Knowledge Translation Planning Template ©

Melanie Barwick
October 28, 2015

800-266-1832 | www.ktdrr.org

No part of this presentation may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording, or any information storage and retrieval system, without permission in writing from SEDL/AIR (4700 Mueller Blvd., Austin, TX 78723), or by submitting an online copyright request form at www.sedl.org/about/copyright_request.html. Users may need to secure additional permissions from copyright holders whose work SEDL/AIR included after obtaining permission as noted to reproduce or adapt materials for this presentation.
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)
Effective KT starts with identifying your **KT Goals:**
What is your purpose in sharing what you learned?

- Generate awareness & interest
- Share knowledge
- Inform future research
- Generate practice change (practitioners) or behavior change (people)
- Generate policy action
- Mobilize public action
- Commercialization or patent
Who is your audience?

WHO needs to hear your message?

HOW well do you know them?

ACT how prepared are they to act?

BLOCKS that might impede you?
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?
KT and Evaluation

Failing to evaluate whether your KT activities achieved the intended KT goal(s) leads to:

- Sub-optimal knowledge translation
- Sub-optimal return on investment
- Unrealized contribution to KT science
KT Planning Cycle & Common Failures

- KT Goal(s)
- KT Plan
- Implement (do it)
- Evaluate
- Validate
- Inform

Common Failures:
- X

KT Planning Cycle:
- Inform
- KT Goal(s)
- KT Plan
- Implement (do it)
- Evaluate
- Validate
Evaluation Approaches

1) Indicators – e.g., reach, usefulness, use, collaboration
2) Learning outcomes
   Kirkpatrick Model: Reaction / Learning / Behavior / Results
3) Evaluation of Implementation Effectiveness
   NIRN model
   RE-AIM
   Stages of Implementation Completion
   CFIR – Consolidated Framework for Implementation
   Proctor Implementation Outcome Typology
4) Evaluation of Research Impact
   Canadian Academy of Health Sciences
   Research Councils United Kingdom
   Australia’s Research Excellence Framework
Impact

*Academic impact*
The demonstrable contribution that excellent research makes to academic advances, across and within disciplines, including significant advances in understanding, methods, theory and application.
Source: http://www.rcuk.ac.uk/kei/impacts/Pages/meanbyimpact.aspx

*KT impact*
The demonstrable contribution that KT activities make to achieving stated KT goals based on research outcomes.
Research Impact vs. KT Impact

A piece of research, if it’s worth funding and doing at all, must not only be published, but used, applied and built-upon by others (e.g., researchers, practitioners, decision makers)

‘Research impact’ is typically measured as the number of times an article is cited by other articles (‘citation impact’ or H index).

# of journal articles published is not a good indicator of research impact, (captures productivity), nor of KT impact

We need other metrics.
Outcomes and Impact

Outcome: stands alone

Impact: on something

Impact has to tell you / show you that people knew what to do with the knowledge you shared.
KT Impact

LEVEL 1
Impact on Healthcare Research Base & Future Research

LEVEL 2
Impact on Health Policies & Services

LEVEL 3
Impact on Clinical Practice

LEVEL 4
Impact on Health Outcomes

Indicators for Use in Evaluation

Reflection — Where am I now?
Indicators of Impact for Services and Products

Sullivan, T.M., Strachan, M., and Timmons, B.K.

Guide to Monitoring and Evaluating Health Information Products and Services.


Reach Indicators

Area 1: Primary Distribution (Push)
- Number of copies of a product initially distributed to existing lists
- Number of copies of a product distributed by a publisher through additional distribution

Area 2: Secondary Distribution (Pull)
- Numbers of products distributed in response to orders
- Number of file downloads in a time period
- Number of people reached by media coverage of the material or generated by it

Area 3: Referrals
- Number of instances that products indexed or archived in bibliographic databases
- Number of postings by other Web sites or links to products from other Web sites
Quality Indicators

Area 1: User Satisfaction

• Percentage of those receiving a product or service that read or browsed it
• Percentage of users who are satisfied with a product or service
• Percentage of users who rate the format/presentation of a product as usable
• Percentage of users who rate the content of a product or service as useful
• Number/percentage of users who report knowledge gained from product/service
• Number/percentage of users who report product or service changed their views

Area 2: Product or Service Quality

• Number and quality assessment of reviews of a product in periodicals
• Number and significance of awards given to a product or service
• Number of citations of a journal article or other information product
• Journal impact factor
• Number/percentage of users who pay for a product or service
Use Indicators

- Number/percentage of users intending to use an information product or service
- Number/percentage of users adapting information products or services
- Number/percentage of users using an information product or service to inform policy and advocacy or to enhance programs, training, education, or research
- Number/percentage of users using an information product or service to improve their own practice or performance
Collaboration and Capacity Building Indicators

Area 1: Collaboration

• Number of instances of products or services developed or disseminated with partners

• Number of instances of South-to-South or South-to-North information sharing

Area 2: Capacity Building

• Number and type of capacity-building efforts
Partnership Evaluation Tool

Developed to help multi-sectoral partnerships to monitor their development, to assess emerging benefits and to identify areas for further development. **PET** is based on research carried out by the Institute of Public Health from 2003 to 2006 as part of a research program on measuring impacts of multi-sectoral partnerships on inequalities in health.

