

16. Surveillance												
Basic			Developing			Advanced			Leading Edge			
1	2	3	4	5	6	7	8	9	10	11	12	
Strategic Direction	The NPHI conducts surveillance based on WHO guidance or donor interest, but it does not analyze or use the collected data.			The NPHI attempts to use data from its surveillance to inform policies and programs. However, there is often a mismatch between what is needed and what is collected.			The NPHI's surveillance is designed to provide data to guide policies and programs. In designing systems, all aspects of surveillance are considered, from data collection through analysis and use of the data.			The NPHI uses multiple approaches, including engaging decisions-makers, to ensure surveillance systems are maximally useful. Systems are regularly evaluated, and are modified or ended if they are not useful.		
Systems	The NPHI has some surveillance SOPs and guidelines, but these are hard to use (e.g., incomplete or poorly written), and are not widely distributed. Review of surveillance systems is ad hoc, if it occurs.			The SOPs for surveillance are sometimes outdated. Reporting entities sometimes do not have them. Most surveillance systems have been reviewed, but reviews are not comprehensive and are rarely acted on.			All reporting entities receive SOPs, and these are generally followed. Surveillance systems are regularly reviewed using standard indicators (e.g., timeliness, completeness). The NPHI often follows up on evaluation results, resulting in increasingly useful and efficient systems.			The NPHI's surveillance SOPs are models for other organizations. The NPHI routinely reviews systems for quality and relevance, including whether the data are being used. Evaluations usually lead to improvements in the system.		
Resources	The NPHI has few resources to conduct surveillance and limited capacity to analyze and use surveillance data.			The NPHI has some resources to help improve data collection by reporting entities, but these are not adequate. NPHI staff can conduct basic data analyses, but lack skills and software for more sophisticated work. They do not have skills to integrate the data with other information to make quality recommendations.			The NPHI has resources to provide substantial assistance to reporting entities to improve data collection. NPHI staff have the skills and resources to collect and analyze data, including sophisticated analyses, and to use data to make recommendations.			The NPHI invests substantially in all aspects of its surveillance systems, from data collection through use of data. It consistently updates staff skills, infrastructure, and technology to meet current and expected future demands.		
Quality	Collected data are often of poor quality and are incomplete. Much of the data is not analyzed, and those analyses that are done are very basic, incomplete, and contain errors. Lack of computers and software also limits data collection and analysis.			The quality of collected data is variable. Some data analysis occurs in a timely manner, but much of the data are not analyzed. Analyses tend to be very simple, for example, reporting numbers of cases by month, but not examining time trends.			The NPHI's surveillance data collection and analysis is of generally high quality. Analyses often involve advanced methods, and analyses and reports are completed in a timely manner.			The NPHI uses a range of tools for collecting, analyzing, and visualizing results to maximize data quality and usefulness. Data collection and analysis are outstanding, even in the most complex endeavors. The NPHI regularly develops and tests innovative approaches to improving the quality of its surveillance.		
Engagement	Decision-makers and other stakeholders are not involved in defining questions for data collection and analysis. The NPHI shares its findings with stakeholders that submit requests.			The NPHI sometimes involves decision-makers and other stakeholders when prioritizing data collection and analysis, usually at the stakeholder's request. Some findings are widely shared.			Decision-makers and other stakeholders routinely provide input to the NPHI about priorities, and the NPHI ensures that they have access to results. It shares its findings through its website and other venues.			The NPHI actively seeks input from a range of stakeholders to inform its data collection and analysis efforts, and also proactively shares results. The NPHI maintains engagement as projects proceed, increasing the likelihood that results will be used. Impactful findings are disseminated using a variety of approaches.		
Impact	The NPHI's surveillance data are not often used in-country for decision-making. The NPHI almost never identifies acute issues from its surveillance.			The NPHI can provide few examples where surveillance data have informed policies or programs or have been used to identify acute issues.			Decision-makers often rely on the NPHI's surveillance data for informing programs and policies. The NPHI can provide several examples where problems were identified earlier because of surveillance.			The NPHI's surveillance has a major impact on the policies and programs of the MOH and many other organizations. Some of its findings have global impact. The NPHI regularly identifies new or emerging public health issues from surveillance data.		