

SITUATIONAL ASSESSMENT

Purpose:

The purpose of this stage is to describe the public health issue using an iterative process by gathering information from a variety of sources, including existing data, stakeholders and literature. The completion of the stage guide will provide a thorough understanding of the public health issue.



TOOLS

- *Scope of Work*
- *Work Plan*
- *Population Health Assessment and Surveillance tool*
- *Data Sources tool*
- *Stakeholder Analysis tool*
- *Environmental Scan tool*
- *New Data Collection tool*
- *SWOT and PESTLE Analysis tool*
- *Evidence Summary tool*
- *Knowledge Exchange Plan tool*

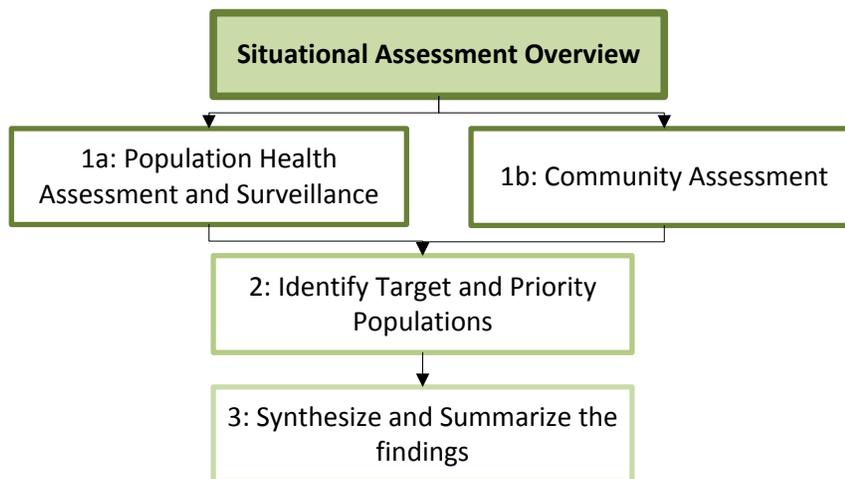


Figure 1: Overview of the steps in Situational Assessment

The *Situational Assessment* stage guide will help you gather background information to identify WHAT the public health issue is and the extent of it. There are a series of steps to help you gather and interpret population health assessment and surveillance data, community assessment information, and published and/or grey literature.

Gathering information from the population health assessment and surveillance data as well as the community assessment takes time but it is essential for moving through the Planning & Evaluation Framework. For some programs, particularly health protection programs, the MOHLTC has done most of the work and assessed the need, so working through this stage may be fairly quick. As shown in Figure 1, the first two steps (1a and 1b) in the *Situational Assessment* stage guide may happen in any order. For example, you may need to have population health assessment and surveillance data available about a public health issue before engaging stakeholders to provide background information and sometimes you may have to reach out to stakeholders to better understand the existing data.

Tip:

The terms “situational assessment” are used rather than “needs assessment.” This is intentionally done to avoid only looking at problems and difficulties; instead, it encourages considering the strengths of, and opportunities for, individuals and communities.

Step 1a: Population Health Assessment and Surveillance

This step uses a variety of population health assessment and surveillance data and/or other sources of information such as grey literature, expert consultation, and stakeholders' perspectives. There are three main tables to work through the **Population Health Assessment and Surveillance** tool. Please note the following for each table:

Table 1: Brainstorm the public health issue and data sources

Some of this information may have already been collected within the *Pre-Planning* stage guide. When this section is complete you will have articulated the following information: The public health issue of interest (in 1-2 sentences), key questions you would like answered from the data, and a statement about how the information gathered will inform future decisions.

Within these steps, the short, intermediate, and long-term outcomes will be documented. Some examples of short, intermediate-term outcomes would include practicing safer sex, and following low-risk drinking guidelines. An example of a long-term outcome would be "there is a reduction in population health inequities related to chronic diseases" within the Chronic Disease Prevention and Well-being program standard, within the Ontario Public Health Standards (OPHS) program standards.

