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Evaluation Framework - Joint Consortium for School Health

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Introduction

In 2005, Canada's ministers responsible for health and education pioneered a new approach to improving health and learning for school-aged children and youth: the Pan-Canadian Joint Consortium for School Health (JCSH). They recognized that, statistically, young people were at risk for a range of physical, psychological, and behavioural problems – and that these kinds of issues have major implications not only for learning, but also for health care costs.

Today, the JCSH comprises the Ministries of Education and Ministries responsible for Health and / or Wellness in 12 of the 13 provinces and territories¹. The federal government also supports the work of the Consortium, with the Public Health Agency of Canada (PHAC) serving in a funding and advisory capacity.

JCSH is uniquely positioned to facilitate and initiate collaboration across the health and education sectors. The Consortium provides leadership and support to its member governments, enabling the education and health sectors to work together more efficiently and effectively while building system capacity for the promotion and integration of health in the school setting. Among its provincial and territorial membership, it is considered a stable platform to which different jurisdictions and sectors can turn in the face of ever-changing priorities, agendas, and emerging trends.

The Consortium focuses on priority areas of FPT Ministers of Health, as well as the Council of Ministers of Education, Canada – all of which have key implications for the health and learning outcomes for students, such as healthy weights, mental health and academic achievement. The JCSH fulfills its mission and mandate through activities related to four key goals. These goals are:

- 1. **Leadership**: To advance the principles of comprehensive school health through policy, practice, and research.
- 2. **Knowledge Development and Exchange**: To build, share, and leverage knowledge to support the learning, health, and well-being of children and youth in Canada.
- 3. **Capacity Building**: To enable member jurisdictions to advance a comprehensive school health approach to support optimal learning, health, and well-being.
- 4. **Monitoring, Evaluation and Accountability**: To develop and implement a comprehensive evaluation framework for the goals, strategies, and action plans of the JCSH 2015-2020 Strategic Plan.

¹ While Quebec is not a member, it intends to contribute to the work of the Consortium through sharing information and best practices.

Evaluation Framework - Joint Consortium for School Health

This document contains the evaluation framework for the JCSH to outline the indicators and data collection tools that will be used to measure progress towards the organization's outcomes, which are described in the logic model also contained in this document.

Outcomes

The JCSH has committed to three long-term outcomes. They are defined in the JCSH Strategic Plan 2015-2020 as follows:

- Increased System Capacity, Collaboration, and Efficiency
- Increased Research Coordination
- Increased Inter-Sectoral Action between Education and Health

The following page provides an overview of the JCSH in a Logic Model that shows at a high level how the activities of the organization contribute to outputs and Short-term outcomes that are intended to lead to accomplishment of the longer term outcomes.

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Pan-Canadian Joint Consortium for School Health Logic Model

Components	Leadership	Knowledge Development and Exchange	Capacity Building	Monitoring, Evaluation & Accountability
Activities	 Align F/P/T work across Health and Education Ministries Develop communication materials on key school health issues Identify and develop new partnerships. Support the comprehensive school health needs of diverse populations 	 Develop comprehensive school health research strategy. Share emerging trends in research that relate to comprehensive school health Identify school health research needs Facilitate dialogue among school health research partners Advocate for increased research funding to support research into comprehensive school health Support evidence informed policy and practice related to comprehensive school health Develop and promote the use of JCSH resources to support knowledge uptake 	 Adapt JCSH resources and tools to broaden the application to a wider range of populations and settings Identify and share across jurisdictions best practices related to curricula renewal Support external partners in using a comprehensive school health approach. Identify and share success stories of use of a comprehensive school health framework 	16. Develop and implement an evaluation framework and monitoring plan to evaluate progress on the strategic plan 17. Write midterm and final evaluation reports summarizing the impact of the JCSH over the term of the strategic plan
Outputs	 Common briefing notes Common key messages New partnerships exist with organizations: in the health and wellness field in sectors other than health and education in northern and remote communities in the non-government sector JCSH is the conduit for communications and engagement on national issues on school health Equity lens identified and applied to JCSH resources 	 Comprehensive school health research strategy School health research trends identified Reports/summaries of current research trends disseminated Meetings with school health research funders Coordinated approaches to school health research implemented JCSH tools created to support knowledge exchange within and among jurisdictions 	 Adapted JCSH resources and tools to support use with diverse populations and settings Best practices on curricula renewal identified and disseminated Resources created to support external partners in adopting a comprehensive school health approach Success stories identified and disseminated 	16. Evaluation framework and monitoring plan17. Mid-term evaluation report18. Final evaluation report
Short-term Outcomes	1. Alignment in work on comprehensive school health across Health and Education Ministries within each jurisdiction and across jurisdictions 2. JCSH resources reflect the needs of diverse populations 3. Increased knowledge of ways in which comprehensive school health aligns with First Nations/Inuit/Metis approaches to wellness 4. Increased range of partners who align with the work of JCSH	 Increased school health research funding opportunities Increased knowledge among members about best evidence related to comprehensive school health Jurisdictions develop policy based on evidence related to comprehensive school health Increased utilization of JCSH resources by a broader range of organizations serving diverse populations/settings Increased number of external partners reflecting a comprehensive school health approach in their own resources and strategies 		10. Adjustments to the operating plan are made mid-term based on results of the mid-term evaluation11. Final evaluation report supports future planning for the JCSH
Long-term Outcomes	 Increased system capacity, collaboration and efficience. Increased research coordination. Increased inter-sectoral action between health and 			

