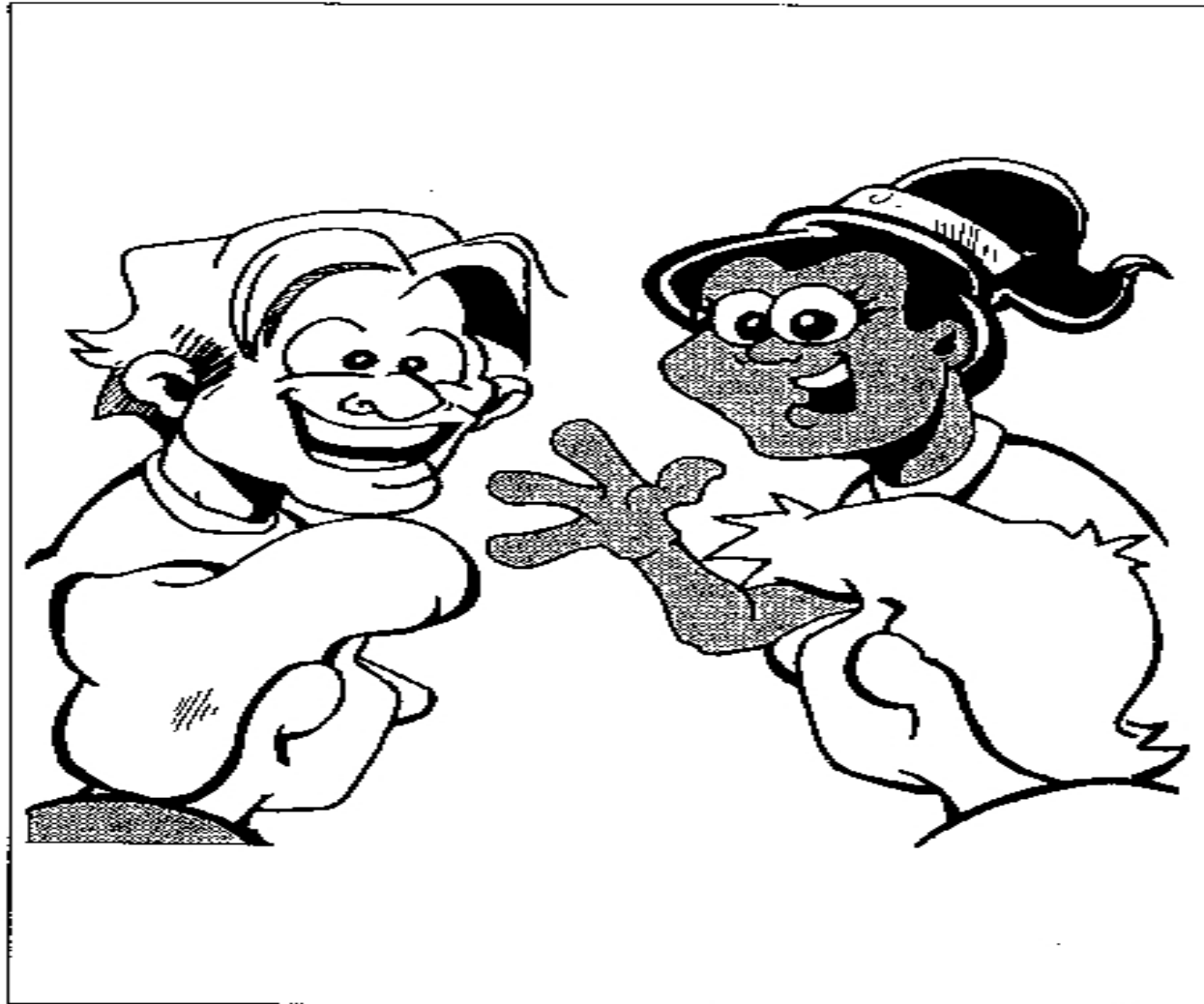


# A Chance to Talk and Interact...



# PPHL Refresher

- Partners **share a common mandate** for the prevention of chronic diseases
- Partners **work together** in a collegial manner to develop organizational, community and regional capacity to use evidence in planning programs for healthy living in communities across Manitoba



