Nova Scotia Public Health

Priority Setting & Planning

Protocol
Public health will

- engage in planning on a multi-year basis to establish priorities and strategic directions for the public health system
- consider these priorities and strategic directions when developing programs and public health action plans
Public Health Action Plans

- prepare a public health action plan that provides the organization’s plan of action to fulfil the Public Health Standards and Protocols. Such an action plan will
  - take into account the specific characteristics (e.g., demographic and cultural) of the populations in the catchment area of the organization
  - demonstrate that the public health operational activities are aligned with the Public Health Standards and Protocols
  - include a public health communications strategy complementary to the program specific communication elements within the Public Health Standards and Protocols
  - include a public health workforce development strategy
  - identify the intended actions in the upcoming year, including resource allocations and other planning parameters (objectives, activities, time frames, responsibilities, intended results, monitoring processes)
  - be provided for approval as outlined in the accountability framework
  - be shared with partners and the public
- review and revise the public health action plan on a regular basis

Planning Cycle

- utilize a planning cycle so as to
  - assess the situation utilizing multiple sources of information, including but not limited to
    - standards, protocol(s), and related appendices
    - provincial strategies
    - strategic plans
    - other directions (e.g., DHW, DHAs)
    - understanding (assessment/surveillance) outputs, including priority populations (see Understanding Protocol)
    - literature (evidence, theory)
    - environmental context (political, economic, social, technological, other)
    - stakeholder perspectives, including extent of and gaps in existing programs and services
    - recommendations from past experience (e.g., evaluations, performance)
• identify and prioritize potential options based on selected criteria, depending on the issue and context. Possible prioritization criteria to consider may include
  o legislated/mandated
  o burden of illness/condition/issue
  o evidence for impact
  o existing gap (considering existing resources)
  o appropriateness
  o synergies with other initiatives (internal/external)
  o stakeholder/community interest and readiness
  o feasibility
• prepare and implement a plan, including such things as
  o a model with goals and objectives
  o identification of key activities, target group(s), partners, outputs, resources, timelines, and indicators
  o emphasis on upstream action (primordial prevention)
  o utilization of public involvement, multiple strategies, and intersectoral collaboration
  o tailoring interventions to meet population health needs, including those of priority populations
  o considering a harm reduction approach or strategy
• develop a monitoring and evaluation plan that includes
  o measurable outputs, process indicators, and outcome indicators
  o data collection methods and tools
  o sources of data and information
  o a plan for frequency of data collection
• monitor whether implementation is occurring as planned and impacts are occurring as anticipated
• conduct implementation, process, impact, and outcome evaluations as necessary
• review the plan annually

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6 These are the basic elements of a planning cycle. Adapted from Maxey-Rosenau-Last Public Health and Preventive Medicine, fifteenth edition, p. 1270.
7 An accountability framework will be developed, and so this protocol will likely change once the framework is in place.