Purpose of the Evaluation

The main purpose of the evaluation framework is to assess progress towards the three long-term outcomes of the JCSH. The evaluation will also provide insight into lessons learned about the work of the JCSH and the future operation of the JCSH beyond 2020.

The main audiences for the information generated as a result of the evaluation include:

- Deputy Ministers of Health and Education of the member jurisdictions of the JCSH;
- Public Health Agency of Canada;
- Management Committee and School Health Coordinators' Committees of the JCSH, and
- JCSH Secretariat.

Evaluation Questions and Indicators

The evaluation matrices on the following pages outlines the key evaluation questions, indicators, and data sources for acquiring the information related to the indicators. In many cases, an evaluation question relates to more than one because aspects of each outcome are intertwined.

Evaluating networks such as the JCSH is an emerging field in the public administration and evaluation literature. Current thought leaders emphasize the importance of measuring both processes and outcomes to effectively assess the progress of a network. In particular, the foundation of networks is the quality of the relationships that exist within the network, so an evaluation of network effectiveness must include some focus on network process and structure.^{2,3} For this reason, there are questions included in the evaluation matrix that are aimed at gaining a better understanding of the network structure and process as well as outcomes.

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² Popp J. et al. 2013. Inter-organizational Networks: A Critical Review of the Literature to Inform Practice.

³ Herranz, J. 2009. Multilevel performance indicators for multisectoral networks and management. American Society for Public Administration; 40: 445.

Short-term Outcome Evaluation Matrix

	Evaluation Question	Indicators	Data Collection Tools	
	Short-term Outcome 1: Alignment in work on comprehensive school health across Health and Education Ministries within each jurisdiction and across jurisdictions			
a.	What are examples of work or issues on which health and education ministries have been aligned <i>within</i> jurisdictions?	Examples of alignment on school health issues within jurisdictions	Focus Group: StaffInterviews: Members	
b.	What are examples of work or issues on which health and education ministries have been aligned <i>across</i> jurisdictions?	Examples of alignment on school health issues across jurisdictions	Focus Group: StaffFocus Group: School Health Coordinators	
c.	What is the role of the JCSH in enabling alignment within or across ministries?	Perception of the contribution of JCSH	 Focus Group: School Health Coordinators Interviews: Members Focus Group: Staff 	
Sho	rt-term Outcome 2: JCSH resources reflect the needs of dive	erse populations	•	
a.	How does the JCSH assess needs of diverse populations to determine who best to address those needs?	Number, type and frequency of methods used to assess needs	Focus Group: Staff	
b.	What are examples of resources that address the needs of diverse populations?	 Number and type of resources designed to meet the needs of diverse populations Methods used to assess the extent to which members of diverse populations believe their needs are addressed in JCSH resources 	Focus Group: StaffDocument review	
	rt-term Outcome 3: Increased knowledge of ways in which of ions/Inuit/Metis approaches to wellness	comprehensive school health alignment	ns with First	
a.	Have School Health Coordinators, JCSH staff and members	Self-perceived knowledge	Focus Group: School Health	