# PPHL Refresher

- ***Our Values:***

- We are inclusive and flexible
- We are non-judgmental
- We are community friendly

- ***Our Principles:***

- We focus on evidence
- We support the development of knowledge and skills
- We support an integrated community planning for healthy living

# PPHL Refresher

- Partners **work and learn together** to build an integrated knowledge system spanning and reflecting the unique contexts of Manitoba
- System involves many activities including:
  - Surveillance (data gathering),
  - Knowledge exchange (identification and dissemination of effective/best practice)
  - Program and policy development, implementation, evaluation and
  - Strategic and investigator-driven research

WE'LL BREAK INTO SMALL GROUPS TO DISCUSS OPTIONS.



DilbertCartoonist@gmail.com

WHY? DO YOU THINK WE'LL BE SMARTER WHEN WE'RE IN SMALL GROUPS?



THAT WAY EVERYONE GETS MORE TIME TO TALK.



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ACCORDING TO YOUR THEORY, THE IDEAL GROUP SIZE WOULD BE ONE PERSON TALKING TO HIMSELF.



NO, YOU ALSO NEED THE KNOWLEDGE AND PERSPECTIVE THAT EXTRA PEOPLE BRING.



THAT WOULD ARGUE FOR LARGER GROUPS, NOT SMALLER ONES.



FINE! JUST BREAK INTO WHATEVER SIZE GROUPS YOU THINK MAKE SENSE.



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I LIKE YOUR STYLE, DILBERT.

THANK YOU FOR NOTICING.



