

# 2009-2010 Gap Analysis & Improvement Plan: Reproductive Health & Prevention of Disabilities Core Public Health Program



# **2009-10 Gap Analysis & Improvement Plan: Reproductive Health & Prevention of Disabilities Core Public Health Program**

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In collaboration with the PHSA Centre for Women's  
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## Executive Summary

In 2005, the BC Ministry of Health (now the Ministry of Healthy Living and Sport) released a policy framework to support the delivery of effective public health services. *The Framework for Core Functions in Public Health* identifies 20 core programs that a renewed and comprehensive public health system must provide. This document provides a gap analysis and improvement plan for the Reproductive Health & Prevention of Disabilities Model Core Program for the Provincial Health Services Authority (PHSA). The key objectives of this core program are to enhance protective factors linked to improved reproductive outcomes for women and men of childbearing age; to prevent and/or reduce risk factors for pregnant women and their babies; to reduce pre-term births, low birth weights and congenital defects and disabilities; and to increase the rate of births with healthy birth weights.

In 2009, the PHSA Centres for Population & Public Health were launched as part of PHSA's commitment to advancing population and public health in BC. By implementing a coordinated approach to primordial and primary prevention, the Centres provide a venue to leverage expertise across PHSA agencies and Programs, facilitate knowledge transfer and collaboration, and coordinate PHSA's response to the Core Public Health Program requirements. The PHSA Centre for Women's Health (CWH) has undertaken the responsibility for developing the gap analysis and improvement plan for the Reproductive Health and Prevention of Disabilities Core Public Health Program. The CWH consists of representatives from across PHSA agencies and programs including BC Women's Hospital & Health Centre, BC Perinatal Health Program, BC Cancer Agency, BC Centre for Disease Control, BC Mental Health and Addiction Services, and the Aboriginal Program.

This gap analysis and improvement plan identifies strengths on which the CWH can build to achieve the aims of the model core program as well as challenges in the current capacity to achieve the full scope of the four components of the program. Priorities for 2010-2013 have been identified under each component.

### **Leadership and Strategic Planning:**

- Identify strategic areas of focus for the CWH, consistent with PHSA Strategic Plan and CPPH priorities
- Clarify roles and responsibilities for PHSA agencies and programs represented within the CWH
- Clarify roles, responsibilities and relationships of CWH with external partners including Ministry of Healthy Living & Sport and regional health authorities.
- Develop collaborations with external organizations (e.g. NGOs)

### **Health Promotion:**

- Identify opportunities to leverage existing projects and programs across PHSA agencies and programs.

### **Delivery of Prevention Programs:**

- Collaborate with stakeholders to develop an approach to preconception health for both men and women.
- Collaborate with stakeholders to explore opportunities to develop a sexual health framework for BC.

**Surveillance, Monitoring and Program Evaluation:**

- Identify opportunities to leverage expertise across PHSA agencies and programs.

**All Components**

- Identify opportunities for population and public health within Perinatal Services BC.

The CWH will also link with other Centres and core program initiatives as they relate to the core program in reproductive health and prevention of disabilities in order to identify opportunities for collaboration, coordination and joint action.

## Introduction

In 2005, the BC Ministry of Health (now the Ministry of Healthy Living and Sport) released a policy framework to support the delivery of effective public health services. *The Framework for Core Functions in Public Health* identifies 20 core programs that a renewed and comprehensive public health system must provide. Evidence reviews are conducted for each core program to inform Model Core Program Papers, against which each health authority is responsible to perform a gap analysis and develop an improvement plan.

This document provides a gap analysis and improvement plan for the Reproductive Health & Prevention of Disabilities Model Core Program from the perspective of the Provincial Health Services Authority (PHSA). The key objectives of this core program are to enhance protective factors linked to improved reproductive outcomes for women and men of childbearing age; to prevent and/or reduce risk factors for pregnant women and their babies; to reduce pre-term births, low birth weights and congenital defects and disabilities; and to increase the rate of births with healthy birth weights.

