

DEVELOPMENT OF UK-WIDE REGULATORY  
FRAMEWORKS FOR PUBLIC HEALTH  
PRACTITIONERS

QUESTIONNAIRE



In order to improve the health of the population of the UK and reduce health inequalities the public health workforce must be properly trained and accredited, with mechanisms in place to ensure that this is so. Regulation is one aspect of that and the UKVRPHS was set up in 2003 to provide a voluntary regulatory framework for public health specialists. The Specialist end of the public health workforce is but one part of a much broader workforce, yet it is essential that the skills of the whole workforce are maximized in a co-ordinated and joined up way. Once again regulation is a key part of this.

**Aim of this project:**

The Departments of Health of the four UK countries are supporting the UKVRPHS in undertaking this project to explore the feasibility of developing a UK-wide regulatory framework for public health practitioners.

**Objectives:**

- To establish what happens now to accredit and regulate practitioners in public health
- To explore the benefits, feasibility and acceptability of having a common regulatory framework
- As appropriate agree the extent to which shared competencies can be used as the common currency for accreditation and to develop a commonly-agreed regulatory framework for public health

The purpose of this questionnaire is to address the first objective.

This questionnaire will be sent to all relevant UK professional and regulatory bodies during January 2007. The summarized results of this information-gathering exercise will be shared with all participating organizations during March and April 2007, as well as with the Joint Board and Advisory group to the UKVRPHS. The results of the questionnaire will help to develop our understanding about the levels of consistency of approach as well as the differences that exist. The public health practitioner workforce is a diverse and complex one with many individuals already regulated by a number of different bodies and adhering to professional standards in public health set by different agencies. In addition there are large groups of practitioners that are not regulated at all and the questionnaire will also assist in the identification of these groups.

This work is also being developed alongside and in collaboration with the Sector Skills Council (Skills for Health) work on the development of a career framework for public health practitioners in both England and Wales. This is an important development for the public health workforce and it is essential that the development of any regulatory framework for public health integrates properly with this work. To this end, if you are able, we would also ask you to indicate where ever possible the links to the career levels being developed. To assist you in this we have

included a summary of the career framework work to date, but if you would like further details please do not hesitate to contact Ms Emma Heughan, Project Manager, Skills for Health (Mobile: 07789 653 145), email: [emma.heughan@skillsforhealth.org.uk](mailto:emma.heughan@skillsforhealth.org.uk)

Many of the questions we have posed are open-ended and we would very much appreciate any views you would like to share with us. Much of the information sought may already be in the public domain and it would be helpful to have that signposted to us if this is the case. We would also like to know of any developments in this area that you are currently involved with/leading so that we do not duplicate effort or inadvertently affect your work

If you have any queries relating to this questionnaire or indeed to the project as a whole please do not hesitate to contact us, either through the UKVRPHS Register Office (tel: 020 7827 5926, email: [register@cieh.org](mailto:register@cieh.org)) or direct to Dr Lillian Somerville (Vice Chair of the Joint Board and Board member lead for this work) (tel: 01886 830241 email: [lillian.somerville@tiscali.co.uk](mailto:lillian.somerville@tiscali.co.uk)).

Completed questionnaire should be returned by **Wednesday 31 January 2007** to:

The UKVRPHS (Practitioner project)  
Chadwick Court  
15 Hatfields  
London SE1 8DJ

Or emailed to: [register@cieh.org](mailto:register@cieh.org)

## **Section 1. Development of knowledge and skills in public health**

Improving the health of the public is a broad and complex area. In the work to establish an assessment framework for Defined Registration with the UKVRPHS all the professional groups and organizations involved agreed that the following areas were **core** to public health practice and should apply to all public health practitioners:

1. Surveillance and assessment of the population's health and well-being
2. Assessing the evidence of effectiveness of health and healthcare interventions, programmes and services
3. Policy and strategy development and implementation
4. Leadership and collaborative working for health

There was also agreement that there were **non core** areas which were specific to the different public health disciplines, viz:

5. Health improvement
6. Health protection
7. Public health intelligence
8. Academic public health
9. Health and Social Care quality

These core and non core competency areas are now being used as the basis for developing the Public Health Career Framework.

(Please note: if you cannot identify any parts of your workforce that are trained in/contribute to the areas of practice above you may not find this questionnaire of relevance to you. In this case we would be grateful if you could contact the Register for a further discussion)

---

**Question 1.** What are the areas of practice that are relevant to your workforce (please use the numbers 5-9 as listed above for reference)?

