

Domain 10: Contribute to and Apply the Evidence Base of Public Health

Domain 10 focuses on the role that health departments play in building and advancing the science of public health. Public health is strengthened when its practitioners continually add to the body of evidence for promising practices -- those practices that have the potential to become evidence-based over time. Health departments should employ evidence-based practices for increased effectiveness and credibility. Health departments also have important roles in developing new evidence. Health departments should apply innovation and creativity in providing public health services appropriate for the populations they serve.

DOMAIN 10 INCLUDES TWO STANDARDS:

Standard 10.1:	Identify and Use the Best Available Evidence for Making Informed Public Health Practice Decisions
Standard 10.2:	Promote Understanding and Use of the Current Body of Research Results, Evaluations, and Evidence-based Practices with Appropriate Audiences

STANDARD 10.1: Identify and use the best available evidence for making informed public health practice decisions.

Public health evidence-based practice requires that a health department use the best available evidence in making decisions and in ensuring the effectiveness of processes, programs, and interventions. Evidence-based practice assures that a health department's resources are being used in the most effective manner. Health departments should access information about evidence-based practices and apply that information to their processes, programs, and interventions.

Standard 10.1: Identify and use the best available evidence for making informed public health practice decisions.

MEASURE	PURPOSE	SIGNIFICANCE		
<p>Measure 10.1.1 A</p> <p>Applicable evidence-based and/or promising practices identified and used when implementing new or revised processes, programs, and/or interventions</p>	<p>The purpose of this measure is to assess the health department's use of evidence-based and/or promising practices in its design of new process, programs, or interventions or in revisions of programs.</p>	<p>It is important that public health efforts have the maximum positive impact possible. Evidence-based practices have been evaluated or researched and have been found to be effective.</p> <p>Health departments should be aware of practices that are evidence-based and incorporate them into their processes, programs, and interventions, as appropriate. Evidence-based practice ensures that health department resources are being applied effectively. Promising public health practices also have the potential for evaluation and designation as evidence-based.</p>		
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN	
<p>1. The use of evidence-based or promising practices, including:</p> <p>a. Documentation of the source of the evidence-based or promising practice</p>	<p>1. The health department must document the incorporation of an evidence-based or promising practice in a public health process, program, or intervention.</p> <p>a. The health department must document the source of the information concerning the evidence-based or promising practice. The source of the practice could be (1) The Guide to Community Preventive Services, (2) an Initiative listed in the NACCHO Model Practices Database, (3) the result of an information search (web, library, literary review), or (4) result of interaction with consultants, academic faculty, researchers, other health departments, or other experts.</p>	<p>2 examples; examples must come from two different program areas, one of which is a chronic disease program or program that seeks to prevent chronic disease.</p>	<p>3 years</p>	

MEASURE 10.1.1 A, continued

b. Documentation of how the evidence-based or promising practice was incorporated into the design of a new or revised process, program, or intervention

b. The health department must provide a description of how the evidence-based or promising practice identified in (a) above was incorporated into the design of a new or revised process, program, or intervention. Incorporation of the evidence-based or promising practice must be appropriate to the particular group or community or it must be modified to be appropriate.

Documentation could be, for example, internal memos, annual reports, program descriptions in public information (reports, newsletters), or other program descriptions written by the department.

Due to the limited availability of evidenced-based practices or promising practices in Tribal communities, Tribal health departments may provide documentation of how evidence-based practices or promising practices have been adapted to integrate cultural values, beliefs, and traditional healing practices of the Tribe.

Standard 10.1: Identify and use the best available evidence for making informed public health practice decisions.

MEASURE	PURPOSE	SIGNIFICANCE		
<p>Measure 10.1.2 T/S</p> <p>Fostered innovation in practice and research</p>	<p>The purpose of this measure is to assess the Tribal or state health department's efforts to promote and support innovations in public health practice and research.</p>	<p>Public health addresses complex, multi- sectorial problems that are changing as rapidly as our social, cultural, and technological environment is changing. The need for innovation in public health practice and research is more urgent, given the increasingly rapid pace of change in the environment that affects the public's health.</p>		
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN	
<p>1. Relationships with academic institutions, research centers/institutes</p>	<p>1. The Tribal or state health department must document that it has a working relationship with academic institutions, research centers/institutes, and/or Tribal organizations and Tribal Epidemiology Centers.</p> <p>In some cases, the relationship may be a formal relationship that can be documented by a contract or a MOA/MOU. In other cases, the working relationship may be less formal. In those cases, documentation can be, for example, meeting minutes, emails, or a meeting agenda that demonstrates collaboration with academic institutions and/or research centers/institutes. Additionally, jointly written reports, white papers, and research studies could demonstrate collaboration with academic institutions and/or research centers/institutes.</p>	<p>2 examples</p>	<p>5 years</p>	
<p>2. Participation in research agenda-setting, practice-based research networks, or other research efforts</p>	<p>2. The Tribal or state health department must document that it is engaged with the work of the research community. The Tribal or state health department must demonstrate involvement of the community in the development of the research agenda.</p> <p>Documentation could be, for example, membership in a practice-based research network, either with other states, institutions, or within the state. Community Based Participatory Research is a model that could be used.</p> <p>For Tribal health departments, this may include the incorporation of practice-based evidence grounded in cultural values, beliefs, and traditional practices.</p> <p>Documentation could be, for example, a membership list or meeting attendance roster. Documentation could also be meeting minutes or submission of IRB documentation showing participation in research (minutes, submission documentation).</p>	<p>2 examples</p>	<p>5 years</p>	