The program outlines four core components through which health authorities can support these objectives:

### **Component 1 - Leadership and Strategic Planning**

Develop a comprehensive, multi-sectoral strategy, including policies, regional priorities and partnerships to enhance programs for reproductive health and prevention of disabilities, based on regional and community needs assessment.

### **Component 2 - Health Promotion**

Advocate for healthy public policies, development of enhanced public education and social marketing, as well as strengthened community development and community capacity building.

### **Component 3 - Delivery of Prevention Programs**

Direct delivery of a range of universal and targeted public health programs along with collaborative services delivered by health care partners and community organizations, including: Preconception / Interconception programs, Prenatal programs, Postpartum programs, and Aboriginal Program delivery.

### **Component 4 - Surveillance, Monitoring and Program Evaluation**

Identify trends, needs and priorities, and evaluate program success in optimizing maternal and infant outcomes.

The purpose of this document is to present the PHSA's gap analysis and improvement plan in relation to the components listed above to its stakeholders and provincial partners over a three-year period, 2010-2013, as they relate to reproductive health and the prevention of disabilities.

Given the overlapping scope with other Core Public Health Programs (including Healthy Infant/Child; Healthy Child/Youth; Healthy Living; Healthy Communities; and Communicable Disease Prevention) this gap analysis and improvement plan has been developed within the parameters defined by the Reproductive Health and Prevention of Disabilities Core Program. However, it is critical to note that many other core programs may be reviewed with a sex and gender lens in order to target activities appropriately and effectively to improve reproductive health for both women and men. Future work for the Centre for Women's Health (CWH), the PHSA entity responsible for this analysis and plan, will include developing linkages with these other core programs.

## Background

PHSA's Strategic Plan 2010-2013 identifies Promoting Healthier Populations as one of three key strategic directions for PHSA, along with Creating Quality Outcomes and Better Value for Patients, and Contributing to a Sustainable Health Care System. Many of PHSA's initiatives in Population & Public Health align with all three strategic directions.

In 2009, the PHSA Centres for Population & Public Health (see Appendix A) were launched as part of the commitment made by PHSA's Executive Leaders' Council and Board to advance population and public health in BC. By implementing a coordinated approach to primordial and primary prevention, the Centres provide a venue to leverage expertise across PHSA agencies and programs, facilitate knowledge transfer and collaboration, and coordinate PHSA's response to the Core Public Health Program requirements.

The Centres for Population & Public Health consist of nine Centres focused on key population and public health areas including:

- Communicable Disease Prevention
- Environmental Health
- Chronic Disease Prevention
- Mental Health Promotion
- Injury & Violence Prevention
- Health Emergency Management
- Children & Youth
- Women's Health
- Aboriginal Health

The Centres provide a mechanism for PHSA to internally coordinate primordial and primary prevention activities and link with external agencies to address issues across the province. The Centres are responsible for:

- Leveraging expertise and knowledge of key agencies.
- Developing gap analyses and performance improvement plans for Core Public Health Programs and report on progress of the plans.
- Collaborating on planning, implementation and evaluation of population and public health primary prevention projects funded by PHSA.
- Being a point of contact with external groups, including health authorities, government, community groups, aboriginal groups and other stakeholders; and providing support to these groups in addressing province-wide needs through knowledge synthesis, transfer and exchange, coordination/facilitation of surveillance, consistent messaging, supporting healthy public policy and expert advice.
- Being a point of contact with academic institutions and a venue for coordinating and expanding academic initiatives in population and public health.

## Context

The PHSA Centre for Women's Health has undertaken the responsibility for developing the gap analysis and improvement plan for the Reproductive Health and Prevention of Disabilities Core Public Health Program. The PHSA Centre for Women's Health consists of representatives from across PHSA agencies and programs including BC Women's Hospital & Health Centre, BC Perinatal Health Program, BC Cancer Agency, BC Centre for Disease Control, BC Mental Health and Addiction Services, and the Aboriginal Program (see Appendix B for membership list). The Centre is co-led by representatives from the BC Perinatal Health Program and BC Women's Hospital & Health Centre to reflect the importance of perinatal health within the overall spectrum of women's health and to signal the intent of the Centre to ensure that both traditional reproductive health issues and the broader spectrum of women's health issues are understood to be the purview of the Centre. Centre members have expertise across the spectrum of women's health issues and expertise in population and public health.

