

Center on Knowledge Translation *for*
Disability and Rehabilitation Research

A project of  SEDL

Developing the Knowledge Translation Plan to Build Research Impact

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Why Plan for Knowledge Translation?

- 1) Because it is a requirement for many research funders
- 2) Because if we don't plan for it, it won't happen
- 3) Because if it doesn't happen, it will sit on the shelf or in a journal
- 4) Because we owe it to tax payers to show what we accomplish with public funds
- 5) Because funders want to demonstrate return on investment – and consequently, so do you and the organization for whom you work
- 6) Because we need to demonstrate the impact of our research
- 7) Because we want to advance science and practice

And that means, getting what we know works to improve health and well-being into the hands of people who can apply it.

Key Components of a KT plan

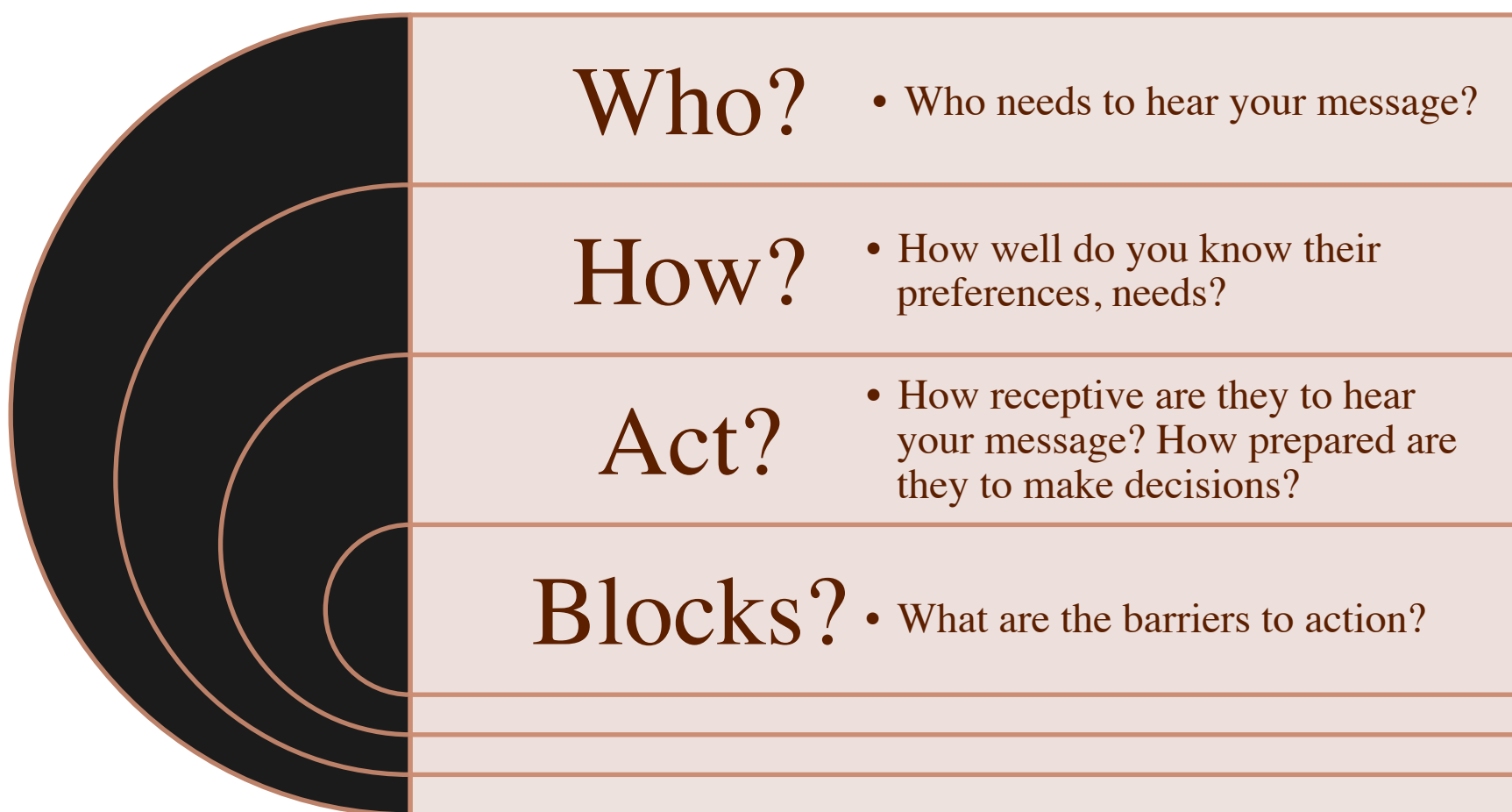
- 1) What are your **KT goals**?
- 2) Who are your **target audiences / knowledge users**?
- 3) **How** will you engage them?
- 4) **When** will you **engage** them?
- 5) What are your **main messages**?
- 6) What **KT strategies** will you use?
- 7) How will you **implement** your strategies?
- 8) With what **impact** (evaluation strategy to determine success of KT plan and impact on health)?
- 9) What **resources** are required (budget, staffing, etc)