Knowledge Translation Planning Template

<table>
<thead>
<tr>
<th>(1) Project Partners</th>
<th>(2) Degree of Partner Engagement</th>
<th>(3) Partner(s) Roles</th>
<th>(4) KT Expertise on Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>researchers</td>
<td>from idea formulation straight through</td>
<td>(1) What do the partner(s) bring to the project?</td>
<td>scientist(s) with KT expertise</td>
</tr>
<tr>
<td>consumers - patients/families</td>
<td>after idea formulation &amp; straight through</td>
<td>(2) How will partners assist with developing, implementing or evaluating the KT plan?</td>
<td>consultant with KT expertise</td>
</tr>
<tr>
<td>the public</td>
<td>at point of dissemination &amp; project end</td>
<td>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.</td>
<td>knowledge broker/specialist</td>
</tr>
<tr>
<td>decision makers</td>
<td>beyond the project</td>
<td>Action: Capture their specific roles in letters of support to funders, if requested.</td>
<td>KT supports within the organization(s)</td>
</tr>
<tr>
<td>private sector/Industry</td>
<td></td>
<td></td>
<td>KT supports within partner organization(s)</td>
</tr>
<tr>
<td>research funding body</td>
<td></td>
<td></td>
<td>KT supports hired for specific task(s)</td>
</tr>
<tr>
<td>volunteer health sector/NGO</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>practitioners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTES

Assistance in formulating a KT Plan.
Available as free download: www.melaniebarwick.com/training.php
Ontario: The Hospital for Sick Children
© 2008, 2013 The Hospital for Sick Children
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.

<table>
<thead>
<tr>
<th>(1) Project Partners</th>
<th>(2) Degree of Partner Engagement</th>
<th>(3) Partner(s) Roles</th>
<th>(4) KT Expertise on Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>researchers</td>
<td>from idea formulation straight through</td>
<td>(1) What do the partner(s) bring to the project?</td>
<td></td>
</tr>
<tr>
<td>consumers - patients/families</td>
<td>after idea formulation &amp; straight through</td>
<td>(2) How will partner(s) assist with developing, implementing or evaluating the KT plan?</td>
<td></td>
</tr>
<tr>
<td>the public</td>
<td>at point of dissemination &amp; project end</td>
<td>Action: Capture their specific roles in letters of support to funders, if requested.</td>
<td></td>
</tr>
<tr>
<td>decision makers</td>
<td>beyond the project</td>
<td></td>
<td></td>
</tr>
<tr>
<td>private sector/industry</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>research funding body</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>volunteer health sector/NGO</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>practitioners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>scientist(s) with KT expertise</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>consultant with KT expertise</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>knowledge broker/specialist</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KT supports within the organization(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KT supports within partner organization(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KT supports hired for specific task(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Knowledge Translation Conference

KT Solutions for Overcoming Barriers to Research Use

(5) Knowledge Users (KUs)

Which KUs or audiences will you target?

- researchers
- health practitioners or service providers
- public
- media
- patients/consumers
- decision makers
  - in organization
  - in community
- policy makers
- private sector/industry
- research funders
- venture capitalists
- volunteer health sector/NGO
- other, specify ▶__________

Consider: Have you included any of your audiences on your research team? If so, who and why (be strategic)?

(6) Main Messages

What did you learn, or what do you anticipate learning?

What messages do you anticipate sharing (up to 3 KU audiences can be included on this form)?

Audience 1

Audience 2

Audience 3

OR

No idea yet; messages will emerge during research through collaboration with partners.

Consider: What can you feasibly do within this project, given time and resources? Aim for defining your Single Most Important Tiling (SMIT) or Bottom Line Actionable Message (BLAM).

(7) KT Goals

What are your KT Goals for each KU/audience?

Audiences ▼ 1 ▼ 2 ▼ 3
- Generate...
- awareness
- interest
- practice change
- behaviour change
- policy action
- Import...
- knowledge
- tools
- Inform...
- research
- product
- patent
- other ▶__________

Consider: KT is applicable to all research; even single studies are shared via journal articles. However, intent to change practice, behaviour or policy must be supported by a body of high quality research evidence (synthesis). Always consider legal and ethical principles in your KT efforts.

(8) KT Strategy(s)

What KT strategy(s) will you use?

