

Effective interventions: The Canadian Best Practices Portal

A summary of

Public Health Agency of Canada. (2010). The Canadian Best Practices Portal. Retrieved from <http://cbpp-pcpe.phac-aspc.gc.ca/>.



National Collaborating Centre
for Methods and Tools
Centre de collaboration nationale
des méthodes et outils

How to cite this NCCMT summary:

National Collaborating Centre for Methods and Tools (2010). *Effective interventions: The Canadian Best Practices Portal*. Hamilton, ON: McMaster University. (Updated 03 October, 2017) Retrieved from <http://www.nccmt.ca/resources/search/69>.

Categories:

Tool, Search

Date posted:

October 7, 2010

Date updated:

October 3, 2017

Tool

Relevance For Public Health

The Canadian Best Practices Portal (CBBP) was developed for use by decision-makers in health promotion and chronic disease prevention. It is useful for frontline public health workers and program coordinators in non-governmental and voluntary organizations. For example, decision-makers can use the site to identify evaluated initiatives on skin cancer prevention.

Description

The CBPP can be used to:

- base decision making on scientific evidence and effective practices
- assist with retrieving current and reliable information about what works and does not work for a specific health issue
- search the 'best of the best' information efficiently on a specific public health issue

The underlying framework for the CBPP is the Population Health Approach. This framework aims to improve health status and address health status inequities across the lifespan, and at the population level. The framework includes eight elements. For each element, case examples and additional resources are provided.

1. Focus on the health of populations

Population health data highlights emerging health issues and health status inequities. These priority health issues are determined through the use of indicators. Health indicators are based on standard definitions and methods to provide comparable information between different jurisdictions and groups of people, and over time. Commonly-used indicators of health status include mortality indicators, morbidity measures, quality of life indicators and measures of positive dimensions of health. A new kind of indicator, "aggregate health indicators," combines data on mortality, loss of function and quality of life, so that different issues can be compared in a consistent way. Examples of aggregate health indicators include disability-adjusted life years (DALYs) and quality-adjusted life years (QALYs).

Steps:

1. Collect and analyze population health data using indicators
2. Assess contextual factors and conditions through existing datasets, case studies, ethnographic studies, etc., which may influence the health of populations and affect the effectiveness of interventions
3. Organize information of contextual factors in the form of a PEEST analysis (political, environmental, economic, social and technological factors) or a SWOT analysis (internal strengths and weaknesses, and external opportunities and threats).

2. Address the determinants of health and their interactions

This step is critical to develop an in-depth, comprehensive look at a health issue, including the underlying causes of an issue, and identifying why interventions are appropriate for a specific context. Determinants of

These summaries are written by the [NCCMT](#) to condense and to provide an overview of the resources listed in the [Registry of Methods and Tools](#) and to give suggestions for their use in a public health context. For more information on individual methods and tools included in the review, please consult the authors/developers of the original resources.

health are the individual and collective factors and conditions affecting health status.

Steps:

1. Identify which determinants of health are relevant for the health issue and intended populations
2. Identify indicators for measuring those determinants of health from existing indicators
3. Measure and analyze determinants of health, and their interactions. This is important to link health issues to their determinants and inform action.

3. Base decisions on evidence

Evidence-based decision making is an approach that critically reviews a body of information in a systematic way so that decisions can be supported by a rationale. Evidence can be used to answer the question "Why did you decide that?"

Steps:

1. Consider all types of evidence (formal and informal) and data sources (epidemiological, economic, health systems data).
2. Use the expertise of analysts, decision-makers, community organizations and others who gather or work with research and other types of evidence .
3. Explicitly state criteria for including or excluding specific evidence to minimize bias.
4. Identify and assess effective interventions.
5. Use a knowledge exchange strategy to share evidence and its implications for different stakeholders (policy-makers, the public, practitioners). The knowledge exchange strategy will identify who needs what information by when and for what purpose.

4. Increase upstream investments

Upstream investments are interventions aimed at addressing the root causes of a health issue, which often involves addressing social, economic and environmental conditions. With earlier interventions in the causal stream, there are greater benefits in population health status.

Steps:

1. Balance short, medium and long term investments to address immediate concerns while working to maintain and improve health status long term.
2. Select priorities for investment using a strategic assessment that compares different options based on their ability to improve health outcomes.
3. Influence investments in other sectors through action on a wide range of determinants of health.
4. Use a communication strategy to support intersectoral action.

