Implement & Monitor 4

- Carry out the program and/or interventions
- Collect, analyze, and summarize indicator, evaluation and/or quality improvement evidence
- Determine what program and/or intervention modifications should be made
- Implement knowledge exchange (as appropriate)
- Report on progress as required (e.g. Mid-year Report, End-year Report)

Assess

Implement & Monitor

PROGRAM PLANNING FRAMEWORK

Plan 3

 Develop Activity Plans to suit operational needs (flexible):

o Objectives

- o Programs and/or interventions
- o Stakeholder roles and expectations
- o Indicators
- o Evaluation plan and/or quality improvement plan
- o Organizational resources and timelines
- o Knowledge exchange plan
- Develop a Standard Level Logic Model and as needed Logic Models to suit operational needs
- Submit Annual Service Plans to the Ministry
- Deliverables: <u>Activity Plan</u>, <u>Logic Model</u>, <u>Annual Service Plan</u>

Public Health Santé publique SUDBURY & DISTRICTS

Plan

Assess 1

• Determine the scope of the assessment at the topic level

• Identify evidence to be gathered from the following contexts:

- o Population health
- o Research, monitoring, and evaluation
- o Capacity and resources
- o Community and political context and preference
- Collect, organize, and assess evidence
- Deliverables: Topic Level Evidence <u>Repository Form</u> (Needs & Interventions), Topic Level Evidence Synthesis Form (Needs), Standard Level Evidence <u>Synthesis Form</u> (Needs), Standard Level Local Needs Assessment Discussion

Recommend

Recommend 2

- Synthesize the evidence and draw conclusions: recommend interventions, capacity and resources at the topic level
- Prioritize and recommend interventions, capacity and resources at the standard level

• Deliverables: Topic Level <u>Evidence Synthesis</u> <u>Form</u> (Interventions), <u>Standard Level Evidence</u> <u>Synthesis Form</u> (Interventions), Standard Level Interventions Discussion



Evidence of Need and Interventions *Repository Form*

Topic: Insert Name Here Lead(s): Who is leading and contributing to this work Standard: Identify which Standard requirements are linked to this assessment

Evidence Collection Table for Local Needs

This section is a repository of relevant evidence on local needs. Throughout this section, identify which standard(s) the evidence supports. Provide key points and/or abstracts of relevant information (and any limitations to its use).

This section will help inform Phase 1 of the Evidence Synthesis Form. Be sure to include all references as per APA format. Consider how local needs may differ for rural or district office areas. Include data and information specific to these communities.

Population Health Data Burden of illness, emerging trends, risk and protective factors, barriers to access and utilize services, health inequities Target Group(s) and Priority Population(s)¹

Identify/describe any target groups and/or priority populations who:

- Are more likely to suffer from a negative health outcome than the general population
- Are more likely to develop a negative health outcome due to common health behaviours, lifestyles, exposure to health hazards, or characteristics of their social or physical environment including rurality
- May be less able to access health unit programs, services or messaging

Public Health Resources

Financial resources, human resources, materials, capacity

Community and Political Context *Knowledge, perceptions, attitudes, behaviours, practices, local needs assessment, assessment of existing programs and services*

Research, Monitoring, and Evaluation

Local needs assessment, high quality quantitative and qualitative evidence, research and evaluation findings from a variety of disciplines and sectors

Gaps in Evidence

What are the gaps in the information or evidence?

Evidence Collection Table for Interventions

This section is a repository of relevant evidence on effective program interventions. Throughout this section, identify which standard(s) the evidence supports.

This section will help inform Phase 2 of the Evidence Synthesis Form.

Provide key points and/or abstract of relevant information (and any limitations to its use).

Be sure to include all references as per APA format.

Options/Interventions

- Consider best practices, promising practices, and interventions from research literature that have promise.
- What is the community already doing to address this topic?
- Identify community readiness, capacity/resource implications and collaboration/partnerships for each intervention. Consider how interventions may differ for rural or district office areas. Include evidence on delivering interventions specific to these communities.