Audiences ▼ 1 ▼ 2 ▼ 3
- Mostly Effective 1
- interactive small group
- educational outreach
- reminders
- IT decision support
- multi-prof collaboration
- mess media campaign
- financial incentive
- combined interventions
- Mixed Effects 1
- conferences (didactic)
- opinion leaders
- champions
- educational materials
- patient-mediated interview
- performance feedback
- substitution of tasks
- peer reviewed publication
- Limited Effects 1
- CQI - Continuous Quality Improvement
- Effects Unsupported by Synthesis 1
- press release
- patent license
- arts-based KT
- social media
- networks
- communities of practice
- Café Scientifique
- webinar
- other ▶__________
### KT Process

**When will KT occur?**
- [ ] integrated iKT³ – researchers and research users will collaborate to shape the research process, e.g., setting the research questions, deciding the methodology, involvement in data collection and tools development, interpretation of findings and dissemination of research results
- [ ] end of grant iKT³ – KT undertaken at the completion of the research process
- [ ] both

*Comment on the specifics of your KT procedures; describe how you are using iKT.*

### KT Impact & Evaluation

**Where do you want to have an impact?**
- [ ] healthcare/well-being outcomes
- [ ] (clinical) practice
- [ ] policies/systems
- [ ] research & knowledge

**How will you know if you achieved your KT goal(s)? Consider:**
- reach indicators (# distributed, # requested, # downloads/hits, media exposure)
- usefulness indicators (read/browsed, satisfied with, usefulness of gained knowledge, changed views)
- use indicators (# intend to use, # adopting the information, # using to inform policy/advocacy/enhance programs, training, education, or research, # using to improve practice or performance)
- partnership/collaboration indicators (# products/services developed or disseminated with partners, # or type capacity building efforts, social network growth, influences, collaborativeness)
- practice change indicators (intent or commitment to change, observed change, reported change)
- program or service indicators (outcome data, documentation, feedback, process measures)
- policy indicators (documentation, feedback, process measures)
- knowledge change (quantitative & qualitative measures)
- attitude change (quantitative & qualitative measures)
- systems change (quantitative & qualitative measures)

### Guiding Questions for Evaluation

1. What internal/external factors do you need to consider? Where is the energy for this work? How have similar initiatives been evaluated in the past? ([link this to partners, KUs](#))
2. Who values the evaluation of this initiative? What are they saying they need from this evaluation? ([link this to partners, KUs](#))
3. Why are you evaluating? For program/growth or improvement; accountability? Sustainability? Knowledge generation? (e.g., to know if the KT strategy met the objectives)
4. How will literature or existing theories inform how you evaluate the initiative?
5. Which questions/objectives are critical? ([link this to KT goals, process, impact](#))
6. Will you focus on process or outcome information? What are your pre-determined outcomes? How will you capture emergent outcomes?
7. Does this information already exist in your system? ([link to methods, process, impact](#))
8. Will methods be quantitative, qualitative or mixed? Do tools exist or will you need to create your own? ([link to KT methods](#))
9. What perspective or skill set do you need to help you reach your evaluation objectives? ([link to partners, KUs](#))
10. How do your stakeholders wish to receive this information so that it will be valuable and useful to them? How will you engage them throughout? ([link to partners, KUs](#))
## Knowledge Translation Conference

**KT Solutions for Overcoming Barriers to Research Use**

### (11) Resources

What resources are required?
- [ ] board
- [ ] financial
- [ ] human
- [ ] IT
- [ ] leadership
- [ ] management
- [ ] volunteer
- [ ] web
- [ ] worker
- [ ] other: (list)

### (12) Budget Items

What budget items are related to the KT plan?
- [ ] accommodation
- [ ] art installation
- [ ] evaluation specialist
- [ ] graphics/imagery
- [ ] knowledge broker
- [ ] KT specialist
- [ ] mailing
- [ ] media release
- [ ] media product (e.g., video)
- [ ] networking functions
- [ ] open access journal
- [ ] plain text writer

Estimated costs for items listed:

### (13) Implementation

Describe how you will implement your KT strategy(s):
What processes/procedures are involved? If practice or behaviour change is the focus, how will you ensure the knowledge (intervention) you are transferring retains quality, fidelity, sustainability?

NOTE: Be sure to include all KT costs in your budget for funders
Knowledge Translation Conference
KT Solutions for Overcoming Barriers to Research Use

Melanie Barwick, PhD, CPsych
Senior Scientist, Child Health Evaluative Sciences, Research Institute
Head, Child and Youth Mental Health Research Unit, Psychiatry
The Hospital for Sick Children
Associate Professor, Department of Psychiatry
University of Toronto

Email: melanie.barwick@sickkids.ca
Web: www.melaniebarwick.com
twitter.com/MelanieBarwick
WordPress: melaniebarwick.wordpress.com
PH: 416-813-1085

Scientist Knowledge Translation Training course (SKTT) http://tinyurl.com/3uaqob7
Knowledge Translation Professional Certificate (KTPC) http://tinyurl.com/7zrvbq4

An Online Conference for NIDILRR Grantees
Hosted by SEDL’s Center on Knowledge Translation for Disability and Rehabilitation Research (KTDBR)
Disclaimer:

The contents of this presentation were developed under a grant from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant number 90DP0027). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this presentation do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.