

**Faculty of Public Health**

**The Faculty of Public Health Diplomate examination (DFPH)  
2015 syllabus**

This document links each element of the DFPH syllabus with a key area of the curriculum. Y1 indicates a primary link, Y2 indicates a secondary link

*NB. KA 9 (Professional personal & ethical development) and KA10 (Integration & application of competences for consultant practice are not mapped as either they are not assessed through Part A or elements are subsumed within other KAs*

**1. Research methods appropriate to public health practice, including epidemiology, statistical methods, and other  
1 methods of enquiry including qualitative research methods**

**1.1 Epidemiology**

Intelligence	Evidence	Policy	Leader	Himp	Hprot	Health and Care	Academic
KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8

		Intelligence	Evidence	Policy	Leader	Himp	Hprot	Health and Care	Academic
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8
1.1.1	use of routine vital and health statistics to describe the distribution of disease in time and place and by person	y1				y2	y1	y2	y1
1.1.2	numerators, denominators and populations at risk	y1	y2			y2	y1	y2	y1
1.1.3	time at risk	y1	y2				y1	y2	y1
1.1.4	methods for summarising data	y1	y1				y1	y2	y1
1.1.5	incidence and prevalence including direct and indirect standardisation,	y1	y2			y2	y1	y2	y1
1.1.6	years of life lost	y1	y2			y2	y2	Y2	y1
1.1.7	measures of disease burden (event-based and time-based) and population attributable risks including identification of comparison groups appropriate to Public Health	y1	y2			y2	y1	y2	y1
1.1.8	sources of variation, its measurement and control	y1	y2				y1	y2	y1
1.1.9	common errors in epidemiological measurement, their effect on numerator and denominator data and their avoidance	y1	y2			y2	y1	y2	y1
1.1.10	concepts and measures of risk	y1	y1			y2	y1	y2	y1
1.1.11	effect measures including odds ratios, rate ratios and risk ratios	y1	y1			y2	y1	y2	y1

	(relative risk);									
1.1.12	association and causation	y1	y1			y2	y1	y2	y1	
1.1.13	biases and confounding	y1	y1			y2	y1	y2	y1	
1.1.14	interactions, methods for assessment of effect modification	y1	y1			y2	y1	y2	y1	
1.1.15	strategies to allow / adjust for confounding in design and analysis	y1	y1				y1	Y2	y1	
1.1.16	the design, applications, strengths and weaknesses of descriptive studies and ecological studies		y1			y2	y1	y2	y2	
1.1.17	design, applications, strengths and weaknesses of cross-sectional, analytical studies, and intervention studies (including randomised controlled trials)		y1			y2	y1	y2	y1	
1.1.18	analysis of health and disease in small areas	y1				y2	y1	y2	y2	
1.1.19	Validity, reliability and generalisability		y1			y2	y2	y2	y1	
1.1.20	intention to treat analysis		y1			y2	Y2	y2	y1	
1.1.21	clustered data - effects on sample size and approaches to analysis		y1				y2	y2	y2	
1.1.22	Numbers Needed to Treat (NNTs) - calculation, interpretation, advantages and disadvantages	y2	y1			y2	y2	y2	y1	
1.1.23	time-trend analysis, time series designs	y1	y1				y1	y2	y1	
1.1.24	methods of sampling from a population	y1	y1			y2	y1	y2	y1	
1.1.25	methods of allocation in intervention studies		y1			y2	y1	y2	y1	
1.1.26	the design of documentation for recording survey data, construction of valid questionnaires, methods for validating observational techniques	y1	y1			y2	y1	y2	y1	
1.1.27	studies of disease prognosis.		y1					y2	y2	
1.1.28	the ethics and conduct of epidemiological research.	y1	y1				Y2	y2	y1	
1.1.29	Appropriate use of statistical methods in the analysis and interpretation of epidemiological studies, including:	y1	y2			y2	y1	y2	y1	
1.1.30	life-table analysis	y1	y1			y2	y2	y2	y2	
1.1.31	epidemic theory (effective and basic reproduction numbers, epidemic thresholds) and techniques for infectious disease data (construction and use of epidemic curves, generation numbers, exceptional reporting and identification of significant clusters)						y1	y2	y1	