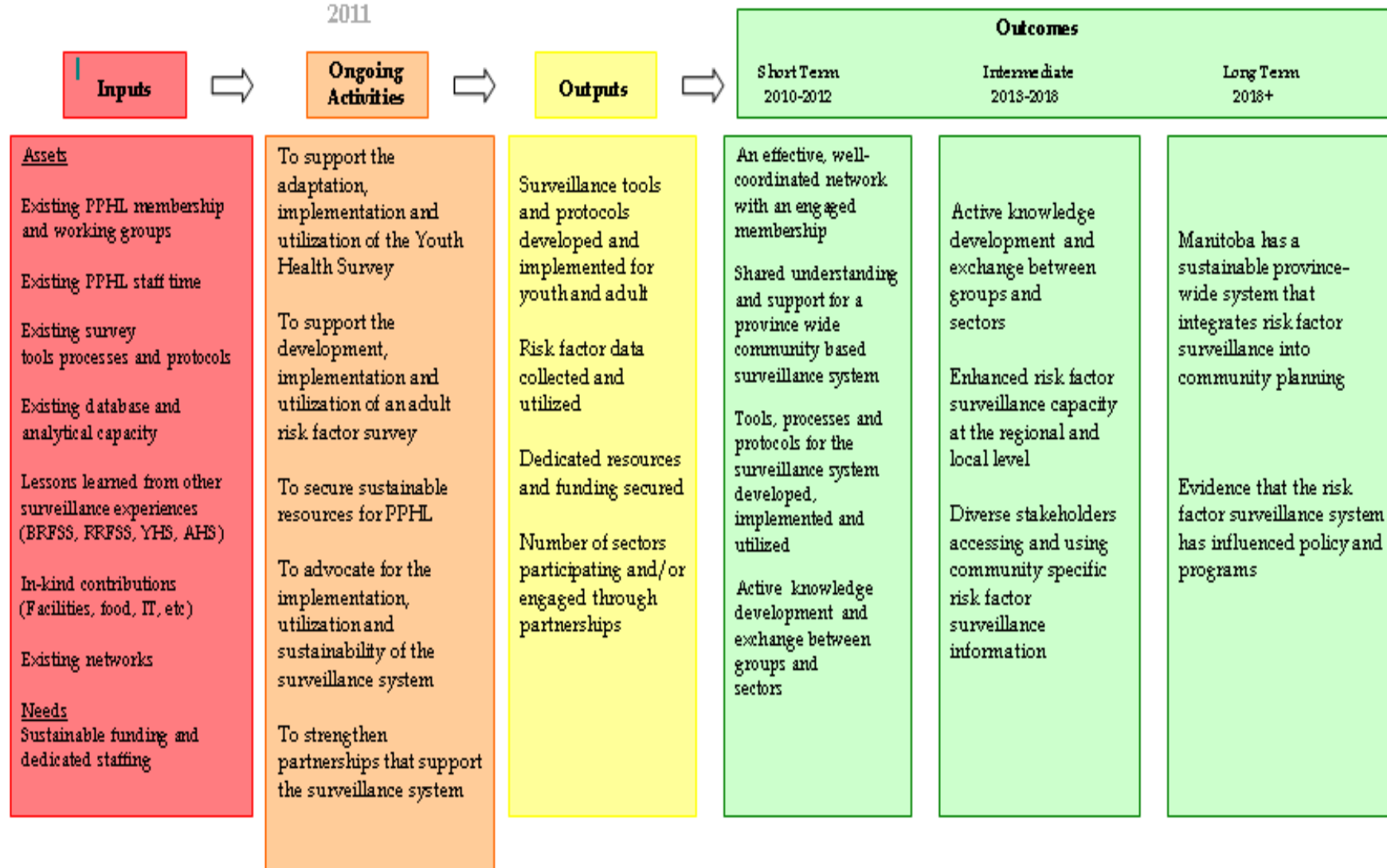
# Small Group Work

1. We'd like you to break into RHA/organization groups (5-6 people per group). Organizations with fewer than 2-3 people can feel free to disperse among other tables.
2. Please use the flip charts provided to make notes and nominate one person to do the report back.

# Objectives

- Information from small groups can/will be used:
  - By organizations – moving their priorities forward
  - By PPHL Working Groups – to advise the work plans and priorities of the working groups
  - By PPHL Coordinating Committee- to inform PPHL strategic planning and direction
  - By CLASP team to share applications and implications

LOGIC MODEL for Partners in Planning for Healthy Living  
2011



**EVALUATION** Evaluation Framework will include CLASP project.

June 2010 (Revised April, 2011)



# Small Group Work cont'd

Reflecting on the CLASP Case Study Presentation from this morning and the lessons learned by both provinces, think about **“where do we go from here?”**

Discuss the following questions:

# Small Group Work cont'd

1. What do you see as the successes/challenges for your organization (in terms of PPHL work)?
2. How can your organization build on these successes and address these challenges? (Form/maintain partnerships, enhance communication, engage youth/community, build knowledge exchange, sustainability, etc).
3. Using these themes and lessons, what will your organization do to move **“evidence to action?”** (Be specific!)

# *PPHL Working Group Updates*

May 27<sup>th</sup>, 2011

PPHL AGM



# Overview

1. Youth Health Survey WG
2. Adult Risk Factor Surveillance (ARFS) WG
3. Data Access Review Panel (DARP) WG
4. Youth Excel CLASP

# *Youth Health Survey Working Group*



# Youth Health Survey Working Group

## Task Groups:

- Tools
- Methods
- Administration Survey
- Knowledge Exchange

# Tools

- Expert Groups for each topic area met last fall (included youth)
- Expert groups reviewed, chose and amended questions to gather information they felt was important
- Results of these consultations was forwarded to Tools Task Group for consideration in survey development
- Tools Task Group reviewed these results and forwarded on to Methods Task Group
- Tools Task Group has now been “sunsetting” – thanks very much for all your hard work

# Methods

- Consists of broad representation from research, policy and practice
- Currently reviewing results of Expert Groups
- Will develop & test the survey tool based on other methodology considerations
- Considering numerous options for this survey
  - Census of grades 6 to 12 students province-wide
  - Possible sub-sample for direct measures (height, weight, step-count)
  - Possible cohort for longitudinal analysis
  - Inclusion of identifiers



# Administration Survey

- New component for this survey
- Survey of school administrators to obtain school environment data
- Data will be used to help identify and analyze factors that contribute to the health behaviors of Manitoba youth
- Initial draft developed and forwarded to Methods Task Group for consideration

# Knowledge Exchange

- Numerous activities – some examples:
  - Healthy Schools Conference panel discussion
    - How 3 schools/divisions used the YHS data
  - Provincial Report Quick Facts
  - Partnered with CDPI for Share & Learn in January
  - YHS video planning
    - Stories about how the data from the YHS has made an impact