5. Apply multiple interventions and strategies

Multiple interventions and strategies will produce incremental change (action on one or few determinants of health) and comprehensive change (action on multiple determinants of health), reduce inequities, address health across the lifespan and work within multiple settings.

Steps:

1. Use an effective mix of interventions and strategies across different levels to move action beyond the individual to the family, community and society.
2. Select strategies and interventions based on the evidence.
3. Identify resources and supports for implementing strategies.
4. Establish a coordinating mechanism to guide interventions.

6. Collaborate across sectors and levels

Successful collaboration is characterized by working across and within sectors to garner political support to address a specific issue.

Steps:

1. Engage partners early to establish shared values and alignment of purpose.
2. Establish concrete objectives and focus on visible results. Identify and support a champion.
3. Invest in the alliance-building process.
4. Generate political support.
5. Share leadership, accountability and rewards among partners.

7. Employ mechanisms for public involvement

These summaries are written by the [NCCMT](#) to condense and to provide an overview of the resources listed in the [Registry of Methods and Tools](#) and to give suggestions for their use in a public health context. For more information on individual methods and tools included in the review, please consult the authors/developers of the original resources.

Provide opportunities for the public to contribute in meaningful ways to the selection of health priorities, the development of strategies and the review of outcomes. Five levels of public involvement are discussed, ranging from providing information and education to developing partnerships with citizens.

Steps:

1. Capture the public's interest by keeping the issue on the public agenda.
2. Media advocacy can help to create and package information relevant to the issue.
3. Contribute to health literacy. Health literacy is the requisite level of knowledge and skills to make health decisions and achieve personal and community health actions.
4. Apply public involvement strategies that link to the overarching purpose.

8. Demonstrate accountability for health outcomes

Accountability refers to determining the degree to which changes in health outcomes can be attributed to interventions. Accountability tools, like health impact assessments, set criteria for determining the impact of programs and policies. Accountability measures performance through evaluation on an ongoing basis.

Steps:

1. Construct a results-based accountability framework.
2. Determine baseline measures and set targets for health improvement.
3. Institutionalize effective evaluation systems.
4. Promote the use of health impact assessment tools.
5. Publicly report results.

Implementing the Tool

Who is Involved?

The Canadian Best Practices Portal is free of charge and accessible to anyone. Decision-makers working in health promotion and chronic disease prevention would find the CBPP to be relevant to their work. Decision-makers can include managers, supervisors, program coordinators and frontline staff within public health, non-governmental and voluntary organizations.

Steps for Using Tool

The Canadian Best Practices Portal (CBPP) includes:

- a searchable database of interventions a list of best practice systematic review sites resources to assist with chronic disease
- health promotion and public health planning.

Features of the CBPP include the following:

- Information on over 300 interventions in the form of a summary on the characteristics of the intervention
- a description of the evaluation/study design
- supporting documents and a list of systematic reviews citing the intervention
- a brief description and a link to the website housing the resource in a summary statement
- a list of over 50 resources the ability to search by keyword, year of publication and intervention/resource characteristics
- the ability to export interventions directly to an online, interactive, evidence-based planning tool, the [Online Health Program Planner](#), a map of resources offering support for evidence-informed decision making and practice the option to receive RSS feeds or email alerts for newly added interventions and resources
- the ability to connect with other members by becoming a member of the CBPP (membership is free).

Evaluation and Measurement Characteristics

Evaluation



Has been evaluated.

The Canadian Best Practices Portal (CBPP) routinely seeks feedback from users regarding the portal's content and usability. The CBPP also reviews their website statistics on a regular basis. An evaluation conducted in 2007-08 examined the levels of use of the CBPP, and made suggestions for improvement with

These summaries are written by the [NCCMT](#) to condense and to provide an overview of the resources listed in the [Registry of Methods and Tools](#) and to give suggestions for their use in a public health context. For more information on individual methods and tools included in the review, please consult the authors/developers of the original resources.

respect to knowledge exchange. Data from a user survey conducted for the evaluation demonstrated that among those who used the CBPP (n=85), about 10% reported a "high impact" on their work, and another 50% reported a "moderate impact."