STANDARD 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

Lack of communication or understanding between public health researchers and public health practitioners often exists. Gaps in understanding may also occur between the public health department and the general public. Communication can help bridge the areas where understanding is lacking and can strengthen the relationship and trust among researchers, public health practitioners, and the public. Communication between public health practitioners and the public, governing entities, and other audiences could encourage others to become advocates for research and to contribute to the science of public health. Health departments should encourage the use of research results, evaluations, and evidence-based practices.

Standard 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

MEASURE	PURPOSE	SIGNIFICANCE		
<p>Measure 10.2.1 A</p> <p>Protection of human subjects when the health department is involved in or supports research activities</p>	<p>The purpose of this measure is to assess the health department's policies and practices for the protection of human subjects in research in which it is involved.</p>	<p>Many public health studies involve recipients of public health services or public health staff. Institutions that receive government funds for research are required to have the research that involves human subjects approved by a registered institutional review board (IRB) to ensure the ethical treatment of human subjects. Ethical treatment of human subjects is a basic value of public health research and programs. Appropriate efforts must be made to protect the rights, welfare, and well-being of subjects involved in research.</p>		
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN	
<p>1. An adopted human subjects research protection policy</p>	<p>1. The health department must provide a copy of a policy regarding research, such as an IRB review policy. If the health department does not have its own internal IRB process, the health department must have a copy of the IRB approval from the institution where the IRB review was done. If the health department does not currently engage in research that involves human subjects, a statement to that effect could be accepted as documentation.</p> <p>Documentation for a Tribal health department could be a Tribal policy or protocol that describes the process for research review and approval by the Tribal Council, Health Oversight Committee, or other body or authority.</p>	<p>1 policy</p>	<p>5 years</p>	

Standard 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

MEASURE	PURPOSE	SIGNIFICANCE		
<p>Measure 10.2.2 A</p> <p>Access to expertise to analyze current research and its public health implications</p>	<p>The purpose of this measure is to assess the health department's ability to review and interpret research findings.</p>	<p>Health departments must have the internal capacity for, or ability to access, expert review and interpretation of research findings. Interpreting research findings is important when communicating the public health implications of those findings to stakeholders, partners, and the public. It is also important when incorporating research findings into department processes, programs, or interventions.</p>		
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN	
<p>1. The availability of expertise (internal or external) for analysis of research</p>	<p>1. The health department must document that it has expert staff or access to outside experts who can analyze research and its public health implications.</p> <p>This measure includes analysis of the current body of research relevant to public health practice, irrespective of whether or not the research was conducted in the Tribe, state, or community.</p> <p>Documentation could be, for example, a list of experts and a description of their training or expertise. The expertise may be within the department or may reside outside the health department, for example, an academic institution, research center, Tribal epidemiology center, public health institute, or consultant. If the expertise is outside of the health department, the health department must show a written agreement (contract, MOA/MOU, etc.) that demonstrates access to such expertise.</p>	<p>2 examples or one list</p>	<p>5 years</p>	