# Knowledge Exchange

- Future Plans
  - Distribution of 2009 Manitoba YHS Quick Facts
  - Currently filming Manitoba YHS Video: Schools Moving Towards Healthier Lifestyles
  - Identifying local champions
  - Follow up to previous presentations
  - Working towards consistent reporting of the next YHS
  - Identifying future opportunities

# YHS Working Group

- Oversees overall workplan for 2012 YHS
- Avenue for communications between all Task Groups
- Responsible for evaluation of project

# *Adult Risk Factor Surveillance Working Group*



# ARFS Working Group

- Adult Risk Factor Surveillance Working Group
- Includes 15 members from 10 different PPHL organizations
- 6 RHAs, 2 NGO's and 2 gov't organizations are represented

# ARFS Symposium

- **“Growing Up: Expanding from Youth to Adult Risk Factor Surveillance”**
- Held January 26<sup>th</sup>, 2011
- Over 75 participants from all 11 RHAs, a variety of NGO’s and government organizations, and out of town guests (SK, PAHO, U of Waterloo)

# ARFS Symposium

## Symposium Objectives included:

1. Highlight the importance of community-led adult RFS and address gaps in current data
2. Review the pros and cons of different methodologies for ARFS
3. Identify existing resources and supports at the regional level to conduct ARFS in MB



# ARFS Symposium

## Highlights included:

- Dr. John Garcia of the University of Waterloo describing a systems approach to healthy living
- Dr. Glennis Andall-Brereton from the Pan-American Health Organization sharing an international success story of ARFS in six Caribbean countries
- Case studies- discussing the lessons learned from 3 RHAs experiences conducting ARFS in MB

# Symposium Feedback

Evaluations of the day showed:

- All regions reported some progress on ARFS (discussions, initiation of planning or completed implementation)
- Majority of participants felt that ARFS is a high priority and would help with regional planning
- Majority of participants reported that investing in ARFS is worthwhile and that MB has the required expertise

# Symposium Feedback

Comments included:

*"We're just starting to look at this process, so this session was very relevant and timely."*

*"Generated a lot of enthusiasm among colleagues who hadn't really understood what RFS was about and why it's so important for regions."*

# Moving Forward with ARFS

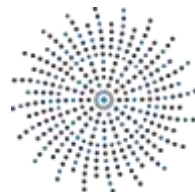
Where do we go from here?

- Symposium report and evaluation available at:  
<http://www.healthincommon.ca/pphl/>
- Pilot ARFS to determine most appropriate tools and methods
- Engage partners and build enthusiasm about ARFS
- Continue to look for funding and resources

# *Youth Health Collaborative; 'Excelerating' Evidence-Informed Action (Youth Excel)*

## **MB Youth Excel CLASP Team**

- Jane Griffith, Principal Investigator
- Kate McGarry, Project Coordinator
- Catherine Hynes, NOR-MAN RHA
- Tannis Erickson, Interlake RHA
- Cathy Stevens, Health in Common
- Bo Kinesavych, Health in Common
- Paul Paquin, MB Education
- Andrea Lamboo Milne MB Healthy Living, Youth and Seniors



**PROPEL**  
CENTRE FOR  
POPULATION  
HEALTH IMPACT

CANADIAN PARTNERSHIP  
AGAINST CANCER



PARTENARIAT CANADIEN  
CONTRE LE CANCER

# Aim #1

## Purpose:

Establish and advance priorities for a) moving evidence to action, and b) deriving evidence from action.

- Aim 1 involves the MDS process and involves policy, practice, and research to identify common indicators and measures for physical activity and tobacco use.
- Voluntary use of MDS

## Manitoba Activities

- Tobacco MDS
  - Final meeting June 8&9, 2011
- Physical Activity MDS
  - First meeting March 8 & 9<sup>th</sup>, 2011

# Aim #2

## Purpose:

Accelerate development of knowledge exchange capability in provinces, by doing and sharing case studies (three case study provinces, PEI, MB, NB)

## MB Activities

- Provincial Case Study
- Cross Case Study

# Aim #3

## Purpose:

Strengthen collaboration among research, policy, practice, and youth leaders by creating mechanisms to enable mutual learning about how to effect efficient and productive knowledge exchange.

