

**Health Technical Competency Framework.**

**1. About the FCDO Advisory Cadres**

World-leading technical and analytical capability is central to FCDO’s mission to be a force for good in the world. FCDO Advisers embody these capabilities, playing a key role in the delivery of the UK’s international objectives and development impact in particular.

Advisors have a central role in the design, implementation, appraisal, and evaluation of international development programmes; in the development and implementation of foreign and development policy; and in diplomacy and international partnerships. They play an expert role in inter-disciplinary thinking and thought leadership, linking programmes and bringing deep expertise to maximise impact. They have strong links with specialist networks, research organisations, and professional bodies in the UK and globally.

Advisers are accredited to one or more of thirteen Advisory Cadres. These are professional bodies within FCDO and cover: Climate and Environment, Conflict, Economics, Education, Evaluation, Governance, Health, Humanitarian, Infrastructure, Livelihoods, Private Sector Development, Social Development, and Statistics. The Economics, Statistics, and Evaluation Cadres are linked to government-wide advisory services. Each Cadre has a Head of Profession (HoP), who is responsible for ensuring that professional standards are maintained both within the Cadre and for those wishing to join. The HoP provides thought leadership, quality assurance, and supports continuous professional development.

**Adviser Capabilities**

Advisers have certain capabilities in common. These include but are not limited to the following:

- **Expertise and thought leadership** in international policy and investment, applicable across a range of themes and geographies, and with a focus on development impact
- **Use of evidence to inform policy and programming** including the use of political economy analysis
- **Knowledge of data** relevant to operating sector and context, and application of professional expertise in interpretation and analysis of this in support of intended outcomes
- **Policy and programme delivery**, from design through to implementation and appraisal
- **International influence and diplomacy**, thinking and working politically and cooperatively, and through appropriate challenge, to shape norms and approaches
- **Brokering partnerships** with governments, civil society, the private sector, multilaterals, research organisations and professional bodies in the UK and globally
- **Delivering value for money** by applying key economic and commercial concepts
- **Safeguarding** to ensure the UK does-no-harm by integrating gender equality, child protection, disability inclusion, preventing sexual exploitation and abuse, and sexual harassment
- **Tackling climate change and restoring nature**, ensuring that programmes are aligned with the Paris agreement on climate change and UK commitments on nature
- **Contextual differences** such as fragility and conflict affected states, policy contexts, economic development and responding appropriately
- **Embodying Civil Service behaviours** in applying, communicating, influencing, and leading technical and evidence-informed processes and engagement
- **Systems thinking**, recognising inter-linkages, real-world dynamics, and complexity to help design effective policies and interventions.
- **Innovation and digital development**, proactive in exploring and validating innovative approaches, technology solutions and creative ways to address the world’s challenges.

**2. Health Advisers (HAs)**

FCDO’s contribution to global health. FCDO’s health agenda is shaped by the 2021 Integrated Review, the 2022 International Development Strategy. Our objectives are to contribute to (i) strengthening global health security, including transitioning to manage COVID-19 as an endemic disease (ii) strengthening global health architecture (iii) ending the [preventable deaths of mothers](#),

[babies and children](#) through [strengthening health systems](#), accelerated progress to universal sexual reproductive health rights, strengthen food, water, sanitation and wider environmental systems, support for science, research and innovation and (iv) advancing global health science and technology.

The FCDO contributes to the advancement of several SDGs – in particular SDG 3 - ‘*ensure healthy lives and promote well-being for all at all ages*’ (SDG Goal 3). Whilst impacting on global health across the globe, it has a focus on improving health outcomes in low income countries (LICs) and for the poorest and most vulnerable across the geographies in which we work. The FCDO delivers on a range of goods with global public health benefit – for example engagement and finance for developing new vaccines, diagnostics and therapeutics, and policy influencing research. It shapes global health policy global dialogue on many issues – for example sexual and reproductive health and rights and pandemic preparedness. Finally, FCDO contributes to health gains in LICs and middle income countries (MICs) through its support to the major global health initiatives and through in country programmes in support of national health systems complemented with targeted high-impact interventions, and the wider determinants of health including nutrition and WaSH, drawing on UK expertise in science, technology and public health. The majority of health programmes are in fragile and conflict affected states.