*All areas of practice are relevant to the pharmaceutical workforce i.e. 5,6,7,8 and 9*

**Question 2.** What are the main ways in which public health practitioners in your workforce would develop their knowledge and skills in the core and non core areas above (numbered 1-9)? (It may be helpful to relate groups of practitioners to the career framework levels)

*There is a need to establish a foundation in public health in the pharmacy undergraduate curriculum (years 1 to 4), to build on this in the pre-registration year (year 5) and ensure it is a component of relevant postgraduate (PharmD/MSc/Diploma) programmes. In addition, development of relevant knowledge and skills needs to be incorporated in the mandatory continuing professional development undertaken by the pharmacy workforce.*

### **Question 3.**

(a) The Sector Skills Council (Skills for Health) developed National Occupational Standards (NOS) for public health practice both for Specialists and Practitioners. Have you used these to steer development of public health knowledge and skills development and if so how?

*The NOS have not been used to steer the development of public health knowledge and skills for pharmacists.*

(b) The work on the NOS predated the Faculty of Public Health and UKVRPHS work in developing core and non core areas of public health listed above. Have you used these to steer development of public health knowledge and skills development and if so how?

*It is intended to incorporate the public health competencies of the Faculty of Public Health alongside those developed by the RPSGB for individual pharmacists to utilize when completing their mandatory CPD record.*

(c) Are there other public health standards you have drawn on and if so how?

*No other public health standards/competencies have been drawn upon other than those of the Faculty of Public Health.*

### **Question 4 Comments.**

Please give any further comments or views on the development of knowledge and skills in public health

*The RPSGB recognize the need to incorporate appropriate knowledge and skills of public health in the undergraduate curriculum and build on this throughout the career of the pharmacist.*

*The inclusion of public health in the undergraduate syllabus and relevant content is monitored when the Society undertakes its accreditation visit to each School of Pharmacy (this normally occurs every five years for each School of Pharmacy).*

## **Section 2. Accreditation**

**Question 5.** Does development of knowledge and skills lead to a specific qualification and/or accreditation? If so please state what qualification and/or accreditation and for whom it is relevant.

(It would be particularly helpful to use the public health career framework to indicate the levels of practice to which accreditation applies – although we fully appreciate this can be indicative only)

Please provide details of how this is done and by whom.

*The possibility of individual pharmacists, appropriately qualified to operate at the defined specialist (Consultant) level, having an appropriate annotation alongside their name in the register of pharmaceutical chemists has been raised by members of the Society and the feasibility is being explored.*

## **Question 6. Comments.**

Please give any further comments or views on accreditation in public health.

*For pharmacists working in public health there needs to be some exploration of joint accreditation with the UKVRPHS and the implications of this.*

## **Section 3. Regulation**

**Question 7.** Is there any formal registration that follows from qualification/ accreditation?

If yes please give details of this registration (If No please go to Section 4)

**Question 8.** If you hold a register of practitioners do you separately identify those who work in the area of public health within this register?

*The RPSGB maintains the register of pharmaceutical chemists. At present the register does not identify those who work in the area of public health.*

**Question 9.** Is accreditation and registration with you mandatory or voluntary to practise in the public health elements of the role?

*Registration with the RPSGB is mandatory to practice as a pharmacist in whatever field is chosen.*

**Question 10. Comments.**

Please give any further comments or views on regulation in public health.

*The most accepted and over – arching definition of public health is ‘as the science and art of preventing disease, prolonging life and promoting health through organized efforts of society’. (Aceheson D. Public Health in England. Report of the Committee of Inquiry into the Future Development of the Public health Function. London: DOH, 1998). Within this definition pharmacists already apply their pharmaceutical skills, knowledge and resources to promote these objectives with the aim of defining, addressing and monitoring the health needs of the population. This application is sometimes known as ‘pharmaceutical care’.*

*There are 12,000 Community Pharmacies in the UK – whose staff see an estimated six million customers a day (Royal Pharmaceutical Society of GB, Statistics of pharmacists and registered premises). Community pharmacists are therefore already a significant component of the of the public health workforce. Based in the heart of communities, they create an informal network of drop-in access points for medicines and advice on health and well-being in the community.*

*THE RPSGB works closely with the public health organisation, PharmacyHealthlink whose role is to support the development of public health in pharmacy.*

**Section 4. Further comments**

Please give any comments or views on the role of the UKVRPHS in the accreditation and regulation of public health professionals.

I would be willing to be contacted by the project team for further discussion on public health workforce regulation.

Yes / No / Contact details

**Thank you for completing this questionnaire.**

Please return to:

The UKVRPHS (Practitioner project)  
Chadwick Court  
15 Hatfields  
London SE1 8DJ

Or email to: [register@cieh.org](mailto:register@cieh.org)

**By Wednesday 31 January 2007**