1.1.32	systematic reviews, methods for combining data from several studies, and meta-analysis		y1			y2	Y2	y2	y1	
1.1.33	electronic bibliographical databases and their limitations	y1	y1	y1		y2	y1	y2	y1	
1.1.34	grey literature	y2	y1	y1		y1	y1	y2	y1	
1.1.35	Publication Bias		y1				y2	y2	y1	
1.1.36	Evidence Based Medicine and Policy		y2	y1				y1	y1	
1.1.37	The hierarchy of research evidence - from well conducted meta-analysis down to small case series,		y1					y2	y1	
1.1.38	the Cochrane Collaboration		y1	y1		y2	y1	y2	y1	
1.1.39	Understanding of basic issues and terminology in the design, conduct, analysis and interpretation of population-based genetic association studies, including twin studies, linkage and association studies.		y1					y2	y1	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
1.2	<b>Statistical methods</b>									
1.2.1	elementary probability theory	y1	y1			y2	y1	y2	y1	
1.2.2	methods for the quantification of uncertainty	y1	y1			y2	y1	y2	y1	
1.2.3	estimation of confidence intervals	y1	y1			y2	y1	y2	y1	
1.2.4	independence of events	y1	y1			y2	y1	y2	y1	
1.2.5	conditional probability	y1	y1			y2	y1	y2	y1	
1.2.6	standard statistical distributions (e.g. Normal, Poisson and binomial) and their uses	y1	y1			y2	y1	y2	y1	
1.2.7	sampling distributions	y1	y1			y2	y1	y2	y1	
1.2.8	principles of making inferences from a sample to a population	y1	y1			y2	y1	y2	y1	
1.2.9	measures of location and dispersion and their appropriate uses	y1	y2			y2	y1	y2	y1	
1.2.10	graphical methods in statistics	y1	y1			y2	y1	y2	y1	
1.2.11	hypothesis testing	y1	y1			y2	y1	y2	y1	

1.2.12	type I and II errors	y1	y1			y2	y1	y2	y1	
1.2.13	problems of multiple comparisons	y1	y1			y2	y1	y2	y1	
1.2.14	parametric and non-parametric tests for comparing two or more groups	y1	y1			y2	y1	y2	y1	
1.2.15	sample size and statistical power	y1	y1			y2	y1	y2	y1	
1.2.16	regression and correlation	y2	y1			y2	y1	y2	y1	
1.2.17	the appropriate use, objectives, and value of multiple linear regression, multiple logistic regression, principles of life-tables and Cox regression.	y2	y1			y2	y1	y2	y1	
1.2.18	Comparisons of survival rates; heterogeneity; funnel plots; the role of Bayes' theorem.	y1	y1			y2		y2	y1	
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
1.3	<b>Approaches to the assessment of health care needs, utilisation and outcomes, and the evaluation of health and health care</b>									
1.3.1	the uses of epidemiology and other methods in defining health service needs and in policy development	y1		y1		y2	y1	y1		
1.3.2	participatory needs assessment	y1			y2	y1	y2	y1		
1.3.3	formulation and interpretation of measures of utilisation and performance	y2					y2	y1	y2	
1.3.4	measures of supply and demand	y1					y2	y1	y2	
1.3.5	study design for assessing effectiveness, efficiency and acceptability of services including measures of structure, process, service quality, and outcome of health care		y1			y1	y1	y1	y1	
1.3.6	measures of health status, quality of life and health care	y1	y1			Y2	y1	y1	y1	
1.3.7	population health outcome indicators	y1	y1			y2	y1	y1	y2	
1.3.8	deprivation measures	y1	y2			y1	y1	y1	y2	
1.3.9	principles of evaluation, including quality assessment and quality assurance		y2	y2		y1	y1	y1	y2	
1.3.10	equity in health care	y1	y2	y2		y1		y1	y1	
1.3.11	clinical audit						y1	y1	y1	