The **health cadre** is a medium-sized cadre; with over 55 accredited health advisers. Health advisers ensure evidence, equity and inclusion is central to policy and programming and combine technical skills with influencing and diplomatic skills. Cadre members will fulfil delivering the health agenda by:

1. **Supplying high quality technical expertise** to support and guide FCDO’s health ambitions including the design of strategies, plans, policies, programmes, rules, and guidance
2. Being a **strong partner to the Global Health Directorate** in delivering the UK’s international health ambitions, working with other government departments and external partners
3. **Drawing on the best available evidence**, consulting with other specialisms or sources of knowledge and working with others to quality assure
4. **Tailoring health interventions** to the development aspirations of ODA recipient countries in ways that are consistent with UK and international commitments and ambitions
5. **Integrating health across FCDO’s work** at all levels and in all sectors, advising on possible health opportunities, solutions within policies and programmes, and providing appropriate levels of challenge when necessary
6. **Promoting and championing health achievements**, learning and development and professional excellence
7. Ensuring skillset remains relevant through **continual learning and professional development**
8. Developing **strong partnerships, knowledge sharing and relationships** with UK health organisations, partner governments, bilateral and multilateral organisations to ensure coherence, build and use evidence informed policy and programming, and establish trust and reliability.
9. Using all **available UK levers**: design, delivery, and appraisal of development policy and ODA programme interventions; design and implementation of trade and diplomacy measures; maximising use of diplomatic networks and relationships; influencing across HMG; facilitating bilateral, regional, and multilateral agreements and negotiations

**3. Health Technical Competencies**

Health Advisers are expected to demonstrate knowledge and practice across FCDO’s strategic priorities for Health. These technical competencies are outlined below.

**PLEASE NOTE:** In addition to the five technical competencies, you will be able to draw on **other areas of technical capability in application and interview processes** (see Annex 1 for examples). Experience in these areas could be used to demonstrate depth of expertise in a particular competency area (e.g. deep experience of public health responses to conflict situation, and/or humanitarian settings, addressing climate change’s impact on health and the health sector’s response, advancing demographic transition through health interventions) or as examples of relevant transferable skills (e.g. experience in governance, security and justice and/or human rights programming in relation to empowerment and accountability, gender and broader inclusion and equality agendas). Additional areas of knowledge and practice will need to be *closely linked* to the five technical competencies:

**COMPETENCY H1: PUBLIC HEALTH - Analysis and application of epidemiology and public health intelligence – with a strong focus on LICS and MICS**

**Knowledge: advisers can identify and analyse:**

**Epidemiology / public health intelligence: including the following:** (i) health inequalities, including poverty and gender issues, and underlying factors such as power imbalances and social norms (ii) communicable disease (including malaria, HIV, TB and neglected tropical diseases) prevention, preparedness, surveillance, detection and response, including existing and emerging infections and antimicrobial resistance (iii) reproductive, maternal, newborn, child and adolescent health (iv) nutrition (v) population dynamics and demography (vi) trends in a population’s health and (vii) the relationship between climate change and health status.

In **protracted crises and fragile and conflict affected states**, understand the political, social and economic implications for public health.

**Global Health Security: including the following:** (i) preparedness, risk reduction and resilience and responses for outbreaks nationally and globally (ii) the global health security architecture (including the International Health Regulations, and implementing the all hazards and a One Health approach)

**Practice Areas: advisers can use the above knowledge to:**

**Influence the development and implementation of global and national health policies and programmes** including:

- Influence policy development through knowledge, and evidence and using political economy analysis
- Able to assess, and communicate, the potential impact of new evidence or policy on population level health outcomes
- Ability to address equity considerations in interventions and understand the drivers of exclusion in policy making and implementation with a focus on poverty and disability
- Analyse and advise on the value for money of interventions intended to improve the health or wellbeing of individuals or populations
- Ability to advance the health arguments for more ambitious national and global action on climate mitigation and adaptation.
- Ability to apply a rights based approach to policy development and delivery

**Shape FCDO’s strategic direction with respect to global health its contribution to FCDO’s policy priorities** including effectively partnering with other UK public health institutions and other government departments for maximise policy impact

**COMPETENCY H2: HEALTH SYSTEM DEVELOPMENT - Analysis based on experience of health systems development – with a strong focus on LICS and MICS**

**Knowledge: advisers can identify and analyse:**

**Health Services:** packages of essential ‘best buy’ services, delivery systems (state and non-state)

**Leadership and governance:** political economy shaping national health systems, relationship between private and public sectors, accountability structures, state regulatory structures and policies and procurement policies.

