

12. Population Health Status (Assessment and Reporting)												
Basic			Developing			Advanced			Leading Edge			
1	2	3	4	5	6	7	8	9	10	11	12	
Strategic Direction	The NPHI conducts few population health assessments. Selection of issues for assessment is based on donor or staff interest, and not on strategic considerations.			The NPHI is beginning to provide regular updates on population health status. Except where donor funding provides for an in-depth evaluation, reports are very basic.			The NPHI regularly reports on population health status. It identifies issues of particular concern for inclusion in its reports, such as health of subpopulations, and invests resources to collect the necessary information.			The NPHI is at the forefront of identifying trends and population health impacts of changes in a range of sectors (e.g., related to food, immigration, energy).		
Systems	The NPHI has not standardized its process for conducting health assessments. It rarely produces reports on population health status, and the format and content vary from report to report.			The NPHI has quality standards and templates to guide core tasks (e.g., identification of key data sources, report preparation), but these are not consistently used.			The NPHI uses quality standards, templates, and other tools to guide identification of data sources, information synthesis, and report development and dissemination.			The NPHI has fully institutionalized systems and processes for data collection, integration, analysis, report development, and dissemination that increase efficiency and ensure quality.		
Resources	The NPHI has limited resources to carry out assessments, so few are completed, and those that are done use only easy-to-access data sources.			Donors provide resources to conduct assessments on topics of interest to them; many high-priority areas are not addressed. Computers and software are only marginally adequate.			NPHI staff have the resources, skills, and time to evaluate and report on a large number of health outcomes for the overall population and subpopulations.			NPHI staff have skills to incorporate GIS, economic, and other non-health data into analyses of health status. New technologies are regularly introduced to improve the quality of reports and increase dissemination.		
Quality	Data used for assessments may be low quality or incomplete, and assessment reports may not cover all priority areas or subpopulations.			The NPHI is taking steps to improve report quality, but reports often need to be clarified, modified, or expanded after publication.			In developing reports, the NPHI assesses data quality, and documents any quality concerns. The assessment reports address priority topics and have detailed data on subpopulations of concern.			The NPHI conducts projects to fill information gaps identified during development of assessments. Analyses of trends and synthesis use multiple data sources. Because the NPHI has institutionalized systems and processes for generating and updating reports, the quality of reports is high. The NPHI's reports provide models for other institutions.		
Engagement	The NPHI realizes the need for stakeholder input, but has not yet established relationships with key partners.			The NPHI makes an effort to identify and reach out to stakeholders (often based on personal relationships), but requests for input into what reports should cover and requests for data often are not timely or focused enough to affect the assessment.			Stakeholders help set priorities for reports and provide information for inclusion.			Stakeholders within and outside the health sector help the NPHI identify issues on which to report and collaborate in identifying information for inclusion. Some reports, for example, on certain marginalized populations or that span sectors, are developed in full collaboration with stakeholders.		
Impact	Reports are one-size-fits-all, with little consideration given to possible end users, and distribution and use.			Reports are distributed within and outside the NPHI, generally through the NPHI's traditional channels. Although they are largely perceived as useful, their impact is limited due to suboptimal quality and scope, and delays in dissemination.			Reports are comprehensive and widely circulated, using various formats and channels to meet needs of different end users. Timely dissemination of reports increases their usefulness. The NPHI has examples illustrating policies and programs that have changed as a result of the reports.			User interfaces allow end users to easily customize reports to meet their specific needs (e.g., reports on age group or geographic area). The NPHI's reports are widely quoted by policy-makers, the media, and other stakeholders. The NPHI often evaluates the reach and impact of reports to understand whether the desired impact (e.g., changes in public health programs or policies) is being achieved.		