Standard 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

MEASURE	PURPOSE	SIGNIFICANCE		
<p>Measure 10.2.3 A</p> <p>Communicated research findings, including public health implications</p>	<p>The purpose of this measure is to assess the health department's efforts to keep others, both within and outside the public health profession, informed about the findings of public health research and the public health implications of those findings.</p>	<p>Public health research provides the knowledge and tools that people and communities need to protect their health. However, research findings can be confusing and difficult to translate into knowledge that steers action toward improved public health. Health departments can communicate the facts and implications of research so that individuals and organizations are informed and knowledgeable, and can act accordingly.</p>		
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN	
<p>1. The communication of research findings and their public health implications to stakeholders, public health system partners, and/or the public</p>	<p>1. The health department must document the provision of communication through which the department conveyed research findings and their public health implications to stakeholders, other health departments, members of the public health system and non-public health system partners, and/or the public.</p> <p>Appropriate audiences could include: the health department's governing entity; elected/appointed officials; agencies, departments, or organizations that collaborate with the health department in the delivery of services; community and healthcare partners; and the general public. Audiences would be especially appropriate if involved in or affected by the research. Community Based Participatory Research is an example of an approach that could be used.</p> <p>Research referred to is research conducted and published by others, outside of the health department. The research must have been evaluated by experts to provide valid implications, for example, peer-review for publication in journals.</p> <p>The state health department distribution list of research findings must include the Tribal and local health departments in the state.</p> <p>The local health department distribution list of research findings must include the state health department and Tribal health department(s) in the state with which the local health department coordinates.</p>	<p>2 examples</p>	<p>5 years</p>	

MEASURE 10.2.3 A, continued

The Tribal health department distribution list of research findings must include the state and local health department(s) in the state with which the Tribal health departments coordinates.

Documentation could be, for example, a presentation, prepared report, discussion at a meeting recorded in the minutes, web posting, email list-serve, newspaper article, webinar, or press release.

Standard 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

MEASURE	PURPOSE	SIGNIFICANCE	
<p>Measure 10.2.4 S</p> <p>Consultation or technical assistance provided to Tribal and local health departments and other public health system partners in applying relevant research results, evidence-based and/or promising practices</p>	<p>The purpose of this measure to assess the state health department's provision of assistance to Tribal and local health departments on the application of relevant research results and evidence-based/promising practices.</p>	<p>Scientifically sound public health practices are essential for public health interventions to be effective. Public health practices are continually being researched and tested, and new findings are being made available to the field. State health departments should share their knowledge and expertise concerning research findings and evidence-based or promising practices with Tribal and local health departments in their state. State health departments can provide consultation or technical assistance on employing research and modifying practices to best suit the population served by the Tribal or local health department.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p>1. Provision of consultation or technical assistance to Tribal and/or local health departments, and/or other public health system organizations in applying relevant research, evidence-based, and/or promising practices</p>	<p>1. The state health department must document how it has provided consultation, technical assistance, advice, direction, or guidance to Tribal and/or local health departments and/or members of the public health system in the application of relevant research, evidence-based, and/or promising practices. This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices. This assistance can be provided to local health departments, Tribal health departments in the state, or other partners or stakeholders.</p> <p>The state health department cannot use examples of providing assistance to program divisions within the state health department.</p>	<p>2 examples</p>	<p>5 years</p>

Standard 10.2: Promote understanding and use of the current body of research results, evaluations, and evidence-based practices with appropriate audiences.

MEASURE	PURPOSE	SIGNIFICANCE	
<p>Measure 10.2.4 T</p> <p>Technical assistance provided to the state health department, local health departments, and other public health system partners in applying relevant research results, evidence-based and/or promising practices</p>	<p>The purpose of this measure to assess the Tribal health department's provision of assistance to the state and local health departments and other Tribal health departments on the application of relevant research results and evidence-based/promising practices.</p>	<p>Scientifically sound public health practices are essential for public health interventions to be effective. Public health practices are continually being researched and tested, and new findings are being made available to the field. Tribal health departments should share their knowledge and expertise on research findings and evidence-based or promising practices with state and local health departments, other Tribal health departments, and/or Tribal organizations. Tribal health departments can provide consultation or technical assistance on employing research and modifying practices to best suit the population being served. Tribal health departments should share with state and local health departments their knowledge and expertise on research methods that are culturally relevant or appropriate approaches to applying research in Tribal communities.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p>1. Provision of consultation or technical assistance to state and/or local health departments, other Tribal health departments, and/or Tribal organizations in applying relevant research, evidence-based, promising practices, and/or practice-based evidence</p>	<p>1. The Tribal health department must document the provision of consultation, technical assistance, advice, direction, or guidance to others in the application of relevant research or evidence-based, promising practices, and/or practice-based evidence. This assistance must be specific to the application of relevant research results or the employment of evidence-based and/or promising practices. This assistance can be provided to the state health department, local health departments, other Tribal health departments or Tribal organizations in the state, or other partners or stakeholders.</p> <p>Examples of technical assistance provided by the Tribe may be done together with a federal partner, such as IHS, a Tribal Epidemiology Center, or other Tribal department. The Tribal health department cannot use examples of providing assistance to itself, such as to program divisions within the Tribal health department.</p>	<p>2 examples</p>	<p>5 years</p>