

Competency Framework

NSW Aboriginal Population Health Training Initiative

July 2024



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NSW Ministry of Health acknowledges the people of the many traditional countries and language groups of New South Wales. It acknowledges the wisdom of Elders both past and present and pays respect to Aboriginal communities of today.

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Foreword

The NSW Aboriginal Population Health Training Initiative was established in 2011 as part of the NSW Government's commitment to Closing the Gap in health outcomes between Aboriginal and non-Aboriginal Australians.

The program aims to increase Aboriginal representation across the population health workforce as a way of delivering more culturally competent services and achieving better health outcomes for Aboriginal people.

Since 2012, the program has used a detailed competency framework to guide workplace learning and assessment. In 2019, a review of the competency framework was undertaken to assess how it was being used by key stakeholders, whether it continued to be relevant and appropriate, and whether it was meeting its intended objectives.

The review found that stakeholders had good overall familiarity with and understanding of the framework and valued its flexibility and close alignment with work placements. The review also identified a need to refresh the framework to ensure it continued to reflect contemporary population health practice.

The development of this refreshed competency framework was an iterative process that commenced in 2020. The process involved extensive consultation with current and former trainees, program graduates, workplace supervisors across NSW, program assessors, members of the program's advisory committee and a broad range of subject matter experts.

This work was led by a working group comprising representatives from the program's current trainees and graduates, program assessors, advisory committee members, and staff of the Ministry's Population and Public Health Division. We would particularly like to acknowledge the work of the trainee representatives in the development of the vision and values statement that forms part of this framework.

The refreshed competency framework reflects the key skills and knowledge expected of graduates and aims to ensure that the competencies are adaptable to meet the priorities of a dynamic health system.



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APHTI vision and values

Background

The Aboriginal Population Health Training Initiative (APHTI) is a collaboration between Aboriginal trainees and graduates, NSW health services and the NSW Ministry of Health.

The APHTI aims to increase Aboriginal representation across health services to enhance the population health workforce, deliver more culturally competent services, reduce health inequities, and improve health outcomes for Aboriginal people. APHTI graduates hold the knowledge, high-level skills, and experience required to advocate for Aboriginal people, lands, and culture.

The APHTI is a three-year training program involving part-time study towards a Master of Public Health degree and supervised work placements within NSW population health services.

Our vision

A workforce in which knowledgeable, skilled, and capable Aboriginal population health professionals drive and influence current and future population health practice, programs, and policies in NSW

Our intent and commitment

We will work to:

- *achieve equity in health outcomes* between Aboriginal and non-Aboriginal Australians to close the gap by 2031
- *ensure widespread collaboration* with a range of agencies within and outside of the health sector to promote perspective, experience, and connection
- develop Aboriginal population health professionals who *understand the implications of policy* at all levels
- *enhance the role and significance* of Aboriginal population health professionals within the health system.

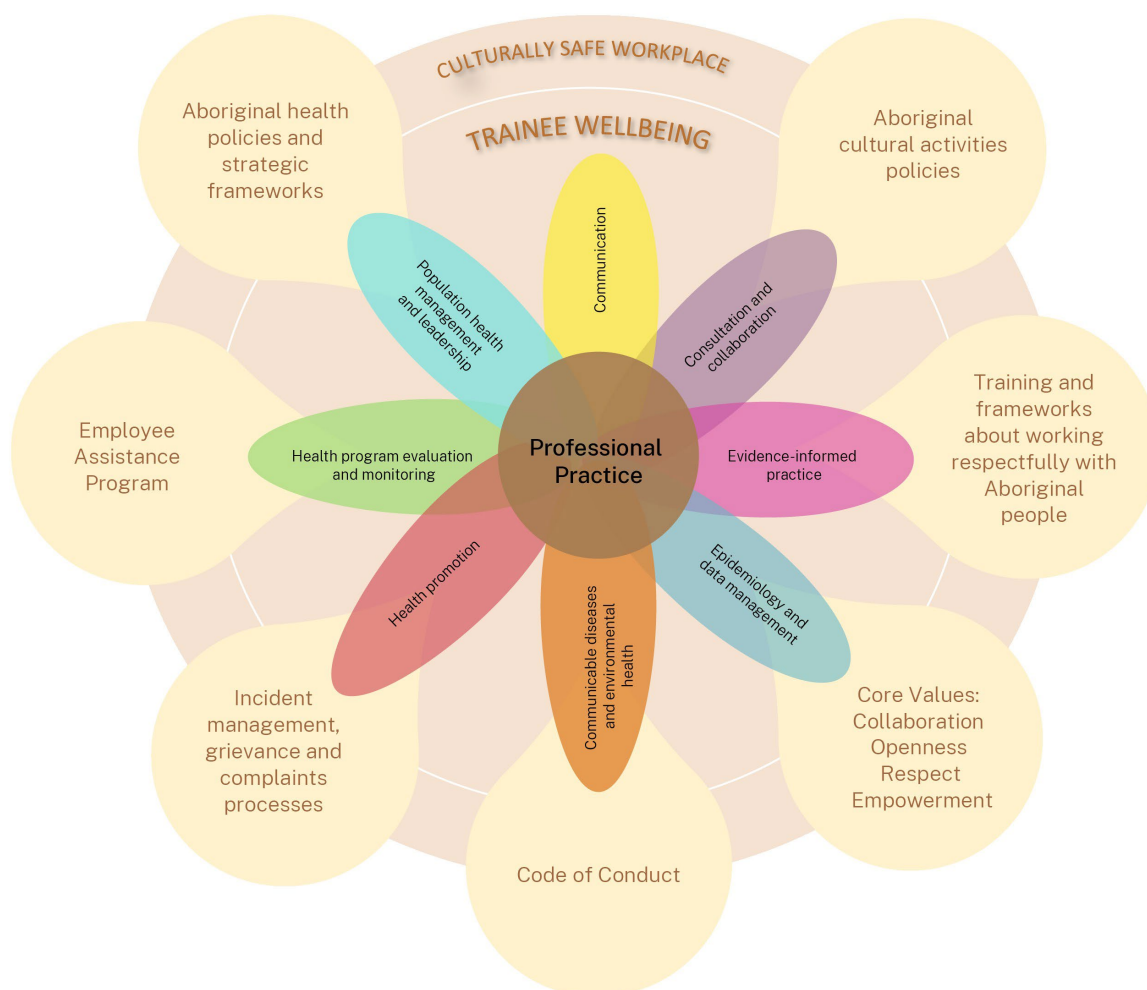
Our values

- Self-determination for Aboriginal peoples
- Elevated, embedded, and empowered Aboriginal leadership and voices
- Commitment, collaboration, and high-level participation
- Reciprocity and two-way learning
- Cultural inclusion, respect, empathy, and focus on community.

How do we do this?

Core elements of the APHTI

Figure 1: The relationship between a culturally safe workplace, trainee wellbeing and competency attainment¹



Trainee wellbeing

Trainee wellbeing is fundamental. This begins by recognising and valuing the knowledge, skills, and experiences that trainees bring to the APHTI. Wellbeing is facilitated by self-determination and incorporates reflective practice within a shared learning journey between trainees and the broader health system. The APHTI encourages and supports self care, which is essential to trainee wellbeing.

Culturally safe workplace

‘Cultural safety’ is the freedom to express our cultural identities and attitudes. It involves being open-minded and flexible in our attitudes towards people from other cultures. Everyone, regardless of culture, needs to be treated with respect and inclusion and needs to have an awareness of other cultures. This requires a united understanding and recognition that individual values and practices should safely coexist in workplaces and the wider community². We acknowledge that there is currently no nationally agreed definition of cultural safety. In the context of the APHTI, we use it to describe the individual and institutional knowledge, skills, attitudes, and competencies needed to create an environment that is safe for Aboriginal peoples.

¹ The outer yellow shapes are based on the flower of the tea-tree known as ‘Bimbun’, ‘Gumar’ or ‘Mudha’ by the Wiradjuri people. Williams A, Sides T, Connolly L. (2008) Wiradjuri plant use of Murrumbidgee. Murrumbidgee Catchment Management Authority, Wagga Wagga p.52. [https://wwwul.org.au/files/Wiradjuri plant use of Murrumbidgee - CMA.pdf](https://wwwul.org.au/files/Wiradjuri%20plant%20use%20of%20Murrumbidgee%20-%20CMA.pdf)

² Adapted from: <https://www.safework.nsw.gov.au/safety-starts-here/our-aboriginal-program/culturally-safe-workplaces/what-is-cultural-safety>

A culturally safe workplace respects Aboriginal ways of knowing, being and doing. The APHTI is committed to strengthening systems and processes within NSW Health to provide a workplace where culture and identity are respected and valued. We actively promote acceptance of Australia's cultural, linguistic and religious diversity and challenge prejudiced attitudes. The APHTI is committed to examining its role in creating culturally safe workplaces, including addressing institutional racism, and promoting decision making processes that increase the active participation of Aboriginal peoples and voices.

