At a Glance Departmental Evaluation Plan for Health Canada 2020-21 to 2024-25

The COVID-19 pandemic has had a significant impact on the work of Health Canada (HC) as it is at the forefront of the Government of Canada's response. To be respectful of the need for branches to focus on the response, many engagements scheduled to start in 2020-21 were put on hold. In addition, the Office of Audit and Evaluation (OAE) mobilized staff to assist in HC critical functions and to remain responsive to management requests for advice or assistance. The present Departmental Evaluation Plan (DEP) reflects the response of OAE to these circumstances, by developing a plan that ensures that evaluation focuses its efforts and resources on emerging priorities.

This document presents the OAE Departmental Evaluation Plan (DEP) for fiscal years 2020-21 to 2024-25 for HC. While not presented jointly, OAE also prepared a Risk-Based Audit Plan (RBAP) in parallel to the DEP. Both plans are updated annually through an extensive consultation process with each branch in HC as well as a document review. The use of parallel processes allowed OAE to fully utilize synergies between the audit and evaluation functions and maximize their combined value.

The DEP is updated annually to support the allocation of resources to a suite of evaluation projects over a five-year period, and is focused on Health Canada information needs. The development of this plan complies with requirements of the Treasury Board (TB) *Policy on Results* (July 1, 2016). The projects contained within this plan were selected to ensure compliance with legislation and policy, support information needs, and consider risks in order to ensure the optimal use of resources.

The 2020-21 to 2024-25 DEP for HC reflects OAE's commitment to implementing TB's *Policy on Results* (2016) requirements. The Departmental Results Framework (DRF), program inventory, and performance information profile developed by HC have formed the basis for this plan.

Planning for Evaluation

Over the next five years, the OAE plans to conduct 28 evaluations that involve HC: 21 of which will be led by HC while the remaining seven are horizontal evaluations led by other government departments or agencies. A yearly breakdown is provided in **Table 1. Appendix A** outlines the direct program spending (DPS) by branch for all scheduled evaluation for the next five years.

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	2020-21	2021-22	2022-23	2023-24	2024-25	Total
HC	2	3	7	5	4	21
Horizontal OGD led	3	1	1	1	1	7
Total	5	4	8	6	5	28

Appendix A – Coverage of Direct Program Spending (DPS)

Program	Evaluations planned in the next five years	Fiscal year of approval	2020-21 spending covered by evaluation (\$) ¹	Rationale for not evaluating program or spending
Core Responsibility	Health Care Systems (\$1,773,863,0	46)		
Health Care Systems Analysis and Policy	Home Care and Mental Health Services Initiative	2022-23	12,498,691	N/A
(\$56,616,691)	Health Care Policy Contribution Program	2023-24	27,118,000	N/A
	Pan-Canadian Health Organizations	2023-24	17,000,000	N/A
Access, Affordability, and Appropriate Use of Drugs and Medical Devices (\$27,494,407)	Pan-Canadian Health Organizations	2023-24	27,494,407	N/A
Home, Community and Palliative Care (\$651,078,707)	Home Care and Mental Health Services Initiative	2022-23	651,078,707	N/A
Mental Health (\$615,328,707)	Home Care and Mental Health Services Initiative	2022-23	600,000,000	N/A
	Pan-Canadian Health Organizations	2023-24	15,328,707	N/A
Substance Use and Addictions (\$68,786,386)	Health Portfolio's Tobacco Activities (including vaping)	2021-22	100,000	N/A
	Canadian Drugs & Substances Strategy (including opioids and drug overdose crisis in Canada)	2022-23	68,686,386	N/A
Digital Health (\$78,078,707)	Pan-Canadian Health Organizations	2023-24	78,078,707	N/A
Health Information (\$93,743,281)	Pan-Canadian Health Organizations	2023-24	93,743,281	N/A
Canada Health Act (\$1,649,138)	Canada Health Act Administration	N/A	1,649,138	Low Need: HC's activities have focused on the administration of the Act, such as monitoring for compliance. On an annual basis, the federal Minister of Health is required to report to Parliament on the administration and operation of the Canada Health Act, which provides good oversight on this activity.
Medical Assistance in Dying (\$1,078,707)	Medical Assistance in Dying	N/A	1,078,707	Low Need: Program has been recently implemented. Furthermore, while the potential for conducting an evaluation will be examined in the future, parliamentary

¹ To obtain detailed estimates on program budgets, annual data for 2020-21 is presented. This financial data was extracted by the Chief Financial Officer Branch on February 14, 2020. As a result, these budget figures may not fully align with those contained in other corporate reporting documents such as the Departmental Plan, the Departmental Results Report or the Three-Year Transfer Payment Program Plan.