### *PHSA Agencies and Mandates Relating to Reproductive Health*

PHSA is responsible for ensuring that high quality specialized services and programs are coordinated and delivered within the regional health authorities. PHSA operates eight provincial agencies including: BC Mental Health & Addiction Services, BC Children's Hospital, BC Women's Hospital, BC Centre for Disease Control, BC Cancer Agency, BC Renal Agency, BC Transplant and Cardiac Services BC.

The Centres for Population and Public Health (described previously) supported by the Population and Public Health Program, coordinate population and public health activities across PHSA agencies and programs.

**BC Women's Hospital & Health Centre** is the only facility in BC devoted primarily to the health of women, newborns and their families. This agency provides a broad range of primary, secondary, tertiary and quaternary health services that address the health needs of women of all ages and backgrounds. As one of Canada's busiest maternity services, BC Women's serves as the provincial resource for high-risk maternity and neonatal care. In addition to direct service delivery, BC Women's strives to provide excellence in education, training and research to support health care providers and policy development at provincial, national and international levels.

BC Women's offers a range of specialized outpatient programs delivered on-site and through outreach, many in collaboration with community partners. Some of these specialized services include:

- CARE (Comprehensive Abortion and Reproductive Education) program;
- Fir Square Care Unit, which provides specialized care for substance-using pregnant women and substance-exposed babies;
- Aurora Centre, a residential and day treatment for women recovering from substance dependence;
- Women Abuse Response Program, a training, resources consultation and clinical support for health care providers;
- Sexual Assault Service, which provides provincial training on best practices to support survivors of sexual assault;

- Training for health care professionals to strengthen counseling related to alcohol use in pregnancy (a component of the Ministry's Healthy Choices in Pregnancy);
- Nurse Practitioner Community Outreach, which provides primary care for women facing multi-barriers;
- The Aboriginal Women's Program, a community nurse training and women's wellness outreach clinics for on-reserve populations;
- The Access Clinic, a sexual health and screening for women challenged with disabilities;
- The Asian Women's Health Clinic, a cervical screening and breast health services provided by Asian-speaking healthcare providers in partnership with community agencies;
- The Diagnostic Ambulatory Program, which provides maternity-related outpatient services providing primary to tertiary-level consultation and care;
- BC Women's oversees the contract management of OPTIONS for Sexual Health, a province-wide organization responsible for the training, education and service delivery in the area of sexual health promotion; and
- Specialized services for women and children with HIV/AIDS, prenatal genetic screening, fetal diagnosis and treatment service, care of pregnant women with complex medical conditions.

**BC Centre for Disease Control (BCCDC)** provides provincial and national leadership in public health through surveillance, detection, treatment, prevention and consultation services. The Centre provides both direct diagnostic and treatment services for people with diseases of public health importance, including sexually transmitted infections and HIV and analytical and policy support to all levels of government and health authorities. BCCDC investigates and evaluates the occurrence of communicable diseases in BC and is the provincial reporting centre for reportable cases and categories of communicable diseases. In addition, the Centre creates opportunities for scientists, health professionals, universities and other partners to contribute their knowledge and experience in resolving the outstanding health challenges facing British Columbians. Leading through research, innovation and action, the BCCDC is dedicated to embedding a culture of quality and safety into all aspects of its programs. BCCDC works closely with partner health authorities, health professions and other stakeholders to continually improve patient safety and quality of services.