Validity

Not applicable

Reliability

Not applicable

Methodological Rating



Not applicable

Tool Development

Developers

Public Health Agency of Canada

Website: <http://cbpp-pcpe.phac-aspc.gc.ca/>

Method of Development

The Canadian Best Practices Portal is one component of the Canadian Best Practices Initiative (CBPI). CBPI was conceived in 2001 by a group of public health professionals and researchers who determined there was a need for a consolidated approach to identifying and sharing best practices in Canada. The CBPP is part of an evidence-based public health approach that promotes the use of effective interventions that have been well evaluated, using appropriately designed methods.

The goals of the CBPP are to:

- consolidate multiple sources of information on interventions, best practices and resources for chronic disease prevention and health promotion recommended by experts
- increase access to published and unpublished information about proven and emerging best practices, theories, research evidence and practical experience

The steps taken to search, select, review and include interventions for the Canadian Best Practices Portal are as follows:

- **Step 1:** Literature and collection search by priority topic. Interventions are screened from government, research and non-profit organizations and research databases. Criteria include date (within the past 20 years), availability in French or English, relevance to health promotion and chronic disease prevention and interventions targeting primary or secondary prevention levels.
- **Step 2:** Assess quality of evaluation or study design. There are several criteria for including collections and individual interventions, in addition to exclusion criteria. Some criteria for inclusion are; interventions have been implemented and evaluated with positive outcomes (collections), have been published, show evidence of effectiveness in bringing about desired results, and provide evidence of effective strategies that are replicable and adaptable (individual interventions). Interventions are excluded if they do not use a community-based or population health approach, are focused on individual behaviour change or clinical trials, did not conduct an evaluation or were single studies or pilots.
- **Step 3:** Search for additional information on selected individual interventions. The original source document and additional information on evaluation and replication of interventions were searched using the Internet and bibliographic databases. To be considered for further steps, interventions need positive support from a published systematic review.
- **Step 4:** Expert review using inclusion criteria. Interventions that demonstrate positive outcomes, replication in another context and inclusion in a systematic review are forwarded to a team of subject experts for further review. Expert reviewers use a series of criteria questions to assess the intervention and related documents.
- **Step 5:** Prioritize selected interventions for annotation. Interventions are prioritized if they are frequently documented, replicable in different contexts, have strong evaluation outcomes and have been published within the last ten years. Once interventions are organized in order of priority, they are annotated and entered in the Portal.
- **Step 6:** Select resources. Resources that support screened and reviewed interventions are included on the Canadian Best Practices Portal. These supporting resources are assessed with three

These summaries are written by the [NCCMT](#) to condense and to provide an overview of the resources listed in the [Registry of Methods and Tools](#) and to give suggestions for their use in a public health context. For more information on individual methods and tools included in the review, please consult the authors/developers of the original resources.

levels of criteria; exclusion criteria, inclusion criteria, and selection criteria.

Release Date

2006

Contact Person

Nina Jetha
Public Health Agency of Canada
785 Carling Avenue, AL 6807B, 7th Floor
Ottawa, ON K1A 0K9
Phone: (613) 952-7608
Email: nina_jetha@phac-aspc.gc.ca

Resources

Title of Primary Resource	The Canadian Best Practices Portal
File Attachment	None
Web-link	http://cbpp-pcpe.phac-aspc.gc.ca/
Reference	Public Health Agency of Canada. (2010). <i>The Canadian Best Practices Portal</i> . Retrieved from http://cbpp-pcpe.phac-aspc.gc.ca/ .
Type of Material	Online repository
Format	On-line Access
Cost to Access	None.
Language	English, French
Conditions for Use	Not specified

Title of Supplementary Resource	The Online Health Program Planner
File Attachment	None
Web-link	https://www.publichealthontario.ca/en/ServicesAndTools/ohpp/Pages/default.aspx
Reference	The Health Communication Unit. (2008). The Online Health Program Planner. Retrieved from: https://www.publichealthontario.ca/en/servicesandtools/ohpp/pages/default.aspx
Type of Material	Web-based, interactive tool
Format	On-line Access
Cost to Access	None.
Language	English, French
Conditions for Use	Not specified

These summaries are written by the [NCCMT](#) to condense and to provide an overview of the resources listed in the [Registry of Methods and Tools](#) and to give suggestions for their use in a public health context. For more information on individual methods and tools included in the review, please consult the authors/developers of the original resources.