**Health financing:** (i) strategies for financial risk protection for the poor (ii) strategies to improve economy, efficiency, effectiveness, sustainability, and equity (iii) health budgets and value for money application to health outcomes and poverty reduction, including health technology assessment principles and (iv) sources of non-health funding that impact on health status (eg multilateral climate funds)

**Health information systems:** national and global health information systems, including mechanisms for analysing and communicating health data, digital for decision-making and to demonstrate results and value for money.

**Health workforce:** human resources policies, planning and management

**Access to essential medicines:** markets for essential medical and other health products, supply chain, infrastructure and equipment provision to ensure efficiency, quality and responsible use.

**Protracted crises/Fragile and Conflict Affected States:** Understanding of political, economic, and social implications of differing contexts along the humanitarian-development-peace nexus and the impact these have on health systems.

**Regulatory policies and systems:** those that govern the health sector and those that govern the macro state structure that the health sector operates within

**Private (non state) sector:** non profit and profit and nature of the relationship between state and non state

**Practice Areas: advisers can use the above knowledge to:**

**Strengthen global and country health systems – through a range of engagement mechanisms- to:**

- Advance tackling stigma and discrimination and promote inclusive systems
- Address social norms and the political economy to shape the health systems and health markets, and influence decision-making on sector priorities and resource allocation
- Advise on evidence-based strategies for effective state and non state systems
- Influence the prioritising of the needs of the poor and excluded
- Ability to influence public sector reforms, (such as decentralisation, anticorruption, and accountability), to improve the performance of health systems
- Support partner country governments and their stakeholders to develop and deliver a package of priority cost-effective quality service for care and prevention, which are affordable and accessible to all
- Advance health systems response to climate change towards more resilient sustainable and low carbon systems (based on a systematic analysis of a health system’s vulnerability to climate change and greenhouse gas emissions) whilst also maximising health outcomes from action on climate change
- Adapt health systems to a variety of contexts in particular systems to deliver health care in protracted crises and fragile and conflict affected states
- Advise on range of relationships between state and non state systems

**Design and deliver programmes compliant with FCDO policies** (Public Sector Duty, safeguarding measures) and appropriate for the context including fragile and conflict affected environments.

**COMPETENCY H3: HEALTH ARCHITECTURE - Analysis of global health context, including the international health architecture**

**Knowledge: advisers can identify and analyse:**

**Health architecture:** (i) The mandate, structure, policy and approach of key global health multilaterals and global funds including World Bank, WHO and other UN agencies, GFATM, GFF and Gavi (ii) The mandate, structure, policy and approach of major bilateral agencies, non-traditional donors and foundations; (iv) roles played in global health by research organisations, academia and the private sector, including pharma.

Understand the different health and humanitarian aid organisations and ways of working, mechanisms and approaches in **challenging contexts – protracted crises and fragile and conflict states.**

**Global institutions that impact on health policy:** the structure, roles and influence of the G7, G20, UN.

**Overseas Development Aid:** (i) The SDGs, ODA rules and UK ODA legislation (including gender); (ii) principles and behaviours of effective aid.

**The UK’s contribution:** (i) the priorities of other government departments (ii) role and scope of UK leading CSOs and professional organisations and (iii) role and scope of leading UK academic institutions, and how best to draw on and deploy UK expertise in science, technology and public health partnerships globally

**Practice Areas: advisers can use the above knowledge to**

- Use opportunities to influence partners in countries to advance complementarity and coherence of multilateral, bilateral and UK’s Centrally Managed Programmes in delivering the UK’s health priorities and ensure FCDO funding to health is greater than the sum of its parts
- Influence the totality of the UK’s sphere of engagement in health using development and diplomacy channels to impact on health policy and strategic delivery of global public goods
- Ability to interpret global health threats and engage in, and influence, the global or regional response
- Shape the global health architecture to maximise its coherence and impact
- Ability to shape health programmes in challenging contexts – using tools, evidence and being adaptive to learning. Able to correctly balance meeting urgent needs with sustaining or strengthening existing health systems

**COMPETENCY H4: THE WIDER DETERMINANTS OF HEALTH INCLUDING NUTRITION - Analysis and application of health improvement principles, including the wider determinants of health**

**Knowledge: advisers can identify and analyse:**

**Wider determinants of health:** the impact of the following on health status and health systems (i) macroeconomics and social factors including gender equality and inclusion and diversity (ii) water and sanitation - quality and quantity (iii) education - quality and quantity (iv) political and governance

systems (v) food safety, air quality and housing and (vi) climate change and the health co-benefits of action on climate change.