Program	Evaluations planned in the next	Fiscal	2020-21	Rationale for not
Flogram				
	five years	year of	spending	evaluating program or
		approval	covered by	spending
			evaluation	
			(\$) ¹	
				reporting requirements
				provide good oversight on
				this activity at this time.
Cancer Control	Pan-Canadian Health Organizations	2023-24	52,078,707	N/A
(\$52,078,707)	T all-Calladial Fleath Organizations	2023-24	32,070,707	IN/A
Patient Safety	Pan-Canadian Health Organizations	2023-24	8,678,707	N/A
(\$8,678,707)	Tan-Ganadian ricatin Organizations	2020-24	0,070,707	IN/A
Blood Systems, Organs,				
Tissue and	Canadian Blood Services Contribution	2022-23	8,583,487	N/A
Transplantation	Programs	2022-23	0,303,407	IN/A
(\$8,583,487)				
Promoting Minority				
Official Languages in	Roadmap for Canada's Official			
the Health Care	Languages: Education, Immigration,	2021-22	38,798,752	N/A
Systems	Communities			
(\$38,798,752)				
Brain Research	Canadian Brain Foundation Contribution	2021-22	24,676,683	N/A
(\$24,676,683)	Program		1,01 0,000	
Thalidomide	Canadian Thalidomide Survivors	2024-25	20,191,979	N/A
(\$20,191,979)	Support Program	202120		
Territorial Health				Low Need: Program will be
Information Fund				sunsetting in 2020-21. An
(\$27,000,000)				evaluation was completed
	Territorial Health Investment Fund	N/A	27,000,000	in 2018-19. If the program
			, ,	is eventually renewed, the
				timing of the evaluation will
				be determined in a future
Care Deemanaihility	Hoolth Drotoction and Dromotion (6	EEC 000 740	•1	version of the DEP.
Core Responsibility	Health Protection and Promotion (\$	2020-21	•	N/A
Pharmaceutical Drugs (\$56,601,336)	Single Window Initiative Pharmacetical Drugs Program - Human	2020-21	-	IN/A
(\$50,001,550)		2022-23	56,601,226	N/A
Biologics and	and Veterinary Drugs Single Window Initiative	2020-21		N/A
Radiopharmaceuticals		2020-21	-	IN/A
Drugs	Biologics and Radiopharmaceuticals	2023-24	41,624,276	N/A
(\$41,624,276)	Program	2023-24	41,024,270	IN/A
Medical Devices	Single Window Initiative	2020-21		N/A
(\$17,585,305)	Medical Devices	2024-25	17,585,305	N/A
	Micaical Devices		17,000,000	N/A
I MATHEM HEALTH PROMICTS	Single Window Initiative	2020-21	_	
Natural Health Products (\$16,320,931)	Single Window Initiative Natural Health Products Program	2020-21	16 320 931	
(\$16,320,931)	Natural Health Products Program	2024-25	16,320,931	N/A
(\$16,320,931) Food Safety and	Natural Health Products Program Food and Nutrition Program – Nutrition		16,320,931 13,868,931	
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy	2024-25 2022-23	13,868,931	N/A N/A
(\$16,320,931) Food Safety and	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory	2024-25		N/A
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative	2024-25 2022-23 2022-23	13,868,931 6,891,799	N/A N/A N/A
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative Food and Nutrition Program – Food	2024-25 2022-23	13,868,931	N/A N/A
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative Food and Nutrition Program – Food Safety and Veterinary Drugs	2024-25 2022-23 2022-23 2023-24	13,868,931 6,891,799	N/A N/A N/A N/A
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative Food and Nutrition Program – Food Safety and Veterinary Drugs Canadian Food Safety Information	2024-25 2022-23 2022-23	13,868,931 6,891,799	N/A N/A N/A
(\$16,320,931) Food Safety and Nutrition (\$67,579,450)	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative Food and Nutrition Program – Food Safety and Veterinary Drugs Canadian Food Safety Information Network	2024-25 2022-23 2022-23 2023-24 2024-25	13,868,931 6,891,799 46,818,720	N/A N/A N/A N/A N/A
(\$16,320,931) Food Safety and Nutrition	Natural Health Products Program Food and Nutrition Program – Nutrition Policy Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative Food and Nutrition Program – Food Safety and Veterinary Drugs Canadian Food Safety Information	2024-25 2022-23 2022-23 2023-24	13,868,931 6,891,799	N/A N/A N/A N/A