1.3.12	confidential enquiry processes						y1	y1	y2	
1.3.13	the use of Delphi methods	y2	y2	y2	y2	y2		y1	y2	
1.3.14	appropriateness and adequacy of services and their acceptability to consumers and providers	y1		y1		y2	y1	y1		
1.3.15	economic evaluation (see also 4.d)		y1	y2			y1	y1	y1	
1.3.16	epidemiological basis for preventive strategies	y1				y2	y1	y1	y1	
1.3.17	health and environmental impact assessment.		y2	y1		y2	y1	y1	y2	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
1.4	<b>The principles of qualitative methods</b>									
1.4.1	semi-structured; narrative and in-depth interviewing, focus groups, action research, participant observation.	y1	y2	y2	y2	y1	y2	y2	y1	
1.4.2	the contribution of qualitative methods to public health research and policy;		y1	y1		y2	y2	y2	y1	
1.4.3	use, analysis and presentation of qualitative data;	y1	y1			y2	y2	y2	y2	
1.4.4	the ethical issues which may arise	y1			y2	y2		y2	y1	
1.4.5	common errors and their avoidance	y1		y2		y2		y2	y1	
1.4.6	strengths and weaknesses	y1	y2	y2		y2	y2	y2	y1	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
2	<b>Disease causation and the diagnostic process in relation to public health; prevention and health promotion</b>									
2.1	<b>Epidemiological paradigms:</b>									
2.1.1	programming, life-course, and adult risk factor approaches.	y2				y2		y2	y1	
2.2	<b>Epidemiology of specific diseases (and their risk factors) of public health significance:</b>									
2.2.1	knowledge of the defining clinical features, distribution, causes, behavioural features and determinants of diseases which currently make a significant impact on the health of local populations.	y1				y2	y1	Y2	y1	

2.2.2	with particular reference to those that are:									
	potentially preventable,									
	require the planned provision of health services at individual, community and structural levels,	y1				y2	y1	y2	y1	
	are otherwise of particular public concern, for example mental health.									
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>2.3</b>	<b>Diagnosis and Screening</b>									
2.3.1	principles, methods, applications and organisation of screening for early detection, prevention, treatment and control of disease	y1				y1	y1	y1	y2	
2.3.2	statistical aspects of screening tests, including knowledge of and ability to calculate, sensitivity, specificity, positive and negative predictive values, and the use of ROC curves	y1	y1			y1	y1	y2	y1	
2.3.3	differences between screening and - diagnostic tests, case finding	y1	y2			y2	y1	y2	y2	
2.3.4	likelihood ratios	y1	y1			y2	y2	y2	y1	
2.3.5	pre and post test probability	y1	y1			y2	y2	y2	y1	
2.3.6	ethical economic, legal and social aspects of screening	y2	y1	y2		y2	y2	y2		
2.3.7	the principles of informed choice	y2	y2			y2	y2	y2	y2	
2.3.8	planning, operation and evaluation of screening programmes		y1	y2		y2	y1	y2		
2.3.9	the evidence basis needed for developing screening policies and implementing screening programmes, including established programmes such as breast and cervix and those currently in development, being piloted or subject to major research activity		y1			y2	y1	y2	y2	
2.3.10	ethical, social and legal implications of a genetic screening test	y2	y2	y2		y2		y2		
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>2.4</b>	<b>Genetics</b>									
2.4.1	elementary human genetics	y2						y2	y1	
2.4.2	inherited causes of disease in populations	y1						y2	y1	

2.4.3	basic genomic concepts including patterns of inheritance, penetrance, genotype/phenotype differences, polygenetic disorders, gene-environment interactions and the role of genes in health and disease	y2						y2	y1	
2.4.4	ætiology, distribution and control of disease in relatives							y2	y2	
2.4.5	elementary molecular biology as related to genetic epidemiology and microbiology						y1	y2		
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
<b>2.5</b>	<b>Health and social behaviour</b>									
2.5.1	principles of nutrition, nutritional surveillance and assessment in specific populations including its short and long term effects	y2				y1				
2.5.2	the influence of malnutrition in disease aetiology, pregnancy, and in growth and development	y1				y1				
2.5.3	markers of nutritional status, nutrition and food the basis for nutritional interventions and assessment of their impact	y1				y1				
2.5.4	social, behavioural and other determinants of the choice of diet	y1				y1				
2.5.5	Dietary Reference Values (DRVs), current dietary goals, recommendations, guidelines and the evidence for them	y2				y1				
2.5.6	the effects on health of different diets (e.g. "Western" diet), physical activity, alcohol, drugs, smoking, sexual behaviour, and sun exposure.	y1				y1				
2.5.7	Combating complex problems using a wide range of approaches, including health service interventions and broader cultural interventions.					y1	y2			
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
<b>2.6</b>	<b>Environment</b>									
2.6.1	environmental determinants of disease	y1				y1	y1			
2.6.2	risk and hazard	y1					y1		y2	
2.6.3	the effects of global warming and climate change	y1				y1	y1			
2.6.4	principles of sustainability					y1	y1	y1		

