

2017 Online Conference

Knowledge Translation Outcome Measurement

Hosted by AIR's Center on Knowledge Translation for
Disability and Rehabilitation Research (KTDRR)



October 30, November 1, and November 3, 2017



**Institute
for Work &
Health**

Research Excellence
Advancing Employee
Health

The Approach to Knowledge Transfer and Exchange and the Measurement of Research Impact at the Institute for Work & Health

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Online KT Conference, Center for KTDRR, American Institutes for Research

October 30, 2017



Overview

- About the Institute for Work & Health
- Integrated Knowledge Transfer and Exchange at IWH
 - Engaging stakeholders/knowledge users
 - Communications
- Measuring Reach and Impact





Who we are

The **Institute for Work & Health** is a not-for-profit research organization based in Toronto, Canada

We conduct and share research to protect and improve the health of working people. Our research is carried out in two broad domains:

- (1) preventing work-related injury and illness
- (2) improving the health and recovery of injured workers



Who are the users of IWH research?

Health and safety practitioners: ergonomists, consultants

Workplaces (including managers and worker representatives)

Workers and injured worker associations

Employers and employer associations

Unions

Workers' compensation boards

Government

Clinical practitioners: physiotherapists, kinesiologists, chiropractors, occupational therapists, nurses

Disability management professionals



Integrating knowledge transfer and exchange

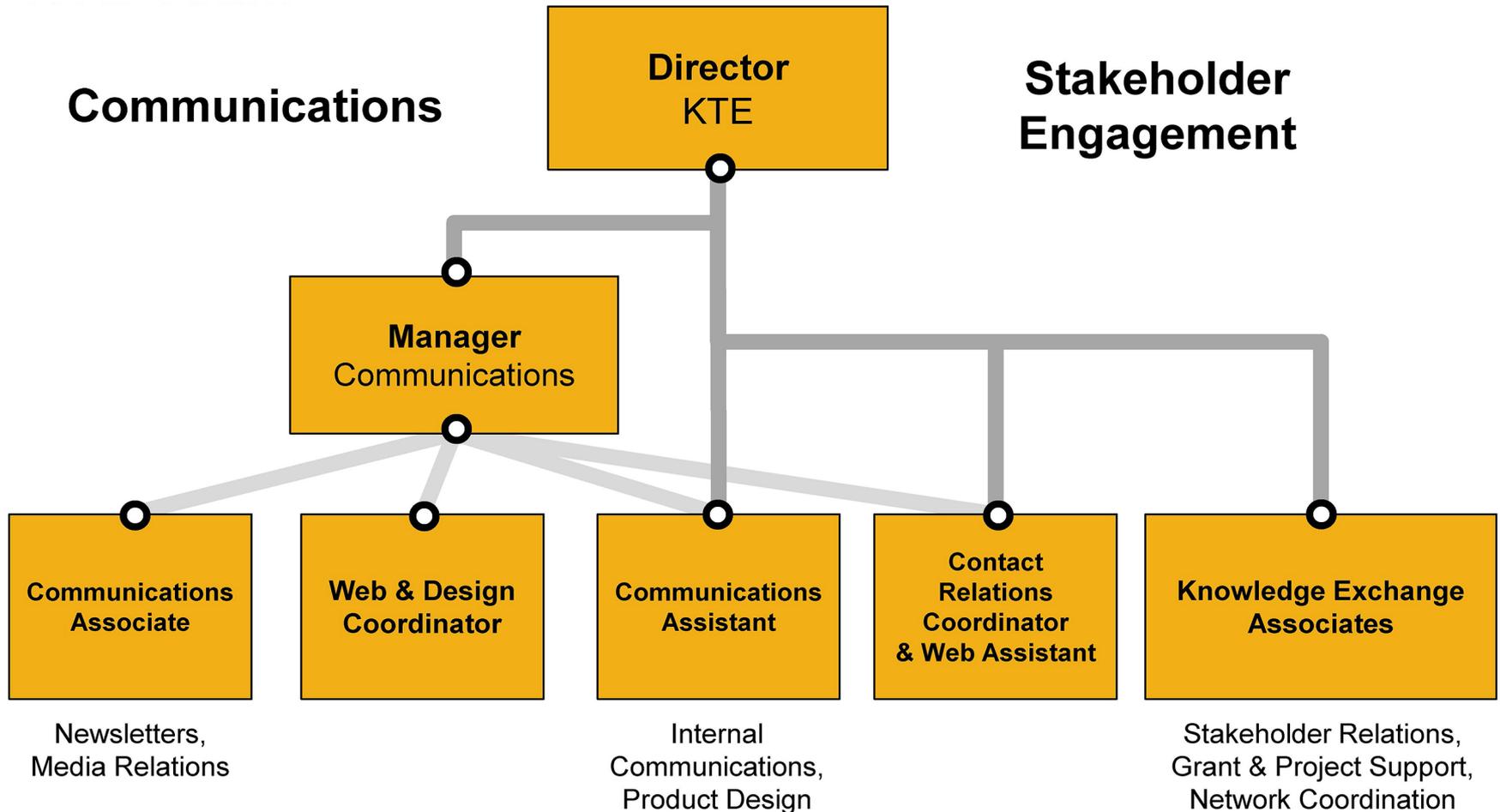
IWH has a team dedicated to supporting the integration of knowledge transfer and exchange (KTE) in all our work