**Multi-sector:** Different approaches to effective multisectoral coordination and action.

**Leaving no-one behind:** strategies to strengthen pro-poor and equitable policy, financing, and implementation based on analysis of socio-cultural contexts, power imbalances between different groups and their effect / impact on safeguarding concerns within health systems / health sector and interventions or approaches to address such concerns.

**Nutrition:** the impact of access to food on health. The causes, scale and trends of malnutrition and range of interventions within and beyond the health sector.

**Practice Areas: advisers can use the above knowledge to:**

- Advance health gains by influencing national development plans
- With competency H3, identify opportunities and use effective relationships to influence global policies that impact on health – and facilitate the use of UK skills and resources
- Develop and implement interventions for behaviour change to shift social norms.
- Engage with multisectoral partners to maximise health co-benefits of action on climate change, and to motivate higher ambition on climate change through utilization of the health arguments
- Ability to ensure equity principles adopted across all social determinant programme
- Ability to advise on nutrition-specific and nutrition-sensitive actions, and multi-sector approaches to prevent and treat (all forms of) malnutrition
- Ability to design and advise on health sector interventions (micronutrient supplements, breastfeeding support, effective diarrhoea treatment)

**COMPETENCY H5: EVIDENCE, INNOVATION AND EVALUATION - Analysis and application of evidence, innovation, and evaluation**

**Knowledge: advisers can identify and analyse:**

**Research and evaluation:** (i) key quantitative and qualitative research and evaluation methodologies (ii) key sources of published statistics, research, systematic reviews, and other evidence and (iii) critically appraise the quality of data and research

**Digital:** potential of different digital technologies to improve the reach and value for money of development interventions.

**Practice Areas: advisers can use the above knowledge to:**

- Contribute effectively to the development of FCDO’s research priorities
- Ability to use evidence and learning from monitoring, evaluation and research into policy and programmes
- Ability to oversee and support the design of rigorous evaluations of programmes including building impact evaluations into programme design where appropriate.
- Ability to work credibly with other actors (nationally and internationally) to identify research gaps and contributing strategically to national and international evidence base through responsive and timely interventions
- Ability to determine how appropriate digital technologies can be integrated into programmes.

**4. Assessing Adviser Expertise**

Assessments will focus on the extent of knowledge and practice across all five areas, with depth of knowledge and practice determining the level of capability at which to accredit. **Advisers are not expected to have equal knowledge and practice experience in all competencies but are expected to provide evidence of knowledge and demonstrate either direct or transferable practice and experience across all five competencies.** For example, under the Public Health competency, it would be acceptable to supply evidence of knowledge of latest evidence and policy debates and best practice in designing and delivering national public health programmes, together with relevant and transferable experience from other sectors/areas of work.



Assessments will be based around a review of evidence that describes the extent of knowledge and expertise applicants hold in the relevant competencies, and also against capability levels from the FCDO Capability Framework: *Awareness, Foundation, Practitioner, and Expert* (within *Expert* the HoPs Group differentiate between *Expert* and *Senior Expert*). Note that particularly for *Senior Expert* level, consideration will be given to candidates' ability to give high quality demonstration of technical leadership and an ability to communicate and influence in their evidence.

**Practitioner:**

- Strong and confident day to day application of capability in common or standard situations but may need to seek expert support on more complex issues
- Holds several years of relevant experience\* and may be augmented by a formal qualification of direct relevance such as a master's in public health (or similar qualification) or significant self-directed study
- Minimum level required in order to be a member of the Cadre – successful Technical Assessment dependent on fulfilling all stated criteria in the TCF

**Expert:**

- Recognised for specialist or technical knowledge and/or skill, underpinned by extensive experience applying it in practice on complex issues at national and global level; connected with other experts
- The health systems competency should be based on sufficient experience in a LICs or LMIC
- Holds several years of relevant experience\* and likely to be augmented by a formal qualification of direct relevance such as a Masters in Public Health (or similar qualification) or significant self-directed study
- Successful Technical Assessment dependent on fulfilling all stated criteria in the TCF

**Senior Expert:**

- Recognised for deep specialist or technical knowledge and/or skill, underpinned by extensive experience applying it in practice on complex issues; connected with other experts
- The health systems competency should be based on sufficient experience in a LICs or LMIC
- Holds significant years of relevant experience\* and likely to be augmented by one or more formal qualifications of direct relevance such as a Masters in Public Health (or similar qualification) or significant self-directed study
- Evidence of applying specialist knowledge and skill as well as displaying leadership qualities in a range of contexts.
- Ability to provide thought leadership
- Accreditation dependent on fulfilling all stated criteria in the TCF and assessment score of at least 4 against 2 Civil Service Behaviours: Leadership and Communicating and Influencing.