2.6.5	the health problems associated with poor housing and home conditions, inadequate water supplies, flooding, poor sanitation and water pollution	y1		y2		y1	y1			
2.6.6	methods for monitoring and control of environmental hazards including: food and water safety, atmospheric pollution and other toxic hazards, noise, and ionising and electromagnetic radiation;	y2		y2			y1			
2.6.7	the use of legislation in environmental control					y2	y1			
2.6.8	appreciation of factors affecting health and safety at work (including the control of substances hazardous to health)	y2					y1			
2.6.9	occupation and health	y2				y1	y1			
2.6.10	health impact assessment for environmental pollution			y2		y1	y1			
2.6.11	chemical incident management						y1			
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
<b>2.7</b>	<b>Communicable disease</b>									
2.7.1	definitions including: incubation, communicability and latent period susceptibility, immunity, and herd immunity						y1			
2.7.2	use and evaluation of national and international surveillance									
2.7.3	methods of control						y1			
2.7.4	the design, evaluation, and management of immunisation programmes	y2	y2				y1	y2		
2.7.5	choices in developing an immunisation strategy			y2			y1	y2		
2.7.6	the steps in outbreak investigation including the use of relevant epidemiological methods						y1			
2.7.7	knowledge of natural history, clinical presentation, methods of diagnosis and control of infections of local and international Public Health importance including: emerging diseases and those with consequences for effective control;	y2					y1			
2.7.8	knowledge of natural history, clinical presentation, methods of diagnosis and control of infections of local and international Public Health importance including: emerging diseases and those with consequences for effective control;	y2					y1			
2.7.9	organisation of infection control						y1	y2		



2.7.10	a basic understanding of the biological basis, strengths and weaknesses of routine and reference microbiological techniques						y1			
2.7.11	international aspects of communicable disease control including Port Health	y2					y1			
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
<b>2.8</b>	<b>Principles and practice of health promotion</b>									
2.8.1	collective and individual responsibilities for health, both physical and mental					y1	y1			
2.8.2	interaction between, genetics and the environment (including social, political, economic, physical and personal factors) as determinants of health, including mental health	y2		y2		y1	y1			
2.8.3	ideological dilemmas and policy assumptions underlying different approaches to health promotion					y1	y1			
2.8.4	the prevention paradox					y1			y2	
2.8.5	health education and other methods of influencing personal life-styles which affect health					y1	y1		y2	
2.8.6	appropriate settings for health promotion (e.g. schools, the workplace)					y1	y1			
2.8.7	the value of models in explaining and predicting health-related behaviour					y1			y2	
2.8.8	risk behaviour in health and the effect of interventions in influencing health related behaviour in professionals, patients and the public					y1	y1			
2.8.9	theory and practice of communication with regard to health education					y1	y2			
2.8.10	the role of legislative, fiscal and other social policy measures in the promotion of health			y2		y1	y2			
2.8.11	methods of development and implementation of health promotion programmes			y2		y1	y2			
2.8.12	community development methods					y1	y2			
2.8.13	partnerships			y1		y1	y1	y2		
2.8.14	evaluation of health promotion, public health or public policy interventions			y1		y1	y1	y2	y2	
2.8.15	international initiatives in health promotion					y2	y1			
2.8.16	opportunities for learning from international experience.			y2		y2	y1	y2		

