Public Mental Health Content Guide

For public health academic courses, professional training programmes and professional development

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In partnership with Public Health England and the Faculty of Public Health

Introduction

We have made it a priority to improve the capacity and capability of the public health workforce to meet the key public health challenge of improving the nation's mental health and wellbeing. This includes creating a workforce that is confident, competent and committed to:

- promote good mental health and wellbeing across the population
- prevent mental health problems and suicide
- improve the quality and length of life of people living with mental health problems[1]

This document has been developed and informed by national priorities, evidence and learning from a range of sources, including:

- Health Education England's Action Plan for mental health promotion and prevention training and the Mental Health Workforce Plan for England: Stepping Forward to 2020/21
- Public Health England's Public Mental Health Leadership and Workforce Development Framework and Prevention Concordat for Better Mental Health
- The Faculty of Public Health's Better Mental Health for All programme and work plan

It has been developed with experts from Public Health England, the Faculty of Public Health and Local Authority Public Health Departments, informed by research evidence of what works and learning from practice. It has been tested with academic providers. A mapping of under-graduate and post-graduate public health courses found that the majority of courses did not explicitly include public mental health.

Background evidence to support the content can be found in the listed documents and at the Faculty's website and publication Better Mental Health for All

Principles

Public health practitioners and specialists have a key role to provide expertise and leadership in public mental health and embed it within all public health policy and practice. Public mental health is not a single topic. It is indivisible from physical health and related to all pillars of public health. The parity of esteem challenge for public health is the need for better, more explicit reference to mental health within public health practice.

Public Mental Health includes the promotion of good mental health and wellbeing across the whole population, the prevention of mental health problems and suicide and improving the lives of people experiencing mental health problems.

Purpose

The aim of this document is to provide a concise but comprehensive overview of the public mental health knowledge and skill areas required of a public health professional. Table 1. provides specific public mental health content (column 3) mapped against the UK Public Health Skills and Knowledge Framework (columns 1-2).

The intention is to inform the development of public health academic courses (e.g. under-graduate and post-graduate public health degree courses), public health professional training programmes (e.g. practitioner, defined specialist and speciality training) or to be used by individuals for their own professional development.

How to use the guide

1. Course leaders/ programme facilitators/ lecturers:

Use column 3 as a subject guide for public health courses. The content can be used in specific public mental health modules and/ or integrated within more generic modules and other public health topics.

Use column 4 to assess whether your course/ different modules currently include this content or if it is an area for development.

2. Individuals:

Use column 3 to appraise your current knowledge and skills in relation to public mental health and how this aligns to core public health knowledge and skills (columns 1 and 2).

Use column 4 to self-assess your level of competence and highlight areas for development.

Public Health Skills & Knowledge Framework		Public Mental Health Content	Self-assessment: Fully/Partially met; or Development area;
Technical functions			
A1 Measure, monitor and report population health and wellbeing; health needs; risks; inequalities; and use of services	A1.1 Identify data needs and obtain, verify and organise that data and information	• Knowledge, use and analysis of measures and data in relation to: o Mental health, wellbeing, resilience o Social capital o Mental health problems o Service access, outcomes and recovery o Suicide and self harm o Risk and protective factors e.g. parenting, social connections, control, financial security, participation o Wider determinants of mental health and wellbeing e.g. housing, employment, poverty, violence o Community health assets	
	A1.2 Interpret and present data and information		
	A1.3 Manage data and information in compliance with policy and protocol		
	A1.4 Assess and manage risks associated with using and sharing data and information, data security and intellectual property		
	A1.5 Collate and analyse data to produce intelligence that informs decision making, planning, implementation, performance monitoring and evaluation		
	A1.6 Predict future data needs and develop data capture methods to obtain it		
A2 Promote population and community health and wellbeing, addressing the wider determinants of health and health inequalities	A2.1 Influence and strengthen community action by empowering communities through evidence based approaches	• Principles and approaches of community development and empowerment • Understanding of power inequality and mental health • Enable communities to develop their capacity to advocate for mental health and wellbeing	