KTE goal: to make relevant research evidence accessible through interactive engagement with specific audiences to help inform practice, planning and policy-making





KTE Team





How do we achieve our goal

1. Build stakeholder networks and relationships
2. Build stakeholder/knowledge user engagement into research process
3. Enhance capacity in our audiences to better understand and make use of evidence
4. Develop tools, communication technologies and techniques that facilitate the dissemination and application of research evidence

Networks
and
relationships

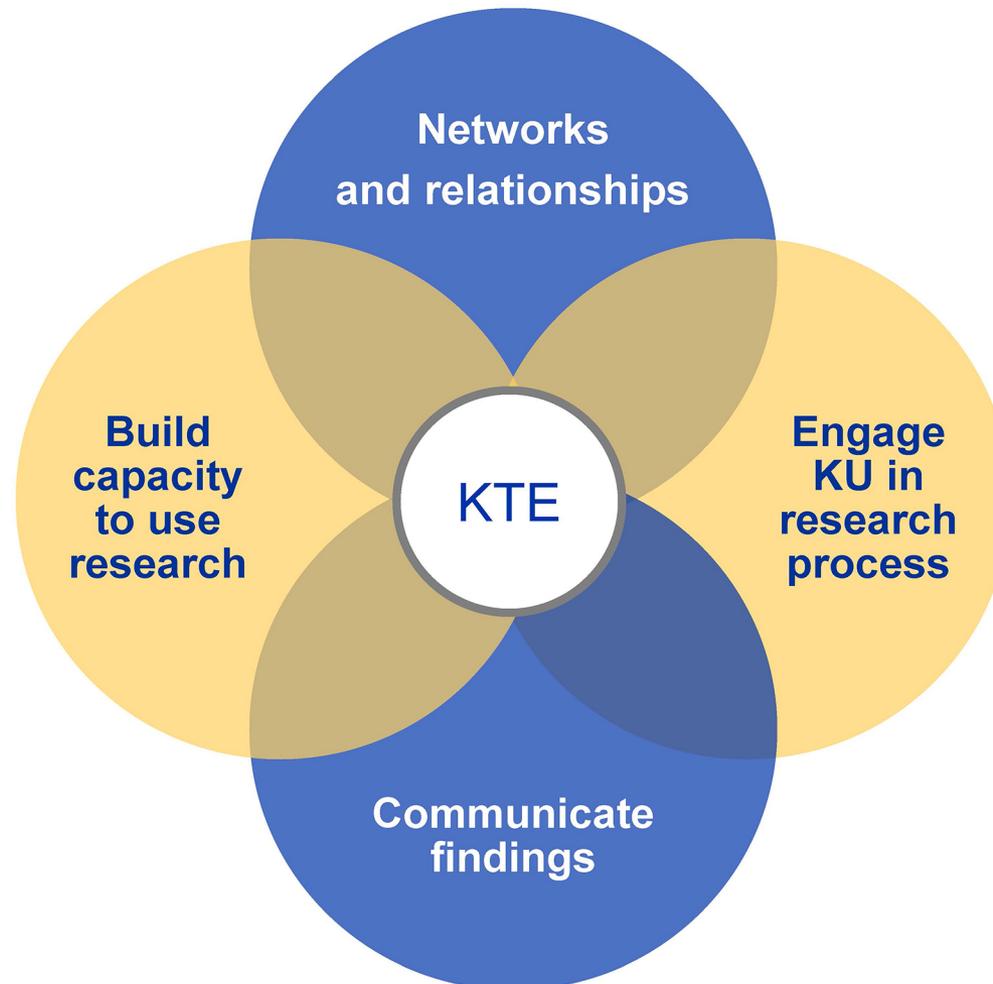
Engage KU
in research
process

Build
capacity to
use research

Communicate
findings



Integrated KTE strategies and activities





Networks and relationships

- Regular meetings with:
 - health and safety system partners
 - policy officials
 - influential practitioners



Engage KU in research process

- Regular consultations on emerging issues
- Pre-grant focus groups/consultations
- Stakeholder participation in advisory committees or as research team members
- Follow ups to identify how research is used



Communicate findings

- Evidence-based tools/guidelines
- Newsletters (*At Work, IWH News*)
- Research summaries
- Summaries of systematic reviews (*Sharing Best Evidence*)
- Briefings on policy issues (*Issue Briefing*)
- Via our website, social media, alerts