Program	Evaluations planned in the next five years	Fiscal year of approval	2020-21 spending covered by evaluation (\$) ¹	Rationale for not evaluating program or spending
Water Quality (\$3,617,520)	Chemicals Management Plan (including water quality)	N/A	3,617,520	Low Need: Program is scheduled to sunset by March 2021. An evaluation was completed in 2019-20. If the program is eventually renewed, the timing of the evaluation will be determined in a future version of the DEP.
Climate Change (\$4,849,460)	Climate Change and Health Adaptation Program	N/A	4,849,640	Low Need: ECCC recently announced that they were postponing the horizontal evaluation of Climate change initiatives to 2026-27. Data to feed into the horizontal evaluation will only be required in 2025-26. This evaluation has thus be postponed.
Consumer Product	Single Window Initiative	2020-21	-	N/A
Safety (\$31,386,270)	Consumer Product Safety	2022-23	31,386,270	N/A
Health Impacts of Chemicals	Genomics Research and Development Initiative	2020-21	514,074	N/A
(\$65,877,181)	Impact Assessment and Regulatory Processes (IARP) Horizontal Initiative	2022-23	4,985,635	N/A
	Federal Contaminated Sites	2023-24	1,657,441	N/A
	Chemicals Management Plan (including water quality)	N/A	58,720,031	Low Need: Program is scheduled to sunset by March 2021. An evaluation was completed in 2019-20. If the program is eventually renewed, the timing of the evaluation will be determined in a future version of the DEP.
Workplace Hazardous Products (\$3,597,392)	Workplace Hazardous Products	2024-25	3,597,392	N/A
Tobacco Control (including vaping) (\$26,802,800)	Health Portfolio's Tobacco Activities (including vaping)	2021-22	26,802,800	N/A
Controlled Substances (\$57,617,422)	Canadian Drugs & Substances Strategy (including opioids and drug overdose crisis in Canada)	2022-23	57,617,422	N/A
Cannabis (\$78,721,454)	Cannabis Program	2022-23	78,721,454	N/A
Radiation Protection	Single Window Initiative	2020-21		N/A
(\$15,171,889)	Radiation Protection Activities	2021-22	15,171,889	N/A
Pesticides (\$34,759,769)	Single Window Initiative PMRA's Activities in Support of AAFC's Minor Use Pesticides Program	2020-21 2020-21	-	N/A N/A
	Pesticides Program	2023-24	34,759,769	N/A
Specialized Health Services and	Specialized Health Services	N/A	14,659,876	Low Need: No requirement to inform major policy or spending decisions.

Program	Evaluations planned in the next five years	Fiscal year of approval	2020-21 spending covered by evaluation (\$) ¹	Rationale for not evaluating program or spending
Internationally Protected Persons Program (\$14,659,876)				Low Risk: Low enterprise risk. For one program component, Health Canada is the delivery agent rather than program owner (Employee Assistance Services - EAS). EAS has been accredited with the highest quality standard (gold) of the industry as set out by the Employee Assistance Society of North America (EASNA) as the Council of Accreditation (COA) carries out in-depth assessments of EAS' compliance with best practices in the industry.
Other	Sex and Gender-based Analysis		-	N/A