**BC Mental Health & Addiction Services (BCMHAS)** provides a diverse range of provincial specialized and tertiary mental health and addiction services for children, adolescents and adults across the province. Working with the regional health authorities, BCMHAS ensures that everyone in the province has access to the kind of specialized health services they need, when they need them, regardless of where they live. In addition to providing these clinical services, BCMHAS also provides provincial leadership for system wide improvement through its work in health promotion and illness prevention; knowledge exchange; and research and academic teaching. Recognizing that people with mental health challenges may also have co-occurring issues with substance use, the assessment and treatment of addictions is an integral part of the agency's programs. With regard to the specifics of the Reproductive Health Core program, BCMHAS mandate includes responsibility for the Provincial Reproductive Mental Health Program.



**BC Centre of Excellence for Women's Health (BCCEWH)** has been hosted by BC Women's Hospital & Health Centre since it was established in 1996. The BCCEWH conducts research and knowledge translation on the determinants of women's health, and receives funding from governmental sources and competitive research granting agencies. Since its inception, the BCCEWH has become known as a leader in women and addictions (including tobacco), mental health, health promotion and women's health surveillance. The BCCEWH has provided BC Women's with support for its population and public health mandates, as well as serving as a partner on key women's health initiatives such as the Provincial Women's Health Strategy and Provincial Women's Health Network. BCCEWH staff are supporting the development of the Provincial Health Officer's Report on women's health due to be released in late 2010.

**Women's Health Research Institute** In March 2005, the Women's Health Research Institute (WHRI) was established by BC Women's Hospital & Health Centre. WHRI is devoted to advancing the health of women, newborns and families. By fostering a collaborative and inclusive environment where investigators can examine women's unique health circumstances, the WHRI can help women live better, healthier lives. Many of the researchers at WHRI divide their time between engaging in studies and providing direct care to patients. Their hospital base bridges the gap between research and its application.

As a research partner of PHSA, WHRI operates as a not-for-profit society governed by a volunteer Board of Directors. While located at BC Women's the mandate of WHRI is to facilitate province-wide women's health research with the support of the University of British Columbia. The aim of WHRI is to lead a visionary research agenda to positively impact the lives of women and girls.

**Perinatal Services BC** Historically, the BC Perinatal Health Program has provided leadership for perinatal health throughout the province (including specialized perinatal services since 2007) through collaboration with health authorities and educational support for hospitals, community agencies, academic institutions and health care interdisciplinary practitioners across BC. The mandate has been to support excellent, best practice maternity and perinatal care across the continuum for women and infants in BC by collaborating with a wide variety of provincial and national stakeholders through the following:

- Collecting and analyzing perinatal data to evaluate outcomes
- Developing consensus on best practice and care guidelines
- Clarifying appropriate perinatal care provider roles and skill levels
- Promoting and facilitating inter-professional outreach education
- Consulting and liaising with providers and facilities
- Promoting perinatal care networks within the province

In the new fiscal 2010/2011 year, a new revised perinatal collaborative under the name of Perinatal Services BC (PSBC) supported by a central secretariat, a provincial oversight council and a variety of task-specific working groups will evolve. PSBC will replace existing provincial structures and be established to serve in a coordinating role on a provincial basis. The PSBC collaborative will be under the overall direction of PHSA. PSBC will have the authority and resources to provide strategic leadership to the perinatal health system in order to coordinate, plan and lead system-wide changes, to establish priority services, to lead medical and human resource planning, to set and monitor performance targets and to ensure clinical standards are met. The promotion of women's and maternal health and preventative services for the maternal

and newborn population is foundational to a robust perinatal system. As the oversight system for provincial perinatal services is strengthened, it will reflect the entire spectrum of care from health promotion and prevention to specialized care. Accountability with this revised model will be enhanced and the profile of maternal-child services will be improved.

Other agencies within PHSA have additional responsibilities with respect to reproductive health and the prevention of disabilities. The CWH aims to strengthen the links among its member agencies and programs to increase the participation of all relevant aspects of PHSA within the Centre's activities.

### ***Links to Other Core Programs***

Given the overlapping scope with other Core Public Health Programs including Healthy Infant/Child; Healthy Child/Youth; Healthy Living; and Healthy Communities, the CWH looks forward to working with the other PHSA Centres for Population & Public Health, the Ministry of Healthy Living & Sport and its regional health authority partners in Population and Public Health initiatives over the coming years.