Racism

We reject all forms of racism. No one should experience racism within the health environment. Racism is detrimental to learning and practice, and has no place in the NSW health system. We are committed to the elimination of racial discrimination – including direct and indirect racism, racial vilification, and harassment – in all aspects of the working environment.

It is everyone's responsibility to call out instances of racism and discrimination, to challenge the attitudes that allow them to emerge, and to take appropriate and meaningful steps to eliminate racism.

Population health competencies

The APHTI competency framework is grounded in contemporary population health practice. The competencies have been designed to support a strong, knowledgeable and capable Aboriginal workforce that can work to protect, promote and prevent ill health within the community.

Like the APHTI, these competencies will evolve with time. We will seek the experiences of trainees and other stakeholders to adapt and strengthen the competency framework in the future. Collectively, APHTI alumni represent a growing cohort of future public health leaders, influencing the landscape and setting the tempo of change in population health practice, programs and policy.

Key supporting NSW Health policies and resources

- Aboriginal Cultural Training - Respecting the Difference³
- Aboriginal Workforce Composition Policy⁴
- NSW Health Code of Conduct⁵
- Incident management, grievance, and complaints processes and systems
- NSW Health Aboriginal Cultural Activities Policy⁶
- NSW Health CORE values
- Employee Assistance Program
- Health Education & Training Institute (HETI) online courses through My Health Learning⁷, including:
 - Aboriginal Culture – Respecting the Difference
 - Asking the Question: Improving the Identification of Aboriginal People training
 - The Aboriginal Mental Health Drug and Alcohol Toolkit (AMHDA)
 - Health for Older Aboriginal People
 - Yarning about Quitting
 - Respectful partnerships
 - Working with Aboriginal Mothers & Families
 - Incident Information Management System (IIMS): Notifier Training
 - Community and Inclusion

³ NSW Health Policy Directive PD2022_028. [Aboriginal Cultural Training - Respecting the Difference](#).

⁴ NSW Health Policy Directive PD2023_046. [Aboriginal Workforce Composition](#).

⁵ NSW Health Policy Directive PD2015_035. [NSW Health Code of Conduct](#).

⁶ NSW Health Policy Directive PD2019_025. [Aboriginal Cultural Activities Policy](#).

⁷ [My Health Learning Online Training Portal](#).

Why do we do this?

Why do we have the APHTI?

The APHTI:

- builds population health workforce capacity
- supports the development of a knowledgeable, skilled, and capable Aboriginal population health workforce
- increases the number of qualified Aboriginal people eligible for population health positions
- increases the population health workforce's exposure to Aboriginal population health issues
- supports Aboriginal public health professionals to drive and influence population health programs and policies
- increases awareness of cultural safety issues in population health workplaces
- highlights the importance of Aboriginal voices in decision-making processes. This includes incorporating Aboriginal ways of knowing, being and doing in the design, implementation and evaluation of policies and programs to achieve better health outcomes
- values the expertise of Aboriginal people working in NSW Health
- identifies ways to enhance career development for Aboriginal people working in population health in NSW.

Why do we use a competency framework?

The competency framework:

- promotes broad population health training, rather than a focus on Aboriginal health
- focuses on building skills and capabilities
- focuses on developing an adaptive and competent Aboriginal population health workforce
- promotes a flexible and holistic approach that includes trainees in decision-making processes and program delivery
- provides standards and tools to guide learning and assessment
- supports a standardised learning experience for trainees
- values the professionalism of Aboriginal employees and their abilities.

Why do trainees study a Master of Public Health?

The Master of Public Health:

- provides a theoretical framework for population health practice
- complements learning provided in the workplace
- provides the opportunity for expanded professional development through formal learning
- increases the number of Aboriginal people working in NSW Health with postgraduate qualifications in population health.

Introduction to the competency framework

This competency framework underpins the delivery of the NSW Aboriginal Population Health Training Initiative through setting objective standards for workplace learning. Importantly, the competency framework provides a common unit of analysis to review and assess trainee learning experiences across a range of work settings. The framework also supports academic learning within the Master of Public Health by facilitating the application of new knowledge and skills within the workplace.

The framework is designed to be flexible and recognises that trainees work across a broad range of population health issues, community groups and settings.

Competency areas

The competency framework defines nine core competency areas:

1. Professional practice
2. Population health management and leadership
3. Communication
4. Consultation and collaboration
5. Evidence-informed practice
6. Epidemiology and data management
7. Communicable diseases and environmental health
8. Health promotion
9. Health program evaluation and monitoring.

Trainees are required to demonstrate competence in each competency area. There is no prescribed sequence for addressing the competencies, and it is usual for trainees to address several competencies through each work placement.

Competency structure

Each competency area is made up of the following components:

Component	Purpose and intended usage
Competency title	States the broad area of population health practice.
Descriptor	States the scope and intent of the competency area.
Competency elements	Describe the specific knowledge, skills, abilities, and behaviours that make up the competency area; competency elements form the basis of assessment.
Core competency elements	- Describe the core knowledge, skills, abilities and behaviours that trainees are required to demonstrate - To successfully complete the APHTI, trainees are expected to provide evidence of competency achievement addressing all core elements.
Optional competency elements	- Describe additional elements that trainees may choose to demonstrate if they have the opportunity and interest - Optional elements are voluntary; trainees are not required or expected to attempt optional elements if they do not wish to - Optional elements do not replace core elements; all core elements must be completed, even if related optional elements are achieved - A maximum of three optional elements is recommended.
Performance criteria	- Describe the expected outcomes or behaviours associated with each competency element - Performance criteria are used to guide the depth and quality of learning expected; they are not intended to be prescriptive - Trainees are not required to address all of the performance criteria.
Examples of evidence	- Provide guidance on the types of evidence that trainees can present to demonstrate their competence - The examples provided are not exhaustive or prescriptive; they are intended as a reference for trainees, workplace supervisors, health service coordinators and assessors.

Summary of competencies

Competency area	Competency elements
1 Professional practice	1.1 Promotes and monitors own professional practice 1.2 Actively participates in the NSW Aboriginal Population Health Training Initiative 1.3 Works in the context of Aboriginal history and health 1.4 Practices public health within professional, legal, and ethical frameworks 1.5 Works respectfully and effectively with a range of population groups 1a Participates in research ethics processes
2 Population health management and leadership	2.1 Understands and works effectively within NSW Health organisation structures 2.2 Works effectively with others and in teams 2.3 Contributes effectively to population health committees and decision-making bodies 2.4 Manages projects effectively 2.5 Uses negotiation and conflict resolution skills to progress population health objectives 2.6 Applies relevant policy to population health 2a Leads the development or implementation of a population health project, program, policy, or plan 2b Manages people or teams to achieve organisational goals 2c Uses leadership skills to progress population health objectives 2d Supports, promotes, and champions meaningful change to achieve population health objectives
3 Communication	3.1 Demonstrates effective interpersonal skills 3.2 Uses technology to support effective communication 3.3 Prepares reports and papers of a publishable standard 3.4 Prepares formal documentation using organisation templates 3.5 Prepares and delivers oral presentations 3.6 Tailors communication to the intended audience 3a Proactively disseminates work to contribute to the population health evidence base 3b Works within organisational guidelines to engage with the media or general public
4 Consultation and collaboration	4.1 Plans, conducts, and documents a consultation 4.2 Conducts and documents a consultation with a community group 4.3 Collaborates to achieve effective inter-sectoral action and partnerships to address health goals 4a Participates in the co-design of a program, project, policy, or evaluation with external stakeholders 4b Works in partnership with non-government organisations
5 Evidence-informed practice	5.1 Accesses research evidence 5.2 Critically appraises research evidence 5.3 Uses evidence to inform and support decision making 5a Conducts a structured literature review

Competency area	Competency elements
6 Epidemiology and data management	6.1 Accesses data from a range of sources 6.2 Assists in the collection and storage of population health data 6.3 Quantitatively describes the health of a population and identifies potential determinants of health or disease 6.4 Collects and appropriately interprets qualitative information 6.5 Uses surveillance systems to monitor the health of a population 6a Designs or conducts an epidemiological study
7 Communicable diseases and environmental health	7.1 Contributes to the entry and use of data in communicable disease surveillance systems 7.2 Participates in a communicable disease outbreak investigation or response 7.3 Participates in an environmental health program or project 7a Leads a communicable disease outbreak investigation or emergency response 7b Leads an environmental health project, investigation, or response
8 Health promotion	8.1 Applies health promotion theory to population health issues 8.2 Plans population health programs to promote health and wellbeing 8.3 Works to achieve effective inter-sectoral action and partnerships with communities 8.4 Implements a health promotion program 8a Supports the scale-up of a health promotion program or project
9 Health program evaluation and monitoring	9.1 Supports the design of an evaluation or monitoring framework 9.2 Supports the evaluation of a population health program, project, or policy 9a Disseminates or implements evaluation findings 9b Designs or conducts a comprehensive evaluation 9c Supports the establishment or review of a monitoring framework

Note: Competency elements followed by a letter (e.g. 1a) are optional elements.