It starts with identifying your **KT Goals**:

What is your purpose in sharing what you learned?



Who is your audience?



Who are your Knowledge Users?

- ☐ Consumers
- ☐ Health Practitioners
- ☐ Managers (hospitals, workplaces)
- ☐ Policy makers
- ☐ General Public
- ☐ Patients
- ☐ Media
- ☐ Private industry
- ☐ Advocacy groups
- ☐ Research funders
- ☐ Decision makers
- ☐ Research scientists
- ☐ Other?

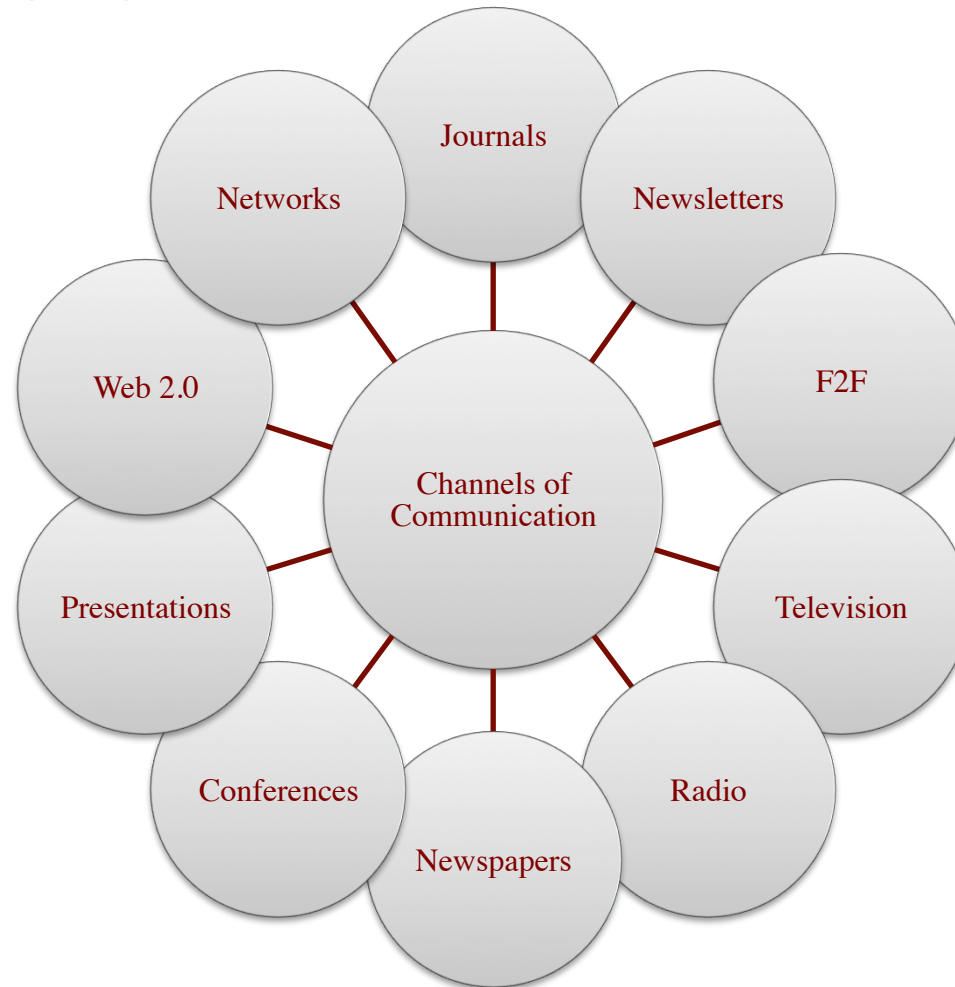


Consider:

- How to involve KUs in project development, interpretation, discussion, knowledge translation activities
- What information KUs need, rather than *what you think* they need
- How to tailor main messages & KT strategies to KU preferences for format, timeliness, functionality
- One-on-one and face-to-face interaction work best as a base from which to add more virtual formats
- Perceived credibility of the messenger is important



How to Engage: formats for communication



For Report Writing - Consider the 1:3:25 Format

1 page: Main messages	3 pages: Executive Summary	25 pages: The Report
Main messages in bullet point format	Summary of findings <i>condensed</i> to service the needs of the knowledge user	Try <i>not</i> to revert to academic prose
Lessons knowledge-users can take away from the research	Include examples that a knowledge user would understand	Maintain focus on your knowledge user audience
Implications your work has for theirs (the “ <i>so what</i> ” piece)	Lead with the most interesting aspect of the research, followed by your approach; less on methods and other details (link to additional files if needed)	Consider using headings: <input type="checkbox"/> Context, <input type="checkbox"/> Implications <input type="checkbox"/> Approach <input type="checkbox"/> Results <input type="checkbox"/> Additional Resources <input type="checkbox"/> Further Research <input type="checkbox"/> Reference & Bibliography
If possible, provide recommendations for practice and/or policy	This section is NOT an academic abstract	

Source: adapted from Canadian Health Services Research Foundation

When will you engage them?

End of Grant KT: Typical dissemination and communication

Integrated KT: throughout the research process, as you work collaboratively to shape research process. Knowledge users can assist at different time points:

- *Research Initiation:* prioritizing, defining, proposing research ideas and refining questions (that are feasible and practical)
- *Conducting Research:* data collection, analysis, interpretation
- *Communication and Knowledge Translation:* message development, connecting to targeted audiences, assistance with formats (newsletters, web, webinars)

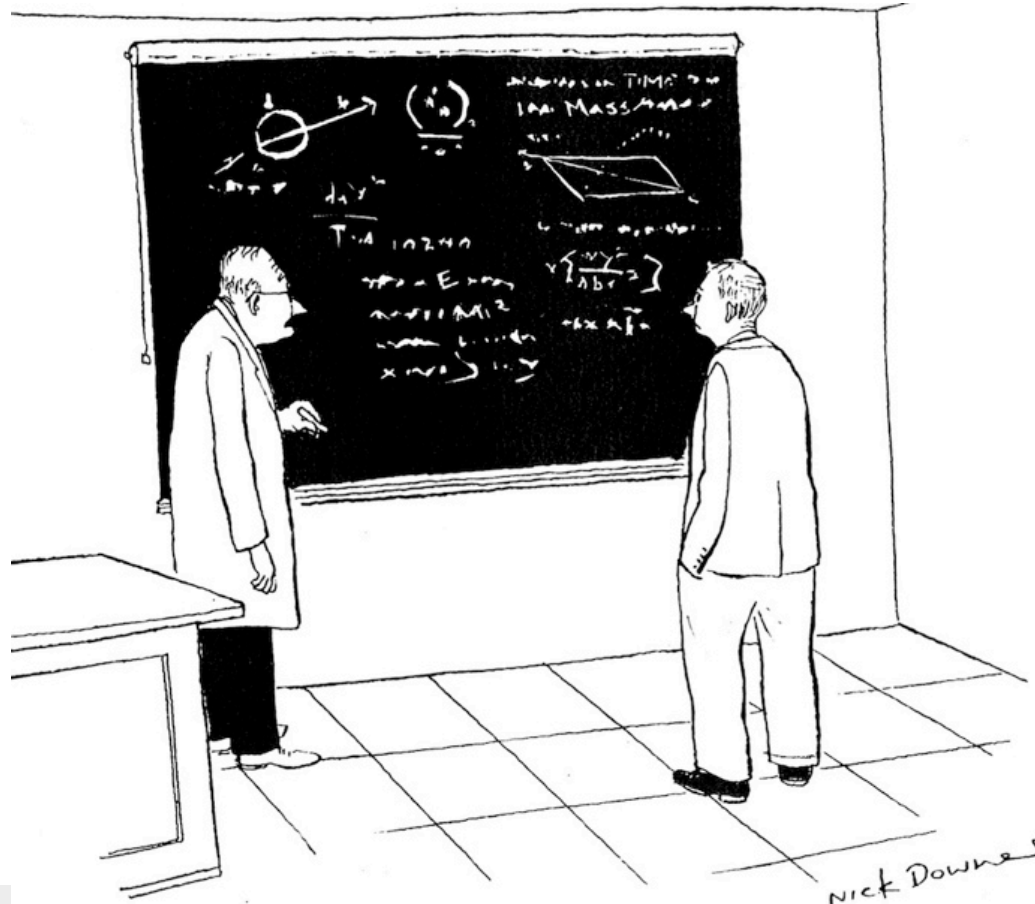
What is a main message?