Interested readers may want to review the other core programs for their potential link to this core program initiative. All Core Program Evidence Reviews and Model Core Programs can be found at: <http://www.phabc.org/modules.php?name=Contentcore&pa=showpage&pid=187>.

## **Gap Analysis**

This gap analysis section will be presented both at an overarching level and at a program specific level. Detailed plans for addressing the gaps identified below will be developed by Centre members as part of the improvement plan; only high-level direction is summarized here.

### **Core Program Component 1 - Leadership and Strategic Planning**

#### **Strengths**

- The participation of PHSA agencies and programs within the CWH offers unique opportunities for coordination and collaboration and provides a point of contact for external stakeholders to access PHSA's expertise across the spectrum of women's health.
- Many of PHSA's agencies have developed strong linkages at the community and non-governmental level as well as at the provincial, national and international levels.
- The unique provincial mandate of PHSA agencies and programs position PHSA to facilitate intersectoral collaboration.
- Strong links to academia position PHSA to have an important role in curriculum development, education and training in population and public health and, specifically, women's health.
- PHSA agencies and programs have close ties to research and policy development networks and expertise which may be leveraged for funding and/or knowledge generation and knowledge exchange to improve reproductive health.
- PHSA has been a leader in developing and modeling international best practice in population and public health. Examples of such programs include Healthy Choices in Pregnancy, the Oak Tree Clinic and numerous others.

## **Challenges**

- The CWH was formed in early 2009. As such, the work of the CWH has been guided by opportunities for action that have emerged as a result of funding from the Population & Public Health Primordial and Primary Prevention Projects initiative, from linkages with other stakeholders such as the Ministry of Healthy Living and Sport, and the activities of other Centres for PPH. Although positioned to respond to such opportunities, the CWH would benefit from the development of a work plan that would enable it to identify its priorities and communicate them with other organizations, programs and stakeholders.
- Since some PHSA agencies and programs work closely with the non-governmental sector and community-based organizations, an opportunity exists to develop mechanisms to foster communication with community-based providers and partners as well as to recognize the importance of such partnerships.
- Although PHSA agencies and programs have been leaders in developing and modeling best practice in population and public health, a key challenge has been communicating about this work and connecting regularly with community partners.

## **Analysis:**

Four key priorities for the CWH Improvement Plan are to:

- Enhance membership and engagement among PHSA agencies and programs in CWH.
- Clarify roles, responsibilities, and relationships with external partners including the Ministry of Healthy Living and Sport and the regional health authorities.
- Strengthen partnerships with external organizations.
- Develop a strategic plan for the CWH.

## **Core Program Component 2 - Health Promotion**

### **Strengths**

- PHSA offers innovative health promotion programs – such as Healthy Choices in Pregnancy, Bevel Up and Cervical Cancer Screening – all of which have been modeled on international best practice and are contributing to the evidence base on better practices.
- Perinatal Services BC, which will replace the existing BC Perinatal Health Program, represents the full continuum of services from health promotion and community-based care to specialized perinatal services.
- The CWH project on young girls and alcohol, collaboration between BCCEWH, BCWH and BCMHAS, brought together stakeholders from around the province to discuss this issue, opportunities exist to ensure links to reproductive health are addressed in subsequent work.

### **Challenges:**

- Perinatal Services BC, which will replace the existing BC Perinatal Health Program in the coming year, has a somewhat different mandate than its predecessor. Dialogue in relation to health promotion in Perinatal Health within PHSA will be in transition as the new program evolves.

- Where PHSA programs and agencies offer innovative health promotion programs, opportunities should be pursued for publicizing these initiatives and documenting them for others (e.g., Healthy Choices in Pregnancy; Bevel Up; cervical cancer screening).