1 Professional practice

Demonstrates the professional qualities required of a population health professional working in the NSW health system

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
1.1 Promotes and monitors own professional practice	i. Plans and prioritises work to manage workload	- List of training courses, workshops, conferences, and other capability building activities you have attended (required) - Project plan or work plan you have written, where you have set deadlines and prioritised tasks - Learning needs assessment or personal development plan in which you have identified your development goals	- Summary or outcomes of a performance review you have completed with a supervisor or manager - Request you have submitted to attend a training course, workshop, or other capability building activity, which highlights how the activity will contribute to your professional development
	ii. Reflects on own professional practice and performance		
	iii. Actively seeks and acts on feedback on own performance		
	iv. Participates in performance review and development processes		
	v. Actively pursues opportunities to develop new skills and build on strengths		
	vi. Accommodates changing priorities and responds flexibly to uncertainty and ambiguity		
1.2 Actively participates in the NSW Aboriginal Population Health Training Initiative	i. Develops placement documentation in a timely manner, in collaboration with the workplace supervisor	- Signed learning contracts for your APHTI work placements, including supervisor and coordinator comments (required) - Academic transcript demonstrating your progress or completion of the Master of Public Health (required) - Minutes of APHTI trainee meetings you have chaired - Minutes you have written for APHTI trainee meetings	- Minutes or record of a meeting or forum you have participated in as a representative of the APHTI - Presentation you have delivered to promote the APHTI - Feedback you have provided as part of an APHTI consultation or quality improvement process - Correspondence confirming your role as a mentor or buddy for another APHTI trainee - Correspondence with program staff about issues that may impact on your traineeship
	ii. Maintains documentation describing progress and assessment		
	iii. Participates in APHTI capability building activities and trainee meetings, including chairing meetings and taking minutes		
	iv. Is actively enrolled in the Master of Public Health and communicates with program staff about results and changes to enrolment		
	v. Communicates with program staff about personal issues that may impact on work or performance		
	vi. Contributes to activities that improve the APHTI		
	vii. Represents the APHTI at external forums (e.g. working groups, consultations, conferences)		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
1.3 Works in the context of Aboriginal history and health	i. Considers the impact of social, cultural, political, spiritual, economic, and environmental factors on the health of Aboriginal peoples	• Project plan or report you have written or contributed to for an Aboriginal health project • Aboriginal Health Impact Statement or Reconciliation Action Plan you have written or contributed to • Correspondence with an Aboriginal community controlled health service or community group • Minutes or record of a meeting you have attended with an Aboriginal community controlled health service or community group • Photographs or schedule confirming your participation in NAIDOC activities • Advice or feedback you have provided as part of a consultation process for an Aboriginal health plan, project, policy, or program	• Ethics application or supporting documentation you have written or contributed to for an Aboriginal health project • Feedback you have provided on cultural aspects of plan, project, policy, or program • Correspondence confirming your participation in a recruitment process for a targeted role • Presentation you have delivered to an Aboriginal community group • Minutes of an Aboriginal cultural committee meeting you have actively participated in • Completed assignment for an Aboriginal health subject as part of your Master of Public Health
	ii. Understands the role of Aboriginal community controlled health services, and strategies, policies, and programs that support the delivery of primary health care for Aboriginal peoples		
	iii. Recognises and advocates for Aboriginal peoples' right to self-determination		
	iv. Understands and follows community and organisational protocols for the release of information gathered in Aboriginal communities		
	v. Follows guidelines governing the conduct of research and evaluations involving Aboriginal peoples and communities		
	vi. Contributes to organisational understanding of culturally safe environments and practices		
	vii. Allocates adequate time and resources to ensure respectful work practice and culturally appropriate service delivery		
1.4 Practices public health within professional, legal, and ethical frameworks	i. Identifies how personal and organisational values influence decision-making in health	• Project plan or report you have written or contributed to that identifies ethical and/or legal issues or requirements • Goods and services, funding, or other legal agreement you have written, contributed to, or negotiated • Signed NSW Health Code of Conduct • Confidentiality agreement you have signed, e.g. relating to notifiable conditions data • Data request you have made e.g. request for release of notifiable conditions data • Aboriginal Health Impact Statement or Reconciliation Action Plan you have written or contributed to	• Ethics application or supporting documentation you have written or contributed to • Conflict of interest declaration you have made • Correspondence confirming your identification or management of a conflict of interest • Correspondence confirming your involvement in an enforcement activity e.g. tobacco compliance • Minutes or record of a project meeting where you have contributed to a discussion of ethical or legal issues • Certificates of attendance for mandatory training • Completed assignment for a public health ethics or law subject as part of your Master of Public Health
	ii. Identifies ethical dilemmas faced in population health practice		
	iii. Acknowledges ethical approaches that can be used to inform decision-making in health		
	iv. Follows guidelines governing the conduct of research and evaluations		
	v. Follows the NSW Health Code of Conduct and consistently demonstrates NSW Health core values		
	vi. Identifies and works within ethical frameworks and relevant policies, including those concerning confidentiality		
	vii. Identifies and reports apparent conflicts of interest		
	viii. Identifies and complies with public health law and regulations that determine responses to public health issues		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
1.5 Works respectfully and effectively with a range of population groups	i. Interacts sensitively and effectively with people from diverse cultural, socioeconomic, educational, racial, sexual, ethnic, and professional backgrounds, ages and lifestyle preferences to achieve population health goals ii. Demonstrates inclusive behaviour and shows respect for the values, beliefs, and gender roles of diverse population groups iii. Uses relevant protocols when interacting and working with different cultural groups iv. Seeks input from expert groups representing different populations to ensure programs and services are delivered appropriately v. Follows guidelines governing the conduct of research and evaluations involving priority populations	• Project plan or report you have written or contributed to for a multicultural health or priority populations project • Correspondence with community or expert groups representing a specific population group e.g. LGBTQIA+ or CALD populations • Resource or presentation you have developed or contributed to where language is tailored to a specific population group	• Ethics application or supporting documentation you have written or contributed to for a multicultural health or priority populations project • Presentation you have delivered to a diverse or multi-cultural audience. • Research protocol you have written or contributed to that relates to working with different cultural or population groups • Certificate of attendance for cultural competency training you have completed
Optional elements	Performance criteria	Examples of evidence	
1a Participates in research ethics processes	This element can be achieved by providing evidence of <u>one</u> of the following activities: i. Prepares an ethics or site authorisation application for submission to a Human Research Ethics Committee (HREC) ii. Participates as a member of a HREC OR <u>two or more</u> of the following activities: iii. Liaises with research or governance office staff regarding an ethics or site authorisation application or quality assurance/improvement project iv. Lodges or tracks the progress of an ethics or site authorisation application submitted to a HREC v. Prepares an amendment to an ethics or site authorisation application or approval vi. Prepares and manages the submission of an annual or final report to a HREC	• Ethics application or amendment you have written or contributed to • Site authorisation application you have written or contributed to • Supporting documents you have written or contributed to for an ethics or site authorisation application, such as research protocol, participant consent form, data collection tool • Correspondence with a HREC about ethical approval or exemption • Correspondence with a health service research office about an ethics or research governance matter • Correspondence confirming your appointment to a HREC • HREC meeting minutes, noting your attendance and/or contribution • Annual or final report that you have written and submitted to a HREC	

2 Population health management and leadership

Contributes to effective project management and demonstrates workplace leadership

