

25. Development of Public Health Recommendations												
Basic			Developing			Advanced			Leading Edge			
1	2	3	4	5	6	7	8	9	10	11	12	
<b>Strategic Direction</b>	The NPHI develops evidence-based recommendations on request. It is not proactive in developing recommendations.		The NPHI responds to requests for policy or program recommendations, and sometimes takes the initiative to develop them proactively.			The NPHI proactively develops evidence-based recommendations on priority topics, as well as responding to requests from the MOH and others.			The NPHI conducts environmental scans and actively seeks decision-maker and other stakeholder input to make strategic decisions about which issues to address and how to address them.			
<b>Systems</b>	Individual staff or groups develop their own approaches to developing and writing up recommendations, which rarely include systematic reviews of available data or structured assessments of information quality.		The NPHI is able to identify appropriate issues for evidence-based recommendations and find appropriate information to use. The NPHI has some tools (e.g., literature search strategies, sample templates for decision documents) which are used intermittently.			The NPHI has a number of tools to assist in developing recommendations, including SOPs for conducting literature reviews, guides about types of information to consider in making recommendations, and templates for decision documents.			The NPHI's approaches and tools for documenting evidence and recommendations are models for organizations throughout the world. These include systems for engaging outside expert panels and formal advisory committee processes for some topics.			
<b>Resources</b>	The NPHI has few resources to help identify critical information (e.g., lack of computers and access to internet and to books, journals, and other sources). It does not have specialized staff with experience in developing public health recommendations.		The NPHI has access to most on-line scientific publications and recommendations from other organizations. When working with other groups, the NPHI often has access to individuals with specialized experience (e.g., economists).			The NPHI accesses a wide range of data sources for use in developing recommendations. The NPHI has information specialists, economists, and other specialists on staff – not, however, enough to support the needs of all parts of the NPHI. As a result, issues like cost are not always addressed in recommendations. The NPHI convenes expert committees for the highest visibility issues, such as immunizations.			The NPHI has sufficient specialized staff (e.g., information specialists, economists) to support evidence-based recommendations throughout the NPHI. The NPHI has resources to purchase and evaluate new potential sources of data, for example, commercial datasets. The NPHI frequently convenes outside experts.			
<b>Quality</b>	Data syntheses tend to be simplistic, using few types of information. Customization to the local situation is limited.		Information syntheses often include some local information (including that gathered by the NPHI) in addition to information from meta-analyses, studies, or other efforts conducted outside the NPHI. Some recommendation documents are of high quality, often when conducted with partners, but others are of poor quality.			The NPHI's recommendations involve comprehensive assessment of information and are of high quality. However, the NPHI is often unable to access or use data on subpopulations or other considerations, reducing the usefulness of the recommendations for some areas or groups.			The NPHI continually improves the quality and scope of its recommendations by incorporating novel data sources and analytic approaches. Recommendations always take local considerations into account. However, the quality and layout is such that many of the NPHI's recommendations are adopted by organizations throughout the world.			
<b>Engagement</b>	Decision-makers and other stakeholders provide little input into the NPHI's recommendations. The NPHI shares its findings with stakeholders on request or based on personal relationships.		The NPHI works with decision-makers and other stakeholders to develop recommendations on some topics. On others, its engagement with stakeholders is limited. Some recommendations are widely shared.			Decision-makers and other stakeholders routinely provide input to the NPHI's priorities for evidence-based recommendations, 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 stakeholders to inform its recommendation development efforts. The NPHI maintains engagement as projects proceed, increasing the likelihood that results will be used. Recommendations are disseminated widely using a variety of approaches.			
<b>Impact</b>	The NPHI does not often develop evidence-based recommendations. Its impact on policy and programmatic decision-making is minimal.		The NPHI can provide examples where its syntheses of information and resultant recommendations have affected policies or programs.			Decision-makers often rely on the NPHI's recommendations for informing programs and policies.			The NPHI's recommendations have a major impact on the policies and programs of the MOH and many other organizations.			

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.