Using the Knowledge Transfer Guide developed by the Institute for Work & Health

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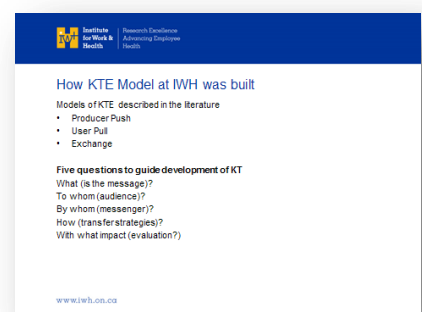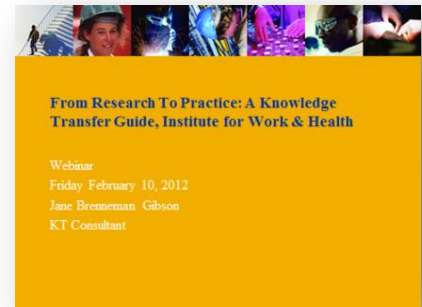
Introduction

Welcome to "From Research to Practice", our second Spotlight on Knowledge Translation Methods & Tools webinar. During this installment, we'll be looking at the Knowledge Transfer Guide developed by the Institute for Work & Health (IWH). As an applied research organization, IWH focuses on workplace issues such as injury prevention and treatment, effective return-to-work procedures, and compensation systems. The IWH conducts and shares research that protects and improves the health of working people and is valued by policy-makers, workers and workplaces, clinicians, and health and safety professionals.

Knowledge Transfer & Exchange

In their role as a knowledge producer, IWH engages heavily in Knowledge Transfer & Exchange (KTE). The goal of KTE is to make relevant research evidence accessible and usable through interactive engagement with specific audiences to help inform practice, planning, and poli cy-making. In order to accomplish this, IWH created a KT Planning Tool based on the work of Lavis et al. (2003), who proposed that "exchange relationships can bring about a cultural shift that facilitates the ongoing use of research knowledge among decision-makers and a more decision-relevant culture among researchers."
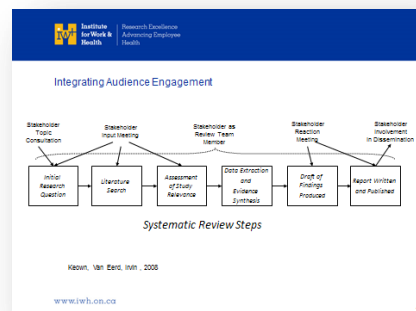
The KT Planning Tool

The resulting KT Planning Tool moved away from the Producer Push model IWH had been heavily involved in, where researchers would simply look at the available research and design ways to disseminate it to users. Instead, IWH developed an integrated model that involved stakeholder input early and throughout the research process. Though it was initially met with resistance from researchers, this integrated model is now viewed quite favourably by everyone within IWH.
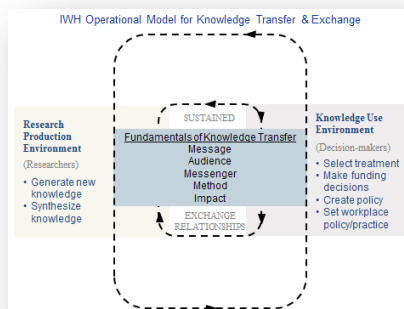
Engaging Stakeholders

Involving stakeholders early meant that stakeholders would be integrated from the very beginning of the process, including helping pick research topics that would be relevant to them in their practice. Once a topic was picked, stakeholders would be invited to help refine the research question, contribute search terms, and join as team members where those skills existed. As research findings began to surface, presenting them in a useful way and assessing their applicability and transferability were other opportunities to gather stakeholder perspective. At the end of the process, stakeholders were instrumental in disseminating research to interested parties.