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
2.1 Understands and works effectively within NSW Health organisation structures	i. Identifies organisational structures within the NSW health system and recognises how to influence these to support decision-making	- Business, operational or project plan you have written or contributed to which links your work to strategic goals - Minutes or record of a team meeting where you contributed to a discussion on how your work aligns with strategic goals - Minutes or record of a strategic planning meeting or process you have contributed to	- Approval brief or formal request you have submitted for approval to an authorised person within your health service e.g. request for funding or request to publicly release information - Feedback you have provided on a business, operational or strategic plan
	ii. Recognises lines of reporting and works within these to progress work and support decision-making		
	iii. Understands delegations and acts within authority levels		
	iv. Understands how work aligns with strategic plans and priorities (local, regional, state, or national)		
2.2 Works effectively with others and in teams	i. Supports and applies principles of effective teamwork and team building strategies	- Business, operational or project plan you have written or contributed to that identifies team members' roles and responsibilities - Minutes or record of a team meeting you have actively participated in - Photographs or roster of you participating in team-based activities or events e.g. NAIDOC events	- Report you have written or contributed to that demonstrates effective multi-disciplinary teamwork - Presentation you have delivered that showcases collaboration - Constructive feedback you have provided to team members - Feedback from a supervisor or peer confirming your contribution to a team project or activity - Completed group assignment for a Master of Public Health subject
	ii. Understands team objectives and recognises the role and contribution of individual team members		
	iii. Actively contributes to team discussions and activities		
	iv. Encourages others to talk, share, and debate ideas		
	v. Works effectively to achieve a shared goal		
2.3 Contributes effectively to population health committees and decision-making bodies	i. Supports decision-making through active and effective participation in formal bodies or groups such as advisory committees, steering committees, working groups and/or boards	- Correspondence confirming your membership of a committee, supported by Terms of Reference - Committee documents, such as minutes, reports, presentations, or policy recommendations, which acknowledge your input	- Minutes of a committee meeting you have chaired - Minute you have written for a committee meeting - Terms of Reference you have written or contributed to for a committee or decision-making body
	ii. Reflects on factors which make committees and decision-making bodies function well		
	iii. Contributes to the development of Terms of Reference		
	iv. Effectively chairs and prepares minutes of meetings		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
2.4 Manages projects effectively	i. Develops project plans or proposals which include a clear objective, stakeholders, resources, project milestones, timelines, and outputs	- Project plan or report you have written or contributed to - Business case you have written or contributed to for a new project - Minutes or record of a project meeting, noting your contribution to the project - Screenshots from project management or collaboration tools you have used to manage a project	- Spreadsheet detailing a project budget you have managed - Correspondence confirming your role in managing a project and/or developing a business case - Certificate of attendance for project management training you have completed - Completed assignment for a Master of Public Health subject, which describes a project you have managed
	ii. Establishes project governance mechanisms such as steering committees		
	iii. Plans and organises work activities to align with the project plan or proposal		
	iv. Identifies resource needs and ensures goals are achieved within identified resources and deadlines		
	v. Monitors the completion of project milestones against goals and takes necessary actions		
2.5 Uses negotiation and conflict resolution skills to progress population health objectives	i. Uses a fair and considered approach to gain cooperation and commitment from others	- Memorandum of understanding or goods and services, funding, or other formal agreement you have been involved in negotiating - Minutes or record of a meeting where you were actively involved in a negotiation process - Correspondence confirming your involvement in a consensus based decision-making process e.g. a recruitment process	- Stakeholder engagement plan you have written or contributed to - Correspondence confirming your involvement in a conflict resolution or negotiation process - Completed group assignment for a Master of Public Health subject
	ii. Uses evidence and sound arguments to negotiate from an informed and credible position		
	iii. Develops trust among parties involved in a negotiation		
	iv. Anticipates and minimises conflict		
	v. Speaks up on topics where others have limited knowledge to identify and address risks		
	vi. Represents the team or organisation in a negotiation or decision-making process		
2.6 Applies relevant policy to population health	i. Understands the role of policy as an instrument to protect the health of populations	- Policy implementation plan you have written or contributed to - Feedback you have provided on a policy proposal - Minutes or record of a meeting where you contributed to a discussion on the implementation of a policy - Report or presentation you have written or contributed to, which promotes a policy to stakeholders	- Policy, guideline, or standard operating procedure you have written or contributed to - Literature review you have written or contributed to which establishes the basis for a policy or guideline - Evaluation framework you have written or contributed to for a policy or guideline - Aboriginal Health Impact Statement, risk assessment or health impact assessment you have written or contributed to for a population health policy - Completed assignment on health policy as part of your Master of Public Health
	ii. Supports the implementation of local, state, or national policy		
	iii. Identifies gaps between current policy and practice		
	iv. Identifies barriers and enablers to policy implementation		
	v. Applies or develops a policy implementation plan		
	vi. Promotes engagement and adoption of a policy to relevant stakeholders		

Optional elements	Performance criteria	Examples of evidence
2a Leads the development or implementation of a population health project, program, policy, or plan	This element can be achieved by providing evidence of <u>one or more</u> of the following activities: - Leads the design or implementation of a substantial population health project or program - Actively contributes to the development of policy relevant to population health - Actively contributes to the development of a strategic plan	- Policy, guideline, or standard operating procedure you have written or made a significant contribution to - Project plan or report you have written for a population health program or project - Strategic plan you have developed or made a significant contribution to
2b Manages people or teams to achieve organisational goals <i>Note: This element is generally recommended for trainees who have the opportunity to act in management roles.</i>	This element can be achieved by providing evidence of <u>three or more</u> of the following activities: - Defines and clearly communicates roles, responsibilities, and performance standards - Engages and motivates others to work towards a common goal - Delegates work effectively to others - Provides constructive feedback, guidance, and reinforcement to others - Manages people management processes, including recruitment, learning and development, and performance review	- Letter of appointment and role description for a role with management responsibilities - Program of orientation you have provided to a new staff member - Minutes or record of a team meeting where you delegated or allocated work - Correspondence confirming your participation in a recruitment, performance review or other people management process - Constructive feedback or guidance you have provided to direct reports - Certificate of attendance for management training you have completed, supported by a reflection on how you have applied this learning
2c Uses leadership skills to progress population health objectives	This element can be achieved by providing evidence of <u>all</u> the following activities: - Demonstrates integrity and acts as a role model - Builds authentic relationships - Encourages shared accountability and responsibility AND <u>two or more</u> of the following activities: - Develops capability and potential in others (e.g. through coaching and mentoring) - Seeks to understand the needs of a group, community or population and considers the diversity of views within the group - Promotes shared decision-making by encouraging contributions from all members of a group or team - Adapts leadership approach or style to suit the situation	- Testimonial confirming your effectiveness in a leadership role - Minutes, record, or transcript of a project or community meeting where you promoted shared decision-making - Correspondence confirming your role as a mentor or coach - Constructive feedback or guidance you have provided to others - Certificate of attendance for leadership training you have completed
2d Supports, promotes, and champions meaningful change to achieve population health objectives	This element can be achieved by providing evidence of <u>two or more</u> of the following activities: - Promotes change processes - Actively supports change planning - Actively supports the implementation of change - Identifies and responds to barriers to change - Engages others in the change process - Supports others to manage uncertainty and change	- Change management plan you have written or contributed to - Minutes, record, or transcript of a meeting where you participated in the planning of a change to a program, policy, or process - Correspondence you have written to advocate for a program, policy or process change to address a population health issue - Presentation or correspondence you have written to promote or communicate a change to stakeholders - Report or presentation you have written on a change you have implemented

3 Communication

Communicates effectively in a range of settings

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
3.1 Demonstrates effective interpersonal communication skills	i. Actively listens and asks questions to check understanding	- Digital recording or transcript of your verbal interaction with other people or groups e.g. as part of an interview process, question and answer session or group discussion - Minutes, record or transcript of a meeting or forum where you actively participated in discussion - Presentation you have delivered to a diverse or multi-cultural audience	- Presentation you have delivered which showcased collaboration with team members - Correspondence confirming your role in a negotiation or feedback process - Completed group assignment for a Master of Public Health subject
	ii. Uses language, information, and cross-cultural skills appropriate to the context and audience		
	iii. Responds appropriately to questions and encourages discussion		
	iv. Demonstrates critical self-assessment about interactions with other people		
3.2 Uses technology to support effective communication	i. Uses technology effectively to participate in virtual meetings and events	- Minutes or record of a meeting or event you have organised or attended which used a virtual meeting platform such as Webex, Microsoft Teams, Zoom or Skype - Screenshots from an online survey you have developed or contributed to - Web content you have written or contributed to	- Social media post you have developed on behalf of NSW Health to support consumer engagement - Web analytics you have used to measure the impact of a project, report, program, or policy
	ii. Uses current and emerging technology to support public health practice		
	iii. Accesses email, intranet, and internet appropriately and in line with organisational policy and practice		
	iv. Uses appropriate tone and expression in electronic communications		
3.3 Prepares reports and papers of a publishable standard	i. Identifies workplace activities that could be presented as a written report or published paper	- Published report or peer-reviewed paper you have written or contributed to - Correspondence with co-authors regarding revisions to a draft report or publication - Feedback you have received on a report or publication you have written or contributed to	- Abstract you have written or contributed to that was accepted for presentation at a conference following peer-review - Approval brief or formal request you have made to publish a report or submit a paper for publication - Completed assignment for a Master of Public Health subject, which is written in report format
	ii. Determines the aim and audience of a report or paper		
	iii. Structures and formats reports or papers according to the intended audience and purpose		
	iv. Assists in preparing health service reports or papers of a publishable standard according to publication and/or organisational requirements		
	v. Presents information in graphs and tables		
	vi. Identifies and follows organisational processes required for the external release of information		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
3.4 Prepares formal documents or correspondence	i. Prepares documents or correspondence to support decision-making or external communication using health service templates or standard formats e.g. approval or information briefs, letters, memos, circulars etc.	- Approval brief, Ministerial briefing, or formal request you have submitted for approval using an organisational template - Letter or other formal correspondence you have written or contributed to in accordance with organisational guidelines	- Policy, guideline, or standard operating procedure you have written or contributed to - Snapshot from a document management system you have used to track a document submitted for approval or sign-off
	ii. Clearly identifies and addresses issues that may impact decision-making		
	iii. Writes fluently in plain English and in a range of styles and formats		
	iv. Identifies and follows organisational sign-off processes, including managing the process of submitting documents for approval		
3.5 Prepares and delivers oral presentations	i. Determines the aim and audience of a presentation	Presentation slides, digital recording, or transcript of a presentation you have developed and delivered at a meeting, forum, conference or event	- Feedback you have received on an oral presentation you have given - Certificate of attendance for presentation skills training you have completed
	ii. Structures and delivers a presentation using appropriate format and language		
	iii. Presents information appropriately on behalf of the organisation		
	iv. Speaks confidently and engages with the audience		
	v. Responds appropriately to questions and encourages discussion		
3.6 Tailors communication to the intended audience	i. Defines the audience and adjusts communication style and approach to optimise outcomes	- Report or peer-reviewed paper you have written or contributed to - Presentation you have delivered to a community group or lay audience - Correspondence you have written to a community group or member of the public - Approval brief, Ministerial briefing, or formal request you have submitted for approval using an organisational template	- Resource you have developed or contributed to where language is tailored to meet the needs of a specific audience - Abstract you have written or contributed to that was accepted for presentation at a conference or forum - Oral or poster presentation you have delivered at a meeting, forum, or conference
	ii. Communicates in a way that respects the privacy of individuals and sensitivity of content		
	iii. Communicates using methods appropriate to the situation and consistent with management and policy requirements		
	iv. Communicates in a sensitive way with community groups and members		
	v. Clearly explains complex concepts in easy-to-understand language		
	vi. Explains methods, appropriately interprets results, and checks for understanding		