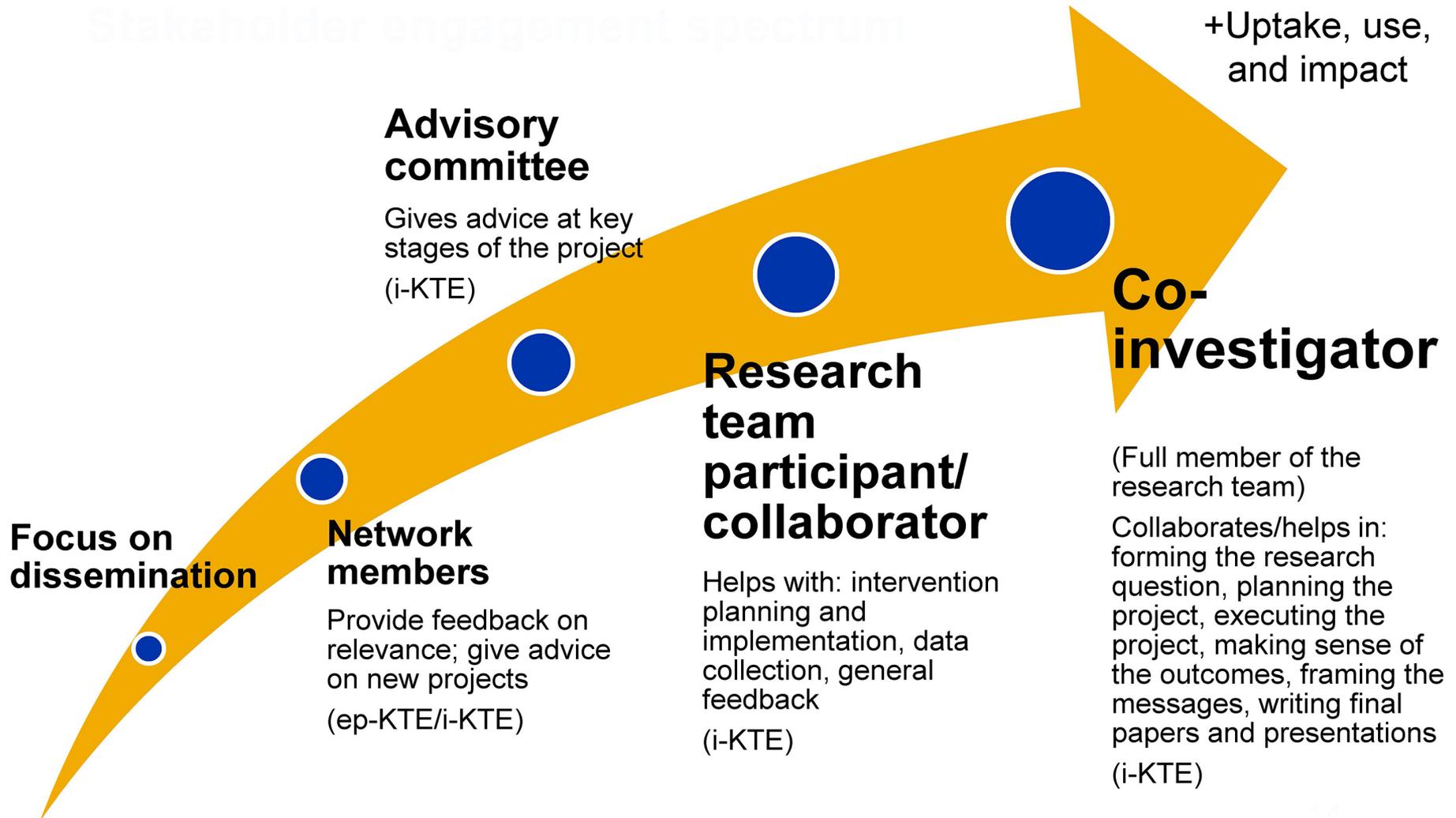


Build capacity to use research

- “*What Researchers Mean By*” column
- Workshops on:
 - how to conduct systematic reviews
 - research methods
- Consultations with knowledge users

