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IDENTIFICATION OF KEY ENABLERS WHICH WILL IMPROVE COMMUNITY GROUPS AND ORGANIZATIONS CAPACITY TO IMPROVE HEALTH AND WELLNESS

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Public Health
Agency of Canada

Agence de la santé
publique du Canada

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SUMMARY

Key enablers for the Live Well redesign project were identified by the Live Well project team, community groups and organizations. The final list of 10 key enablers were determined to be modifiable and impactful in their ability to influence community health promotion capacity. Seven features, that address most of the key enablers (i.e., 80%), were identified, confirmed and prioritized for the redesign of the LWP website and CPHO Wellness Grants.

Background

Well designed, community-led health promotion actions are an essential component of enabling Prince Edward Island (PEI) residents to improve their health and wellness. Such actions are especially critical to empower equity-deserving populations (e.g., individuals living in poverty, individuals living in rural locations, gender-diverse individuals) to improve their health. Currently PEI communities need access to adequate supports and tools to enable optimal development of community-led health promotion actions.

The PEI Chief Public Health Office (CPHO) Health Promotion Team (HP Team) noticed a gap in supports available to community organizations that support health promotion actions. These gaps were identified by consultations with community organizations/groups (COG) and by reviewing previously implemented community-led health promotion projects. To address this gap, the CPHO is redesigning the Live Well PEI (LWP) website and Wellness Grant program, two components of the overall Live Well PEI strategy. The Live Well PEI strategy is much broader than the redesign of the LWP website and the Wellness Grant program, however the processes to identify enablers, explored in this document, was undertaken to specifically inform this LWP redesign project.

The redesigned website and granting program are intended to provide a suite of tools, resources and capacity to support COG to develop, implement and evaluate community-led health promotion actions. The redesign of the grant program will improve access to financial and technical supports and the redesign of the LWP website ensures access to the resources and knowledge needed to lead health promotion actions. Resulting community-led actions are ultimately anticipated to contribute to lowering rates of chronic disease and improving wellness across PEI.

Enablers

One of the first steps in the redesign project is the identification of specific enablers or influences that positively impact the ability of COG to engage in health promotion actions. These enablers are needed for COG to develop, implement and evaluate health promotion actions. This document explores the process to identify priority indicators and the initial features/tools proposed to address them. These proposed features/tools are expected to evolve with further consultation and during implementation.

To identify and prioritize enablers for inclusion in the LWP redesign project, extensive consultations were conducted. In March 2023 the HP team, other CPHO staff and other individuals engaged in the redesign project (i.e., LWP project team) were consulted to capture previously noted gaps in support available to COG and to draw on their professional knowledge/experience to identify barriers and enablers of community action. Only enablers under the influence of the LWP were considered. This consultation resulted in a list of enablers that were viewed as supportive to community-led health promotion actions. In May 2023, the LWP project team consulted with COG resulting in the confirmation and augmentation of the enablers identified by the LWP project team consultation. From these two engagements, a consensus was reached on 10 key enablers that are important to facilitate community-led health

promotion actions in the PEI context. Going forward, these 10 key enablers will inform the LWP website and CPHO Wellness Grant program redesign (i.e., LWP redesign project).

10 KEY ENABLERS OF COMMUNITY-LED HEALTH PROMOTION ACTION

CPHO Wellness Grants

All consultations indicated that a clear process to access grant resources was an essential contributor to designing, implementing and evaluating community-led health promotion actions. The CPHO Wellness Grant program needs to be modernized, improving its transparency and accessibility. In addition, a gap analysis demonstrated that some COG needed support to identify and apply for available grants. Some COG indicated a desire to have more influence in determining the priorities for the CPHO Wellness Grant program, ensuring it reflects the experiences and needs of communities across PEI.