		A2.2 Advocate public health principles and action to protect and improve health and wellbeing	• The nature and dimensions of mental health, wellbeing and mental illness, including differing and contested concepts and definitions • The need for clarity about the terms and definitions in operation when presenting to a range of audiences • Mental health promotion and public mental health theories and models • Relationship between physical and mental health • Determinants of mental health and illness – individual, family, community, structural • Relationship between trauma, adverse conditions and mental health • Prevention across the life-course	
		A2.3 Initiate and/or support action to create environments that facilitate and enable health and wellbeing for individuals, groups and communities	• Mentally healthy environments and settings • Recognition of the psychosocial environment • Importance of family and early years environment including trauma-informed environments • Whole school approaches to emotional health and wellbeing • Importance of built and natural environment to mental health and wellbeing • Using design to promote mental health and wellbeing • Organisational approaches to workplace mental health and wellbeing • Economic environment and wider systems	
		A2.4 Design and/or implement universal programmes and interventions while responding proportionately to levels of need within the community	• Programmes that promote mental health and wellbeing by strengthening individuals and communities • Programmes that prevent mental health problems • Programmes that prevent suicide • Reducing mental health inequalities • Engaging communities in the planning and delivery of community programmes	

	A2.5 Design and/or implement sustainable and multi-faceted programmes, interventions or services to address complex problems	• Holistic approaches in practice • Bio-psycho-social model of health • Parity of esteem • Complex causes and outcomes e.g. drug use, alcohol, domestic violence, long-term conditions and wider determinants across the life-course • Complex nature of mental health and multiple morbidities • Trauma-informed approaches	
	A2.6 Facilitate change (behavioural and/or cultural) in organisations, communities and/or individuals	• Psychosocial aspects of behavioural and cultural change • Organisational development that promotes wellbeing • Strengths and limitations of individual behaviour change approaches for mental wellbeing	
A3 Protect the public from environmental hazards, communicable disease, and other health risks, while addressing inequalities in risk exposure and outcomes	A3.1 Analyse and manage immediate and longer-term hazards and risks to health at an international, national and/or local level	• Risks to population mental health, wellbeing, illness and suicide • Consideration of differential exposure to risks by deprivation, age, gender, ethnicity etc • Preventing adverse childhood experiences • Suicide prevention interventions especially environmental • Psychological and community resilience • Understanding and responding to mental health impacts of population exposures to risk, emergencies and trauma	
	A3.2 Assess and manage outbreaks, incidents and single cases of contamination and communicable disease, locally and across boundaries		
	A3.3 Target and implement nationwide interventions designed to offset ill health (e.g. screening, immunisation)		
	A3.4 Plan for emergencies and develop national or local resilience to a range of potential threats		
	A3.5 Mitigate risks to the public's health using different approaches such as legislation, licensing, policy, education, fiscal measures		

A4 Work to, and for, the evidence base, conduct research, and provide informed advice	A4.1 Assess and appraise evidence gained through systematic methods and through engagement with the wider research community	• Effectiveness and cost effectiveness of:
		  o mental health promotion
		  o mental illness prevention
		  o suicide prevention
		  o improving the health, life expectancy, quality of life and recovery of people experiencing mental health problems
		  o reducing stigma and discrimination	

	A4.2 Critique published and unpublished research, synthesise the evidence and draw appropriate conclusions		
	A4.3 Design and conduct public health research based on current best practice and involving practitioners and the public		
	A4.4 Report and advise on the implications of the evidence base for the most effective practice and the delivery of value for money		
	A4.5 Identify gaps in the current evidence base that may be addressed through research		
	A4.6 Apply research techniques and principles to the evaluation of local services and interventions to establish local evidence of effectiveness		

A5 Audit, evaluate and re-design services and interventions to improve health outcomes and reduce health inequalities	A5.1 Conduct economic analysis of services and interventions against health impacts, inequalities in health, and return on investment	• Consider impacts on mental health and wellbeing • Consider inequalities in relation to mental illness • Economic evaluation of services/programmes that promote mental wellbeing	
	A5.2 Appraise new technologies, therapies, procedures and interventions and the implications for developing cost-effective equitable services	• The use of new technology for public mental health • Equitable access to mental health services • NICE appraisals of public mental health interventions	
	A5.3 Engage stakeholders (including service users) in service design and development, to deliver accessible and equitable person-centred services	• Community engagement methods and principles • Inclusion of people with mental health problems and those at risk • Principles of recovery in mental health services	
	A5.4 Develop and implement standards, protocols and procedures, incorporating national 'best practice' guidance into local delivery systems	• Public Mental Health national guidance	
	A5.5 Quality assure and audit services and interventions to control risks and improve their quality and effectiveness	• Across all areas and outcomes of Public Mental Health • Including building PMH capacity of the workforce	

