2015
Knowledge Translation Plan
Island Health

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May 2015
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ISBN: 978-0-9739243-9-8
Background

How the Knowledge Translation Plan was Informed

- Knowledge Translation is defined by CIHR as “a dynamic and iterative process that includes synthesis, dissemination, exchange and ethically-sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the health care system.”

- Examples of KT strategies include: Frequent brief, informal team meetings (huddles); research rounds; audit and feedback; knowledge brokering; clinical practice guidelines; professional standards; and "active-learning" continuing education.

- As part of Island Health’s Research Capacity Building (RCB) initiative, the RCB Department completed an environmental scan of Knowledge Translation Capacity Building, published in March 2014.

- Stakeholders from organizations similar to Island Health were interviewed and stated that they had learned that KT:
  - Must be tied to an organization’s strategic plan and must be shown through rigorous evaluations involving academics to improve outcomes
  - Is difficult, time consuming and requires dedicated resources
  - Must be tailored to a specific audience (the public, health care providers, senior management)
  - Must be supported through collaborations with internal and external stakeholders
  - In the longer term, the translation of evidence and knowledge (that is best practice clinical guidelines) must be hardwired into the Electronic Health Record.

- Informal discussions at Island Health indicate that there are many services that are currently being provided at Island Health to support KT activities. For example, the accreditation surveys provided positive feedback on its huddles and on its use of population based data to plan services to meet the needs of communities (the dashboard.)

The RCB Department prepared the KT plan with the following understanding:

- The goals and objectives of Island Health are aligned with the B.C. Ministry of Health.
- Island Health’s priorities include “providing an exemplary patient experience, delivering excellence in quality and safety and supporting a great place to work and learn for our staff and physician partners.”
- Island Health is focusing on the following vulnerable populations: seniors, persons with mental and/or chronic illness, Aboriginal peoples and youth.
- Collaboration is the key to achieving Island Health’s goals and objectives.
- Island Health has been working collaboratively to develop and provide leadership development programs.
- "Island Health is currently reviewing and modifying existing Quality Governance structures and processes to enable quality care to be delivered across the continuity of

1 http://www.cihr-irsc.gc.ca/e/39033.html
care services. A key enabler of this governance system will be the implementation of an expanded Information Technology system. It will include advanced analytics to enable an improved understanding of the quality of care being provided to our patients, clients and residents across the continuum of care spanning birth to death.”

- Managers are expected to access and use evidence. They are encouraged to use Evidence-Informed Decision Making.

How the Knowledge Translation Plan is structured

The RCB Department used the Sick Kids Knowledge Translation Planning template to develop Island Health’s plan. This tool was chosen after the Michael Smith Foundation for Health Research (MSFHR) and Island Health hosted a two-day workshop in November, 2013 entitled Scientist Knowledge Translation Training (SKTT™). This template has been used previously in many settings and was well-received by Island Health providers, based on the evaluation results.

How the Knowledge Translation Plan will be Monitored and Maintained

The following Table (Table 1) provides a list of KT strategies, the target KT audience, possible collaborators, and collaborative planning processes and suggested deliverables based on current progress and existing expertise and resources. The deliverable list has been compiled based on the input of multiple stakeholders involved in planning and executing existing KT activities throughout Island Health. It requires confirmation by the identified POSSIBLE collaborators.

This KT Plan is a living or dynamic document, one that is “continually edited and updated.” On an annual basis, a document with the RCB’s completed KT activities will be prepared. KT activities will be reported in appropriate venues. Once the business plan for 2015/16 is available, this version of the KT plan will be archived and replaced with a living KT plan for 2015/2016.