**Analysis:**

Four key priorities for the CWH Improvement Plan are to:

Identify avenues to leverage and expand work currently underway within PHSA agencies and programs including:

- Explore opportunities to support the release of maternity care pathway materials developed by BCPHP.
- Contribute to the development of the young girls and alcohol project underway at BCCEWH (initiated within this Centre) to ensure it addresses the links between alcohol use and reproductive health.
- Explore opportunities to disseminate information regarding best practices in sexual and reproductive health programs.
- Support the transition to Perinatal Services BC through regular dialogue and an ongoing discussion about the links between this core program and the mandate and operations of PSBC.

**Core Program Component 3 - Delivery of Prevention Programs**

**Strengths:**

- PHSA has a high concentration of specialists for complex medical conditions which may be able to promote pre-pregnancy visits as part of preconception health.
- Given PHSA's role in facilitating provincial collaboration, PHSA is well-positioned to bring stakeholders together in consultation with Ministry representatives, community partners and other health authorities around key gaps in the delivery of prevention programs.

**Challenges:**

- Gap in supports for women with disabilities to promote healthy pregnancies.
- BC does not have a provincial strategic framework for healthy sexuality, though the core program evidence review references this concept. Such a framework would include attention to issues of healthy sexual relationships and access to and information about contraceptives and pregnancy prevention.

**Analysis:**

Two key priorities for the CWH Improvement plan are to:

- Explore opportunities for engaging stakeholders in the development of an approach to preconception health for both women and men.
- Explore opportunities for developing a sexual health framework for BC.

## **Core Program Component 4 - Surveillance, Monitoring and Program Evaluation**

### **Strengths:**

- Surveillance and Monitoring are key PHSA roles through Perinatal Services BC, the BCCEWH, BCCDC in sexually transmitted infections.
- Evaluation is also a key role function of PHSA for programs such as Sheway, Primary Healthcare and newborn screening, neonatal follow up programs and medical genetics.

### **Challenges:**

- Data availability, provincial standardization and adoption of standards, privacy agreements, enhanced collaboration with stakeholders in utilization of BCPHP data for public health surveillance and decision making.

### **Analysis:**

One key priority for CWH improvement plan is:

- Work with CWH members to identify opportunities for enhancing reproductive health surveillance, monitoring and program evaluation.

## ***Summary of Priority Areas for Improvement:***

### **Leadership and Strategic Planning:**

- Identify strategic areas of focus for the CWH, consistent with PHSA Strategic Plan and CPPH priorities.
- Clarify roles and responsibilities for PHSA agencies and programs represented within the CWH.
- Clarify roles, responsibilities and relationships of CWH with external partners.
- Develop partnerships with external organizations (e.g. NGOs & Community)

### **Health Promotion:**

- Identify opportunities to leverage existing projects and programs across PHSA agencies and programs.

### **Delivery of Prevention Programs:**

- Collaborate with stakeholders to develop an approach to preconception health for both men and women.
- Collaborate with stakeholders to explore opportunities to develop a sexual health framework for BC.

### **Surveillance, Monitoring and Program Evaluation:**

- Identify opportunities to leverage expertise across PHSA agencies and programs.

### **All Components:**

- Identify opportunities for population and public health within Perinatal Services BC.

## Improvement Plan:

Component	Gaps	Outcomes/Objectives	Performance Targets (Indicators)	Timeline	PHSA Lead
<b>REPRODUCTIVE HEALTH &amp; PREVENTION OF DISABILITIES</b>					
Leadership & Strategic Planning	Lack of strategic direction for the Centre for Women's Health	Strategic areas of focus, consistent with PHSA Strategic Plan and CPPH priorities, identified for the Centre for Women's Health	Stakeholders identified	July 2010	Co-Leads Centre for Women's Health
			Strategic areas of focus identified	Nov.2010	
			Strategic Plan completed	Dec. 2010	
	Roles and relationships with the Centre for Women's Health and other PHSA Agencies, Ministry and Health Authority partners and external organizations unclear	Clear roles and responsibilities for PHSA Agencies and programs represented within Centre for Women's Health	Centre for Women's Health membership reviewed	April 2010	Co-Leads Centre for Women's Health
			New members recruited	Sept. 2010	
			Knowledge exchange forum with other CPPH Centres held	Mar. 2011	
			External partners identified	June 2010	
	Mechanism to engaged external organizations identified	Dec. 2010			
Clear roles, responsibilities and relationships of external partners to Centre for Women's Health	External organization engagement implemented	External organization engagement implemented	Mar. 2011		
		Develop partnerships with external organizations	External organizations identified	June 2010	Co-Leads Centre for Women's Health
		Mechanism to engaged external organizations identified	Dec. 2010		
External organization engagement implemented	Mar. 2011				