		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8
<b>2.9</b>	<b>Disease prevention, models of behaviour change</b>								
2.9.1	evaluation of preventative actions, including the evidence base for early interventions on children and families, support for social and emotional development		y1	y2		y1	y1	y2	y2
2.9.2	pre-determinants of health including the effect of social cohesion on health outcomes	y2				y1	y1		y2
2.9.3	approaches to individual behaviour change including economic and other incentives;								
2.9.4	The role of social marketing			y2		y1	y2		
2.9.5	involvement of the general public in health programs and their effects on health care					y1	y2		
2.9.6	concepts of deprivation and its effect on health of children and adults	y2				y1	y1		y2
2.9.7	the benefits and means of community development, including the roles and cultures of partner organisations such as local authorities			y1	y2	y1	y2	y2	
2.9.8	health impact assessment of social and other policies			y1		y1	y1	y2	y2
2.9.9	the role of strategic partnerships and the added value of organisations working together			y1	y1	y2	y1	y2	
2.9.10	the role of target setting,		y2	y2		y2	y1	y2	
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8
<b>3</b>	<b>3. Health information</b>								
<b>3.1</b>	<b>Populations</b>								
3.1.1	conduct of censuses	y1						y2	y2
3.1.2	collection of routine and ad hoc data	y1					y1	y2	y2
3.1.3	demography	y1					y2	y2	y2
3.1.4	important regional and international differences in populations, in respect of age, sex, occupation, social class, ethnicity and other characteristics	y1					y2	y2	y2



3.3.1	Use of information for health service planning and evaluation	y1					y2	y1	y1	
3.3.2	specification and uses of information systems	y1					y2	y1	y1	
3.3.3	common measures of health service provision and usage	y1					y2	y1	y2	
3.3.4	the uses of mathematical modelling techniques in health service planning	y1					y2	y1	y2	
3.3.5	indices of needs for and outcome of services	y1	y1				y2	y1	y1	
3.3.6	the strengths, uses, interpretation and limitations of routine health information	y1					y2	y1	y2	
3.3.7	use of information technology in the processing and analysis of health services information and in support of the provision of health care	y1					y2	y1	y2	
3.3.8	principles of information governance	y1	y2			y2	y2	y2	y2	
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
4	<b>4. Medical Sociology, Social Policy and Health Economics</b>									
4.1	<b>Concepts of health and illness and the aetiology of illness:</b>									
4.1.1	the theoretical perspectives and methods of enquiry of the sciences concerned with human behaviour					y1				
4.1.2	illness as a social role					y1		y2		
4.1.3	concepts of health and wellbeing;					y1		y2		
4.1.4	concepts of primary and secondary deviance;					y2				
4.1.5	stigma and how to tackle it;					y2				
4.1.6	impairment, disability and handicap	y2				y1		y2		
4.1.7	social and structural iatrogenesis					y1		y2		
4.1.8	role of medicine in society					y1		y2		
4.1.9	explanations for various social patterns and experiences of illness including: differences of gender, ethnicity, employment status, age and social stratification	y2				y1	y2	y2		
4.1.10	the role of social, cultural, psychological and family relationship factors in the aetiology of illness and disease	y2				y1	y2	y2		

4.1.11	social capital and social epidemiology	y2					y1	y2	y2	y2	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>		
4.2	<b>Health care</b>										
4.2.1	different approaches to health care including self-care, family care, community care, self-help groups					y2		y1			
4.2.2	hospitals as social institutions					y2		y1			
4.2.3	professions, professionalisation and professional conflicts				y2	y2		Y1			
4.2.4	the role of clinical autonomy in the provision of health care				y2	y2		y1			
4.2.5	behaviour in response to illness and treatments					y2	y1	y1			
4.2.6	psychology of decision-making in health behaviour.					y1	y1	y1			
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>		
4.3	<b>Equality, equity and policy</b>										
4.3.1	concepts of need and social justice		y2	y1		y1	y1	y1	y2		
4.3.2	priorities and rationing		y2	y1		y2	y2	y1	y2		
4.3.3	balancing equity and efficiency		y2	y1		y2	y2	y1	y2		
4.3.4	consumerism and community participation			y1		y1		y1			
4.3.5	prioritisation frameworks and equity of service provision;		y1	y2				y2			
4.3.6	public access to information	y2		y1		Y1	y2	y1			
4.3.7	user and carer involvement in service planning	y1		y1		y2	y2	y1	y2		
4.3.8	appreciation of concepts of power, interests and ideology		y2	y1		y1		y1			
4.3.9	inequalities in health (e.g. by region, ethnicity, socio-economic position or gender) and in access to health care, including their causes;	y1	y1	y1				y1	y1		
4.3.10	health and social effects of migration	y1				y2			y2		