Context functions

B1 Work with, and through, policies and strategies to improve health outcomes and reduce health inequalities	B1.1 Appraise and advise on global, national or local strategies in relation to the public's health and health inequalities	• Public mental health strategies (global, national, local) to
		  o promote mental health and wellbeing
		  o prevent mental illness
		  o prevent suicide
		  o improve the lives of people with mental health problems
		• Mental health and wellbeing impact assessment
		• Inclusion of mental health in all policies
		• Using community-centred approaches and principles	

	B1.2 Assess the impact and benefits of health and other policies and strategies on the public's health and health inequalities		
	B1.3 Develop and/ or implement action plans, with, and for specific groups and communities, to deliver outcomes identified in strategies and policies		
	B1.4 Influence or lead on policy development and strategic planning, creating opportunities to address health needs and risks, promote health and build approaches to prevention		
	B1.5 Monitor and report on the progress and outcomes of strategy and policy implementation making recommendations for improvement		

B2 Work collaboratively across agencies and boundaries to improve health outcomes and reduce health inequalities	B2.1 Influence and co-ordinate other organisations and agencies to increase their engagement with health and wellbeing, ill-health prevention and health inequalities	• Involvement in local multi-agency groups to address and embed public mental health across agendas • Advocate for actions to promote mental health and wellbeing in non-public health settings • Systems thinking wellbeing solutions for complex challenges • Engage and collaborate with voluntary and community services including working alongside those with lived experience of mental health problems	
	B2.2 Build alliances and partnerships to plan and implement programmes and services that share goals and priorities		
	B2.3 Evaluate partnerships and address barriers to successful collaboration		
	B2.4 Collaborate to create new solutions to complex problems by promoting innovation and the sharing of ideas, practices, resources, leadership, and learning		
	B2.5 Connect communities, groups and individuals to local resources and services that support their health and wellbeing		

B3 Work in a commissioning based culture to improve health outcomes and reduce health inequalities	B3.1 Set commissioning priorities balancing particular needs with the evidence base and the economic case for investment	• Outcomes and Indicators in relation to:
		  o individual mental health and wellbeing
		  o population mental health and wellbeing
		  o community empowerment and social capital
		  o population suicide reduction
		  o prevention of mental health problems across the population
		  o reduction in stigma
		  o improved health and wellbeing of people with mental health problems and their recovery from illness
		  o service access and outcomes
		  o mental health inequalities
		• All service specifications to incorporate mental health and wellbeing outcomes/ key performance indicators
		• De-commissioning of contracts that create barriers to mental health
		• Participatory approaches, co-production, peer and lay roles and other community-centred approaches
		• Use of Mental Health & Wellbeing Impact Assessment

	B3.2 Specify and agree service requirements and measurable performance indicators to ensure quality provision and delivery of desired outcomes	
	B3.3 Commission and/or provide services and interventions in ways that involve end users and support community interests to achieve equitable person-centred delivery	
	B3.4 Facilitate positive contractual relationships managing disagreements and changes within legislative and operational frameworks	
	B3.5 Manage and monitor progress and deliverables against outcomes and processes agreed through a contract	
	B3.6 Identify and de-commission provision that is no longer effective or value for money	

B4 Work within political and democratic systems and with a range of organisational cultures to improve health outcomes and reduce health inequalities	B4.1 Work to understand, and help others to understand, political and democratic processes that can be used to support health and wellbeing and reduce inequalities	• Influence politicians to prioritise mental health and wellbeing in policies • Advocate for mental health and wellbeing in political environments • Use data and information to make a compelling case • Principles and practice of individual and community empowerment • Approaches to participation in decision making • Legislation impacting on individual and population mental health and wellbeing
	B4.2 Operate within the decision making, administrative and reporting processes that support political and democratic systems	
	B4.3 Respond constructively to political and other tensions while encouraging a focus on the interests of the public's health	
	B4.4 Help individuals and communities to have more control over decisions that affect them and promote health equity, equality and justice	
	B4.5 Work within the legislative framework that underpins public service provision to maximise opportunities to protect and promote health and wellbeing	

