	Basic	Developing	Advanced	Leading Edge
	1 2 3	4 5 6	7 8 9	10 11 12
Strategic Direction	The NPHI sometimes provides policy or program recommendations to the MOH or others upon request. The data used by the NPHI to develop recommendations have major limitations. The NPHI rarely follows up about whether its recommendations are used.	The NPHI's policy or program recommendations are mainly in response to requests. They draw from several information sources, but data quality is often low, and data gaps persist. The NPHI is starting to disseminate its recommendations more widely and sometimes works with the MOH or partners to encourage uptake.	In addition to responding to requests, the NPHI proactively identifies critical public health issues and develops recommendations. It documents its data sources and provides critiques about their strengths and limitations. It disseminates its recommendations widely and actively collaborates with the MOH and other stakeholders to encourage uptake.	The NPHI is known for using diverse information sources to make robust recommendations and for its creative approaches to dissemination and increasing uptake. The NPHI attempts fills important data gaps so future recommendations can be more robust.
Systems	The NPHI lacks a consistent approach to accessing and analyzing data for use in decision-making. It lacks standardized formats for reporting or disseminating recommendations, for example, on its website, through a public health bulletin, or in regular meetings with partners or MOH leadership.	The NPHI's systems for accessing and synthesizing information and creating recommendations are improving, but gaps remain. Formats for reports, policy briefs, etc. are being standardized. The NPHI sometimes requests meetings with MOH or partners to discuss recommendations, but most dissemination is passive, for example, through the NPHI's website and email lists.	The NPHI has systems, tools, and SOPs to create evidence-based guidance. It has systems for ensuring wide dissemination, and it is developing more systematic ways to ensure specific audiences are aware of recommendations of particular relevance for them.	The NPHI's systems for developing and disseminating recommendations are models for organizations around the world. For some issues, such as immunizations, it has systems for managing external advisory groups. The NPHI develops and evaluates new technologies and approaches to data-to-action work and incorporates these into its systems when they are shown useful.
Resources	Staff make recommendations based on easily available information. They have little capacity to synthesize information from multiple sources and determine policy implications. There are no trained communications staff.	The NPHI attempts to use a variety of data to make recommendations and to share them. However, barriers include poor- quality surveillance and other data and limited expertise in developing and disseminating recommendations.	The NPHI has resources to synthesize multiple sources of information. It has some specialized staff, such as experts in communication, to help increase the uptake of high-priority recommendations.	The NPHI is well-staffed, with experts in informatics, economics, modeling, communication, and other specialty areas, enabling excellence in developing and disseminating recommendations.
Quality	The NPHI often relies on limited, poor- quality data to make recommendations. Guidance documents are unstructured and often do not address key issues, so they are usually not persuasive.	While the NPHI's recommendations include evidence, the types and quality of evidence considered, and quality of the synthesis are often limited. Efforts to package information to be persuasive are increasing.	The NPHI has access to high-quality data and skills to synthesize information and format recommendations to be persuasive. Its recommendations are timely and comprehensive and often take diverse contexts and sub-populations into account.	The NPHI uses high-quality data from a range of sources. When needed, it collects new data to address critical gaps. It engages internal and external experts and stakeholders to ensure its recommendations are robust and widely used. Its briefing documents and other materials are used as models by many organizations.
gagement	Decision-makers and other stakeholders provide little input into recommendations. Critical public health information and recommendations are shared on request or based on personal relationships.	The NPHI involves decision-makers and other stakeholders in developing recommendations in a few areas, usually at the stakeholders' request. Some recommendations are widely shared.	The NPHI proactively engages decision- makers and other stakeholders in the development of most of its high-priority recommendations. It tailors the presentation of data and recommendations to its primary audiences and makes its recommendations widely available.	The NPHI includes decision-makers and other stakeholders throughout the data-to-action process. Recommendations are disseminated widely, using a variety of formats and channels and actively builds the capacity of partners to apply them.
Impact	The NPHI's information and recommendations are rarely used and have little impact.	Decision-makers sometimes use the NPHI's recommendations, but poor data quality, unpersuasive presentation, and insufficient dissemination often limit their impact.	Due to the high quality, decision-makers trust the NPHI's recommendations and often seek its opinions.	The NPHI's recommendations significantly impact decision-making nationally and internationally. Evaluation has shown the recommendations have improved public health.

The Staged Development Tool (SDT) for NPHIs was developed by the U.S. Centers for Disease Control and Prevention (CDC) and the International Association of National Public Health Institutes (IANPHI) with the assistance of a consultative group of National Public Health Institute (NPHI) leaders from around the world. Revised 2024.