Mapping of key competencies required by the public health wider workforce to contribute to public health priority 3

(A Scotland where we all have good mental wellbeing)
The purpose of this document is to provide an illustration that could guide workforce development considerations for the public health wider workforce in relation to Public Health Priority 3, a Scotland where we all have good mental wellbeing.

For the purposes of this paper, public health wider workforce refers to:

“Any individual who is not a specialist or practitioner in public health but has the opportunity or ability to positively impact health and wellbeing through their paid or unpaid work”.

This mapping was informed by consulting and adapting the Public Mental Health Content Guide by Health Education England, Public Mental Health Leadership Workforce Development Framework, Scotland’s Mental Health Strategy 2017-2027 ‘Good Mental Health for All’, the Scottish National Suicide Prevention Action Plan and with evidence and consideration from NHS Health Scotland colleagues and advisers from the public health wider workforce.

In order to meet the public health priority of ‘A Scotland where we all have good mental wellbeing’ we require a public health wider workforce that is competent, committed and can contribute to:

• promote good mental health and wellbeing across the population
• prevent mental health problems, loneliness isolation and suicide
• improve the quality and length of life of people living with mental health problems.

Introduction

Public mental health and wellbeing includes the promotion of good mental health and wellbeing across the whole population, the prevention of mental ill-health, isolation and suicide and improvement of the lives of people experiencing mental health problems. This is achieved through organised efforts of society at large including organisations, communities and individuals.

Mental health and wellbeing is not a single topic. It is inseparable from physical and social health and related to all pillars of public health. The challenge for public health is the need for better, more explicit reference to mental health and wellbeing across the diverse public health wider workforce in Scotland.

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The scope of Public Health Priority 3, ‘A Scotland where we all have good Mental Wellbeing’, casts a broader net than the public health core workforce (practitioners and specialists). While the core public health workforce has traditionally been considered as the leading contributors to public health outcomes, the current/potential contribution which the public health wider workforce (as part of the organised efforts of society) makes towards safeguarding against the wider detriments of poor mental wellbeing and isolation is also increasingly being recognised and acknowledged. It is therefore important that appropriate steps are taken to maximise the potential and contribution of the public health wider workforce to public mental health and wellbeing.

In this mapping exercise consideration was given to roles across a broad spectrum from staff who do not have an explicit role in mental health (but require awareness on mental health to foster self-management and respond to individuals who are experiencing any form of mental distress) to specialist mental health staff within public health wider workforce.
Figure 1: Mapping of mental health priority against public health wider workforce groups

In Figure 1 above, the key competencies required by the public health wider workforce in order to make a vital contribution to the delivery of the public health priority on mental health – ‘*A Scotland where we all have good mental wellbeing*’ were categorised under four broad domains as follows:

- **Domain 1** - Mental health and wellbeing awareness, self-management and signposting
- **Domain 2** - Mental health in policy making, commissioning and design of services
- **Domain 3** - Non-mental health and social care services delivery and referrals
- **Domain 4** - Mental health service delivery

Examples of public health wider workforce groups mapped against each domain were provided. Given the size and diversity of the public health wider workforce, it was not possible to list all job roles. The examples of job roles provided are for illustrative purposes and are not exhaustive.

Figure 1 depicts the relationships between the domains and workforce groups as follows:

- **Domain 1** encapsulates the whole of the wider public health workforce with a requirement to have an awareness of mental health and wellbeing, be able to self-manage and respond to someone who is experiencing mental distress by signposting.
- **Domain 2** includes workforce groups with responsibility for policy making, commissioning and design of services to ensure that where applicable, mental health is considered and integrated into policy development, service design and commissioning of services. Workforce groups mapped against this domain will require competencies for domains 1 and 2.
- **Domain 3** covers workforce groups responsible for the delivery of non-mental health and social care services delivery including those who have a role in initial screening and referrals to specialist mental health services. Workforce groups mapped against this domain will require competencies for domains 1–3.
- **Domain 4** comprises specialist mental health professionals responsible for the delivery of mental health services. These workforce groups will require competencies for all four domains.
## Competency statements (including knowledge, skills and values required) for the domains

### Mental health and wellbeing awareness, self-management and signposting (Domain 1)

#### 1.1 Know the nature and dimensions of mental health and mental illness
- Define mental health, wellbeing and mental health problems
- Know the cultural differences and perspectives in mental health

#### 1.2 Appreciate that there is no health without mental health and the mind and body work as one system
- Understand the links between physical and mental health
- Appreciate that mental and physical health should be treated equally
- Be aware of wellness and wellbeing approaches in practice

#### 1.3 Understand your own mental health, what influences it, its impact on others and how you can improve it
- 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
- Understand that each individual faces different challenges and has different coping resources and experiences
- Understand what influences mental health in the workplace