Gaps in Evidence What are the gaps in intervention evidence?

References

l list of references per APA format	
per APA format	

¹Priority populations are those that are experiencing and/or at increased risk of poor health outcomes due to the burden of disease and/or factors for disease; the determinants of health including the social determinants of health; and/or the intersection between them. They are identified using local, provincial and/or federal data sources; emerging trends and local context; community assessments; surveillance; and epidemiological and other research studies. In Northern Ontario, greater health inequities are experienced by several populations, included by not limited to Indigenous Peoples, Francophone populations, people living in low income, LGBT2SQ+ populations, racialized populations, newcomers, those living with disabilities and those who experience poor mental health and addictions. (Northern Ontario Health Equity Strategy, 2018)

Evidence of Need and Interventions Synthesis Form

Topic: Insert Name Here Lead(s): Who is leading and contributing to this work Standard: Identify which Standard requirements are linked to this assessment

Phase 1: Synthesis of local need evidence

Briefly describe the **local need** regarding this topic by utilizing the following evidence. Throughout this section, clearly identify which standard(s) the evidence supports. Assigned staff to consult across Standards on this topic.

Population Health Assessment	
Population Health Burden	
Population health data related to burden of illness	
How do we compare to elsewhere? Are things getting worse? Yes/No	
• Better off than Ontario, No difference, Worse than Ontario, Worse than NEO and Onta	irio
Emerging trends:	
• Clearly identify timeframe (i.e. 1, 5, 10 years) and geographic location (i.e. local, regio	nal, provincial, etc.)
	Unique to district offices
Risk and Protective Factors	
	Unique to district offices

Target and Priority Populations¹

- Who is most at risk of poor health outcomes due to the burden of disease and/or factors for disease?
- Who is most at risk of poor health outcomes due to the social determinants of health? (Highlight the inequity)

• What proportion of the population are at risk?	
	Unique to district offices
Political and Community Context	
 Political context (legislation, political/government context - local, provincial and federal, with a What are the government priorities related to this topic, if any? Have there been any changes to the public health mandate, protocols, etc.? What other political factors are influencing this topic (e.g. have there been any change government elected platform, etc.)? Support or opposition for this topic? What are some political/community context facility 	s or new legislation on this topic, new
Organizational priority (standard level priority, strategic plan priority, EC priority, etc.) Please describe how this relates to organization priorities?	<u> </u>
	Unique to district offices

New evidence (new guidelines, literature, research, WHO, etc.)	
Is there new and/or emerging evidence that has identified a need?	
	Unique to district offices
Community context	
 Community beliefs, attitudes, behaviours, practices, knowledge, and social and physical 	al environments related to the tonic
 From general public, key stakeholders, community partners, staff input 	
	Unique to district offices
Existing programs and services/Community assets (resources, capacity, partnership)	
• To what degree are services already provided and meeting the needs of communities?	
• To what degree does the community have the necessary assets to support this topic?	
What are the gaps? Duplications? Limitations to other services?	
	Unique to district offices

Evidence Quality and Gaps			
• Do we have good valid and reliable information? How sure are we of all of this?			
• What are the gaps in information or evidence when it comes to identifying need for thi	s topic?		
	Unique to district offices		
Community Needs and Priorities (TO POPULATE ASP)			
Please provide a short summary of the following:			
a) The key data and information which demonstrates your communities' needs for public	health interventions.		
b) Determination of the local priorities for programs of public health interventions. (i.e. W	/hat are the key needs that require		
interventions and that will be addressed)?			
	Unique to district offices		

Manager Approval (must be signed by most responsible manager and consulting managers)

Name	Check when approved
Most Responsible Manager	
Consulting Manager	
Consulting Manager	
Consulting Manager	

