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Health departments are welcome to adapt this tool. Requirements for adapting this tool include: Health Evidence™ and Peel Public Health are acknowledged for tool development; and adapted tool cannot be used for profit (not to be sold).

# Briefing Note #: Date:

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| --- | --- | --- |
| Insert briefing note number or other identifier. |  |  |

# Issue:

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| * Explain in one or two lines why the briefing note matters to the reader. * Sets out, in the form of a question or statement, what the rest of the note is about. |

# Background:

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| * Gives a brief summary of the history of the topic and other background information and provides details the reader needs in order to understand what follows: * How a situation arose, * Previous decisions/problems, * Actions leading up to the current situation, | * What led up to this problem or issue? How has it evolved? * Do not repeat information that you're including in the Current Status section. |

# Current Status:

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| * Describes only the current situation, who is involved, what is happening now, the current state of the matter, issue, situation, etc. * What are we currently doing on this topic? |

# Key Considerations

The subsections below provide a summary of important facts, considerations, developments—everything that needs to be considered now. While you will have to decide what to include and what to leave out, this section should be as unbiased as possible. Your aim is to present all the details required for the reader to be informed or to make an informed decision. Keep the reader's needs uppermost in your mind when selecting and presenting the facts.

# The Evidence:

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| * Research evidence * Indicate results of literature search conducted based on 6-step pyramid in [Levels & Sources of Public Health Evidence](https://healthevidence.org/practice-tools.aspx#PT3). See [Evidence-Informed Decision Making (EIDM) Checklist](https://healthevidence.org/practice-tools.aspx#PT1)   + What do we know from the evidence?   + What works to address the issue?   + What does not work?   + What factors are associated (e.g. barriers and facilitators)?   + What don’t we know? * Organizational evidence * Information about organization’s capacity to complete the task, e.g., availability of   + Human resources   + Managerial expertise   + Funds - reality of limited budgets   + Opportunities to draw from other areas of the organization | * Colloquial evidence * Environmental scan evidence (evidence from other health units)   + What are other health units doing?   + Results of outcome and/or process evaluations   + Expertise, views and realities of stakeholders   + Partner or other in-kind resources * Expert (practice/research) consultation evidence * Political evidence * Public attitudes towards proposed policies, media reaction * Legislation or Ministry Guidelines * Community Values * Community evidence * Habits and traditions * Lobbyists and pressure groups * Pragmatics and contingencies of situation |

# Options:

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| * Provide observations about the key considerations, what they mean, and a concise description of: * The options; may include for example: maintaining current status; changing practice/policy; reorganizing human resources; training key personnel; submitting a funding proposal. * Their pros and cons   + Impact on organization   + Supports (or not) for strategic priorities or other organizational initiatives     - * Which ones?       * How?   + Human resources     - * Numbers       * Knowledge/ skills   + Budget implications   + Potential to impact other roles/teams/divisions     - * Which ones?       * How?   + Potential or actual contentious issues   + Community     - * Preferences       * Societal/population/community impact   + Political issues * What will happen next? |

# Conclusion and/or Recommended Response/Action:

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| * Conclusions summarize what you want your reader to infer from the briefing note. What’s the take home message? * When identifying recommendations, offer the best and most sound advice you can offer. Make sure the recommendation is clear, direct and substantiated by the facts you have put forward Many readers jump immediately to this section, so be sure it covers the points you most want your reader to be clear about. * Do not introduce any new information or evidence in the Conclusion section. |

# Submitted by: Submitted to:

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| --- | --- | --- |
| Name and contact information |  | Name and contact information |

**Have you used this tool?**

We would appreciate hearing from those who have used the tool, perspectives on its usefulness, how it was adapted, and any suggestions for revision:

[**info@healthevidence.org**](mailto:info@healthevidence.org).

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