaboratively with colleagues across a broad range of partnership organisations to identify local needs, agree priorities and develop action plans for joint health improvement programmes across the area
- analyse a range of data sets to draw informed conclusions about local public health needs, contributing to strategic needs assessments and operational service planning
- provide public health information, analysis, interpretation and insight to support business planning, policy and strategy development, performance monitoring, and quality assurance

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- provide public health intelligence in support of eg: the Health and Wellbeing Board strategy; health commissioning by Clinical Commissioning Groups (CCGs); and to support multi-agency and partnership networks and alliances around health issues and inequalities
- develop projects and plans with key stakeholders and partner agencies to address local public health needs and bring about improvements in identified areas. Lead or contribute to delivery of these projects as necessary
- establish and maintain effective working relationships with local partners in order to bring about positive outcomes in the health and well-being of the local population
- implement government-led policies and strategies locally eg: ensuring the equitable and effective implementation of winter fuel schemes to prevent deaths from cold; the implementation of the NHS Health Check programme
- commission, plan or provide a range of services to bring about improvements in public health (including the drawing up and negotiation of service specifications and performance indicators), ensuring, where relevant, that tendering and procurement processes are managed appropriately and within policy and legislative requirements
- monitor and evaluate the impact of public health projects, services and interventions
- lead and manage key areas of public health business including management and supervision of staff, resources and finances
- develop knowledge and expertise in a public health specialism eg: the management of risk behaviours such as smoking; obesity prevention; infectious disease prevention and control such as sexually transmitted infections, Tuberculosis, and the implementation of immunisation and vaccination programmes; mental health and wellbeing; public health intelligence
- work directly with communities to ensure their engagement in needs assessments, service design and delivery, to support them in accessing and navigating local services, and to improve health literacy where it is a barrier to accessing services and interventions

NB: A national framework of public health functions has been published to support the development of job descriptions, and education and training provision for people working in public health. The Public Health Skills and Knowledge Framework can be found here (<https://www.gov.uk/government/publications/public-health-skills-and-knowledge-framework-phskf>)

Q12. Please provide an overview of the knowledge, skills and behaviours required for these roles.

Upon completion of the apprenticeship, the PHP will know and understand:

- patterns of disease and ill-health and how these are measured and reported for communities and populations (eg: incidence and prevalence)
- how local health needs are identified and monitored (eg: within a local authority population) and for specific communities (eg: children and young people; people with existing conditions such as diabetes; people living in prison)
- how to appraise the evidence base, interpret its relevance and application to practice, and how it informs the basis of key public health messages and advice, and national guidance

Q12. Please provide an overview of the knowledge, skills and behaviours required for these roles.

- infectious disease (incubation, transmission, hygiene, infection control, personal behaviours), how infectious disease can spread in a range of settings, and the prevention and management strategies and protocols, including notifiable diseases and current legislation
- how policy and strategy is formed and developed, nationally and locally, and how policies and strategies are used to implement change, improve services, and secure wide engagement in public health issues and outcomes
- how public health interventions are designed, planned and developed, informed by the best available evidence (about what works, and what doesn't), and how to evaluate these interventions to track effectiveness and ensure continuing improvement
- the challenges of measuring health improvement, setting performance indicators for programmes and services, and the importance of evaluation, audit and quality assurance
- the challenges of making the business case for prevention against competing, and more immediate priorities for key agencies positioned to promote the public's health
- the principles of partnership working and collaboration, and the skills and approaches necessary to do this successfully
- the different organisations and agencies, both nationally and locally, that play a key role in the public's health, their statutory duties and remits, and the leadership and other roles where key accountabilities lie
- health inequalities, how they occur, how they are measured, monitored and reported, and the impact on different societies both nationally and globally
- the social determinants of health, the different government and local government departments that influence these, and the extent to which national and local policies, strategies and service planning impact on health and wellbeing
- contemporary methods of engaging with the public and local communities and the current evidence around asset-based approaches to community development
- methods of communicating messages to different segments of the population through social marketing and other approaches, to support choices and decisions made at an individual level that impacts on health and wellbeing
- behavioural science and its relevance to a range of health and wellbeing outcomes, and how it informs the development of policy, strategy, and the planning and implementation of public health interventions and services

Upon completion of the apprenticeship, the PHP will be able to:

(Ref: PHSKF – fuller details can be found in the Framework)

Technical Skills:

- Measure, monitor and report population health and wellbeing; health needs, risks and inequalities; and use of services
- Promote population and community health and well-being, addressing the wider determinants of health and health inequalities
- Protect the public from environmental hazards, communicable disease, and other health risks, while addressing inequalities in risk exposure and outcomes
- Work to, and for, the evidence base, conduct research, and provide informed advice
- Audit, evaluate and re-design services and interventions to improve health outcomes and reduce health inequalities

Contextual Skills:

- Work with, and through, policies and strategies to improve health outcomes and reduce health inequalities
- Work collaboratively across agencies and boundaries to improve health outcomes and reduce health

Q12. Please provide an overview of the knowledge, skills and behaviours required for these roles.

inequalities

- Work in a commissioning based culture to improve health outcomes and reduce health inequalities
- Work within political and democratic systems and with a range of organisational cultures to improve health outcomes and reduce health inequalities

Delivery Skills:

- Provide leadership to drive improvement in health outcomes and the reduction of health inequalities
- Communicate with others to improve health outcomes and reduce health inequalities
- Design and manage programmes and projects to improve health and reduce health inequalities
- Prioritise and manage resources at a population/systems level to achieve equitable health outcomes and return on investment

Upon completion of the apprenticeship, the PHP will: Behaviours:

Work within ethical and professional boundaries while promoting population health and well-being, and addressing health inequalities (PHSKF). They will:

- make the health and protection of the public their prime concern
- maintain high standards of professional and personal conduct
- be honest and trustworthy
- protect confidentiality
- respect the dignity of individuals and treat everyone fairly
- know the limits of their competence and act within them
- cooperate with the teams with which they work and interact

Key references:

A national guidance document is available for people working in public health. The Good Public Health Practice Framework (2016) can be found here (http://www.fph.org.uk/uploads/Good%20Public%20Health%20Practice%20Framework_%202016_Final.pdf).

The UKPHR code of conduct can be found here (<https://www.ukphr.org/registration/code-of-conduct/>).

Q13. How will the apprenticeship allow the individual to develop transferable skills to perform the role in a business of any size or relevant sector?

PHPs are employed across a number of employment settings including NHS, local government, civil service and Voluntary, Community and Social Enterprise (VCSE) agencies. Using the Public Health Skills and Knowledge Framework (2016) to underpin the standard will ensure that apprentices develop the full breadth of skills, knowledge and behaviours for public health practice across all employer types – both the technical aspects, and the more transferable areas ie: context and delivery.

This Framework supports and encourages the use of common language across sectors and organisational cultures, to help PHPs and their employers to track their personal and professional development

Q14. Will the occupation require rigorous and substantial training of at least 12 months prior to the end-point assessment to achieve full competence, with off-the-job training accounting for at least 20% of the apprenticeship? Please provide detail of what this will include.

Yes

As this is a degree apprenticeship learning beyond 12 months will be required. The exact pattern of delivery has not been established at this point, but discussion has taken place around year-round degree delivery (ie: not just termly) with HEI providers. Given the scope and complexity of the training that will be required, it will most likely be a combination of taught contact sessions, which could either be delivered through weekly attendance or in blocks, supported by e-learning, self-directed learning, and supervised more practical learning at sites other than the employment/apprenticeship workplace as the apprentices will be required to gain experience in working in more than one setting. We recognise that 20% of the learning needs to be conducted off-the-job, as per the recent

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guidance* and any delivery model will meet this as a minimum.

*Apprenticeship off-the-job training: Policy background and examples (June 2017)
[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/621565/OTJ_training_guidance.pdf]

Q15. What will the duration of the apprenticeship be?

Typically 36 months based on support from universities developing innovative approaches to the delivery and timing of the learning, and based on a full-time apprenticeship.

Q18. Please provide details below of any professional body recognition of this standard. This should include information on what this will be.

A letter has been secured from the Chief Executive of UKPHR pledging support for the development of the apprenticeship standard, and the development of apprentices to meet the national benchmark standards for occupational competence.

Q19. We are committed to ensuring that the standard we design provides sufficiently transferable skills to enable a successful apprentice to perform this role in an employer of any size and in any relevant sector. We are collectively representative of our sector(s) and are willing to work with other employers who come forward with an interest in this occupation and with colleagues from other sectors where our standards are closely related. We will develop the apprenticeship standard and assessment plan in line with the latest edition of the Institute's "How to" Guide for Trailblazers, will aim to complete this process within a year and are committed to working with relevant sector organisations to promote the use of the resulting standard once it is ready for delivery.

Yes

Q22. Name and email address of contact we can use publicly on the gov.uk website (and Institute website when ready) as a contact point for any enquiries relating to the Trailblazer. (By filling out this box you consent to the publication of these details. If you wish to opt out please leave this box blank)

Name of public contact

Email address

Q24. Do you have a copy of the draft standard? If so, please include it with your submission.

No Response

Q25. In future, Technical Education will be arranged around the common framework of 15 technical education routes identified in the Sainsbury Review. These encompass all employment-based and college-based activity. The aim of these new routes is to facilitate the progress of young people from compulsory schooling into skilled employment and the highest levels of technical competence. A technical route could be followed either through an apprenticeship or in a college where the training would be supported by a substantial work placement, with both programmes being based on employer-designed occupational standards. In light of this, we have introduced a new criterion requiring any standard approved for development to align with one of the 15 technical routes. Details of the 15 routes can be found on page 22 of the Government Skills Plan here. Please detail which of the 15 Sainsbury Technical Education Routes your standard(s) aligns to. Also, if an occupational map is available for this route, there will be a link to it on the "How to" Guide for Trailblazers webpage. Please refer to this and specify which occupation detailed in the route map your proposed standard covers.

	Proposed Standard (s)
Agriculture, Environmental and Animal Care	-
Business and Administrative	-
Catering and Hospitality	-
Childcare and Education	-
Construction	-
Creative and Design	-
Digital	-
Engineering and Manufacturing	-
Hair and Beauty	-
Health and Science	Public Health Practitioner
Legal, Finance and Accounting	-
Protective Services	-
Sales, Marketing and Procurement	-
Social Care	-
Transport and Logistics	-