- ✓ A clear, concise, audience-focused statement
- ✓ Not simply data or findings but rather:
 - what the research results mean,
 - why they are important,
 - what action should be taken as a result (if any)
- ✓ Tailored to KU needs and preferences



Note: results of a single study can differ from the body of research and have different implications for different settings, so it is helpful to include the context as part of the message.

The Message: 'KISS' principle



“In layman’s terms? I’m afraid I don’t know any layman’s terms.”

By Nick Downes. Used by kind permission of *The Spectator*, 28 APRIL 1990, 50.

Clear communication

Why are you communicating?

To report

To ask

To inform

To influence

To explain

What do you want to say?

How do you intend for the reader to use this information?



Focus on the needs of the knowledge user

Effective if reader can understand the message;

Efficient if reader understands it the FIRST time

Address *their* needs and questions

Include only *essential* information (link to other)



Plain language writing:

Don't overload sentences

Use active voice

Keep sentences short

Keep sentences simple

Avoid ambiguity

Emphasise the positive

Avoid double negatives

Learning Checkpoint

Which elements are universal components of KT?

- ☐ Goals
- ☐ Audience
- ☐ Engagement
- ☐ Main message
- ☐ Strategy
- ☐ Implementation
- ☐ Impact evaluation
- ☐ Resources
- ☐ All of the above



Consider the Evidence for KT Strategies



Adapted from Grol R & Grimshaw J 2003



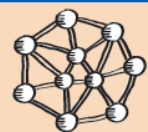


Participatory research			
Interactive small groups			
Clinical Practice Guidelines	Conferences		Consultants
Academic detailing	Opinion leaders		Communities of practice
Reminders	Champions		Policy Briefs
Computerized decision support	Educational materials		Networks
Multi-disciplinary collaboration	Audit and feedback		Patent license
Mass media campaign	Patient-mediated		Social media
Combined interventions	Substitution of tasks	Didactic Presentations	Arts-based KT
			Knowledge Broker
<i>Mostly Effective</i>	<i>Mixed Effectiveness</i>	<i>Limited Effectiveness</i>	<i>Not Synthesized</i>

Knowledge Translation Planning Template

Knowledge Translation Planning Template©

INSTRUCTIONS: This template was designed to assist with the development of Knowledge Translation (KT) plans for research but can be used to plan for non-research projects. The Knowledge Translation Planning Template is universally applicable to areas beyond health. Begin with box #1 and work through to box #13 to address the essential components of the KT planning process.

(1) Project Partners	(2) Degree of Partner Engagement	(3) Partner(s) Roles	(4) KT Expertise on Team
 <ul style="list-style-type: none"><input type="checkbox"/> researchers<input type="checkbox"/> consumers - patients/families<input type="checkbox"/> the public<input type="checkbox"/> decision makers<input type="checkbox"/> private sector/industry<input type="checkbox"/> research funding body<input type="checkbox"/> volunteer health sector/NGO<input type="checkbox"/> practitioners<input type="checkbox"/> other 	 <ul style="list-style-type: none"><input type="checkbox"/> from idea formulation straight through<input type="checkbox"/> after idea formulation & straight through<input type="checkbox"/> at point of dissemination & project end<input type="checkbox"/> beyond the project <p>Consider: Not all partners will be engaged at the same point in time. Some will be collaborators, end users or audiences, or people hired to do specific activities.</p>	 <p>(1) What do the partner(s) bring to the project?</p> <p>(2) How will partner(s) assist with developing, implementing or evaluating the KT plan?</p> <p>Action: Capture their specific roles in letters of support to funders, if requested.</p>	 <ul style="list-style-type: none"><input type="checkbox"/> scientist(s) with KT expertise<input type="checkbox"/> consultant with KT expertise<input type="checkbox"/> knowledge broker/specialist<input type="checkbox"/> KT supports within the organization(s)<input type="checkbox"/> KT supports within partner organization(s)<input type="checkbox"/> KT supports hired for specific task(s)

Assistance in formulating a KT Plan.