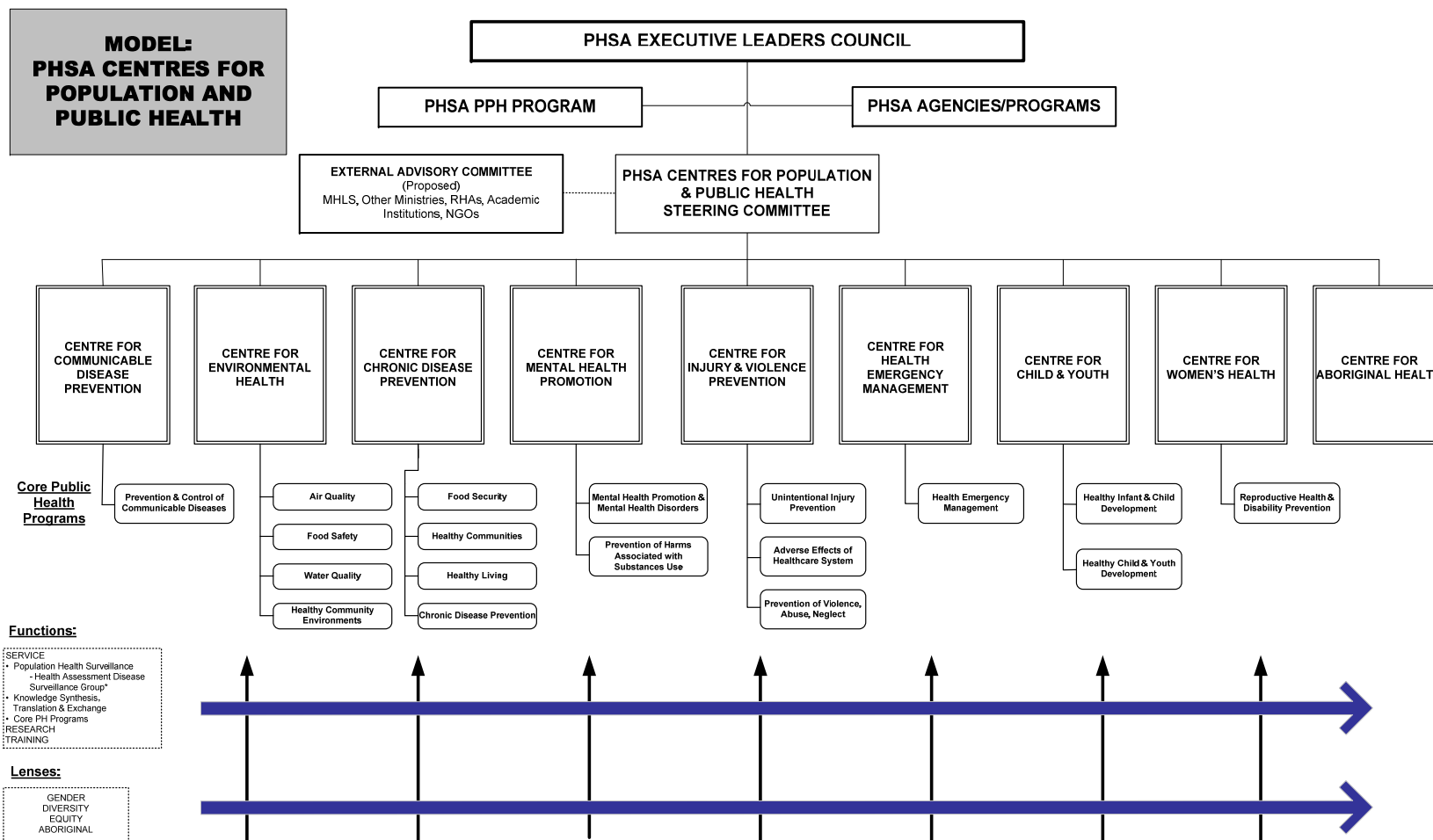
<b>Component</b>	<b>Gaps</b>	<b>Outcomes/Objectives</b>	<b>Performance Targets (Indicators)</b>	<b>Timeline</b>	<b>PHSA Lead</b>
Health Promotion	Lack of opportunities to leverage PPH work in reproductive health across PHSA agencies and programs	Identify opportunities to leverage existing projects and programs across PHSA agencies and programs	Mechanisms to identify opportunities developed  1 opportunity per year to support and leverage existing projects and programs across PHSA agencies and programs identified  Confirm opportunities' alignment with PHSA Strategic plan, CPPH Strategic areas of focus and Centre for Women's Health priorities	June 2010  Mar. 2013  June 2011	Co-Leads Centre for Women's Health
Delivery of Prevention Programs	Lack of support to promote healthy pregnancies in women with disabilities	Align with Ministry priorities regarding pre-conception health promotion	Priority validated/confirmed  Stakeholders identified  Funding identified/confirmed.  Approach to preconception health promotion developed  Preconception health promotion plan implementation begun	Mar. 2011  Sept. 2011  Mar. 2012  Oct. 2012  Mar. 2013	Co-Leads, Centre for Women's Health
	Sexual Health framework for BC does not exist	Align with Ministry priorities regarding developing a sexual health framework for BC	Priority validated/confirmed  Stakeholders identified	Mar. 2011  Sept. 2011	Co-Leads, Centre for Women's Health