## Youth Excel Learn

- Supports exchanges within or across provinces/territories, disciplines (e.g., health and education) and sector (research, policy, practice)
- YE Learn Program accepting application until Jan.31, 2012



# AIM #3 Cont'd

## Manitoba Activities

- MB has submitted two successful applications to YE LEARN
  - Exchange with Epidemiologist from the Prince Alberta Parklands Regional Health Authority
  - Exchange with Saskatchewan Cancer Agency (PPHL AGM)
  
- Partnered with Healthy Schools conference
  - 47 teachers accessed funds
  - 42% of those teachers said they couldn't have attended the conference without teacher substitute funding
  - 50% of those teachers said they made new or strengthened connections with regional health authority staff and community organizations

# Moving Forward

- Exploring future funding opportunities
  - CPAC committed to funding CLASP for 5 more years
- Engaged in Cross-CLASP Knowledge and Sustainability committee
- Case study dissemination (CU EXPO, JASP, WARFS)
- National Roundtable in Fall 2011
  - Learn from Case Studies and other provinces experiences
  - Learn how MDS can accelerate action on youth health
  - Apply the above lessons learned
  - Consider how the above lessons learned can be applied to the monitoring and measurement of various strategies (eg. JSCH, Childhood Obesity Strategy)

# *Data Access Review Panel Working Group*



# DARP PURPOSE

- To develop and manage a process to control access to the Youth Health Survey (YHS) provincial data repository housed on a secure server at CCMB
  - Health Regions signed data storage/data sharing agreements assigning CCMB as trustee of YHS data.
  - PPHL are gatekeepers to access to that data, through DARP
- Report on status to the PPHL Coordinating Committee.

# DARP OBJECTIVE: PROTECT USE OF THE YHS DATA

- Request for access to the database will only be made through CCMB and not individual RHA's. This data is only available at the provincial level. No RHA, school or community specific data will be released.
- The purpose of the YHS is to provide schools and RHA's with current region-specific information about risk factors for chronic disease in youth.... The results are not age or sex standardized across regions and are, therefore, not suitable for comparisons between regions.
- The YHS applied community-based approaches and principles to data collection, analysis, interpretation and dissemination. To that end, all data access requests will be considered in the spirit of respecting the needs and priorities of the communities that provided their information for study.

# DARP MEMBERSHIP

- **Five (5) to seven (7) policy and program representatives from PPHL member authorities.**
- **Representation as follows:**
  - Health Authorities:
    - CancerCare Manitoba (CCMB) -Jane Griffith
    - Winnipeg Regional Health Authority -Landis Esposito
    - Rural Regional Health Authorities -Cathy Hynes
  - Government Departments
    - Education -Paul Paquin
    - Health -Heather Sparling  
Erin Shillberg (ad hoc)  
-(currently vacant)
  - Non Government Authorities
    - Health in Common -Bo Kinesavych

# DARP PROCESS

- Requests for access to MB YHS data must be made using the PPHL Manitoba YHS Data Access Request Form, located on the HIC website, under PPHL, data access.
- DARP meets to review applications and determine if the application is approved, not approved, or conditionally approved.
- YHS data will be released on approved applications, following receipt of signed PPHL Manitoba YHS Research Data Sharing Agreement

# 2010-2011 DARP REVIEWS:

- Three (3) applications approved:
  - June 2010: data to be used for program planning and potential future research at Healthy Child Manitoba
  - July 2010: YHS data to inform a report on the economics of primary prevention in Manitoba
  - September 2010: Thesis request: “Factors associated with Physical Activity among Canadian High School Students”
- One (1) application conditionally approved:
  - March 2011 – approved pending receipt of ethics proposal and approval



# DARP DATA SHARING AGREEMENT REQUIREMENT

- Prior to publication(s) / presentation (s) of Youth Health Survey data, final copies of presentations / papers or any other type of publication are to be submitted to DARP
- DARP has been informed that the thesis using YHS data, has been submitted for publication in an international journal. Still waiting to hear if it will be accepted.



***Thank you!***

**Questions for the Working Groups?**