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5 http://www.msfhr.org/sites/default/files/SPF_Island_Health_Evaluation_Framework.pdf
6 http://www.nccmt.ca/registry/view/eng/131.html
7 http://en.wikipedia.org/wiki/Living_document
Table 1. List of KT deliverables. The list has been compiled based on the input of multiple stakeholders and requires confirmation by the identified partners.

|-------------------------------------|-------------------------------|-------------------|-----------------------------|------------------------------------------------------------|
| Arts-based KT                       | Brings together the systematic and rigorous qualities of scientific inquiry with the artistic and imaginative qualities of the arts to reach out beyond academic Summary of performance over a specified period of time | • Providers[^10] | • Vancouver Island University (VIU)  
• UVic  
• NIC  
• Royal Roads University | • Facilitate the submission of one collaborative grant application that includes arts-based KT. |
| Audit and feedback                  |                               | • Managers  
• Executives | • Performance Monitoring & Improvement  
• Operations Research & Advanced Analytics  
• Professional Practice & Learning | • Explore with decision-makers how RCB could support the monitoring of Island Health's activities re: an exemplary patient experience, delivering excellence in quality and safety and supporting a great place to work and learn for our staff and physician partners.  
• Identify and report on successful and unsuccessful projects that monitor and track data on how well the organization is meeting its goal and objectives.  
• Engage KT audience in the planning of conference (Five Days in May).  
• Provide support to collaborators during the planning and delivery of Five Days in May.  
• Engage KT audience in the planning and delivery of Knowledge-to-Action Month. |
| Conference                           | A gathering for the purpose of didactic presentation of science and networking | • Providers  
• Managers  
• Executives  
• Public | • MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health  
• Academic organizations | |

[^8]: Source: Hospital for Sick Kids Learning Institute, 2013  
[^9]: Collaborators’ participation unconfirmed  
[^10]: Providers may be formal or informal.
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<thead>
<tr>
<th>Knowledge Translation (KT) strategy</th>
<th>Definition of KT strategy</th>
<th>Target KT audience</th>
<th>POSSIBLE collaborators</th>
<th>Collaborative Planning Processes and Suggested Deliverables</th>
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<tbody>
<tr>
<td>Clinical practice guideline (CPGs)</td>
<td>Guidelines developed from systematic reviews to help healthcare professionals and patients make decisions about screening, prevention or treatment of a specific health condition</td>
<td>• Providers&lt;br&gt;• Managers&lt;br&gt;• Executive</td>
<td>• Professional Practice &amp; Learning (PPL)&lt;br&gt;• Quality Patient and Safety&lt;br&gt;• Clinical Nurse Specialists&lt;br&gt;• Academic organizations across the Island</td>
<td>• Identify and report on the involvement of Island Health providers at a local, provincial and national level in the implementation of CPGs.&lt;br&gt;• Continue to work towards the establishment of a mechanism to connect students and health care providers re evidence and CPGs.&lt;br&gt;• Collaborate with PPL around the increased uptake of Global Centre for Nursing Executives. The Global Centre for Nursing Executives &quot;identifies and disseminates best practices and addresses emerging health care trends. We aim to create an exclusive network composed of progressive nursing leaders from around the world.&quot;(<a href="http://www.advisory.com/research/global-centre-for-nursing-executives/about-the-global-centre-for-nursing-executives">http://www.advisory.com/research/global-centre-for-nursing-executives/about-the-global-centre-for-nursing-executives</a>).&lt;br&gt;• Participate with PPL re the planning and delivery of events regarding Joanna Briggs Institute (JBI) and CPGs. The University of Victoria researchers have embarked on an initiative related to the Joanna Briggs Institute (JBI) initiative.</td>
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<td>Knowledge Translation (KT) strategy</td>
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<td>Continuous quality improvement</td>
<td>A management approach to improving and maintaining quality that emphasizes internally driven and continuous assessments of potential causes of quality defects, followed by action aimed either at avoiding a decrease in quality or correcting it at an early stage</td>
<td>• Providers • Managers</td>
<td>• Quality and Patient Safety • Royal Roads University</td>