			Assessment*			Recommended Decision**		
Торіс	Activities	Intervention*	Need	Impact	Capacity	Partnership	Activity Status	Rationale/Evidence
	1.							
	2.							
	3.							
	4.							
	5.							
	6.							
	7.							
	8.							
	9.							
	10.							
when it comes to i	ity gaps in evidence dentifying activities ds identified for this				·		·	

Phase 2: Program of Public Health Interventions for Standard: _____

*Definitions below

**Refer to this decision-making tool.

References

list of references	
per APA format	

¹Priority populations are those that are experiencing and/or at increased risk of poor health outcomes due to the burden of disease and/or factors for disease; the determinants of health including the social determinants of health; and/or the intersection between them. They are identified using local, provincial and/or federal data sources; emerging trends and local context; community assessments; surveillance; and epidemiological and other research studies. In Northern Ontario, greater health inequities are experienced by several populations, included by not limited to Indigenous Peoples, Francophone populations, people living in low income, LGBT2SQ+ populations, racialized populations, newcomers, those living with disabilities and those who experience poor mental health and addictions. (Northern Ontario Health Equity Strategy, 2018)

²Need: Assess the magnitude of the problem that the intervention will address (from population health and community and political evidence).

Impact: Assess the effectiveness of the interventions, and so the likelihood to change the health status of the identified population with the intervention (from research, monitoring, and evaluation evidence). Capacity: Assess the financial, human, and material resources available for this intervention and required to meet the needs of the identified population. Partnership: Assess external opportunities (e.g. existing partnerships/engagement, existing programs and services,) for this intervention.

APPENDIX B

	Example Activity for Planners				
OPHS Requirement	Indicate the requirement name				
Requirement Number/Letter	Input the standard number(s)/letter(s)				
Strategic Priority	Indicate Strategic Priority/Priorities this activity addresses 1-Champion and lead equitable opportunities for health 2-Strengthen Relationships 3-Strenthen evidence-informed public health practice 4-Support community actions for promoting health equity 5-Foster organization-wide excellence in leadership and innovation All	1, 2			
Activity	Insert name/description of activity	Pregnancy Education/Preparation for Parenting			
Details of Plan	Describe steps/services required to make this activity happen	Prenatal education			
		 Universal: Continue to deliver monthly prenatal education classes Continue to provide online prenatal classes Targeted: Continue to co-facilitate various reproductive/prenatal topics Creating Healthy Babies program at OCOF Continue to organize up to 4 meetings per year with OCOF stat training on various reproductive health topics Consult with OCOF staff to determine resource needs and dist Continue to promote prenatal sessions to HCPs & social service 			
FTE	Outline FTE allotment for this plan (if applicable)	•3 PHN's .25 •Health Promoter .02 •Registered Dietician .02			
Target Audience	Provide your <u>specific target audience</u> for the activity (e.g. youth, young adults by age, students)	Pregnant women, their partners and families HCP's, social service providers			
Priority Population	Provide your identified priority population(s) for the activit	Low-SES pregnant women and their partners; pregnant teens			
AODA	Have you considered AODA compliance?				
Time Period	Indicate estimated <u>time-frame</u> in which the activity will take place (Ongoing, 1 year, 2 years, 3 years)	Ongoing			
Partners (List partners e.g., internal & external)	Provide a list of partners you will collaborate with to carry out this activity	HBHC, OCOF, HCP's, social service providers (e.g. CAS, CFC)			

ics from Toronto Public Health CPNP binder as part of the taff to discuss programming and provide education and istribute resources as requested vice providers in order to increase awareness of SDHU