Optional elements	Performance criteria	Examples of evidence
3a Proactively disseminates work to contribute to the population health evidence base	This element can be achieved by providing evidence of evidence of the following activity: i. Prepares and submits a scientific peer-reviewed paper, or chapter in a peer-reviewed scientific report as first or second author OR evidence of <u>both</u> of the following activities: ii. Prepares and submits a clear, succinct conference abstract in accordance with conference themes and abstract submission criteria iii. Delivers a conference presentation using a format and style appropriate to the conference themes and audience	• Peer-reviewed paper where you are listed as first or second author • Correspondence with co-authors about revisions to a peer-reviewed paper • Feedback you have received about a published report or peer-reviewed paper you have written • Abstract you have written or contributed to that was accepted for presentation at a conference following peer-review • Presentation, transcript, or digital recording of a presentation you have developed and delivered at a population health conference • Poster presentation you have developed and delivered at a population health related conference
3b Works within organisational guidelines to engage with the media or general public	This element can be achieved by providing evidence of the following activity: i. Identifies and follows organisational policies or guidelines governing the release of information of potential interest to the media or interest groups AND evidence of <u>one</u> of the following activities: ii. Prepares a media release or social media content iii. Participates in a media interview iv. Provides support to others responsible for presenting to the media	• Correspondence with the health service's media unit about a project or activity you have worked on • Media release or social media content you have written or contributed to • Published material in which you have provided information or opinion on behalf of NSW Health • Digital recording or transcript of a media interview you have given • Published profile of you on a health service website or newsletter • Certificate of attendance for media training you have completed

4 Consultation and collaboration

Consults effectively in a range of settings

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
4.1 Plans, conducts, and documents a consultation	i. Identifies when consultation is required and why, including which stakeholders to consult	- Consultation plan, project plan or stakeholder map you have written or contributed to which identifies stakeholders, their interest in the program or project, and engagement strategies - Minutes, transcript, or digital recording of a consultation meeting or focus group you have led or contributed to - Summary of stakeholder feedback you have collected and collated - Report or presentation you have written or contributed to on a consultation process or outcomes	Correspondence with stakeholders as part of a consultation process e.g. invitation to participate
	ii. Develops a consultation plan for communicating with stakeholders (e.g. decision-makers, clinicians, content experts, community representatives)		
	iii. Demonstrates knowledge of contextual factors that may affect the consultation process and outcomes (e.g. stakeholder views and values, existing relationship with stakeholders, and potential risks)		
	iv. Conducts a consultation relevant to population health using a systematic approach		
	v. Communicates clearly with stakeholders to promote effective collaboration and decision-making		
	vi. Presents and consults with others in a group setting to meet a specific purpose		
	vii. Documents a consultation process and conveys the outcomes to participants and stakeholders		
4.2 Conducts and documents a consultation with a community group	i. Conducts a consultation with community members or groups to understand perspectives, inform decision-making or achieve other population health objectives	<i>In addition to the examples provided for element 4.1, the following examples are relevant to this element:</i> - Aboriginal Health Impact Statement indicating how you will engage and share information with Aboriginal stakeholders - Report or presentation you have developed which is tailored to the meet the needs of a community	
	ii. Consults in a culturally safe manner		
	iii. Consults using language, information, and cross-cultural skills appropriate to the context and audience		
	iv. Builds community partnerships to support productive decision-making and ongoing collaboration, where appropriate		
	v. Conveys the outcomes of the consultation to participants and stakeholders		
4.3 Collaborates to achieve effective inter-sectoral action and partnerships to address health goals	i. Identifies potential partner organisations, including consideration of the organisations' values and core business	<i>In addition to the examples provided for element 4.1, the following examples are relevant to this element:</i> - Minutes, record, or transcript of an inter-sectoral meeting you have actively participated in - Report or presentation you have written or contributed to on an inter-sectoral project - Correspondence you have exchanged with inter-sectoral partners	
	ii. Considers ways to engage potential partners		
	iii. Describes the steps in effective inter-sectoral action for health		
	iv. Communicates clearly and appropriately with stakeholders from other agencies and organisations to promote effective collaboration and decision-making		
	v. Engages stakeholders in dialogue about priority population health issues and works together to plan, implement, and/or evaluate programs and activities		

Optional elements	Performance criteria	Examples of evidence
4a Participates in the co-design⁸ of a program, project, policy, or evaluation with external stakeholders	This element can be achieved by providing evidence of <u>four</u> or <u>more</u> of the following activities: - Understands and applies the key principles of co-design - Identifies collaborators and resources required to build a co-design team - Helps to build trusting, ongoing relationships with co-design team members - Contributes to stakeholder capability building if required to enable equitable collaboration e.g. in program development, implementation, or evaluation - Negotiates goals and roles and establishes governance structures - Facilitates collaborators working together to design, implement and/or evaluate programs, projects, policies, or plans	- Consultation plan or stakeholder map you have written or contributed to - Correspondence you have written to stakeholders or partners involved in a collaborative project - Project or evaluation plan you have written or contributed to which outlines the co-design or collaborative process - Research or evaluation protocol you have written or contributed to which describes the co-design or collaborative process - Minutes, record, or transcript of a meeting with stakeholders or partners involved in a collaborative project - Report or presentation you have written or contributed to on a co-designed project you have supported
4b Works in partnership with non-government organisations e.g. Aboriginal Community Controlled Health Services	This element can be achieved by providing evidence of <u>all</u> the following activities: - Engages with partners appropriately and according to organisational protocols - Contributes to the development or maintenance of long-term, trusting relationships - Considers the diversity of views within a community, group, or organisation - Understands and follows community and organisational protocols for key processes (e.g. the release of information gathered in Aboriginal communities)	- Partnership agreement or memorandum of understanding you have written or contributed to - Minutes, record, or transcript of a meeting with a non-government partner, noting your contribution - Correspondence with a partner organisation about an ongoing project or program - Report or presentation you have written or contributed to describing a joint project with a non-government organisation - Correspondence from a partner organisation giving you permission to present or publish work relating to a joint project - Ethics application or amendment you have written or contributed to for a project involving Aboriginal communities or community members

⁸ Co-design is a participatory process based on respectful relationships and equitable partnerships, generally involving people who are likely to be impacted by or benefit from the project, policy, program, or evaluation.

