

# Developing an effective public health intelligence course utilising a blended learning approach

## INTRODUCTION

The Local Knowledge and Intelligence Service (LKIS) is part of the Office for Health Improvement and Disparities (OHID) in DHSC. Part of our role is to develop the capacity and capability of the public health intelligence (PHI) workforce.

Our previous PHI training provision was inequitable due to different delivery frequencies and different course content across regions. We sought to develop a national course on PHI, targeted at new analysts working in local authorities. We wanted to deliver a consistent high-quality course which was co-produced and co-delivered in a multi-modal way.

## METHODS

We set up a cross-organisation working group and reviewed relevant competency frameworks and standards against existing materials to identify gaps in content. The resulting syllabus was structured into a course which used a range of delivery methods in a blended way and encouraged social learning. Existing materials were adapted and new content produced.

## RESULTS

We now have a 7-module course which runs over 6 months. The course includes e-learning modules, reading, videos, exercises, large webinar style sessions and small group sessions. Participants are supported throughout the course by a dedicated learning set facilitator. The course is hosted on our PHI/Online workspace on Futures.

The course was piloted in April 2024 and, following positive feedback, a second cohort ran in January 2025. A third cohort will start in January 2026.

Module	Weeks	Time
1: Introduction to public health and public health intelligence	2	3.5 hours
2: Using public health intelligence tools	4	14.25 hours
3: Data sources	4	8 hours
4: Statistics	5	9.5
5: Epidemiology	3	6 hours
6: Health inequalities	4	7.75 hours
7: Turning public health intelligence into action	4	11 hours
Whole course	26	60 hours



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## EVALUATION

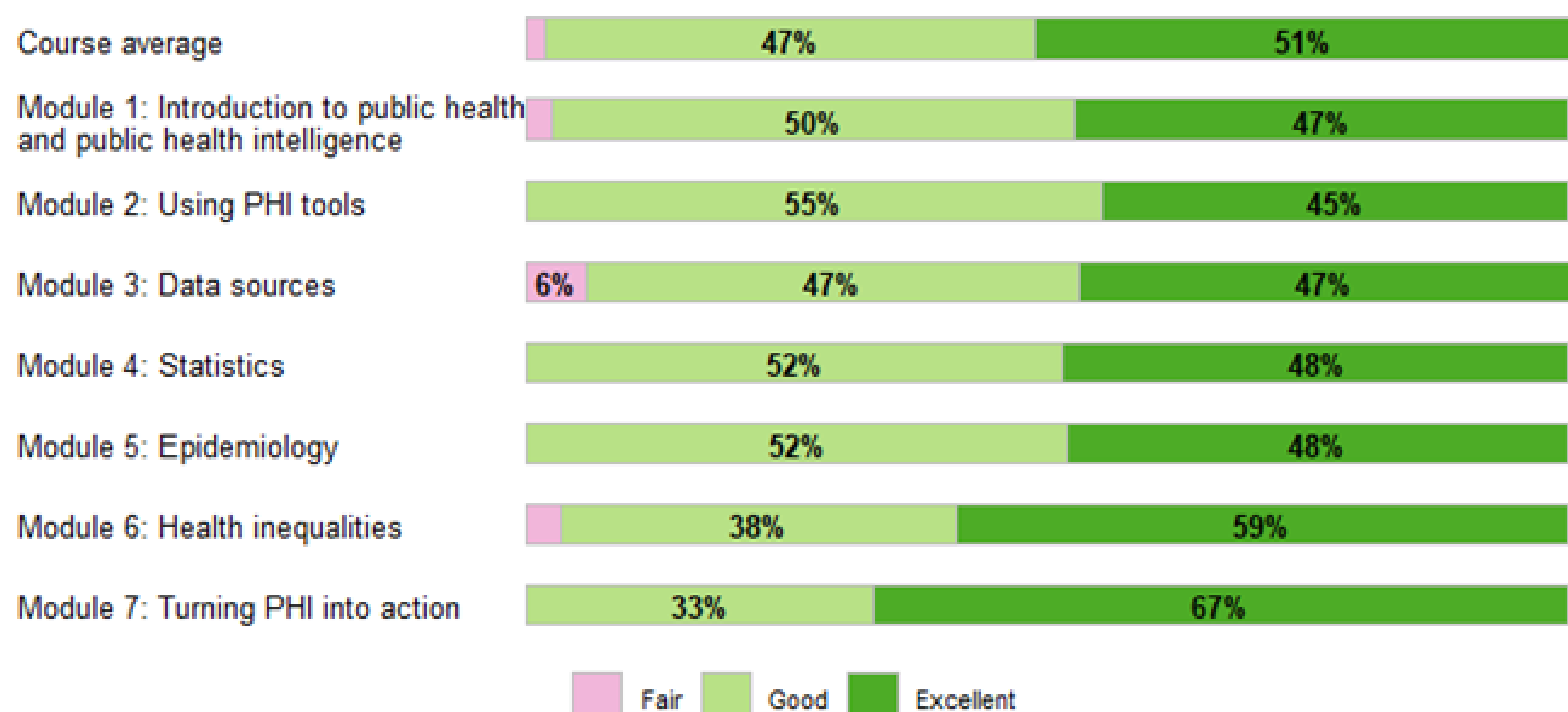
A full evaluation of the pilot was completed, using a mixed methods approach.

### Participant Feedback

Participants provided feedback after each module via set questions in an MS Form. Feedback was overwhelmingly positive, with 98% of participants rating modules as excellent or good.

How would you rate the module?

Percentage of those giving an answer other than 'N/A'



Q5: How would you rate the module?

### Lessons learned

The after-action review identified the following points which were taken forward to improve the course for the second cohort:

- Different people learn in different ways – try to offer the same content in multiple ways
- Book live sessions before the course starts
- Remember to plan the evaluation at the start

### Impact

114 local authority public health analysts have gained knowledge and skills to produce effective PHI outputs which will enable evidence-based decision making to improve population health.

The course can be delivered at scale and more efficiently than our previous offer, resulting in a more efficient use of our resources.

“I think the way the module was delivered and the self-learning was really good and suits different learning styles as people have different ways of learning.”

“An excellent module - thank you. All 7 have been excellent and I am really going to miss seeing the sessions in my diary. My manager has really appreciated some of the new knowledge I've gained.”



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