#### 1.4 Recognise and act to reduce discrimination against people experiencing mental illness
- Understand stigma and discrimination and its impact on inequalities
- Understand the difference in life expectancy of people experiencing mental health problems
- Recognise and respond to people with mental health problems with compassion
- Reflect on your own limitations and know when and where to refer people with mental health problems
# Mental health in policy making, commissioning and design of services (Domain 2)

## 2.1 Know the determinants of mental health at a structural, community and individual level
- Wider factors e.g. poverty, employment, housing
- Community factors e.g. social connections, community life
- Family and parenting
- Individual factors e.g. sense of control, resilience, physical health
- Understand the importance of a whole population approach to mental health and wellbeing
- Understand how inequalities shape people’s risk of and resilience for mental health

## 2.2 Know what works to improve mental health and prevent mental illness within own area of work
Understand approaches that:
- Strengthen individuals: positive thinking and behaviour change, personal skills and resilience building, physical health and wellbeing
- Strengthen families: preventing adverse childhood experiences, supporting parenting
- Strengthen communities: empowerment, participation, co-production, social action
- Create mentally healthy environments and policies: green and public spaces, healthy schools and workplaces, welfare systems, accessible services

## 2.3 Consider social inequalities in your work, act to reduce them and empower others to do the same
- Take action to reduce inequalities where possible: socioeconomic disadvantage and meeting the needs of the most marginalised
- Reduce discrimination faced by people with mental health problems including their physical health needs, access to services and cultural needs of diverse groups
- Take a life course approach and investment in healthy early environments
- Support individuals and communities in the articulation of their priorities and advocating for health and wellbeing
- Engage people with lived experience in service design and co-production
## Non-mental health and social care delivery and referrals (Domain 3)

### 3.1 Know how mental health is a positive asset and resource to society
- Understand how mental health affects other outcomes:
  - Our physical health and health behaviours
  - Our functioning in work and school
  - Our relationships with family and others
- Understand different outcomes for children, young people, adults and older adults

### 3.2 Communicate effectively with children, young people and adults about mental health
Within your role:
- Encourage and enable individuals and families to identify the things that are affecting their mental health, now and in the future, and the things they can do to improve it
- Use appropriate tools and approaches that support people to build their skills and confidence in staying mentally healthy
- Help people to develop and implement a personal or family action plan to improve their mental health
- Enable people to get hold of up to date appropriate information and advice when they need it and access opportunities in their community and digitally

### 3.3 Able to operate within and across organisations
- Know the responsibilities of other practitioners, services and inter-agency procedures
- Communicate and coordinate work with other agencies
- Make a judgement on information sharing within and across services
- Recognise challenges to inter-agency working
### 3.4 Integrate mental health into your own area of work and address mental and physical health holistically
- Integrate and align mental health into your daily practice
- Deliver care holistically; through integrating physical, psychological and social factors
- Support people experiencing mental illness to make and maintain informed choices about improving their health and wellbeing
- Access information, support and make referrals where needed

### 3.5 Support people who disclose lived experience of mental illness
- Recognise when someone may be experiencing mental distress, including self-harm and suicidal thoughts and intentions
- Link people to appropriate sources of support, to address psychological need and social causal factors
- Incorporate the voice of people with lived experience in your work
- Assess risks and follow appropriate procedures and guidelines
- Apply an early intervention model (for suicide or mental health)

### Mental health service delivery (Domain 4)

#### 4.1 Understand and operate within professional and ethical guidelines
- Know mental health legislation relevant to professional practice
- Understand local and national policies in relation to capacity and consent; confidentiality and data protection
- Act in line with ethical and professional guidance represents and principles that need to be interpreted and applied to unique situations

#### 4.2 Provide mental health intervention to a person
- Identify potential barriers to uptake of service and provide support to problem solve and manage these obstacles
- Recognise and respond to concerns about safeguarding (e.g. neglect, domestic/sexual/financial abuse etc)
- Help validate and ‘normalise’ a person’s experiences and reactions
- Able to communicate effectively with people with neurodevelopmental conditions

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<tr>
<th>4.3 Understand psychopharmacology</th>
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<td>• Apply pharmacological interventions for coexisting mental health problems in patients (including self-harm or are suicidal) where appropriate</td>
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<td>• Understand that all medications have benefits and risks</td>
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References

Rethinking the Public Health Workforce, Royal Society for Public Health (2015)

Mapping the core public health workforce in Scotland, Centre for Workforce Intelligence (2015)


4Mental health Strategy 2017 -2027, Scottish government (2017)

5Good Mental Health for All, NHS Health Scotland, (2016)