5 Evidence-informed practice

Finds, assesses, interprets, and applies evidence derived from research to population health practice

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
5.1 Accesses research evidence	i. Identifies questions that can be addressed by research evidence ii. Identifies different types of research evidence (e.g. grey literature, expert opinion, peer-reviewed papers) and considers the strengths and limitations of each iii. Accesses research evidence through databases or search engines (e.g. Medline, PubMed, Google Scholar) iv. Searches for systematic reviews of population health practice from relevant sources	• Search strategy for a literature search you have conducted • Literature review you have written or contributed on a population health topic or issue • Report or presentation you have written or contributed to which includes sources of evidence and their limitations	• Reference list you have compiled to support a project plan, report, or presentation • Completed Master of Public Health assignment, which includes a literature review or references multiple sources of evidence
5.2 Critically appraises research evidence	i. Uses appropriate critical appraisal tools to assess the quality, reliability, and relevance of research evidence ii. Understands and distinguishes between different research study types and the type of questions each can soundly answer iii. Synthesises and summarises research evidence, including its limitations	• Literature review or systematic review you have written or contributed to • Completed critical appraisal checklist you have used to assess research evidence • Record or transcript of a discussion you have led or contributed to at a journal club meeting • Report or presentation you have written or contributed to which summarises your appraisal of research evidence	• Research proposal you have written or contributed to, which outlines the rationale, research questions, objectives, and study design • Correspondence confirming your involvement in a peer review process as a reviewer • Certificate of attendance for critical appraisal skills training you have completed • Completed Master of Public Health assignment which includes a literature review or references multiple sources of evidence
5.3 Uses evidence to inform and support decision-making	i. Appropriately uses different types of evidence from different sources to inform practice ii. Appropriately interprets and translates evidence from different sources (e.g. research, experts, and community) iii. Synthesises evidence from a variety of sources to understand problems, their causes/determinants, and to identify appropriate solutions iv. Presents evidence-based solutions to decision-makers (e.g. managers or policy makers) v. Uses evidence to inform and engage community groups	• Report or presentation you have written or contributed to which synthesises evidence you have collected • Presentation you have given to a community group where you have used evidence to inform and engage the group	• Report or proposal you have written or contributed to which proposes a solution to a health problem and presents supporting evidence • Approval brief or formal request you have made seeking endorsement of evidence-based recommendations

Optional elements	Performance criteria	Examples of evidence
5a Conducts a structured literature review	This element can be achieved by providing evidence of <u>all</u> of the following activities:	• Literature review or systematic review you have written that includes a formal search strategy • Systematic review protocol you have written or contributed to that describes the rationale, hypothesis, and planned methods of the review • Peer-reviewed paper based on a literature review, where you are listed as first, second or third author
	i. Conducts a structured literature review of publishable standard using a formal search strategy (e.g. a rapid review, narrative review, scoping review, or systematic review)	
	ii. Conducts title and abstract checks, full text review, data extraction and/or critical appraisal	
	iii. Contributes to associated publications as first, second or third author	

6 Epidemiology and data management

Measures and understands the health of a population and the factors that influence population health outcomes

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
6.1 Accesses data from a range of sources	i. Identifies and uses data from a range of sources to describe the health of populations ii. Identifies and follows data governance policies and meets legislative requirements concerning data access, security, privacy, and ethics iii. Identifies the strengths and weaknesses of different data sources, including the limitations of each data set iv. Uses databases appropriately, including undertaking original queries v. Considers Indigenous data sovereignty principles when accessing data from or about Aboriginal peoples	• Data request you have made e.g. request for release of notifiable conditions data • Snapshot of data you have extracted from a database such as AIR, APDC, HealthStats NSW, NCIMS • Data collection plan you have written or contributed to • Confidentiality agreement you have signed e.g. relating to notifiable conditions data	• Dataset you have created or contributed to that includes data from multiple sources • Data governance plan or framework you have written or contributed to that incorporates principles of Indigenous data sovereignty • Epidemiological review you have conducted or contributed to for a specific disease or condition • Completed Master of Public Health assignment which includes analysis of data from multiple sources
6.2 Assists in the collection and storage of population health data	i. Inputs and stores data collected through surveys or other primary data collection process ii. Assists with cleaning data (checks for errors, inconsistencies, outliers, and missing values) iii. Assesses the quality of data. iv. Implements workplace procedures for data management, back-up, and security v. Appropriately manages sensitive data vi. Follows Indigenous data governance principles when collecting data from or about Aboriginal peoples	• Data collection plan or protocol you have written or contributed to • Survey tool, questionnaire, or other data collection tool you have developed or contributed to • Confidentiality agreement you have signed e.g. relating to notifiable conditions data • Data request you have completed e.g. request for vaccination rates in your health service • Screenshot of data before and after you have cleaned or prepared it	• Data entry log or correspondence confirming your role in a data entry and validation process • Data audit or quality improvement report you have written or contributed to • Dataset you have created or contributed to that includes data from multiple sources • Data governance plan or framework you have written or contributed to that incorporates principles of Indigenous data sovereignty • Certificate of attendance for training you have completed in data management or collection

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
6.3 Quantitatively describes the health of a population and identifies potential determinants of health or disease	i. Interprets descriptive statistics and graphics used to summarise data	• Data analysis plan or protocol you have written or contributed to • Epidemiological profile you have designed or contributed to which includes key health indicators, trends, patterns, and potential determinants within a defined population • Quantitative report, or presentation you have written or contributed to, which includes objectives, methods, statistical analysis, and findings • Health needs assessment you have written or contributed to that includes quantitative analysis to identify potential determinants of a health-related condition	• Report or presentation you have written or contributed to which includes data presented in tables and graphs • Health indicator you have developed or contributed to which tracks key health metrics such as mortality rates, disease incidence over time and across different subpopulations • Certificate of attendance for applied epidemiology training you have completed
	ii. Identifies and calculates relevant epidemiologic measures for one or more populations, including: ○ prevalence ○ incidence ○ premature death ○ infant mortality		
	iii. Creates basic visualisations such as tables and graphs		
	iv. Identifies and describes social, behavioural, and environmental determinants of health and their distribution within a community or population		
	v. Follows Aboriginal data governance principles when describing the health of Aboriginal peoples i.e. in the design, analysis, and interpretation of data		
6.4 Collects and appropriately interprets qualitative information	i. Gathers qualitative information about health issues and their perceived determinants or causes (e.g. through interviews, group discussions, observation)	• Data collection plan or protocol you have written or contributed to • Data collection tools you have developed or used, such as survey questions or interview guide • Qualitative data you have collected such as survey results, interview transcripts, case studies • Report or presentation you have written or contributed to that presents a qualitative analysis e.g. thematic or narrative analysis	• Ethics application or supporting documentation you have written or contributed to for a qualitative study • Coding scheme or framework you have developed or contributed to using qualitative software such as NVivo or MAXQDA • Certificate of attendance for training you have completed in qualitative research or qualitative data analysis software • Completed assignment for a qualitative research subject as part of your Master of Public Health
	ii. Considers culturally appropriate methods such as research yarning when working with Aboriginal peoples		
	iii. Documents methods and summarises findings from a qualitative data collection process		
	iv. Supports a formal analysis of qualitative data		
	v. Considers qualitative findings to improve understanding of health issues and potential responses or solutions		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
6.5 Uses surveillance systems to monitor the health of a population	i. Recognises the benefits of population health surveillance	- Project plan or research protocol you have written or contributed to which involves using surveillance data - Surveillance report or presentation you have written or contributed to which describes how you have actively used surveillance to monitor and analyse health data - Report or presentation you have written or contributed to which includes charts or graphs you have created using surveillance data	- Trend analysis you have conducted or contributed to which shows how you have used surveillance data to identify patterns, fluctuations, or emerging health issues - Feedback you have provided to enhance surveillance system performance - Snapshot of a dashboard you have developed or contributed to using surveillance data - Certificate of attendance for training you have completed on health surveillance systems
	ii. Determines the advantages and limitations of different surveillance systems (e.g. active and passive)		
	iii. Summarises and displays surveillance data.		
	iv. Interprets and communicates surveillance findings within a defined population		
Optional elements	Performance criteria	Examples of evidence	
6a Designs or conducts an epidemiological study	This element can be achieved by providing evidence of <u>one or more</u> of the following activities:	- Project plan or research protocol you have written that describes a quantitative study, including the objectives or research question, study design, data sources, and statistical methods - Data analysis plan you have written or made a significant contribution to, which outlines the approach, data sources and statistical methods - Data collection tools or surveys you have written for analysis using statistical software e.g. SPSS, Stata, R, Python, or SAS - Report, peer-reviewed paper, or presentation you have written on an epidemiological study you have designed or conducted - Data linkage application documents you have written or contributed to - Epidemiological model you have developed or contributed to - Epidemiological report you have written, which includes background, method, results, and conclusions	
	i. Designs or conducts a quantitative study according to sound epidemiological principles		
	ii. Works effectively with appropriate specialised software to conduct epidemiological analyses		
	iii. Contributes to a project that involves the use of multiple administrative data sets, including a linked data study		

7 Communicable diseases and environmental health

Promotes, develops, and supports activities which ensure a safe and healthy environment, including the control of communicable diseases among populations through systematic action