Enablers identified:

- 1) CPHO Wellness Grant application process for community projects
- 2) CPHO Wellness Grant funding model for community projects
- 3) Communities' ability to influence the priorities for the CPHO Wellness Grants

Evidence (Data and Information)

During the community group/organization consultation it was reported that community-specific evidence (i.e., health and behaviour data) is critical to allow thoughtful consideration of priorities and health promotion options. In addition, data reflecting different populations (e.g., new immigrants, people experiencing poverty) is required to ensure that health promotion actions are prioritized and targeted appropriately (i.e., consideration and inclusion of equity deserving populations.) It was communicated that data is important when crafting convincing grant applications and is essential to promote citizen engagement and empowerment.

Evaluations allow activities to be critically appraised, with COG systematically learning from previous actions and experiences. Groups noted evaluations derived from a PEI context are most relevant, applicable and acceptable. Evaluations are anticipated to guide future community actions. Evaluations and reviews of previous health promotion actions are important to inform the CPHO Wellness Grant processes, ensuring the success of past experiences are considered when evaluating incoming grant applications.

Enablers identified:

- 4) Community organizations have access to information about the health of their communities
- 5) Learnings from community projects are captured and available

Capacity Building (Skills, Knowledge, Technical Expertise)

COG want to improve their capacity for health promotion but currently do not have adequate local resources to support this development. There is a need to equip the LWP website with adequate tools

and resources to support this capacity building. Expert staff are required to augment these online resources.

Enablers identified:

- 6) Community organizations have knowledge of how to promote health and prevent chronic disease
- 7) Community organizations have access to professionals in health promotion and epidemiology

Resources to Support Community Collaboration

COG report that awareness of current community resources is important when they plan health promotion actions, preventing duplication of services and allowing maximal use of existing services. COG recognize there are opportunities to collaborate, making actions stronger and more effective. Collaboration was recognized as especially important as resources are limited and when groups come together, they can leverage resources, knowledge and connections. COG agree that collaboration will improve the quality and sustainability of health promotion actions.

Enablers identified:

- 8) Community organizations are aware of community resources
- 9) Community organizations share knowledge, skills and opportunities with other community organizations
- 10) Community organizations collaborate and coordinate on health promotion projects

MODIFIABILITY ASSESSMENT - ENABLERS

A subset of the LWP redesign project team conducted a literature review to identify interventions that address each of the 10 key enablers. These identified interventions were used as case studies to determine how modifiable each enabler was in real life and how important the enabler was in supporting community-led health promotion actions. All 10 key enablers proved to be modifiable to a significant extent and demonstrated capacity to facilitate community-led health promotion. Following this review, all 10 enablers were confirmed by the LWP project team as suitable targets for the LWP redesign project. The results of this assessment, including examples of how each enabler could be modified during the LWP redesign, is contained in Table 1.

TABLE 1. 10 KEY (PRIORITY) ENABLERS THAT FACILITATE COMMUNITIES’ ABILITY TO LEAD PROMISING HEALTH PROMOTION ACTIONS

ENABLER NUMBER	ENABLER DESCRIPTION	DESCRIPTION OF CONSIDERATION(S) AND NEED(S) THAT ENABLER ADDRESSES	MODIFIABILITY EXAMPLES (I.E., LITERATURE DERIVED EXAMPLES OF HOW MODIFICATION CHANGED ENVIRONMENT TO IMPROVE CAPACITY)	POTENTIAL STRATEGIES TO ADDRESS ENABLER
CPHO Wellness Grants				
1	CPHO Wellness Grant application process for community projects	<p>Clearly outlined application process, including key project activities and budget.</p> <p>Time to complete application is reasonable in length and proportional to the amount of funding being offered</p> <p>Reporting requirements need to respect the time of community organizations</p>	<p>Evaluations, including community feedback, of grant processes provides useful information for improving grant process</p> <p>Making previous grant applications available increases transparency and fosters learning</p> <p>Engaging community members as grant reviewers improves grant writing skills</p>	<p>Revised and modernized CPHO Wellness Grant criteria and processes</p> <p>Online grant management system</p>
2	CPHO Wellness Grant funding model for community projects	<p>Community projects are influenced by the funding model, including amount of money, timing of money, and the objectives of the fund</p> <p>Grants should support project development, implementation and evaluation</p>	<p>Various grant models demonstrate good ability to support community action on chronic disease - from small microgrants supporting needs assessments to multi-year grants supporting interventions – multiple models were effective</p>	<p>Revised CPHO Wellness Grant structure/ criteria</p>
3	Communities’ ability to influence the priorities for CPHO Wellness Grants	<p>Communities have access to local data to support need identification (e.g. smoking rates, chronic disease rates)</p>	<p>Community health profiles inform decision-making and enhance grant proposal strength</p> <p>Intégrer des membres de la communauté aux comités d’évaluation des demandes.</p>	<p>CPHO could contribute information to an open data portal to increase availability of information</p>