	Evaluation Question	Indicators	Data Collection Tools
	increased their knowledge of ways in which comprehensive school health aligns with First Nations/Inuit/Metis approaches to wellness?	change about ways in which comprehensive school health aligns with First Nations/Inuit/Metis approaches to wellness	Coordinators • Focus Group: Staff • Interviews: Members
b.	How has knowledge ways in which comprehensive school health aligns with First Nations/Inuit/Metis approaches to wellness impacted the work of School Health Coordinators, JCSH staff and members?	Examples of how ways in which comprehensive school health aligns with First Nations/Inuit/Metis approaches to wellness have impacted the work of the JCSH and member jurisdictions	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members
Sho	rt-term Outcome 4: Increased range of partners who align w	rith the work of JCSH	
a.	How has the range of JCSH partners changed since 2014?	 Examples of new partners within: the health and education sectors in sectors other than health and education in northern and remote communities in the non-government sector 	 Focus Group: School Health Coordinators Focus Group: Staff
b	Has the relationship with existing partners changed, and if so, how?	• Ways in which partnerships that existed in 2014 have changed in 2017 and 2020	Focus Group: School Health CoordinatorsFocus Group: Staff
С	How have new partners impacted the work of the JCSH and jurisdictions?	Perceived benefits of working with new partners	Focus Group: School Health CoordinatorsFocus Group: Staff

	Evaluation Question	Indicators	Data Collection Tools
d.	How has the work of the JCSH impacted the work of partners?	Examples of how JCSH has impacted the work of partners	 Interviews: Members Interviews: Partners Focus Group: Staff Interviews: Partners
Sho	rt-term Outcome 5: Increased school health research fundir	ng opportunities	
a	Has the number of school health research funding opportunities increased since 2014?	 Number and type of school heath research funding opportunities Perceived contribution of JCSH in achieving an increased number of school health research opportunities 	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members Interviews: Research Partners
Sho	rt-term Outcome 6: Increased knowledge among members	about best evidence related to cor	nprehensive school health
а	Have School Health Coordinators, JCSH staff and members increased their knowledge about best evidence related to comprehensive school health?	Self-perceived knowledge change about best evidence related to comprehensive school health	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members
b	How has knowledge about best evidence related to comprehensive school health impacted the work of School Health Coordinators, JCSH staff and members?	Examples of how knowledge change about best evidence related to comprehensive school health have impacted the work of the JCSH and member jurisdictions	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members
Sho	rt-term Outcome 7: Jurisdictions develop policy based on ex	,	school health
a	What are examples of jurisdictional policies that were developed considering evidence related to comprehensive	Examples of policies developed based on evidence related to comprehensive	Focus Group: School Health CoordinatorsFocus Group: Staff

	Evaluation Question	Indicators	Data Collection Tools
	school health?	school health	Document review
b	What was the role of the JCSH in making evidence available for use by jurisdictions?	Role of JCSH in providing evidence to jurisdictions	Focus Group: School Health CoordinatorsFocus Group: Staff
	rt-term Outcome 8: Increased utilization of JCSH resources ulations/settings	by a broader range of organization	ons serving diverse
a	What are examples of organizations that have used JCSH resources and how have they used them?	Examples of organizations that used JCSH resources and how they have used them (note: "organizations" includes JCSH members)	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Partners
b	How many organizations service diverse populations use JCSH resources compared to 2015?	Number and type of organizations using JCSH resources in 2015, 2017 and 2020	Document reviewFocus Group: Staff
	rt-term Outcome 9: Increased number of external partners ources and strategies	reflecting a comprehensive school	health approach in their own
a	How many external partners use a comprehensive school health approach as a result of their interaction with the JCSH?	Number and type of external partners using a comprehensive school health approach	Document reviewInterviews: Partners
Sho	rt-term Outcome 10: Adjustments to the operating plan are	made mid-term based on results	of the mid-term evaluation
a	What adjustment were made to the operating plan mid-term if any and why?	 Number and type of adjustments to operating plan Rationale for adjustments to the operating plan 	Focus Group: StaffInterviews: MembersDocument review

