

## Outreach Planning Guide Checklist

*A tool for to applying the concepts in the National Collaborating Centre for Infectious Diseases' Outreach Planning Guide*

Intended for use by new and experienced outreach program planners

**Version date: August, 2012**

**Developed by: Anneliese Poetz  
(apoetz@icid.com)**

The *Outreach Planning Guide Checklist* is a framework for guiding the systematic planning and evaluation of new and existing outreach services for public health practitioners who work with priority\* populations. A checklist can foster reflection and subsequent adjustments to program planning and service delivery and facilitate subsequent quality improvements. The aim, through this type of evaluation, is to *both improve projects and meet accountability requirements* (Stufflebeam, 2001: p.72). Furthermore, a *checklist for the essential components of outreach programs...[allows you to]...inventory your readiness for such an endeavor or, if you already are involved in outreach, to take stock of your current situation and acknowledge areas for improvement*. A checklist helps the program manager to *stay focused and on target* throughout the development and preparation, or ongoing revision, of their outreach program (2001, *Template topics: Implementing an outreach program*: p.196). For facilitating quality improvement in the planning and delivery of outreach programs, a checklist can reduce the risk that key elements could be missed (see Gris Seoane, 2001).

This checklist, patterned after the steps outlined in the National Collaborating Centre for Infectious Diseases' Outreach Planning Guide provides an evidence-informed quick reference. The checklist broadly reflects the four main steps for outreach program planning: 1) get to know your population, 2) design your outreach program, 3) deliver the services, and 4) measure the results. In general, these four parts of the outreach planning process respectively ask: Who are the people we serve? What are the necessary components of the program? How will we deliver the services? How, what and when will we evaluate? Within each of these broad categories are specific items for consideration, contained in 14 sub-components. The four main steps for outreach program planning can be employed individually and/or selectively for an existing program depending on its stage of development, or in sequence from 1 through 4 for the planning of new outreach programs.

This checklist represents the first *Outreach Planning Guide Checklist* and was created for use in conjunction with the Guide. For each item in the checklist, the program planner is referred to corresponding page(s) in the Guide which provide more detailed information on that particular step.



If detailed information beyond the scope of the Guide is required to act upon the items in this checklist, please consult the appendix entitled *Additional Resources* at the end of this checklist. The program planner is reminded that this checklist represents a series of steps which have been determined to be important from the literature and by experts in the field. However, additional steps may be required in order to tailor the program for service provision in specific contexts, to particular clientele, and for different types of outreach models (e.g. fixed site, mobile on-foot, mobile in-van as well as urban vs. rural). While the primary purpose of the Outreach Planning Guide and this checklist is for application in the area of communicable disease control outreach program planning, with some adjustments, the Guide and this checklist tool may also prove useful to program planners in other health-related fields.

For more information about the literature and how it was used to inform the development of this checklist, please consult the bibliography and process explanation provided in the appendix.

\**Priority* has been chosen to replace the term *vulnerable* with reference to the populations targeted by outreach programs.



✓	<b>STEP 1: GET TO KNOW YOUR POPULATION</b>	<b>Page(s) in Guide September 2010</b>	<b>Page(s) in Guide February 2012</b>
<b>1.1 Build a priority population profile</b>			
	1.1.1 Collect basic demographic information	5	5
	1.1.2 Collect behavioural information	5	5
	1.1.3 Collect health and/or illness information	5, 45	5, 47
<b>1.2 Assess the situation (community setting)</b>			
	1.2.1 Gather information on strengths and opportunities at the individual, community and organization levels	6 47-48	6 49-50
	1.2.2 Gather information on problems, needs and barriers at the individual, community and organization levels	6 47-48	6 49-50
	1.2.3 Identify which programs and services currently exist for addressing individual and community needs	7 47-48	7 49-50
	1.2.4 Determine the priority populations' ability and/or willingness to access existing services	6-7	6-7
	1.2.5 Identify individual and community service gaps	7 47-48	7 49-50
	1.2.6 Review the results of your situational assessment to ensure completeness and credibility	6-7 47-48	6-7 49-50
<b>1.3 Engage priority community members</b>			
	1.3.1 Identify "key community members" and build relationships in order to facilitate access to the community you wish to serve	8	8-9
	1.3.2 Determine specific ways in which you could involve your target/priority population in the range of planning and delivery activities for your program (e.g. peer outreach workers)	8	8-9



