

Guide to Reviewing Core Indicators and Core Indicator Resources

Thank you for participating in the review of the Association of Public Health Epidemiologists in Ontario (APHEO) Core Indicators and resources. The Core Indicators for Public Health in Ontario were drafted by public health epidemiologists in Ontario and many partners to collate extensive information for over 120 public health indicators. The Core Indicators Work Group aims to develop indicators and resources based on sound evidence, provide users with information supporting the indicator's relevance and limitations as well as clear instructions that will enable users to successfully implement/apply the indicator.

Core Indicators are organized according to a standard format. Please see [Appendix A](#) below for a description of the components of a Core Indicator.

Core Indicator resources provide information to enhance understanding of the Core Indicators. Most Core Indicator resources provide details about data sources, while some document changes in processes over time or provide rationale for decisions made during the Core Indicator revision process (e.g., [“Timeline of changes in live birth registration in Ontario”](#) and [“Reproductive Health Core Indicators Documentation Report”](#) respectively).

As you review the documents (including the links and references provided if possible), you may choose to consider the following:

- Clarity
- Accuracy
- Reliability
- Validity
- Completeness
- Feasibility
- Usefulness

Some questions you may find useful to ask yourself while reviewing the indicator/resource:

- Are the indicator descriptions accurate?
- Are all potential corresponding indicators listed?
- Is the analysis check-list complete and understandable? Does anything need to be added?
- By following the analysis checklist am I able to use the indicator to generate estimates?
- Are the methods of calculation complete and accurate?
- Are the indicator comments complete and understandable? Does anything need to be added?
- Do all the links work in the indicator?
- Are all appropriate definitions in the definition section?
- Are any important references missing?
- In general, could the indicator or resource be improved by adding, removing or changing any of the content?

Limitations of an indicator may become apparent when attempts are made to work through the analysis checklist. Your feedback on the practical use of the indicator would be appreciated.

You can provide your feedback to the organizer of the Core Indicator review (please see email for contact information) by:

- jotting down some comments and responding by email
- tracking changes/adding comments to the word document and forwarding the attachment by email

Thank you for your contribution to the work of the APHEO Core Indicators Work Group. Your expertise will ensure we develop useful products that will support standardized public health reporting in Ontario.

Sincerely,

The Core Indicators Work Group

Appendix A – Components of a Core Indicator

- **Description** – the general indicator concept.
- **Specific Indicator(s)** – particular measures of the concept.
- **Method of Calculation** – the specific indicator equation with numerator, denominator and multiplier.
- **Basic Categories** – main groupings that would be used for this indicator, including pertinent age groups, and geography.
- **Data Source(s)** – the data source(s) used to populate the numerator and denominator of the Core Indicator and link(s) to the corresponding APHEO data source resource document(s).
- **Survey Questions** – included when data source is survey-based, (e.g., CCHS and RRFSS). This section will be omitted if not applicable.
- **Alternative Data Sources** – may be listed and used by health units in cases where the primary data source is not sufficient for some reason (Note: In the case of reproductive data where births can be counted many different ways by many sources, each source is a primary source and the health unit can choose which is most appropriate for their purposes). This section will be omitted if there are no alternative data sources.
- **ICD-10 Codes** – ICD-9 and ICD-10 Codes are listed where appropriate. This section will be omitted if not applicable.
- **Analysis Check List** – analysis details and coding idiosyncrasies.
- **Indicator Comments** – information that assists with the interpretation of the data, including background literature, key trends or findings.
- **Ontario Public Health Standards (OPHS): Requirements for programs, services and accountability** – highlights role and responsibilities of the boards of health and the protocol(s) to which the indicator pertains.
- **Corresponding Health Indicator(s) in Public Health Practice** – the name(s) of indicator(s) developed by other agencies (e.g., Statistics Canada, CIHI Ministry of Health and Long-Term Care, World Health Organization, Centres for Disease Control) and any differences in definition(s) or method(s) of calculation. If there are no corresponding indicators, “none” will be documented.
- **Definitions** – any key definitions that are relevant to this indicator that will enhance understanding. Included if applicable.
- **Cross-References to Other Sections** – links to related indicators. Included where applicable.
- **Cited References** – references that are numbered and cited in the text of the indicator.
- **Other References** – references reviewed but not cited in the text of the indicator.
- **Changes Made** – changes that have been made to the indicator over time, and by whom.
- **Acknowledgements** – with their permission, lists all individuals that have contributed to the indicator as authors or reviewers.