Table 2: Assess the data sources (consult with an Epidemiologist)

Try to fill this section out as much as possible before meeting with an Epidemiologist to support completing the table. Think of what data is needed to understand the public health issue. Different types of data sources could include community health status indicators, environmental scans, or best practices (Public Health Ontario, 2015). The **Data Sources** tool is a good place to start to identify where you can get data.

An Epidemiologist can also provide support to determine the most applicable population health and surveillance data required to understand the public health issue. It is best to start with surveillance data at the local level then move to regional, provincial, and national level data, depending on availability.

In some cases, population health and surveillance data may not exist or may be insufficient. If that is the case, you may need to consult published and grey literature, and/or experts in the field. At this point, you are only going to the research and experts to understand the public health issue and not to determine effective interventions or strategies. To access peer-reviewed and grey literature, you can ask for support from the Librarian or look for grey literature online from reputable organizations within the field. If there is a lack of local data on the public health issue, document this within the **Population Health Assessment and Surveillance** tool.

Identifying the risk factors through the population health assessment and surveillance data for the public health issue and associated health outcomes will contribute to assessing if there is a need to develop a new program, modify or stop an existing program or a need to change a program's target population(s) or priority population(s). More information about target and priority populations can be found in the *Health Equity* concept guide.

An Epidemiologist can also help identify and describe the data gaps, limitations, and quality issues there may be within the data. An example of limitations of data collection occurred when data was collected through the Rapid Risk Factor Surveillance System (RRFSS) telephone-based survey. The data may have been subject to social desirability bias when respondents were asked certain questions about engaging in undesirable behaviours (e.g. smoking/drinking while pregnant, using illegal substances, etc.). Data limitations and data quality issues can arise from how it was collected, reported, analyzed etc.

Table 3: Synthesize and summarize the information

This section will include the summarized information needed to contribute to the **Evidence Summary** tool within the *Integrate Evidence and Apply Expertise* stage guide.

Step 1b: Community Assessment

This step will help you understand the community context by identifying existing assets and gaps in the community, political preferences, and priority areas within the community relevant to the public health issue. To do this, a few different tools can be used to gather evidence. This is not a linear process; multiple sources of information can be gathered at the same time.

Community assets are strengths and resources in community that help to address the needs and improve the quality of life (Centre for Community Health and Development, 2017; UCLA Centre for Health Policy Research, 2012). Community assets can be leveraged and used to identify potential solutions. Examples of community assets are community members, public/government officials, community partner organizations, associations, existing community programs and services offered by public and private nonprofit organizations, and faith-based groups.

i. Conduct an environmental scan

An environmental scan uses various methods (e.g. key informant interviews, surveys, focus groups) to assess many aspects of a public health issue within the community context (Wilburn A. et al., 2016). It can be completed with the help of other program stakeholders. The first step is to determine what information needs to be collected and the purpose for doing so. The next steps are to identify the data collection methods, and generate a list of community partners and organizations offering services/supports (which may have already been outlined in the **Pre-Planning** tool). The information can be gathered using public information such as pre-existing organizational program and services inventories, community directories, community resource guides, organization's websites, and by contacting stakeholders directly.

If stakeholders have not been identified, review the *Engage Stakeholders* concept guide to identify the internal (e.g. MLHU) and external stakeholders

Tip:

If potential target populations and/or priority populations have been identified, consider ways to engage them in the process. In this step, there may be opportunities to engage stakeholders with lived experience as much as feasible.

(e.g. community collaborations, research experts, members of potential priority populations) who need to be engaged during the Community Assessment step.