✓	<b>STEP 2: DESIGN YOUR OUTREACH PROGRAM</b>	<b>Page(s) in Guide September 2010</b>	<b>Page(s) in Guide February 2012</b>
<b>2.1 Develop a conceptual framework and define your program</b>			
	2.1.1 Clearly define the goals and objectives of your program	9-10, 52-56	10-11, 54-58
	2.1.2 Develop a logic model for your program	9, 49-51	10, 51-52
	2.1.3 Identify potential partner organizations for engaging in collaborative work	9-10, 20-22 61-62	10-11, 21-23 63-64
	2.1.4 Develop and define measurable indicators for each of your program goals and objectives	9, 11	10, 12
	2.1.5 Identify specific times to measure progress	11	12
	2.1.6 Identify and address any issues you may be encountering during the process of planning your program	10, 52-56	11, 54-58
<b>2.2 Consider ethical, legal and risk management issues</b>			
	2.2.1 Establish guiding ethical principles for delivery of outreach services within your program	12-13, 57	13-14, 59
	2.2.2 Negotiate parameters for operating your program while respecting the discretionary powers of police (includes establishing clear lines of communication)	13-14	14-15
	2.2.3 Establish trust with clients by communicating clearly about the nature of the working relationship between your organization and other key organizations such as the police	14	14-15
	2.2.4 Identify all sources of risk to your outreach program	14, 40 52-56	15, 42 54-58
	2.2.5 Develop a risk management plan	15	16
<b>2.3 Develop policies, procedures and guidelines</b>			
	2.3.1 Refer to program goals and objectives in 2.1.1 and identify program specific issues which require policies and guidelines	15-16	17
	2.3.2 Develop procedures and operational guidelines to address program specific issues which arise once the program is operational	15-16	17
<b>2.4 Consider staffing and staff development needs</b>			
	2.4.1 Determine staffing needs for delivery of the program's services (including paid staff and volunteers)	16	17-20
	2.4.2 Recruit paid staff and/or volunteers	16	18
	2.4.3 Provide necessary training for outreach workers	17-18, 59	18-19, 61
	2.4.4 Establish formal, structured and regular supervision for outreach workers	18-19, 58	19-20, 60



✓	<b>STEP 3: DELIVER THE SERVICES</b>	<b>Page(s) in Guide September 2010</b>	<b>Page(s) in Guide February 2012</b>
<b>3.1 Manage the program</b>			
	3.1.1 Define administrative structure based on program type and design	20	21
<b>3.2 Integrate services</b>			
	3.2.1 Establish and sustain partnerships with agencies that share a similar mandate (without duplicating services) to protect and promote the wellbeing of priority populations	20-22 61-62	21-23 63-64
	3.2.2 Build and sustain effective inter-agency referral processes	21-22	22-23
<b>3.3 Mobilize the community</b>			
	3.3.1 Determine the level and type of community involvement that would empower the community and create awareness about your program	22-23	23-24
	3.3.2 Create opportunities for facilitating the level and type of community involvement that would empower the community and create awareness about your program	22-23	23-24
<b>3.4 Build capacity and advocate</b>			
	3.4.1 Identify opportunities for advocacy at individual, system, community, provincial, and national levels	23-25	25-26
	3.4.2 Build support for the program by creating an appropriate advocacy plan	23-25	25-26



✓	<b>STEP 4: MEASURE THE RESULTS</b>	<b>Page(s) in Guide September 2010</b>	<b>Page(s) in Guide February 2012</b>
<b>4.1 Develop a performance measurement framework</b>			
	4.1.1 Refer to conceptual framework from Step 2.1 to determine impact, process and outcome indicators according to program goals and objectives	27	28
	4.1.2 Determine which internal information sources you will use to measure the identified indicators	27	28
	4.1.3 Determine which external information sources you will use to measure the identified indicators	27, 45	28, 47
<b>4.2 Monitor progress</b>			
	4.2.1 Conduct monitoring and evaluation according to the performance measurement framework and conceptual framework established in Step 2.1	28	29
<b>4.3 Share results and celebrate</b>			
	4.3.1 Share what you learned from conducting your evaluation of the program	28	29
	4.3.2 Celebrate collective successes and efforts	28	29



## Bibliography

[No authors listed]. Template topics: Implementing an outreach program. CLMR. 2001: May/June: 196-200.

Bichelmeyer B.A. Checklist for formatting checklists. Evaluation Checklists Project [internet]. 2003: [about 3pp.]. Available from: [http://www.wmich.edu/evalctr/archive\\_checklists/cfc.pdf](http://www.wmich.edu/evalctr/archive_checklists/cfc.pdf)

Bix L. The elements of text and message design and their impact on message legibility: a literature review. JDC. 2002: 4. Available from: <http://scholar.lib.vt.edu/ejournals/JDC/Spring-2002/bix.html>

Gris Seoane P.J. Use and limitations of checklists: other strategies for audits and inspections. Qual Assur J. 2001: 5: 133-136.

Outreach Planning Guide for Infectious Disease Practitioners who work with Vulnerable Populations. National Collaborating Centre for Infectious Diseases [internet]. September 2010: 1-62.  
Available from: <http://www.nccid.ca/outreach-planning-guide>

Outreach Planning Guide for Infectious Disease Practitioners who work with Vulnerable Populations. National Collaborating Centre for Infectious Diseases [internet]. 2<sup>nd</sup> edition. February 2012: 1-66.