	Evaluation Question	Indicators	Data Collection Tools
Sho	rt-term Outcome 11: Final evaluation report supports future	planning for the JCSH	
a	How will the final evaluation report be used?	Ways in which the evaluation report will be shared and utilized	Focus Group: StaffInterviews: Members

Long-term Outcome Evaluation Matrix

	Evaluation Question	Indicators	Data Collection Tools
Lon	g-term Outcome 1: Increased system capacity, collaborat	ion and efficiency	
a	Have cost efficiencies been realized because of the work of the JCSH, and if so can they be quantified?	Examples of cost efficiencies (e.g. collaborative development of resources)	 Document review (budgets, briefing notes, annual reports) Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members Interviews: Partners Interviews: Research partners
b	Does the JCSH enable members to achieve benefits that they could not achieve independently for the same cost and effort? If yes, how?	Member perception of unique benefits provided by JCSH	 Focus Group: School Health Coordinators Interviews: Members Electronic Survey (members, partners)
С	What are the benefits of having a collective voice for school health in Canada?	Perception of benefits of having a collective voice for school health	Focus Group: School Health CoordinatorsInterviews: Members

Evaluation Question		Indicators	Data Collection Tools
			 Interviews: External Partners Focus Group: Staff Interviews: Research Partners
d To what extent does the JCSH fulfill collective voice for school health?	the role of providing a	 Extent to which JCSH is perceived as the collective voice for school health 	Electronic survey (members, partners)
e How effective are the collaborative process the indicators are selected factors from Inventory) ⁴	•	Extent to which JCSH is perceived to have: o shared vision o understandable attainable goals and objectives o unique purpose o skilled leadership o open and frequent communication o clear roles and policy guidelines o adaptability o flexibility o legitimacy o mutual respect and trust among members o ability to compromise	Electronic Survey (members, partners)
f Are there opportunities to improve of JCSH?	ollaboration within the	Opportunities for improving collaboration	Focus Group: School Health CoordinatorsInterviews: Members
			Focus Group: Staff

⁴ Mattessich P., Murray-Close M., & Monsey B. 2001. Wilder Collaboration Factors Inventory. St. Paul, MN: Wilder Research.

	Evaluation Question	Indicators	Data Collection Tools
Lon	g-term Outcome 2: Increased research coordination		
а	Has a coordinated research agenda been developed for school health research?	Number and type of partners engaged in developing and implementing a coordinated research agenda	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members Interviews: Research Partners
ь	What have been the benefits of having a coordinated research agenda?	Examples of benefits	Focus Group: StaffInterviews: Research Partners
Lon	g-term Outcome 3: Increased inter-sectoral action betwe	en health and education	
a	To what extent has JCSH enabled inter-sectoral action between health and education within member jurisdictions?	stakeholder perception of impact of JCSH on inter- sectoral action at the provincial/territorial level	 Electronic survey (members, partners) Focus Group: Staff Interviews: Members Interviews: External Partners
Ь	To what extent do stakeholders believe JCSH has enabled inter-sectoral action between health and education <i>across</i> provinces and territories?	stakeholder perception of impact of JCSH on inter- sectoral action across provinces and territories	 Electronic survey (members, partners) Focus Group: Staff Interviews: Members Interviews: External Partners
С	How has the JCSH enabled inter-sectoral action between health and education across provinces and territories?	examples of inter-sectoral action between education and health across provinces and territories	 Focus Group: Staff Interviews: Members Interviews: External Partners