<td>• Participate in the planning and delivery of opportunities for practical skills development in quality improvement methods and tools. • Explore ways to offer ongoing support to individuals who attend quality improvement workshops, basing models on the NHS Institute for Innovation and Improvement. • Continue to identify and support opportunities to fund quality improvement initiatives.</td>
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<td>Community of Practice (CoP)</td>
<td>A social learning process whereby a group of people with common interest come together to share, develop and advance a knowledge base. This informal social setting serves as a forum for the sharing of tacit knowledge.</td>
<td>• Providers • Managers</td>
<td>• Professional Practice &amp; Learning • Academic organizations • MHSU Implementation Committee • VIPAC COACH • First Nations/Island Health VIPAC COACH</td>
<td>• Expand and provide support to the Seniors &amp; Spiritual Health Writing Community of Practice to support the submission of articles that meet criteria for publication. • Continue to work with academic organizations on introducing the virtual community(ies) of practice for Island Health employees. The Research and Capacity Building Department has taken some preliminary steps towards the establishment of a CoP to support Island Health employees who are also students.</td>
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| Educational opportunity            | Educational gatherings for the purpose of conveying evidence-based knowledge, e.g. webinars and Café Scientifique | • Public  
• Providers | • MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health | • Engage KT audiences in the planning of workshops during K2A month. In November, the Research and Capacity Building Department hosts a knowledge translation month of presentations, workshops, and celebration. K2A Month brings together leaders and researchers, knowledge-users and patients to learn about the importance of translating evidence into practice in order to improve care and outcomes.  
• Support the planning and delivery of K2A events  
• Plan and deliver 4 *Nurse Talks* with UVic.  
• Continue to support and showcase the scholar in residence program. In this position she has worked with local research teams to address practice questions associated with older adults encountering the hospital.  
• Continue to work with PPL on exploring the possibility of expanding educational outreach. The RCB has started to explore ways to identify Island Health providers who are interested in participating on a local research team and then linking them with faculty who are interested in guiding interested providers. RCB will work with the new Chief, Professional Practice and Chief Nursing Officer. |
| Educational outreach – academic detailing - | A trained person who meets with providers in the practice setting to provide information with the intent of changing the provider's performance | • Executive  
• Providers | • MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health |
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| Information technology              | Supports how we organize, store and access knowledge and connects people to facilitate communication and networking. IT contributes to a multilayered system for the ‘just in time’ delivery of information. Includes application software for specific purposes or apps. | • Providers  
• Managers  
• Executives  
• Public | • IHealth  
• Professional Practice & Learning | • Facilitate the submission of collaborative grant applications related to IT. RCB collaborated on the AGE-WELL (Aging Gracefully across Environments through technology for Wellness, Engagement and Long-Life) Networks of Centres of Excellence of Canada (NCE) regarding the development of technologies to support people to live and age well.  
• Identify with the help of collaborators the use of IT to “hardwire” best practice.  
• Showcase the use of IT at Island Health. The IHealth initiative “aims to improve the health and care experience of Island Health residents by integrating an individual’s medical information such as: lab results, prescription history, information received from community care clinics, medical images, notations from physicians and specialists – and other relevant health information, into a digital file where it can be easily received, stored and shared.”\(^11\)  
• Support the generation of peer reviewed articles. |
| Journal article                      | A periodical presenting articles on a particular subject. Typically peer-reviewed journals exist in hard copy and increasingly online via open source access. | • Providers  
• Managers  
• Executives  
• Public | • MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health  
• Academic organizations |  |