Scriven M. An overview of evaluation theories. EJA. 2001: 1(2): 27-29.

Scriven M. Evaluation theory and metatheory. In: International Handbook of Educational Evaluation. Kellaghan T, Stufflebeam DL, editors. Dordrecht: Kluwer Academic Publishers; 2003. p. 15-30.

Scriven M. The logic and methodology of checklists. Evaluation Checklists Project [internet]. 2007: [about 11pp.]. Available from: <http://preval.org/documentos/2075.pdf>

Stufflebeam DL. Guidelines for developing evaluation checklists: the Checklists Development Checklist (CDC). Evaluation Checklists Project [internet]. 2000: [about 10pp.].  
Available from: [http://www.wmich.edu/evalctr/archive\\_checklists/guidelines\\_cdc.pdf](http://www.wmich.edu/evalctr/archive_checklists/guidelines_cdc.pdf)

Stufflebeam DL. Evaluation checklists: practical tools for guiding and judging evaluations. Am J Eval. 2001: 22(1): 71-79.

Stufflebeam DL. CIPP evaluation model checklist. Evaluation checklists project [internet]. 2002: [about 16pp.]. Available from: [http://www.wmich.edu/evalctr/archive\\_checklists/cippchecklist\\_mar07.pdf](http://www.wmich.edu/evalctr/archive_checklists/cippchecklist_mar07.pdf)

Wingate LA. The evaluation checklist project: the inside scoop on content, process, policies, impact, and challenges. The Evaluation Center, Western Michigan University. 2002. Available from: [http://www.wmich.edu/evalctr/archive\\_checklists/papers/insidescoop.pdf](http://www.wmich.edu/evalctr/archive_checklists/papers/insidescoop.pdf)



## Checklist development process and intended use:

The evidence base for the development of this checklist has been two-pronged. First, the Guide which forms the basis for the content of this checklist represents an evidence-informed document. Second, in terms of the process for development of this checklist, the evaluation literature has provided an evidence-informed approach. The processes outlined in Stufflebeam's (2001) Checklist for Developing Checklists (CDC) used in conjunction with Bichelmeyer's (2003) Checklist for Formatting Checklists (CFC) provided useful step-by-step guidance. The only steps that were not adhered to, for reasons of redundancy, were steps 3 and 4 in the CDC. These steps require the categorization, refinement and definition of the content to be contained within the checklist. However, as previously stated the checklists' content was to be based upon the information within the Guide. In addition, literature from the field of graphic design informed decisions such as the choice of font type and size for facilitating maximum readability (Bix, 2002).

This checklist provides the outreach program planner with a tool for 'evaluating' the quality/soundness of an outreach program against evidence-informed standards contained within the Guide. From a theoretical perspective, a 'formative' approach could be adopted by a new program planner through the use of this checklist during the development phases of their outreach program. Similarly, experienced program planners may also utilize this checklist in order to detect areas for improvement within an existing program (Scriven, 1991). Components embedded within the checklist concern the measurement of client satisfaction. This is important, as Scriven (2003) notes, client needs are often different than the goals of program managers. In this way, the program manager may also adopt a 'summative' approach, using the checklist to determine whether an existing program is meeting the needs of its clients.



## Additional Resources

### Defining Goals and Objectives, Staffing, Process and Outcome Evaluation

Getting to Outcomes 2004: Promoting Accountability Through Methods and Tools for Planning, Implementation, and Evaluation. *RAND*.

Overview: <http://www.nccmt.ca/registry/view/eng/71.html>

Available from: [http://www.rand.org/content/dam/rand/pubs/technical\\_reports/2004/RAND\\_TR101.pdf](http://www.rand.org/content/dam/rand/pubs/technical_reports/2004/RAND_TR101.pdf)

### Indicators

Guidelines for Selecting and Using Indicators. *NHS Institute for Innovation and Improvement & Association of Public Health Observatories, United Kingdom*.

Overview: <http://www.nccmt.ca/registry/view/eng/73.html>

Available from: <http://www.apho.org.uk/resource/view.aspx?RID=44584>

### Logic Models

The Logic Model: A Blueprint for Describing Programs. *Public Health Agency of Canada*.

Available from: [http://www.phac-aspc.gc.ca/php-ppsp/pdf/toolkit/logic\\_model\\_e.pdf](http://www.phac-aspc.gc.ca/php-ppsp/pdf/toolkit/logic_model_e.pdf)

Logic Models Workbook. *The Health Communications Unit – at the Centre for Health Promotion, University of Toronto*.