<b>Component</b>	<b>Gaps</b>	<b>Outcomes/Objectives</b>	<b>Performance Targets (Indicators)</b>	<b>Timeline</b>	<b>PHSA Lead</b>
			Funding identified/confirmed	Mar. 2012	
			Sexual Health framework developed	Oct. 2012	
Surveillance Monitoring & Evaluation	Opportunities to leverage PHSA agencies and programs to enhance reproductive health surveillance, monitoring & Evaluation	Identify opportunities to leverage expertise across PHSA Agencies & Programs	Surveillance, monitoring and evaluation expertise within Centre for Women's Health identified	Mar.2011	Co-Leads, Centre for Women's Health
			Priority areas for collaboration identified	Sept. 2011	
ALL Components	Transition from BCPHP to Perinatal Services BC	Identify opportunities for population and public health within PSBC across all 4 components of core program	Areas for collaboration between CWH and PSBC identified	Mar. 2012	Co-Leads, Centre for Women's Health



# Appendix

## Appendix A – PHSA Centres for Population & Public Health Model



\* Health assessment & Disease Surveillance is also a Core Public Health Program

## Appendix B – PHSA Centre for Women’s Health Membership

Reproductive Health & Prevention of Disabilities Core Public Health Program	
Ann Pederson Co-Lead	BC Centre of Excellence for Women’s Health (BCCEWH)
Karen Vida Co-Lead	BC Perinatal Health Program (BCPHP)
Lesley Varley	Aboriginal Health
Sonia Lamont	BC Cancer Agency (BCCA)
Gina Ogilvie	BC Centre for Disease Control (BCCDC)
Shannon Griffin	BC Mental Health and Addiction Services (BCMHAS)
Barb Selwood	BC Perinatal Health Program (BCPHP)
Cheryl Davies	BC Women’s Hospital (BCWH)
Leanne Dahlgren	BC Women’s Hospital (BCWH)
Lenore Riddell	BC Women’s Hospital (BCWH)
Nancy Poole	BC Women’s Hospital (BCWH) & BC Centre of Excellence for Women’s Health (BCCEWH)
Shazia Karmali	Population & Public Health (PPH)
John Millar	Population & Public Health (PPH)
Deborah Money	Women’s Health Research Institute (WHRI)