Operational Model for KTE

In facilitating this stakeholder involvement, the IWH Operational Model for KTE aims to create sustained exchange relationships between two camps: the research production environment, where researchers generate and synthesize knowledge; and the knowledge use environment, where decision-makers use knowledge to select treatment, make funding decisions, create policy, and set workplace policy and practice. In order to facilitate this relationship, the model specifies five fundamentals of knowledge transfer that must be considered: the message, the audience, the messenger, the method, and the impact. The result was a series of five questions designed to help in the KTE process.
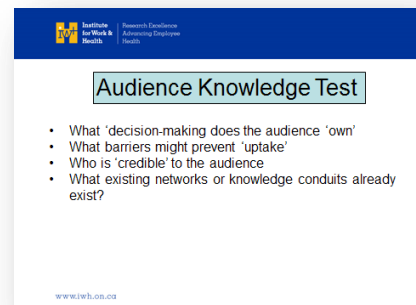

Questions to guide KTE – What (is the message)?

The first step in using the KT Planning Tool is to refine the message for dissemination. The message should be a clear, compelling idea, well-grounded in evidence and related to the audience's decision-making. To assess this, we should ask: Why is the researched issue important? What does the evidence show and is it well supported? How does current practice differ from what the evidence says? What does the research mean for decision-makers? IWH also developed a message typology to match appropriate KTE activities with each type of message.

Questions to guide KTE   – To Whom and By Whom?

IWH found that audience-specific delivery is key. Determining who needs to hear the message and why is a crucial step of KTE. In addressing the To Whom question, we must ask: What decision-making does the audience "own"? What decisions are within their "sphere"? What barriers might prevent uptake of knowledge? Conversely, we must consider the messenger involved: Who is credible to the audience? What existing

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networks or knowledge conduits already exist? Understanding the audience being targeted and the messenger being used are pivotal elements of the KTE process.

Questions to guide KTE – How?

The method of conveying a message can be as important as the messenger itself, so IWH compiled synthesized recommendations from evidence on the effectiveness of different transfer methods. The KT Planning Tool presents transfer methods clustered based on their researched effectiveness an d invites users to reflect on the feasibility of their plan. Some of the methods that have been demonstrated to be effective include using interventions tailored to overcome identified barriers, providing interactive engagements with practitioners, and issuing reminder messages.

Questions to guide KTE – With What Impact?

Research indicates there are three ways to measure the impact of KTE: indirect use, which tends to inform discussion; direct use, which results in changes in behaviour, policy, and procedures; and symbolic use, which involves using research to validate pre-existing positions. In order to measure these impacts, IWH condu cted a systematic review looking at whether there are reliable, valid, and useful instruments for assessing the impact of KTE. Despite finding 66 relevant articles across nine databases, IWH found few well-developed approaches or instruments to evaluate KTE.

The KT Planning Tool in Use

An example of this model being used in practice stems from the workplace assumption that youth are injured more frequently than their older coworkers due to their immaturity. Through a systematic review, IWH learned that it was not young workers getting hurt more often, but new workers – typically in the first month of their job. Since young workers are in new jobs more often, they have more "first months" than older workers, and so are at greater risk of injury. The message that needed to be delivered from this was that intervention strategies were needed before work started, and supervisor support was very important.

Audience and Messenger

At the time, the Workplace Safety and Insurance Board (WSIB) were preparing their annual public education campaign. In the absence of notable barriers and with significant existing networks in place, the organization was quickly identified as an ideal audience for this message. If this new knowledge could be transferred to these parties, it could be incorporated into the upcoming campaign. It was determined that the most credible messengers would be the lead researcher and the IWH president.

Method and Impact

Now that the message, audience, and messenger had been defined, it was time to select the method. Consulting the KT Planning Tool, IWH found that face-to-face meetings with the WSIB and campaign team (education outreach) and an online newsletter (overcoming time barrier) were well-supported transfer methods. After assessing the feasibility of each, IWH carried out the plan for disseminating knowledge to the WSIB. Evaluation could be based on the extent to which the message was incorporated into the education campaign.

Final Thoughts

Incorporating KTE into practice requires a culture shift on many fronts. Funders must choose to fund KTE as well as the research being disseminated. Research must engage stakeholders in the research process as early as possible. Finally, research users must build the capacity to integrate evidence into their practice. This will allow for improved uptake and use of high-quality research in public health decision making.