Communities have access to local data that, where possible, is broken down by stratifiers like gender, income level or racial background to identify differences between groups

Data for community- specific indicators allows priorities to be explored.

Access to technical experts through website to enhance utility of evidence

Indicators allow comparison between communities and goals/standards (e.g., national standards)

Evidence (Data and Information)

4

Community organizations have access to information about the health of their communities

Communities have access to local data to support need identification (e.g. smoking rates, chronic disease rates)

Communities have access to local data that, where possible, is broken down by stratifiers like gender, income level or racial background to identify differences between groups

Community health profiles inform decision-making and enhance grant proposal strength

Data for community- specific indicators allows priorities to be explored.

Indicators allow comparison between communities and goals/standards (e.g., national standards)

CPHO could contribute information to an open data portal to increase availability of information

Access to technical experts through website to enhance utility of evidence

Learnings from community projects are captured and available

Evaluation or review of projects is important to understand what worked well, what didn't work well and what impact a project had

Info. bulletins provided an opportunity to synthesize knowledge and to value community voices/experiences – informed future programs

HP experts ensured that evaluations were used to adapt program delivery. Agencies learned from each other

CPHO Wellness Grant criteria to include a need for knowledge mobilization activities

Standardized evaluation templates

5

Grants that required evaluation at various points during operation allowed early program adaption

Access to technical experts to facilitate evaluation through website

Guidance to involve program members and recipients in developing goals, evaluation, and implementing evaluation results

Capacity Building (Skills, Knowledge, Technical Expertise)

6	Community organizations have knowledge of how to promote health and prevent chronic disease	Communities know of programs that are proven to changing environments, helping people to be healthier	Utilizing Community Based Participatory Research (CBPR) enhances adoption of context relevant interventions	Ability to sign-up for regular information updates via the website
		Communities know how to initiate community health promotion	Collaboratively developed, specifically tailored knowledge tools to disseminate information to other organizations	Best practices and/or evidence-informed intervention database
		Communities understand effective health promotion strategies	Purposeful investment in knowledge dissemination is required to maximize uptake and benefit	Access to technical experts through website
7	Community organizations have access to professionals in health promotion and epidemiology	Having access to professionals can share knowledge and resources on developing, implementing, and evaluating community projects (e.g., Health Promoters or Epidemiologists)	Technical assistance including professional development, coaching and mentoring, consultation, knowledge brokering increases community capacity, dose dependent	Access to technical experts through website.
			Technical assistance: training and educating stakeholders, support to design interventions, developing stakeholder relationships, intervention adaptation increases community capacity	

Resources to Support Community Collaboration

8	Community organizations are aware of existing community resources	Knowledge and awareness of community resources such as facilities or expertise that could support HP actions	Identifying different services and expertise in a community, such as via community asset mapping, demonstrated good utility to inform and catalyze community projects	Resources for developing asset maps on website
9	Community organizations share knowledge, skills and opportunities with other community organizations	Sharing of best practices, lessons learned and resources among staff and volunteers builds capacity and enhances success	Collaboration between organizations implementing similar projects allowed lessons learned to be shared, enhancing the quality of programs.	Ability to discuss topics on website
		Communities able to identify projects in PEI, enables connection and collaboration	Including Indigenous Knowledge in program development allows two-eyed seeing, Western and Indigenous organizations benefit from different perspectives	Ability to share information about organization's work and projects on website

10

Community organizations collaborate and coordinate on health promotion projects

Partnering with other community organizations to promote health

Projects' effectiveness increased through drawing on the expertise of other organizations. Different perspectives improve programing effectiveness.