4.3.11	health effects of international trade	y2		y2						
4.3.12	global influences on health and social policy			y2		y2				
4.3.13	critical analysis of investment in health improvement, and the part played by economic development and global organisations			y1		y2		y1		
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	KA9
4.4	<b>Health economics:</b>									
4.4.1	principles of health economics including: the notions of scarcity, supply and demand, distinctions between need and demand, opportunity cost, discounting, time horizons, margins, efficiency and equity)		y1	y1			Y2	y1	y1	
4.4.2	assessing performance			y1				y1	y1	
4.4.3	financial resource allocation		y2	y1				y1	y1	
4.4.4	systems of health and social care and the role of incentives to achieve desired end-points							y1		
4.4.5	techniques of economic appraisal including cost-effectiveness analysis and modelling, cost-utility analysis, option appraisal and cost-benefit analysis, the measurement of health benefits in terms of QALYs and related measures		y1	y1				y1	y2	
4.4.6	marginal analysis		y1	y2				y1	y2	
4.4.7	decision analysis		y1	y2				y1	y1	
4.4.8	the role of economic evaluation and priority setting in health care decision making including the cost effectiveness of Public Health, and Public Health interventions and involvement		y1	y1	y2	y2	y2	y1	y1	
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
5	<b>5. Organisation and management of health care and health care programs from a Public Health perspective</b>									
5.1	<b>Understanding individuals, teams/groups and their development</b>									
5.1.1	Motivation, creativity and innovation in individuals, and its relationship to group and team dynamics			y1	y1	y2		y1		

5.1.2	barriers to, and stimulation of, creativity and innovation (e.g. by brainstorming)		y2	y1	y1	y2		y1		
5.1.3	learning with individuals from differing professional backgrounds			y1	y1	y2	y1	y1		
5.1.4	personal management skills (e.g. managing: time, stress, difficult people, meetings)			y2	y1	y2	y2	y2		
5.1.5	principles of the effective manager			y1	y1	y2	y2	y1		
5.1.6	principles of leadership and delegation			y1	y1	y2	y1	y2		
5.1.7	principles of negotiation and influencing			y1	y1	y2	y1	y1		
5.1.8	principles, theories and methods of effective communication (written and oral) in general, and in a management context.	y2		y1	y1	y2	y1	y1		
5.1.9	the theoretical and practical aspects of power and authority, role and conflict			y1	y1	y2	y2	y1		
5.1.10	behaviour change in individuals and organisations.			y1	y1	y2	y2	y2		
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
5.2	<b>Understanding Organisations, their function and structure</b>									
5.2.1	internal and external organisational structures and environments;			y1	y1	y2	y2	y1		
5.2.2	evaluating internal resources and organisational capabilities;		y2	y2	y2	y2	y2	y2		
5.2.3	Identifying and managing internal and external stakeholder interests			y1	y1					
5.2.4	structuring and management of inter-organisational (network) relationships, including intersectoral work, collaborative working practices and partnerships			y1	y1	y2	y2	y1		
5.2.5	social networks and communities of interest			y1		y2	y2	y1		
5.2.6	the impact of Political, economic, socio-cultural, environmental and other external influences.	y2	y2	y1		y2	y2	y1	y2	
		KA1	KA2	KA3	KA4	KA5	KA6	KA7	KA8	
5.3	<b>Management and Change</b>									
5.3.1	management models and theories associated with motivation, leadership and change management, and their application to practical situations and problems;			y1	y1	y2	y2	y2		
5.3.2	critical evaluation of a range of principles and frameworks for			y1	y1	y2		y1		