Available as free download: www.melaniebarwick.com/training.php

Barwick, M. (2008, 2013). Knowledge Translation Planning Template.

Ontario: The Hospital for Sick Children

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Purpose

The *Knowledge Translation Planning Template* © was designed to guide researchers, clinical educators, and KT practitioners through the KT planning process in a stepwise manner such that the core elements of KT planning are considered (Ross, Goering, Jacobson & Butterill, 2006).

It was developed in response to funders' requirements for KT Plans alongside research proposals (e.g., Tetroe et al., 2008), in particular the focus on KT from a range of Canadian funders (CIHR, SSHRC, MSFHR, AIHS, NSHRF).

Applicability

The *Knowledge Translation Planning Template* © is applicable across all health pillars (basic, clinical, health services, population health) and across many sectors (health, mental health, education, social sciences, environmental sciences).

The KT strategies refer to the current state of the evidence base for knowledge translation strategies (Grol & Grimshaw, 2003; Boaz, Baeza, & Fraser, 2011).

The *Knowledge Translation Planning Template* © supports effective and evidence-based knowledge translation of research to practice by individual scientists, research teams, and/or KT practitioners.

Educational Objectives

Category	Objectives for The KT Planning Template user:
Remembering: Recall previous learned information.	Knows the core components of KT planning (i.e., partners, engagement, roles, expertise, knowledge users, KT goals, main messages, KT strategies, KT process, KT impact and evaluation, budget and resources, implementation)
Understanding: Comprehending the meaning, translation, interpolation, and interpretation of instructions and problems. State a problem in one's own words.	Explains the steps one will follow, and the rationale, for the implementing the KT plan pertaining to the specific project or research endeavour
Applying: Use a concept in a new situation or unprompted use of an abstraction. Applies what was learned in the classroom into novel situations in the work place.	Produces a KT plan for a specific project or research endeavour
Analyzing: Separates material or concepts into component parts so that its organizational structure may be understood. Distinguishes between facts and inferences.	Outlines in step fashion the core elements of the KT plans as it pertains to the project or research endeavour
Evaluating: Make judgments about the value of ideas or materials.	In selecting KT strategies and KT approach (integrated or end of grant KT), describes and justifies the processes involved for their use
Creating: Builds a structure or pattern from diverse elements. Put parts together to form a whole, with emphasis on creating a new meaning or structure.	Creates a KT plan that will guide the KT activities for a project or research endeavor

Conceptual Background

In Canada, as elsewhere worldwide (Tetroe et al., 2008), planning for integrated (iKT) and end-of-grant knowledge translation is highly encouraged by institutions and research funding bodies in an effort to bridge the research to practice gap (National Research Council, 2001).

Approximately two-thirds of funders reviewed by Tetroe et al., (2008) request a KT plan as part of a submission for research funding, and many promote the active participation of knowledge users in core research activities (iKT).

The *Knowledge Translation Planning Template* © was developed to guide the user in the development of a KT plan for a specific research project or endeavor.

The tool is a universally applicable to health, mental health, allied health, education, and social sciences.

Deployment

The *Knowledge Translation Planning Template* © is an educational component of the Scientist Knowledge Translation Training Program™ (SKTT; Barwick, Butterill, Lockett, Buckley & Goering, 2005) and the Knowledge Translation Professional Certificate™ (KTPC, Barwick, Bovaird, Parker, McMillen & Warmington, 2011), two professional development courses.

It has been taught to over 1,460 SKTT participants since its development in 2008, and to 105 KTPC participants since 2011.

It is available for free as a download on www.melaniebarwick.com.