Available from: [http://www.thcu.ca/resource\\_db/pubs/192077388.pdf](http://www.thcu.ca/resource_db/pubs/192077388.pdf)

### Program Planning & Situational Assessment

The Health Planner's Toolkit: Health System Intelligence Project. *Ministry of Health and Long-Term Care, Government of Ontario*.

Module 1: The Planning Process.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_1.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_1.pdf)

Module 2: Assessing Need.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_2.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_2.pdf)

### Review the Scientific Literature

The Health Planner's Toolkit: Health System Intelligence Project. *Ministry of Health and Long-Term Care, Government of Ontario*.

Module 3: Evidence-Based Planning.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_3.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_3.pdf)



## Partnerships, Community Engagement & Integration

The Health Planner's Toolkit: Health System Intelligence Project. *Ministry of Health and Long-Term Care, Government of Ontario.*

Module 4: Understanding Integration.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_4.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_4.pdf)

Module 5: Community Engagement and Communication.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_5.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_5.pdf)

## Program Evaluation

The Health Planner's Toolkit: Health System Intelligence Project. *Ministry of Health and Long-Term Care, Government of Ontario.*

Module 6: Evaluation.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_6.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_6.pdf)

Module 7: Priority Setting.

Available from: [http://www.health.gov.on.ca/transformation/providers/information/resources/health\\_planner/module\\_7.pdf](http://www.health.gov.on.ca/transformation/providers/information/resources/health_planner/module_7.pdf)

Program Evaluation Toolkit. Public Health Agency of Canada.

Available from: <http://www.phac-aspc.gc.ca/php-ppsp/pdf/toolkit/Welcome.pdf>

A Framework for Monitoring and Evaluating HIV Prevention Programmes for Most-At-Risk Populations. *Joint United Nations Programme on HIV/AIDS (UNAIDS).*

Available from: [http://data.unaids.org/pub/Manual/2008/jc1519\\_framework\\_for\\_me\\_en.pdf](http://data.unaids.org/pub/Manual/2008/jc1519_framework_for_me_en.pdf)

## Glossary

Glossary of Evaluation terms. United States Agency International Development (USAID).

Available from: [http://pdf.usaid.gov/pdf\\_docs/PNADO820.pdf](http://pdf.usaid.gov/pdf_docs/PNADO820.pdf)



## Acknowledgements

The National Collaborating Centre for Infectious Diseases is grateful to the many individuals who contributed to the creation of the *Outreach Planning Guide Checklist*:

### ADVISORY COMMITTEE:

- Margaret Fast, MD. Scientific Director, National Collaborating Centre for Infectious Diseases. Winnipeg, MB.
- Shelley Stopera, MSc, PMP. Program Director, National Collaborating Centre for Infectious Diseases. Winnipeg, MB.
- Anneliese Poetz, PhD. Project Manager, National Collaborating Centre for Infectious Diseases. Winnipeg, MB.
- Donna Ciliska, RN, PhD. Professor, McMaster University; Knowledge Translation Consultant, National Collaborating Centre for Methods and Tools; Co-Director of the McMaster Evidence Review and Synthesis Centre. Hamilton, ON
- Elaine Jones, RN. Outreach Street Nurse, British Columbia Centre for Disease Control. Vancouver, BC.
- Fiona Gold, BA, RN. Outreach Street Nurse. British Columbia Centre for Disease Control. Vancouver, BC.
- James Tigchelaar, RN, MEd. Educator, Clinical Prevention Services. British Columbia Centre for Disease Control. Vancouver, BC.
- Jennifer Gratrix, RN, MSc. Epidemiologist, Communicable Disease Control, Alberta Health Services. Edmonton, AB.
- Amy Lea, BA, RN, BScN. Communicable Disease Consultant, Department of Health and Social Services, Government of the Northwest Territories. Yellowknife, NT.
- Pam deBruin, RN. STI/BBP Nurse Clinician, Public Health Services, Saskatoon Health Region. Saskatoon, SK.
- Tara Carnochan, MA. Manager, Health Promotion & Outreach Programs, Nine Circles Community Health Centre. Winnipeg, MB.

### STAKEHOLDERS:

- The Winnipeg Regional Health Authority, Winnipeg, MB
- Attendees (and my co-presenter, Barbara Anderson – Alberta Health Services) of the *If I had a hammer: A range of tools for HIV/STBBI outreach workers* workshop at the Ontario Public Health Convention, April 2012. Toronto, ON
- Attendees (and my co-presenter, Barbara Anderson – Alberta Health Services) of the *If I had a hammer: A range of tools for outreach program planning and evaluation* workshop at the National Collaborating Centre for Public Health Summer Institute, May 2012. Kelowna, BC

...and many others who provided feedback via email and/or telephone

Production of this document has been made possible through a financial contribution from the Public Health Agency of Canada through funding for the National Collaborating Centre for Infectious Diseases (NCCID). The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