\* *Relevant experience* is defined as work experience in one or more sectors of direct relevance to the competency

Examples of sources of evidence include:

- A CV
- Examples of technical skills being used in Situation, Task, Action, Result format
- Work-based training including 10% cadre contribution
- Qualification
- Self-directed study
- Professional development record or learning log
- Project report
- Published or peer-Reviewed papers/dissertation
- Membership of a relevant professional body

Accreditation assessments will take into account the entire academic and professional history of a candidate and not rely solely on their last or most recent post.

**Assessment Framework**

The table below sets out the framework for how capability will be assessed at the competency level. The framework is based around the standard 1-7 scoring system used for Civil Service recruitments.

**Sift:** During an accreditation round, the sift panel will agree a pass mark for all competencies. This could be, for example, 4. A sift will score all competencies at or above the pass mark for an applicant to pass from sift to interview. If a candidate applies for a level and does not pass, the sift panel can at their discretion agree whether they might still pass at a lower level. For example, an applicant might apply at Expert level. During the sift the panel might not pass them on all competencies, but after discussion agree to progress them to interview at Practitioner level.

**Interview:** Prior to interviews, the interview panel will again set a pass mark for all elements of the assessment. An interviewee must score higher than the pass mark in all areas to be considered for accreditation. If a candidate applies for a level and does not pass, the interview panel can at their discretion accredit the candidate at a lower level. Candidates who pass at a particular level cannot be considered for accreditation at a higher level, regardless of their scores. They must re-apply for accreditation at a higher level in a future accreditation round. The full set of accreditation requirements are specified in Section 5.

Standard scoring for assessment		
Score	Classification	Definition
7	Outstanding Demonstration	The evidence provided wholly exceeds expectation at this level
6	Strong Demonstration	Substantial positive evidence; includes some evidence of exceeding expectations at this level
5	Good Demonstration	Substantial positive evidence of the competency or behaviour
4	Acceptable Demonstration	Adequate positive evidence and any negative evidence would not cause concern
3	Moderate Demonstration	Moderate positive evidence but some negative evidence demonstrated
2	Minimal Demonstration	Limited positive evidence and/or mainly negative evidence demonstrated
1	Not Demonstrated	No positive evidence and/or substantial negative evidence demonstrated

Those accredited at *Senior Expert*, *Expert* or *Practitioner* are considered to be accredited to the health cadre.



### **Annex 1: Examples of recognised additional areas of technical expertise**

In addition to the five technical competencies, you will be able to draw on **other areas of technical capability in application and interview processes**. Experience in these areas could be used to demonstrate depth of expertise in a particular competency area or as examples of relevant transferable skills. Additional areas of knowledge and practice will need to be *closely linked* to the five technical competencies: Examples follow: Deep expertise in:

- preparing and responding to health needs across a range of crises
- addressing climate change's impact on health and the health sector's response and a contributor to climate change and as a mitigation force
- advancing demographic transition through health interventions
- advancing Rights in public health including sexual and reproductive rights
- advancing conflict and political analysis to strategy development
- strengthening accountability and inclusion in health programming
- generation, application to policy and programming and critiquing of research
- advancing nutrition policy and programming: causes, scale and trends in malnutrition, and consequences for human and economic development. Evidence of what works including nutrition-specific and nutrition-sensitive actions, and multi-sector approaches to prevent and treat malnutrition; Global architecture for nutrition, Monitoring systems and indicators, and interpretation of nutrition-related data. Food systems impact on nutrition and health
- preparing and addressing disease outbreak: strong epidemiology and communicable disease

**Knowledge (advisers can identify and analyse):** (and where relevant elements of other cadres' competency frameworks which speak to health (e.g. livelihoods, humanitarian, conflict, social development, education etc.)

- Conceptual framework and commitments/agreements for that sector and other key issues, including institutional structures, roles and financing
- The architecture and barriers/incentives for change
- The Evidence base, best practice and current debates

**Practice Areas (advisers can use the above knowledge to):**

- Lead or contribute to programme design, delivery and monitoring or policy development and advocacy
- Initiate, contribute or challenge best practice among colleagues or other external stakeholders
- Be an informed client of super specialist sector expertise