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
7.1 Contributes to the entry and use of information in communicable disease surveillance systems	i. Recognises the benefits of accurate surveillance of notifiable conditions ii. Identifies appropriate communicable disease surveillance systems and understands their limitations iii. Enters data into a surveillance system	• Data entry log, confirming your role in a data entry and validation process in NCIMS or similar • Notifiable disease report you have written or contributed to • Tools you have developed and/or used to gather and enter data consistently e.g. standardised case investigation forms	• Report or presentation you have written or contributed to which includes charts or graphs to communicate trends and patterns in communicable disease data • Feedback you have provided to enhance surveillance system performance • Confirmation that you have completed training in a communicable disease surveillance system e.g. NCIMS
7.2 Participates in a communicable disease outbreak investigation or response	i. Explains what constitutes an outbreak ii. Outlines population health responsibilities and principles involved in managing an outbreak iii. Identifies legislation and other legal frameworks that support disease prevention and control iv. Works with others to investigate and control a communicable disease outbreak v. Applies contact tracing methods to determine the source of transmission and contain further transmission	• Case report you have written or contributed to about a suspected or confirmed case of a communicable disease • Minutes or record of an investigation team meeting you have actively participated in • Contact tracing script you have developed or contributed to • Situation report you have written or contributed to for a communicable disease outbreak	• Report or publication you have written or contributed to on an outbreak investigation • Correspondence confirming your contribution to an outbreak investigation or response • Certificate of attendance for training in communicable disease control or outbreak investigation
7.3 Participates in an environmental health program, project, or activity	i. Identifies the aims and strategies of an environmental health program, project, or activity ii. Supports the development or delivery of an environmental health program or project iii. Identifies legal requirements that influence environmental health action iv. Supports the implementation of policy that minimises the environmental risk for populations v. Supports an environmental health risk assessment, including hazard posed and likely exposures vi. Identifies the key stages of a health risk assessment such as issue identification, hazard assessment, exposure assessment, risk characterisation, risk management vii. Develops an understanding of environmental health issues, including the distinction between a hazard and a risk	• Project plan you have written or contributed to for an environmental health project or activity • Report, presentation, or publication you have written or contributed to on an environmental health project or activity • Minutes or record of an investigation team meeting you have actively participated in	• Correspondence confirming your involvement in an environmental health activity • Environmental health risk assessment you have written or contributed to • Certificate of attendance for environmental health training you have completed • Completed assignment for an environmental health subject as part of your Master of Public Health

Optional elements	Performance criteria	Examples of evidence
7a Leads a communicable disease outbreak investigation or emergency response Note: Evidence presented for this element will also address element 7.2.	This element can be achieved by providing evidence of the following activity: i. Understands and applies population health responsibilities and principles involved in managing an outbreak or emergency response AND three or more of the following activities: ii. Leads the investigation and control of a communicable disease outbreak or emergency response iii. Applies contact tracing methods to determine the source of transmission and contain further transmission iv. Communicates with relevant parties as required v. Documents the outbreak or emergency response (e.g. in a report or peer-reviewed paper)	• Case report you have written or contributed regarding a suspected or confirmed case of a communicable disease • Minutes or record of an investigation team meeting you have chaired • Correspondence with communicable disease experts about the investigation • Contact tracing script you have developed • Line listing of cases for an outbreak investigation you have led • Situation report you have written for a communicable disease outbreak • Outbreak report or peer-reviewed paper where you are listed as first or second author
7b Leads an environmental health project, investigation, or response Note: Evidence presented for this element will also address element 7.3.	This element can be achieved by providing evidence of <u>one or more</u> of the following activities: i. Leads an environmental health investigation ii. Leads the design, planning and/or implementation of a program or project that minimises environmental risk for a population iii. Leads an environmental health risk assessment, including hazard posed and likely exposure iv. Conducts a health risk assessment, including key stages such as issue identification, hazard assessment, exposure assessment, risk characterisation, risk management	• Project plan or report you have written or contributed to that clearly identifies the approach to delivery of environmental health project or activity • Minutes of an investigation team meeting you have chaired • Correspondence with environmental health experts about an environmental health investigation or project you have led • Report or peer-reviewed paper you have written on an environmental health project, investigation, or response you have led • Report you have written on a risk assessment you have conducted, such as an environmental health exposure assessment or health impact assessment

8 Health promotion

Promotes population and community health by strengthening social, economic, cultural and physical environments in collaboration with communities to ensure engagement and empowerment

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
8.1 Applies health promotion theory to population health issues	i. Describes patterns of health and illness in a population or community	- Project plan you have written or contributed to for a health promotion program or project - Report or presentation you have written or contributed to on a health promotion program or project - Literature review you have written or contributed to for a health promotion program or project	- Certificate of attendance for health promotion training you have completed - Completed assignment for a health promotion subject as part of your Master of Public Health
	ii. Identifies criteria to use in deciding on priority health problems in a population or community		
	iii. Identifies the determinants and/or causes of priority health problems in a population or community		
	iv. Identifies theoretical approaches and organisational systems that underpin effective health promotion		
8.2 Plans population health programs to promote health and wellbeing	i. Considers the policy and system contexts within which a health promotion program is to be developed and implemented and adjusts its development accordingly	- Project plan you have written or contributed to for a health promotion program or project. - Program logic you have written or contributed to for a health promotion project - Report or presentation you have written or contributed to on a health promotion program or project - Consultation or stakeholder engagement plan you have written or contributed to	- Literature review you have written or contributed to, to inform a health promotion program or project - Needs assessment you have written or contributed to that identifies key health issues within a target population - Budget or timeline you have prepared for a health promotion project or activity - Evaluation plan you have written or contributed to, which aims to measure program effectiveness
	ii. Reviews evidence from a range of sources to inform the design of a health promotion program		
	iii. Prepares a plan to address at least one determinant or cause of a population health problem, using a relevant health promotion planning model.		
	iv. Considers innovative approaches (e.g. health education, advocacy, media campaigns, community development, health service integration, policy, legislation)		
	v. Uses or develops a program logic to guide a population health program		
	vi. Incorporates evaluation in the planning of health promotion programs		

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
8.3 Works to achieve effective inter-sectoral action and partnerships with communities	i. Identifies the values and core business of organisations that may be partners in health promotion activities	• Project, consultation, or stakeholder plan you have written or contributed to for a health promotion project, which details collaborative efforts • Community engagement strategy you have written or contributed to • Partnership agreement or Memorandum of Understanding you have developed or contributed to • Minutes or record of a meeting with a community group or inter-sectoral partner where your contribution is noted • Report or presentation you have written or contributed to on an inter-sectoral health promotion program or project	• Case study of a community partnership you have developed or maintained • Resources you have developed or contributed to aimed at community education, such as brochures, posters, or multimedia content • Correspondence confirming your engagement with community groups and/or inter-sectoral partners on a health promotion project or program
	ii. Describes the steps in effective inter-sectoral action for health		
	iii. Engages communities and organisations in determining causes/determinants of priority population health problems, and in planning, implementing, and evaluating programs and activities		
8.4 Delivers a health promotion program	i. Supports the implementation of a health promotion program	• Implementation plan or standard operating procedure you have written or contributed to, including objectives, target population, and rationale for the program • Program materials you have developed or contributed to e.g. brochures, flyers, posters, or multimedia content • Report or presentation you have written or contributed to which summarises the objectives of the program, activities, outcomes, and lessons learned	• Participant enrolment and registration data • Digital recording of program activities, such as participants engaged in a program-related task
	ii. Uses appropriate resources and materials for effective implementation of planned action		
	iii. Monitors the quality of the implementation process in relation to agreed goals and objectives		
	iv. Understands the role of digital platforms in supporting social marketing campaigns		

Optional elements	Performance criteria	Examples of evidence
8a Supports the scale-up of a health promotion program or project	This element can be achieved by providing evidence of <u>one or more</u> of the following activities:	• Literature review you have written or contributed to as part of a scalability assessment, to assess the effectiveness of a program or project • Intervention Scalability Assessment Tool (ISAT) output you have produced such as completed scoring sheet and spider web plot • Program proposal or business case you have written or contributed to that provides a rationale for scaling up a program or project • Scale up plan you have contributed to, or component of a scale up plan you have written • Project plan you have written or contributed to for a component of a scale-up project, such as delivery of a pilot program • Report or presentation you have written or contributed to on a scale-up activity you have been involved in
	i. Systematically assesses the scalability of a health promotion program (e.g. using a scalability tool)	
	ii. Adapts a health promotion program to improve scalability and sustainability	
	iii. Participates in the scale-up of a health promotion program e.g. delivers a pilot program to a larger population, or tailors a program to a different target population.	