Consider asking community partners/organizations questions using the **SWOT Analysis/PESTLE Analysis** tool to understand the strengths, weaknesses, external opportunities and threats impacting the program's activities. At this time, consider asking community partners and organizations their perspectives on the public health issue and the possible gaps existing within the community. This may also be an opportune time to collect information regarding the effectiveness of programs and services offered by community partners and organizations. This information will be used in the *Identify Effective Strategies* stage.

This sub-step also involves assessing community and political preferences regarding the public health issue within the community and according to stakeholders. The information may be found in existing reports through secondary data sources (such as current and/or pending legislation, media coverage, political priorities of the current City or County Council) or may require primary data collection from your stakeholders.

When reaching out to the community for more information, you can use the **New Data Collection Plan** tool; connect with an Epidemiologist or Program Evaluator to help determine the methods and procedures to gather the information. Consider consulting stakeholders (outside of the core team) only once.

When gathering new information, be sure to comply with the Research & Evaluation (RAC) Policy (2-040) to determine if a RAC review is required. The **Environmental Scan** tool provides example questions and can be used to organize the information.

Guiding Questions

- What information about community programs and services is required?
- Is there a need to fully understand how community organizations provide their services (method of delivery), who is eligible, what types of services are provided, fees for services, etc.?
- How will the information be used to inform decisions?
- Would a map of the programs and services be useful?

Tip:

If a map is needed to show where programs and services are located, you will need to gather full addresses and postal codes.

ii. Summarize community assets, linkages, gaps, and priorities

This sub-step summarizes all of the information gathered for the Community Assessment. Throughout the Community Assessment process, stakeholders may have prioritized areas needing attention in the short-term or have identified areas that will have the greatest impact to address the public health issue. The information gathered will help to articulate priority areas of focus. At this point of the *Situational Assessment* stage guide, the following questions can be summarized within the **Evidence Summary** tool.

Guiding Questions

- What are the stakeholders' perspectives on the public health issue?
- What programs and services are currently being offered in the community to address the public health issue?
- What are the community and political preferences of the community, public/government officials (local, regional, provincial, federal), community partners, and/or organizations, regarding the public health issue?
- What strengths and opportunities exist in the community to address the public health issue?
- What are the gaps or barriers in the community needing to be filled in order to address the public health issue?
- What are the priority areas of focus needed to address the public health issue?

Step 2: Identify target populations and priority populations

Various sources of information can be used to identify the target populations and priority populations for the public health issue. In this step, you will apply your public health expertise when considering the summarized information gathered from steps 1a and 1b to support your decision about who will be the priority and/or target populations.

There is an important distinction between target and priority populations. Priority populations are “populations who 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” (Ministry of Health & Long-Term Care, 2018). The 2018 Ontario Public Health Standards (OPHS), highlight “priority populations” throughout the program outcomes and requirements and regularly mention the need for meaningful engagement with those populations who have been identified as “priority”. The OPHS also outline how priority populations are identified, by “using local, provincial, and /or federal data sources; emerging trends and local context; community assessments; surveillance; and epidemiology and other research studies” (Ministry of Health & Long-Term Care, 2018).

Target populations are “populations at risk of adverse health outcomes, and for whom public health interventions may be reasonably considered to have a substantial impact at the population level” (Ministry of Health & Long-Term Care, 2018). Target populations do not have the element of socially produced inequities, which is the distinguishing factor for priority populations.

At times, public health staff will be implementing programs/services based on mandated requirements or protocols. These protocols may identify who we are required to work with, so a process to identify them is not needed. For example, the Tanning Bed Protocol, 2014 states that “all tanning bed operators may be subject to an inspection...”. This requirement makes “all tanning bed operators” a target group, but not a priority population or target population. Target groups are the specific population(s) being reached using the program component(s). This can include the target population, priority population or intermediary group.

For more information and examples regarding target and priority populations, please see the *Health Equity* concept guide. The following guiding questions (from steps 1a and 1b) are relevant to identifying target

populations and priority populations throughout the *Situational Assessment* stage guide. Reviewing your responses at this time will support decision-making about target and/or priority populations. Some of the following questions may have been asked within the Community Assessment step and organized in the **Environmental Scan** tool.