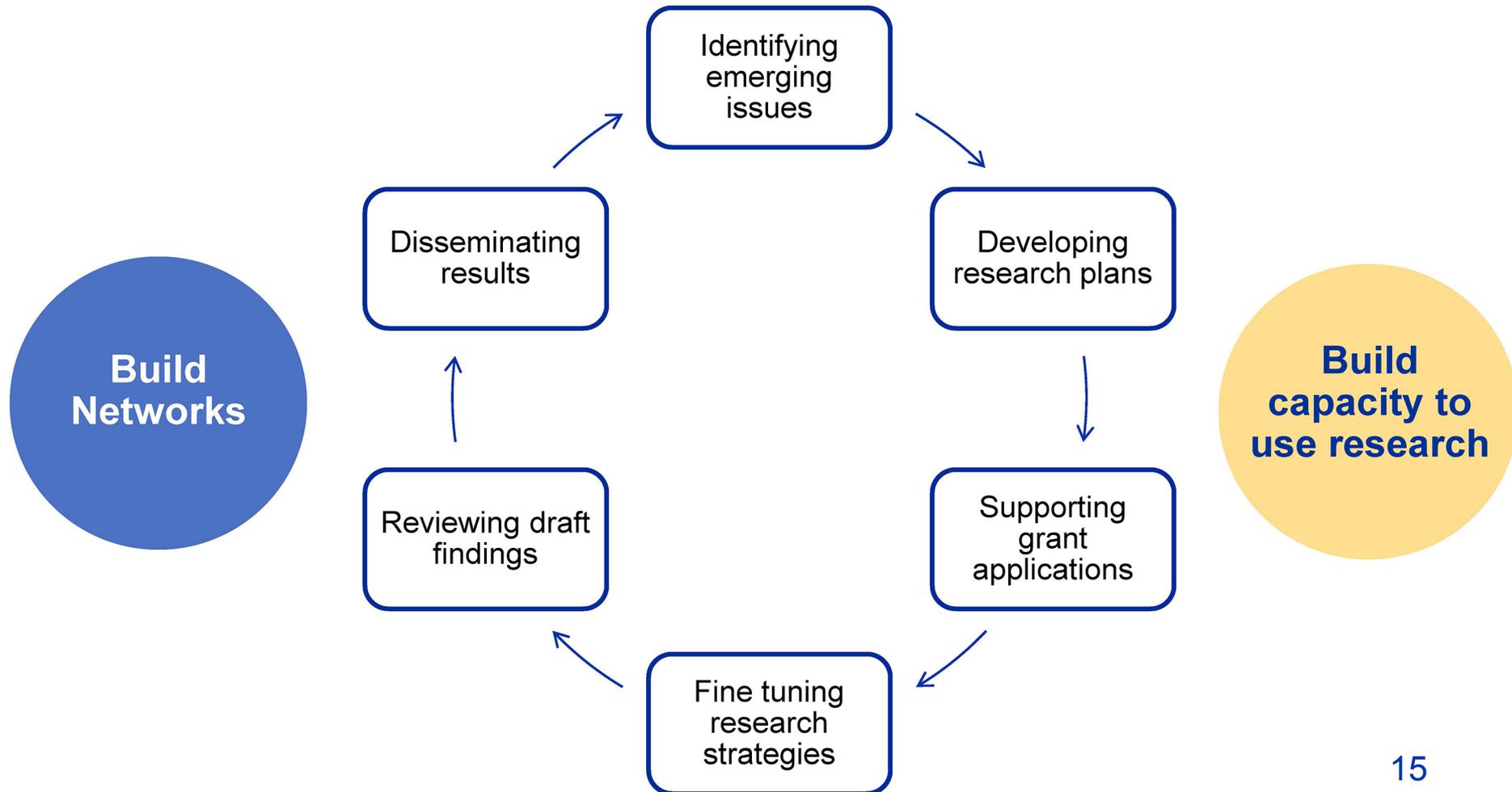


Stakeholder engagement spectrum





Integrating KTE into the research process



Measuring reach and impact



Measuring reach

- We track numbers of people who receive and view IWH products.
- Examples:
 - Web visitors
 - Downloads
 - Subscribers
 - Twitter and Linked In followers



Measuring impact

- Tracking use of our work and documenting impact on policies, practices and health and safety outcomes
- Difficult to do quantitatively. We rely mainly on testimonials and case studies
- Case studies tell stories of use and/or impact of our work
- We identify case study candidates through testimonials, **advisory committees, research collaborations**, and by monitoring reports of WSIB and MOL. (Our integrated approach to KTE helps us identify impact.)



Research Impact Model

Type 1 case study: Evidence of the diffusion of research

Evidence that IWH research is referred to by external stakeholders

Type 2 : Evidence of research informing decision-making

Evidence that IWH research affects legislation, policies, programs, workplace practice or clinical practice

Type 3: Evidence of societal impact

Evidence that IWH research contributes to changes in outcomes, e.g. work injury/illness rates, disability duration (Attribution a challenge—but occasionally a policy official is explicit)