9 Health program evaluation and monitoring

Contributes to the evaluation and monitoring of population health programs, projects, and policies

Core competency elements	Performance criteria	Typical examples of evidence	Other examples of evidence
9.1 Supports the design of an evaluation or monitoring framework	i. Understands and communicates the importance of evaluation in the design of a program or project	- Evaluation plan or framework you have written or contributed to which outlines the evaluation method and approach including process, impact, and outcome measures - Project plan you have written or contributed to which includes an evaluation or monitoring component - Program logic model you have developed or contributed to, which links objectives to measurable outcomes - Minutes or record of an evaluation project meeting, noting your contribution to the design process	- Ethics application or supporting documentation you have written or contributed to for an evaluation study - Evaluation report you have written or contributed to which outlines an evaluation method and approach - Data collection plan you have developed or contributed to for an evaluation - Survey or feedback form you have developed or contributed to - Certificate of attendance for health evaluation training you have completed
	ii. Contributes to governance mechanisms e.g. steering committees to involve relevant stakeholders in decision-making		
	iii. Determines the purpose of an evaluation, including desired outcomes and objectives		
	iv. Identifies the most appropriate type of evaluation for a program or project e.g. formative, process, impact and/or outcome, or economic evaluation		
	v. Considers the resourcing required to support an evaluation		
	vi. Uses program logic to guide the development of an evaluation		
	vii. Prepares an evaluation plan		
	viii. Develops appropriate evaluation questions and identifies sources of information to address these		
9.2 Supports the conduct of an evaluation of a population health program, project, or policy	i. Collects data according to data collection plan	- Evaluation tools you have developed or used in the conduct of an evaluation, such as survey questions and interview guide - Data you have collected as part of an evaluation such as survey results, interview transcripts, and case studies - Report or presentation you have written or contributed to that summarises evaluation findings - Feedback on evaluation findings you have provided to stakeholders	- Ethics application or supporting documentation you have written or contributed to for an evaluation study - Data analysis plan or data management protocol you have written or contributed to for an evaluation project - Quality improvement checklist you developed or contributed to
	ii. Manages data collection and/or analysis for elements of an evaluation		
	iii. Documents and synthesises evaluation findings to inform policy and practice		
	iv. Provides feedback to stakeholders, including communities whose health is affected		

Optional elements	Performance criteria	Examples of evidence
9a Disseminates or implements evaluation findings	This element can be achieved by providing evidence of <u>one or more</u> of the following activities: i. Plans the implementation of evaluation findings ii. Disseminates findings of an evaluation to influence policy or program decisions iii. Implements the findings of an evaluation iv. Adjusts a program in response to evaluation findings	• Evaluation implementation plan you have written • Published evaluation report or peer-review paper you have written or contributed to • Presentation on evaluation findings to stakeholders you have developed and delivered • Summary evaluation report or lay audience summary you have written
9b Designs or conducts a comprehensive evaluation	This element can be achieved by providing evidence of <u>one or more</u> of the following activities: i. Leads the design or conduct of a rigorous and substantial evaluation ii. Leads a component of a large or complex evaluation	• Evaluation plan or framework you have written or made a significant contribution to which outlines the evaluation method and approach including process, impact, and outcome measures • Evaluation report you have written or made a significant contribution to which outlines your evaluation method and approach • Program logic model you have developed, which links objectives to measurable outcomes • Data collection plan you have developed for an evaluation • Ethics application or supporting documentation you have written or made a significant contribution to for an evaluation study
9c Supports the establishment or review of a monitoring framework	This element can be achieved by providing evidence of <u>two or more</u> of the following activities: i. Develops a monitoring plan or framework for a population health program, project, or policy ii. Supports the establishment of systems to routinely collect data and report on program indicators (e.g. process or outcome indicators) iii. Supports or conducts the review and refinement of an existing monitoring framework iv. Actively participates in continuous quality improvement cycles and processes	• Monitoring plan or framework you have written for a population health program, project, or policy • Program logic you have developed to inform a monitoring framework. • Data collection tool you have developed or contributed to • Set of performance indicators you have developed or contributed to as part of a monitoring framework • Feedback you have provided on a monitoring framework • Report or presentation you have written which presents your analysis of program performance against indicators

Writing reflections

Tips:

- A well-structured and thoughtful reflection should showcase your understanding of the competency area, demonstrate your learning progress, and illustrate your commitment to continuous improvement.
- You are required to provide a written reflection for each competency area; but the reflection should address all the competency elements within that area.
- You should aim to limit your written reflections to one page per competency area.
- Consider the following when you sit down to write 1) what did I know about this before I started my training; 2) what did I do that expanded my knowledge and skills in this area; and 3) what do I know now and 4) what more do I want to know?
- You can use the template provided below to structure your reflections, however there are many other models that you could use. A number of these are described at:
<https://www.ed.ac.uk/reflection/reflectors-toolkit/reflecting-on-experience>

Template:

What I knew before I started: Provide an overview of your experience and skills in the competency area before joining the APHTI.

The learning experience: Describe the projects and learning experiences you have had that relate to the competency area. Explain the methods and resources you used, training you completed, and any challenges or opportunities that you encountered.

Identification of competency: Identify the specific competency or skill that was the main focus of the projects or training. This could be a technical skill, a soft skill, or any other relevant skill.

Self-assessment: Self-assess your own performance in relation to the competency area. Be honest and reflective about your strengths, weaknesses, and areas for improvement. Provide examples and evidence to support your self-assessment.

Application of learning: Explain how you applied the newly acquired knowledge or skills in practical situations. Provide specific examples of how you used the knowledge or skills in real-life scenarios, projects, or tasks.

Impact on performance: Highlight any improvements or positive changes you have noticed in your abilities and how this has influenced your work or personal development.

Challenges and lessons learned: Acknowledge any challenges or obstacles you faced during the learning process. Discuss how you overcame these challenges and what you learned from this.

Feedback and support: If applicable, mention any feedback or support received from workplace supervisors, mentors, or peers. Reflect on how this feedback contributed to your learning and growth.

Future development goals: Outline your future development goals related to the competency area. Discuss how you plan to further enhance and apply the skills you have learned to continue progressing in your professional journey.

Conclusion: Summarize the key points of your reflection and reiterate the importance of the competency area to your personal and professional growth. End with a closing thought that highlights the significance of the experience.

Acronyms

AH&MRC	Aboriginal Health & Medical Research Council of NSW
APHTI	NSW Aboriginal Population Health Training Initiative
AIR	Australian Immunisation Register
APDC	Admitted Patient Data Collection
CASP	Critical Appraisal Skills Programme
HREC	Human Research Ethics Committee
ISAT	Intervention Scalability Assessment Tool
NAIDOC	National Aborigines and Islanders Day Observance Committee
NCIMS	Notifiable Conditions Information Management System
NSW	New South Wales
SPSS	Statistical Package for Social Sciences

References

Aboriginal Environmental Health Unit. *NSW Health Environmental Health Officer Workplace Training Kit*. Population and Public Health Division, Sydney: NSW Ministry of Health, 2019. Available from: www.health.nsw.gov.au/environment/aboriginal/Publications/eho-workplace-training-kit-guide.pdf.

Centre for Epidemiology and Evidence. *Enhancing insights and decision making in the NSW Ministry of Health: Data literacy capability framework*. Sydney: NSW Ministry of Health, 2019 (unpublished).

Centre for Epidemiology and Evidence. *NSW Biostatistics Training Program Competency Framework*. Sydney: NSW Ministry of Health, 2015. Available from: <https://www.health.nsw.gov.au/training/botp/Pages/BTP-competency-framework.aspx>

Centre for Epidemiology and Evidence. *NSW Public Health Training Program Competency Framework*. Sydney: NSW Ministry of Health, 2014. <https://www.health.nsw.gov.au/training/phot/Pages/pht-competency-framework.aspx>

Centre for Epidemiology and Evidence. *Review of the NSW Aboriginal Population Health Training Initiative (APHTI) Competency Framework*. Sydney: NSW Ministry of Health, 2019 (unpublished).

Commonwealth of Australia. *Aboriginal and Torres Strait Islander Health Curriculum Framework*. Canberra: Department of Health, 2014. Available from: <https://www.health.gov.au/resources/publications/aboriginal-and-torres-strait-islander-health-curriculum-framework?language=en>.

Health Education and Training Institute. *The NSW Health Leadership and Management Framework*. Sydney: HETI, 2020. Available from: <https://www.heti.nsw.gov.au/education-and-training/our-focus-areas/leadership-and-management/nsw-health-leadership-framework>

NSW Public Service Commission. *NSW Public Sector Capability Framework Version 2:2020*. Sydney: NSW Public Service Commission, 2020. Available from: <https://www.psc.nsw.gov.au/workforce-management/capability-framework/the-capability-framework>

Powers & Associates. *NSW Aboriginal Population Health Training Initiative (APHTI) evaluation*. Sydney: Powers and Associates; 2015. Available from: www.health.nsw.gov.au/research/Documents/aphti-evaluation-final-report.pdf

Ridoutt L, Pilbeam V, O'Sullivan B, Madden DL, Wise MJ, Meyer L, Cumming G. *Competency framework of the NSW Aboriginal Population Health Training Initiative*. Sydney: NSW Ministry of Health, 2012.

The Royal Australasian College of Physicians. *Public Health Medicine Advanced Training Curriculum*. Sydney: RACP, 2013. Available from: https://www.racp.edu.au/docs/default-source/trainees/advanced-training/public-health-medicine/public-health-medicine-advanced-training-curriculum.pdf?sfvrsn=77252c1a_8