Delivery functions

C1 Provide leadership to drive improvement in health outcomes and the reduction of health inequalities	C1.1 Act with integrity, consistency and purpose, and continue my own personal development	• Develop and articulate a compelling vision of improved mental health and wellbeing in the population • Demonstrate and apply an understanding of how mental health and wellbeing can be managed and promoted in staff and yourself in a range of situations • Understand the role personal mental wellbeing plays in competent practice and take responsibility for developing and nurturing your own wellbeing and seeking help as appropriate • Integrate mental health and wellbeing within all policy and take action to mitigate any negative impacts of policy on mental health and wellbeing • Promote the value of mental health and wellbeing and the reduction of inequalities across settings and agencies • Advocate for mental health and addressing mental illness as central to reducing inequalities and creating thriving communities and economies • Create organisations that nurture and sustain the mental health and wellbeing of employees	
	C1.2 Engage others, build relationships, manage conflict, encourage contribution and sustain commitment to deliver shared objectives		
	C1.3 Adapt to change, manage uncertainty, solve problems, and align clear goals with lines of accountability in complex and unpredictable environments		
	C1.4 Establish and coordinate a system of leaders and followers engaged in improving health outcomes, the wider health determinants and reducing inequalities		
	C1.5 Provide vision, shape thinking, inspire shared purpose, and influence the contributions of others throughout the system to improve health and address health inequalities		

C2 Communicate with others to improve health outcomes and reduce health inequalities	C2.1 Manage public perception and convey key messages using a range of media processes	• Understanding and manage perceptions and attitudes to mental health, wellbeing, mental illness, including stigma and its impact	
	C2.2 Communicate sometimes complex information and concepts (including health outcomes, inequalities and life expectancy) to a diversity of audiences using different methods	• Increase the exposure of people with lived experience of mental health problems to the rest of the population in order to reduce stigma • Use traditional and social media to promote mental health and wellbeing and reduce stigma • Communicate the complexity of mental health and wellbeing concepts to different audiences	
	C2.3 Facilitate dialogue with groups and communities to improve health literacy and reduce inequalities using a range of tools and technologies	• Evidence, ethics and approaches to mental health literacy and social marketing • Apply a range of community-centred approaches to engagement	
	C2.4 Apply the principles of social marketing, and/or behavioural science, to reach specific groups and communities with enabling information and ideas		
	C2.5 Consult, and listen to individuals, groups and communities likely to be affected by planned intervention or change		

C3 Design and manage programmes and projects to improve health and reduce health inequalities	C3.1 Scope programmes/projects stating the case for investment, the aims, objectives and milestones	• Understand the range of stakeholders whose work contributes to public mental health within the local and regional system • Consider and embed mental health and wellbeing in all programmes and projects • Consider the causal pathway and complexity of public health challenges and make these links explicit within programmes and projects where appropriate	
	C3.2 Identify stakeholders, agree requirements and programme/project schedule(s) and identify how outputs and outcomes will be measured and communicated		
	C3.3 Manage programme/project schedule(s), resources, budget and scope, accommodating changes within a robust change control process		
	C 3.4 Track and evaluate programme/project progress against schedule(s) and regularly review quality assurance, risks, and opportunities, to realise benefits and outcomes		
	C3.5 Seek independent assurance throughout programme/project planning and processes within organisational governance frameworks		

C4 Prioritise and manage resources at a population/ systems level to achieve equitable health outcomes and return on investment	C4.1 Identify, negotiate and secure sources of funding and/or other resources	• Use of mental health and wellbeing impact assessment to achieve equitable mental health outcomes • Application of public mental health interventions that have a known return on investment • Build public mental health workforce capacity, including commitment, confidence and competence of leaders and practitioners	
	C4.2 Prioritise, align and deploy resources towards clear strategic goals and objectives		
	C4.3 Manage finance and other resources within corporate and/or partnership governance systems, protocol and policy		
	C4.4 Develop workforce capacity, and mobilise the system-wide paid and volunteer workforce, to deliver public health priorities at scale		
	C4.5 Design, implement, deliver and/or quality assure education and training programmes, to build a skilled and competent workforce		
	C4.6 Adapt capability by maintaining flexible in-service learning and development systems for the workforce		

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