Engaging other orgs. increases available resources and improves connections to community.

Formal partnerships allow access to specialized resources (e.g., psychiatry services in community) and opportunity to expand services into sites serving equity deserving populations.

Partnering with community organizations can provide access to volunteer resources increasing sustainability of interventions

Ability to discuss topics on website

Grant criteria – includes need to partner

Proposed features to address enablers

Potential criteria and program components for the CPHO Wellness Grant program were identified by a rapid review, augmented by jurisdictional scans and input from COG and members of the LWP project team. Following, the suggested criteria and program component options were reviewed by the HP team. The HP team proposed a comprehensive suite of criteria and program components for the CPHO Wellness Grant program. These recommendations were reviewed by the LWP project team and then by COG. A final set of grant criteria and components for the CPHO Wellness Grant program was confirmed following these consultations.

Through literature reviews, jurisdictional scans, recommendations from COG and the professional experience of the LWP project team, redesign features for the website, which addressed the key enablers, were identified. Table 2 identifies 21 proposed website features and maps them to the enabler(s) they are anticipated to impact.

TABLE 2. PROPOSED TOOLS, RESOURCES, OR SERVICE (I.E., FEATURES) FOR THE LWP WEBSITE REDESIGN PROJECT MATCHED TO THE ENABLERS THEY ARE ANTICIPATED TO IMPACT.

PROPOSED WEB-BASED TOOLS/ RESOURCES/ SERVICES	ENABLER(S) ADDRESSED
Collection of projects that have worked	6
Details of past projects that were funded by the CPHO Wellness Grant program	1, 5, 6
Online grant management system	1, 2
On-line registration for CPHO learning opportunities	Exigence opérationnelle
Online open data portal (i.e., access to reports and data tables and datasets that can be manipulated by user)	4
Information about community-specific needs	4, 7
Health Promotion newsletters or bulletins (posted online and/or sent directly to subscribers by e-mail)	4, 5, 6, 9, 10
Interactive map to visualize health information	4,8
Calendar of community health promotion events	9
Personal account/login	Fonctionnalité en ligne
Volunteer database	8
Access to Health Promoters or Epidemiologists via a web "chat function"	7
Community group/organization profiles	8, 10

CPHO-moderated online discussion forum	5, 9, 10
Links to community resources	8
Information about the CPHO Wellness Grant program: structure, process, criteria	1, 2
Mechanism to provide feedback to CPHO staff	3
Online courses provided beyond the CPHO's offerings	6
Form to enable COG to submit local health promotion content for the Live Well PEI website	5, 9
Tools and resources webpage	6
Access to Health Promoters or Epidemiologists via a contact form	7

CPHO – Chief Public Health Office

COG- Community groups and organizations

FEATURE EVALUATION

The 21 proposed features (Table 2) were systematically assessed by LWP project team to determine

- relevance to health promotion
- feasibility of implementation
- importance and impact

The assessment criteria used to assess features is detailed in Table 3

TABLE 3. CRITERIA FOR ASSESSMENT OF PROPOSED TOOLS, RESOURCES SERVICES (FEATURES)

DOMAIN	QUESTION/CONCEPT TO GUIDE ASSESSMENT
Relevance	To which domain of the Theory of Triadic Influence does tool, resource, or service map?
	Is there evidence from research, evaluation, or theory that this tool, resource or service works?
	Does this tool, resource or service currently exist for PEI community groups and organizations?
	Does this tool, resource or service align with health promotion strategies and actions?
Feasibility	What are some of the non-technical, non-cost implementation considerations (e.g. associated activities that may be required, barriers, facilitators, sustainability/ maintenance) associated with this tool, resource or service?
	How technically difficult and suitable would it be to add this tool, resource, or service to the Live Well PEI website?
	What is the cost (range) of technical and implementation requirements for this tool, resource or service?
Importance and Impacts	Impressions of community groups/organizations (from Community Workshop)
	What is the potential benefit of this tool, resource or service by itself? What is the level of certainty for each benefit?

Are there any potential drawbacks related to this tool, resource or service? What is the level of certainty for each drawback? Consider harms, which can be direct, psychological, equity-related, group/social, and opportunity, etc.