Other Evaluation Questions

	Evaluation Question	Indicators	Data Collection Tools
a	Is there a legitimate and necessary role for the JCSH beyond 2020? If so, what should that role be?	perceptions about need for and role of JCSH in the future	 Focus Group: School Health Coordinators Focus Group: Staff Interviews: Members Interviews: External Partners Interviews: Research Partners Electronic survey (members, partners)
b	To what extent are the activities of the JCSH aligned with the priorities of F/P/T governments?	Degree of alignment with member priorities	Interviews: Members
С	If the mandate of the JCSH were to be expanded beyond 2020, what should the priorities for action be for the next five year mandate?	Future priorities for JCSH	 Focus Group: Staff Interviews: Members Interviews: Partners Interviews: Research Partners Focus Group: School Health Coordinators
d	Is the current organizational and membership structure of the JCSH effective?	 Description of current organizational and membership structure Challenges with the current organizational and membership structure Opportunities to improve the current organizational and membership structure 	 Document review Focus Group: Staff Interviews: Members Interviews: Partners Focus Group: School Health Coordinators Interviews: Research Partners
е	How effectively are the results of JCSH activities communicated to stakeholders?	Effectiveness of communication mechanisms	Document reviewFocus Group: Staff

	Evaluation Question	Indicators	Data Collection Tools
		used to share information about JCSH activities	 Interviews: Members Interviews: Partners Interviews: Research Partners Focus Group: School Health Coordinators
f	What are the key lessons learned about the work of the JCSH in the past five years?	Lessons learned	 Focus Group: Staff Interviews: Members Focus Group: School Health Coordinators

Data Collection Sources

The evaluation matrix describes in details the key evaluation questions, and the data sources that will be used to collect the data for each indicator. This section describes each of the data sources in greater detail.

- **Document Review**: The evaluators will use a document review template to guide the collection of data during the review of key documents (including but not limited to budgets, briefing notes, annual reports, minutes, evaluation reports).
- **Electronic Survey**: An electronic survey will be created and the link distributed broadly to all of the members and external partners of the JCSH to ensure there is a broad opportunity for input into the evaluation.
- Focus Group School Health Coordinators: A focus group will be conducted by the evaluators at a meeting of the School Health Coordinators. A semi-structured focus group guide will be used by the moderator. Verbal informed consent will be obtained prior to data collection.
- Focus Group Staff: A focus group will be conducted by the evaluators via teleconference or in person. A semi-structured focus group guide will be used by the moderator. Verbal informed consent will be obtained prior to data collection.
- Interviews Members: Telephone interviews will be conducted with representatives of members of the JCSH (members of the Management Committee and/or School Health Coordinators). Members to be interviewed will be identified collaboratively with JCSH staff, and will be contacted via e-mail and invited to schedule an interview. A semi-structured interview guide will be used by the moderator. Ideally the interviews will happen after the focus groups to enable interview questions to be adjusted to provide for greater depth of information based on information gathered during the focus groups. Copies of the interview questions will be precirculated to interviewees. Verbal informed consent will be obtained prior to data collection. Interviews will be recorded and transcribed to assist in data analysis.
- Interviews Partners: Telephone interviews will be conducted with key partners of the JCSH. Partners will be identified by staff. Partners will be contacted via e-mail and invited to schedule an interview. A semi-structured interview guide will be used by the moderator. Copies of the interview questions will be pre-circulated to interviewees. Verbal informed consent will be obtained prior to data collection. Interviews will be recorded and transcribed to assist in data analysis.

- Interviews Research Partners: Telephone interviews will be conducted with key research partners of the JCSH. Research partners will be identified by staff. Partners will be contacted via e-mail and invited to schedule an interview. A semi-structured interview guide will be used by the moderator. Copies of the interview questions will be pre-circulated to interviewees. Verbal informed consent will be obtained prior to data collection. Interviews will be recorded and transcribed to assist in data analysis.
- Interviews External Partners: Telephone interviews will be conducted with key external partners of the JCSH, with an emphasis on partnerships established after 2014 and partnerships established that have broadened the scope of the JCSH's reach. Partners will be contacted via e-mail and invited to schedule an interview. A semi-structured interview guide will be used by the moderator. Copies of the interview questions will be pre-circulated to interviewees. Verbal informed consent will be obtained prior to data collection. Interviews will be recorded and transcribed to assist in data analysis.

Data Analysis and Reporting

All qualitative data will be thematically coded using a coding structure based on the five outcomes. Quantitative data from the electronic survey will be ordinal data, and descriptive statistics will be used for analysis.

Before the evaluation report is finalized, the findings of the evaluation will be summarized and presented to the Evaluation Committee via teleconference for discussion and feedback, and to enable mutual development of recommendations based on the findings.