	managing change									
5.3.3	the design and implementation of performance management against goals and objectives.			y1		y2	y2	y1		
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>5.4</b>	<b>Policy and Strategy development and implementation:</b>									
5.4.1	differences between policy and strategy, and the impact of policies on health;			y1						
5.4.2	principles underpinning the development of policy options and the strategy for their delivery;		y2	y1						
5.4.3	stakeholder engagement in policy developing, including its facilitation and consideration of possible obstacles;			y1	y2					
5.4.4	implementation and evaluation of policies including the relevant concepts of power, interests and ideology;			y1	y2					
5.4.5	problems of policy implementation;			y1						
5.4.6	strategy communication and implementation in relation to health care;			y1	y1					
5.4.7	theories of strategic planning;			y1	y1					
5.4.8	analysis, in a theoretical context, of the effects of policies on health;			y1						
5.4.9	major national and global policies relevant to public health;			y1						
5.4.10	health service development and planning;			y1				y1		
5.4.11	methods of organising and funding health services and their relative merits, focusing particularly on international comparisons and their history.			y2				y1		
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>5.5</b>	<b>Health and social service quality</b>									
5.5.1	principles underlying the development of clinical guidelines, clinical effectiveness and quality standards, and their application in health and social care;		y2	y2		y2	y2	y1		
5.5.2	public and patient involvement in health service planning;	y1						y1		



5.5.3	professional accountability, clinical governance, performance and appraisal;				y1					
5.5.4	risk management and patient safety;				y1	y2	y2	y2		
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>5.6</b>	<b>Finance, management accounting and relevant theoretical approaches:</b>									
5.6.1	the linkages between demographic information and health service information - its public health interpretation and relationship to financial costs	y1						y1	y1	
5.6.2	budgetary preparation, financial allocation and service commissioning	y2		y1	y2			y1		
5.6.3	methods for audit of health care spending	y2	y2					y1	y2	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>6</b>	<b>Skills</b>									
<b>6.1</b>	<b>Design and interpretation of studies:</b>									
6.1.1	skills in the design of research studies; ability to draw appropriate conclusions from quantitative and qualitative research;	y1	y1					y1	y1	y1
6.1.2	ability critically to evaluate published papers including the validity of the use of statistical techniques and the inferences drawn from them;	y1	y1							y1
6.1.3	ability to draw appropriate conclusions from quantitative and qualitative research	y1	y1			y2	y1	y1	y1	
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	
<b>6.2</b>	<b>Data processing, presentation and interpretation:</b>									
6.2.1	ability to sort and manipulate data, and to draw appropriate conclusions from quantitative and qualitative data	y1	y1							y1
		<b>KA1</b>	<b>KA2</b>	<b>KA3</b>	<b>KA4</b>	<b>KA5</b>	<b>KA6</b>	<b>KA7</b>	<b>KA8</b>	



OSPHE competencies mapped to new curriculum

Key areas in curriculum competency framework

Competencies	KA 1	KA 2	KA 3	KA 4	KA 5	KA 6	KA 7	KA 8	KA 9
Presenting communication skills	All LOs except 1.3 and 1.7	All LOs except 2.1, 2.4, 2.5	All LOs except 3.5 and 3.7	All LOs	All LOs except 5.4	All except 6.2, 6.5 and 6.9	All LOs	All except 8.6, 8.8 and 8.9	All except 9.1, 9.4 and 9.6
Listening communication skills	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs
Demonstrating ascertainment of key public health facts from the material provided	All LOs	All LOs			ALL LOs	ALL LOs	ALL LOs	ALL LOs	
Giving a balanced view and/or explaining appropriately key Public Health concepts	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	
Appropriately and sensitivity handling uncertainty, the unexpected or conflict	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs	All LOs

KA 1: Use of public health intelligence to survey and assess a population's health and wellbeing

KA 2: Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations

KA3: Policy and strategy development and implementation

KA 4: Strategic leadership and collaborative working for health

KA 5: Health Improvement, Determinants of Health, and Health Communication

KA 6: Health Protection 55

KA 7: Health and Care Public Health 60

KA 8: Academic public health

KA 9: Professional personal and ethical development (PPED) 71

KA 10: Integration and Application of Competences for Consultant Practice