Does this tool, resource or service impact/influence or is impacted or influenced by other tools, resources or services on this list? Which ones?

Are there any equity considerations associated with this tool, resource or service? If so, what are they?

Relevance was initially assessed, and 10 features were excluded; four because they had low relevance and six because they were already included in the existing Live Well website. Next, the remaining features with high relevance (n=11) were discussed as to their feasibility; feasibility assessments were not used to eliminate features, rather input was used to inform implementation considerations. Finally, the proposed features were assessed for importance and impacts. Two features of high relevance did not proceed to this stage, because final decisions had already been reached – one already exists in another PEI organization and one is an operational requirement. Nine relevant features were assessed for importance and impact. Three of these features were determined to have low or medium importance/impact and were therefore excluded from further consideration. This resulted in six tools, resources and services being prioritized for the LWP redesign project. One operational requirement is also considered as a high priority for LWP redevelopment. The summary assessment of each proposed feature is reported in Table 4.

TABLE 4. PROPOSED TOOLS/RESOURCES/SERVICES FOR THE LWP REDESIGN PROJECT

PROPOSED WEB-BASED TOOLS/ RESOURCES/ SERVICES	RELEVANCE	IMPORTANCE & IMPACT	FEASIBILITY	FINAL PRIORITY RATING
Collection of projects that have worked	High	High	High	High
Details of past projects that were funded by the CPHO Wellness Grant program	High	High	High	High
Online grant management system	High	NR	TBD	High
Online registration for CPHO learning opportunities	High	High	High	High (operational requirement)
Online open data portal (i.e., access to reports and data tables and datasets that can be manipulated by user)	High	High	High	High
Information about community-specific needs	High	High	High	High
Health Promotion newsletters or bulletins (posted online and/or sent directly to subscribers by e-mail)	High	High	Mixed	High
Interactive map to visualize health information	High	Low to Medium	Medium	Low-Excluded
Calendar of community health promotion events	High	Low	Low	Low-Excluded

Personal account/login	High	Low	Low to Medium	Low-Excluded
Volunteer database	High	NR	NR	No additional development as already exists
Access to Health Promoters or Epidemiologists via a web "chat function"	Low	NR	NR	Low-Excluded
Community group/organization profiles	Low	NR	NR	Low-Excluded
CPHO-moderated online discussion forum	Low	NR	NR	Low-Excluded
Links to community resources	Low	NR	NR	No additional development as already exists
Information about the CPHO Wellness Grant program: structure, process, criteria	Already exists on website	N/A	N/A	No additional development as already exists
Mechanism to provide feedback to CPHO staff	Already exists on website	N/A	N/A	No additional development as already exists
Online courses provided beyond the CPHO's offerings	Already exists on website	N/A	N/A	No additional development as already exists
Form to enable COG to submit local health promotion content for the Live Well PEI website	Already exists on website	N/A	N/A	No additional development as already exists
Tools and resources webpage	Already exists on website	N/A	N/A	No additional development as already exists
Access to Health Promoters or Epidemiologists via a contact form	Already exists on website	N/A	N/A	No additional development as already exists

CPHO- Chief Public Health Office

COG- Community organization/group

NR - Not ranked

Final features for redesign project

The six features that received high ratings for relevance and importance/impacts and the one feature that was a critical operational requirement were assessed for relevance and acceptability at workshops with the LWP project team and COG. This consultation focused on co-designing each proposed feature, specifying how it would function, challenges/barriers community groups and organizations would face and understanding the benefits the feature would provide. This consultation confirmed the suitability and preference for these seven features. These seven features will be included on the redesigned LWP

website and are captured in the Theory of Change for the LWP redesign project and CPHO Wellness Grant program (reference below).

The features prioritized to be included in the redesign of the website or the redevelopment of the CPHO Wellness Grant (n=7) will address eight of the 10 identified enablers (i.e., 1,2,4,5,6,7,9,10). The remaining two enablers (i.e., 3 and 8) are currently being adequately addressed by functionality that is currently available on the LWP website.



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