	Example Activity for Planners				
Outcome(s) (Briefly describe)	State the results or impact of the activity or services provided. (e.g. Increased or decreased)	 Expectant parents have increased knowledge about how to have parenting. Expectant parents know how to and can access prenatal education. HCP and social service providers are aware of the importance of prenatal sessions and refer clients to prenatal services and the H 			
Evaluation Methods	(e.g. Process Outcomes/Impact Outcomes)	Process evaluation of prenatal classes (e.g. participant knowledg # of expectant parents attending classes # of pregnant women and families referred to services via HCP's			
Mid year activity progress	Were your anticipated mid year/activity outcomes met?				
Comments Regarding Variance	Describe the barriers to meeting mid year goals, if any				
End of year activity progress	Were your anticipated end of year/project outcomes met? What is important to consider for the next planning cycle?				
Comments Regarding Variance	Describe the barriers encountered to meeting end of year goals, if any				

have a healthy pregnancy and are better prepared for ucation/HBHC services. See of pregnant women (and their partners) attending e HBHC program offered through the SDHU edge pre-post) P's and/or social service providers

APPENDIX C

	Research or E	valuation Title
OPHS Requirement	Indicate requirement name	
Requirement Number/Letter	Input the standard number(s)/letter(s)	
Strategic Priority	Indicate Strategic Priority/Priorities this activity addresses 1-Champion and lead equitable opportunities for health 2-Strengthen Relationships 3-Strenthen evidence-informed public health practice 4-Support community actions for promoting health equity 5-Foster organization-wide excellence in leadership and innovation All	
Evaluation Title	Insert title of research or evaluation project	
Lead and Other Investigators	Insert name and position of lead, and names and positions of other investigators or project team	
Partners	Internal or external program partners	
Purpose/Objective	Insert description or purpose of the research or evaluation project	
Target Audience	Who is the intended audience for the report/evaluation? Who will read and use it?	
Anticipated Benefits or Outcomes	How will the research or evaluation benefit the agency, planning, staff, clients, public health or society? How will the results be used by the agency?	
Evaluation Methods	What methods will be used to complete the research or evaluation?	
Knowledge Exchange Plan	How will results be shared, with whom and when?	
Timeline	Anticipated start and end date	
Mid year activity progress	Were your anticipated midyear/activity outcomes met?	
Comments Regarding Variance	Describe the barriers to meeting mid year goals, if any	
End of year activity progress	Were your anticipated end of year/project outcomes met?	
Comments Regarding Variance	Describe the barriers encountered to meeting end of year goals, if any	

APPENDIX E

OPHS Evidence-Informed Planning Cycle *Prompts for Decision Making*

Choose either start/continue or discontinue programming, <u>think through and discuss</u> the applicable questions in tables below. Minute taking will function as a paper trail of rationale for decisions made. Managers should include this form and <u>relevant minutes</u> as appropriate, when elevating decisions to program directors.

When considering starting/continuing a program or activity:	Initial if discussed
Does the need exist?	discussed
How many people in my local population does this issue affect now?	
Will the public and target groups accept and support the intervention in its current format?	
Will the intervention be allowed or supported in the current political or economic climate?	
Will my target population be interested in the intervention?	
Will the intervention effectively reach a large proportion of the target population?	
How do we need to change the intervention to suit the local situation?	
Who will do the work? Are these people available or are they too busy with other projects? Do	
they know how? If not, is training available and affordable?	
How much will the intervention cost? Can we afford to deliver the program or is our budget	
already committed to other projects?	
Will this intervention overlap or complement existing programs?	
Will this program enhance the reputation of the organization?	

When considering discontinuing a program or activity:	Initial if
	discussed
Will the public and target groups accept and support the end of the program in its current	
format?	
Will stopping the intervention be allowed or supported in the current political climate?	
Will my target population miss the intervention?	
Who/what resources will be saved by stopping the program?	
What other options will be offered if this intervention/program is stopped?	
How might people who are doing this project be redeployed?	
How will using the evidence to stop the current program affect the reputation of the	
organization?	
What is the emotional attachment of the staff to this program and how will we deal with that?	
Are there other (more effective) ways to achieve the same goals?	
Will we miss the opportunity to interact with a large proportion of the population if we stop	
doing this intervention?	
Should a service withdrawal plan be developed?	