\(^8\) http://www.viha.ca/nr/rndonlyres/97b7e157-372e-4d68-ad2c-6e4424062634/0/factsheetihealth.pdf
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| Knowledge broker                    | An individual who links decision-makers and researchers, facilitating their interaction to better understand each other’s goals and professional cultures, influence each other’s work, forge new partnerships and promote the use of research-based evidence in decision-making. | • Providers  
• Managers  
• Executives  
• Public | • Professional Practice & Learning  
• MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health | • Continue to educate decision-makers and researchers about Island Health’s KT coordinator at all possible venues.  
• Continue to link decision-makers and researchers. |
| Media                              | Use of television, radio or print to ‘advertise’ the message or attract the media’s participation with the message as the ‘news story’, e.g. public awareness campaigns | • Providers  
• Managers  
• Executives  
• Public | • Communications and public relations  
• Multimedia Services  
• Professional Practice & Learning  
• Quality and Safety  
• MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health | • Work towards, with collaborators, introducing a REDCAP database to collect information on KT activities from closed research studies.  
• Write and disseminate KT stories.  
• Collaborate with Island Health’s Communications and Public Relations Dept. |
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| Networks                          | Professional relationships between individuals that represent both a collection of ties between people and the strength of those ties | • Managers  
• Providers  
• Public | • Professional Practice & Learning  
• MHSU Implementation Committee  
• VIPAC COACH  
• First Nations, Island Health VIPAC COACH | • Explore interest in establishing the equivalent of UVic's Speakers Bureau.  
• Collect data from Island Health individuals who are conducting research, quality improvement initiatives, or are knowledge users, including interest in participating in KT activities, and post that information using the interactive website once ready. |
| Opinion Leader/Champion           | Peers or experts who are well-connected, credible and persuasive. They are knowledgeable, trustworthy, accessible and approachable and they have a willingness to share their knowledge. Any intervention aimed at changing the performance of healthcare providers using patient-focused interventions to improve clinical practice, typically in the form of reminders or computerized education | • Providers | • MHSU Implementation Committee  
• VIPAC COACH  
• First Nations/Island Health VIPAC COACH | • Continue to provide research support staff to champions for building capacity. The RCB provided support for the first Mental Health and Substance Use (MHSU) Services Research Mingling for Mentoring and Munches event. |
| Patient-mediated intervention      |                                                                           | • Providers | • Multi-disciplinary teams  
• Patient Voices Network  
• CanAssist  
• Other industry  
• Industry | • Continue to support the submission of grant applications involving relationships between patients, Island Health providers, researchers and industry to support patient-focused interventions. |
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| **Policy Brief**                    | A document which outlines the rationale for choosing a particular policy direction. It is commonly produced in response to a request directly from a decision-maker or within an organization that intends to advocate for the position detailed in the brief. | • Managers  
• Executive | • Professional Practice & Learning  
• UVic  
• Royal Roads University | • Explore the possibility of connecting students with an interest in preparing policy briefs with Island Health decision makers. RCB has connected with UVic’s Research Partnerships & Knowledge Mobilization Research Services. |
| **Practice tools/decision aids**    | Tools which make the application of research 'user friendly' e.g. pocket cards with evidence summaries, flow diagrams, wall charts, interactive CSs, training videos, self-audit instruments, etc. | • Public  
• Providers | • Professional Practice & Learning  
• Knowledge Translation Canada | • Identify and provide URLs for these tools |
| **Practitioner Training**           | Facilitated training provided to healthcare practitioners to change attitudes, knowledge and/or practice behaviour | • Providers | • Professional Practice & Learning  
• Academic organizations | • With academic partners, discuss activities outlined in Memorandum of Understanding about working collaboratively to meet the needs for quality KT leadership and increase evidence based decision-making. |
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<td>Innovative Models of Care (Substitution of Tasks)</td>
<td>Expanding the role of a practitioner, e.g. pharmacists who package and dispense prescriptions and over the counter medications, begin to advise people about them and work with other healthcare professionals and the public.</td>
<td>• Pharmacy Leadership Team</td>
<td>• Engage in discussions with the Pharmacy Leadership Team re supports that are needed to increase research capacity around the expanding role of pharmacists</td>
<td></td>
</tr>
</tbody>
</table>
| Workshop or interactive small group | An educational seminar or series of meetings emphasizing interaction and exchange of information among a small number of participants | • Public • Providers | • MHSU Implementation Committee • VIPAC COACH • First Nations/Island Health • Professional Practice and Learning | • Identify with assistance from collaborators 'huddle' successes. “The idea of using quick huddles, as opposed to the standard one-hour meeting, arose from a need to speed up the work of improvement teams. Huddles enable teams to have frequent but short briefings so that they can stay informed, review work, make plans, and move ahead rapidly. Huddles have a number of benefits:  
  • They allow fuller participation of front-line staff and bedside caregivers, who often find it impossible to get away for the conventional hour-long improvement team meetings.  
  • They keep momentum going, as teams are able to meet more frequently.”\(^{12}\)  
  • Write and disseminate stories about huddle successes.  
  • Arrange workshops with the stakeholders with huddle successes. |

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\(^{12}\) [http://www.ihi.org/resources/Pages/Tools/Huddles.aspx](http://www.ihi.org/resources/Pages/Tools/Huddles.aspx)