Research impact case study categories

Type1:

Evidence of
diffusion of
research evidence

Common, simple
to document

Type2:

Evidence of
research informing
decision-making

Less common,
Moderate effort to
document

Type3:

Evidence of
Societal impact:
Health benefits,
Economic benefits

Attribution and
benefits difficult to
estimate



Examples of Impact

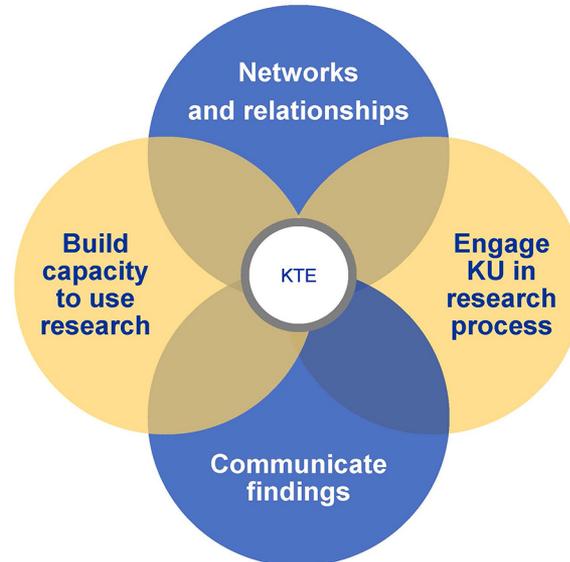
- Improving prevention of work-related **musculoskeletal disorders**
- Identifying **leading indicators of OHS** outcomes
- Developing conceptual framework and survey tool regarding the **vulnerability** of individual workers to work injury or illness
- Improving **accommodation and return to work** practices
- Changing the focus **from young** workers **to new** workers



Acknowledgment

The Institute for Work & Health operates with the support of the Province of Ontario.

The views expressed in this document are those of the authors and do not necessarily reflect those of the Province of Ontario.





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The contents of this presentation were developed under grant number 90DP0027 from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). 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.