Guiding Questions

Identifying the target populations from existing community programs and services:

- Who is the target for the program?
- What risk factors does the target population experience?
- Does the population being served experience socially produced inequities?

Understanding the public health issue and potential gaps in programs and services:

- Are the programs reaching the target populations (and/or priority populations)?
- Who is not being reached through the programs/services? Why?
- Are there health needs of the target populations and/or priority populations not being met within the existing program?

Applying Public Health Expertise:

- Does the potential population fit within the public health mandate?
- Can the work with this potential population be comprehensive enough to expect a positive impact and outcomes from the efforts?
- Are there enough services and supports in the community for this population so public health resources would be better allocated elsewhere?
- What potential risks may exist for the Health Unit in working with this population?
- Was there limited information available when collecting the data? If so, how does this influence your thinking and impact your decision-making?

Step 3: Synthesize and interpret the findings

Once the information has been gathered from the previous steps, it is time to synthesize the information. The **Knowledge Exchange Plan** tool can help organize with whom to share the summarized information, the goal of sharing your information, the key messages to communicate, and how and when the messages are going to be communicated. The following questions can be used to summarize the previous steps.

Guiding Questions

- What is the size and scope of the public health issue?
- Is there evidence to show the public health issue is currently occurring in the MLHU community?
- Who are the target populations and/or priority populations?
- What are the stakeholders' perspectives regarding the public health issue?
- What are the gaps in the community needing to be filled in order to address the public health issue?
- Is there any inconclusive or conflicting evidence across the various sources of information from the situational assessment?

Based on the information gathered, identify if there is a need to address the public health issue in the community. Consider bringing together your manager, the Epidemiologist, and others who are involved in the program planning (e.g. Program Evaluator, other team members, community partners) in a meeting to review your summary of the findings and collectively make a decision about whether or not to proceed with further planning steps.

Situational Assessment Stage Guide Checklist

Checklist items relevant to staff are white with a dotted border; Checklist items relevant to Program Managers are grey with a solid border

<input type="checkbox"/>		1a. Population Health Assessment and Surveillance (In the Population Health Assessment and Surveillance tool)
	<input type="checkbox"/>	Complete "Table 1: Brainstorm the public health issue and data sources" in the Population Health Assessment and Surveillance tool:
	<input type="checkbox"/>	Complete "Table 2: Access and assess the data sources (consult with an Epidemiologist)"
	<input type="checkbox"/>	Complete "Table 3: Synthesize and summarize the information"
<input type="checkbox"/>		1b. Community Assessment
	<input type="checkbox"/>	i. Identify stakeholders and engage core stakeholders using the Pre-Planning tool, and Stakeholder Analysis tool
	<input type="checkbox"/>	ii. Conduct an environmental scan using the Environmental Scan tool, New Data Collection tool, and SWOT Analysis/PESTLE Analysis tool.
	<input type="checkbox"/>	iii. Assess community and political preferences using the Environmental Scan tool
	<input type="checkbox"/>	iv. Summarize community assets, linkages, gaps, and priorities
<input type="checkbox"/>		2. Identify target populations and priority populations
	<input type="checkbox"/>	According to the previous steps, who are the target and/or priority populations?
	<input type="checkbox"/>	Apply your public health expertise to consider the overall context when identifying these populations
	<input type="checkbox"/>	Consider the Guiding Questions
<input type="checkbox"/>		3. Synthesize and interpret the findings
	<input type="checkbox"/>	Complete the Knowledge Exchange Plan tool and communicate the findings to the appropriate people
<input type="checkbox"/>		Decide whether to proceed with the program planning or remain status quo with programs

References

- Centre for Community Health and Development. (2017). Community tool box section 8: Identifying community assets and resources. Retrieved from <https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/identify-community-assets/main>
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