Adaptations & Spread

The *Knowledge Translation Planning Template* © is widely used, and has informed the work of, and/or been adapted by, several authors/organizations, with permission from the author, including:

- KT planning process on www.MakeResearchMatter.org
- Hospital for Sick Children Foundations' National Grants Programs www.sickkidsfoundation.com/grants/knowledge.asp
- York University's Office of Research Services (KMb Unit)
- EENet, Ontario's evidence exchange network for mental health and addictions
- Included in the tool repository for the National Collaborating Centre for Methods and Tools (www.nccmt.ca)
- Community First: Impacts of Community Engagement (CFICE) www.thecommunityfirst.org
- Simcoe Muskoka District Health Unit
- Women and Children's Health Research Institute, Community-University Partnership, Faculty of Extension, University of Alberta
- Addictions Services knowledge brokers in Nova Scotia
- Alberta Addiction & Mental Health Partnership Program www.mentalhealthresearch.ca/KeyInitiatives/ResearchGrants/Seniors_PwD/Pages/KnowledgeExchange.aspx

Adaptations & Spread (cont'd)

- Health Care Programs and Policy Directorate , Health Canada
- Community Health Sciences, Faculty of Medicine, University of Manitoba
- Ontario Heart and Stroke Foundation
- Alliance for Canadian Health Outcomes Research in Diabetes, School of Public Health, University of Alberta
- Occupational Therapy, University of Alberta
- Ontario Agency for Health Protection and Promotion

Use and Adaptation Requests

The *Knowledge Translation Planning Template* © is an open access tool and the author welcomes communications regarding lessons learned, contexts in which it is used, and adaptations.

All adaptations to the tool must cite the original author as per the citation:
Barwick, M. (2008, 2013). *Knowledge Translation Planning Template*.
Toronto, ON: The Hospital for Sick Children.

Implementation Guidance

- The *Knowledge Translation Planning Template* © is readily available on the web, at no cost (www.melaniebarwick/training.php).
- In its most recent revision (2013), there is space to include notes on the form. No other materials are required.
- It is recommended that the plan be developed collaboratively by the (research or KT) team.

References

- Balas, E. A., & Boren, S.A. (2000). Managing clinical knowledge for health care improvement. In: Bemmel J, McCray AT, editors. Yearbook of Medical Informatics 2000: Patient-Centered Systems. Stuttgart, Germany: Schattauer Verlagsgesellschaft mbH; 2000:65-70.
- Brewer, J. D. (2000). *Ethnography*. Buckingham: Open University Press. 95.
- **Barwick, M. (2008-2013). Knowledge Translation Planning Template-Revised©. Toronto, ON: The Hospital for Sick Children.**
- Barwick, M. (2009-2013). The KT Game. Toronto, ON: The Hospital for Sick Children.
- Barwick, M., Butterill, D., Lockett, D. M., Buckley L & Goering P. (2005). Scientist Knowledge Translation Training. Toronto, ON: The Hospital for Sick Children / Centre for Addiction in Mental Health.
- Barwick, M., Bovaird, S., Parker, K., McMillen, K. & Warmington, K. (2011). Knowledge Translation Professional Certificate™. Toronto ON: Learning Institute, Hospital for Sick Children.
- Bloom, B. S. (1956). *Taxonomy of educational objectives, Handbook I: The cognitive domain*. New York: David McKay Co. Inc.

References cont'd

- Boaz, A., Baeza, J., Fraser, A., & the European Implementation Score Collaborative Group (EIS). (2011). Effective implementation of research into practice: an overview of systematic reviews of the health literature. *BMC Research Notes*, 4:212 doi:10.1186/1756-0500-4-212.
- Grol, R., & Grimshaw, J. (2003). From best evidence to best practice: effective implementation of change in patients' care. *The Lancet*, 362(i9391): 1225.
- National Research Council. (2001). *Crossing the Quality Chasm: A New Health System for the 21st Century*. Washington, DC: The National Academies Press.
- Pohl, M. (2000). Learning to think, thinking to learn: Models and strategies to develop a classroom culture of thinking. Cheltenham, Vic.: Hawker Brownlow.
- Ross, S., Goering, P., Jacobson, N., & Butterill, D. (2006). Towards more effective peer review of knowledge translation plans in research grant proposal. Toronto, Canada: Centre for Addiction and Mental Health.
- Tetroe, J. M., Graham, I. D., Foy, R., Robinson, N., Eccles, M. P., & Wensing, M., Durieux, P., Legare, F., Palmhøj Nielson, C., Adily, A., Ward, J.E., Porter, C., Shea, B. & Grimshaw, J.M. (2008). Health research funding agencies' support and promotion of knowledge translation: an international study. *The Milbank Quarterly*, 86(1), 125–155.

Disclaimer

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Thank you!

Questions? Contact us: ktddr@sedl.org

Please complete the brief evaluation form:

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