State of the Science in Knowledge Translation: Where have we been and where are we going?





Overview

- Presentations (40 min)
- Overview of reviews
- Measurement & individual determinants of research use
- Organizational context
- KT interventions
- Questions/Comments (20 min)
- Group topics
- Break (30min)
- Discussion (1 hour)
- > Small groups (6-8/group)
- > Themed group topics
- Reconvene



Panel

Lisa Cranley, PDF (University of Alberta, Canada)

Janet Squires, PhD Candidate (University of Alberta, Canada)

Alison Hutchinson, PhD (Deakin University, Australia)

Maaike Janssen, PhD (HAN University, Netherlands)

Anne Marie Bostrom, PDF (University of Alberta, Canada)



Theory/Models/Frameworks

- PARiHS framework (Kitson et al. 1998; Rycroft-Malone et al. 2002; Kitson et al. 2008)
- Knowledge to Action Model (Graham et al. 2005)
- Diffusion of Innovation (Rogers, 1995)
- Stetler Model of Research Use (Stetler, 2001)
- Normalization Process Theory (May & Finch, 2009)
- Theory of Planned Behaviour (Ajzen, 1991)
- IOWA Model of Evidence-Based Practice to Improve Quality Care (Titler et al. 2001)

Overviews of Systematic Reviews in Knowledge Translation

Author (Year)	Topic	# Reviews	Identified Gaps
Bero, Grilli, Grimshaw, Harvey, Oxman, & Thomson (1998)	Knowledge translation interventions	18	- relative effectiveness and cost effectiveness of different KT interventions in different settings
Solberg (2000)	Guideline implementation strategies	47	 -impact of practice systems or organizational support of clinician behaviour - the process by which change is produced - the role of the practice environmental context within which change is being attempted
Grimshaw, Shirran, Thomas, Mowatt, Fraser, Bero, Grilli, Harvey, Oxman, & O'Brien (2001)	Knowledge translation interventions	41	-economic evaluations -adequately address methodological issues in primary studies in review papers -explore methods to evaluate multifaceted interventions to facilitate understanding about which components contribute to the effectiveness
Wensing, Wollersheim & Grol (2006)	Organizational knowledge translation interventions	36	 cost outcomes specific components of integrated care services that contribute to effectiveness description of local context of KT interventions
Prior, Guerin, & Grimmer-Somers (2008)	Guideline implementation strategies	33	 cost and cost-benefit analysis of guideline implementation strategies environmental, organization and individual clinician factors associated with effective implementation strategies



To What Extent Do Nurses Use Research in Clinical Practice? A Systematic Review



Team and Study Purpose

Review Team

- Janet Squires (Lead)
- Alison Hutchinson
- Anne Marie Bostrom
- Hannah Jerke
- Sandra Cobban
- Carole Estabrooks

Review Purpose: to systematically identify and evaluate the available evidence related to the extent to which nurses uses research findings in practice



Methods

- Systematic review of published and grey literature
 - 12,418 unique titles
 - Final sample: N=55 articles (N=47 studies)
- Included:
 - Studies that examine nurses' use of research
 - English and scandinavian languages
- Double data extraction
- Quality assessment
 - Estabrooks' Quality Assessment & Validity Tool for Cross-Sectional Studies
 - Quality Assessment Tool for Quantitative Studies (EPHPP)



Methods

Analysis:

- Descriptive by type of research use measure
- Sensitivity analysis for quality

Determination of extent of research use

- Imposed a common metric on all studies: low, moderatelow, moderate-high, high research use
- Equal quartiles for each scoring system reported



Extent of Research Use by Date of Publication

Graph removed as is forthcoming in a manuscript



Extent of Research Use in General

N=36 studies

Low: N=3; Low-moderate: N=15; High-moderate: N=21; High: N=1

Graph removed as is forthcoming in a manuscript



Extent of Use of Specific Research Findings

N=14 studies

Low: N=0; Low-moderate: N=2; High-moderate: N=12; High: N=2

Graph removed as is forthcoming in a manuscript



Extent of Use of Research Use According to Kinds

N=14 studies

Low: N=0; Majority high-moderate regardless of kind

Graph removed as is forthcoming in a manuscript



Conclusions

- 1. On average, nurses' extent of research use is moderate high
- 2. Nurses' extent of research use has increased in recent years
- 3. There is little variation in extent of research use scores across groups (general, specific findings, kinds) or instruments (e.g., RUQ, NPQ, etc)



State of the Science on the Extent of Nurses' Research Use

The 'field' itself has many limitations:

- 1. Methodological quality
- 2. Measurement Issues (new review)
 - Inconsistency in outcome measures, lack of substantive and measurement theory, use of self-report, lack of psychometric assessments
- Lack of systematic evaluation of the determinants (individual & organizational) of research use (new reviews)
- 4. Lack of study on the effects of varying levels of research use on patient and other outcomes



Individual Determinants of Research Utilization by Nurses: A Systematic Review Update



Team and Study Purpose

Review Team

- Janet Squires (Lead)
- Carole Estabrooks
- Petter Gustavsson
- Lars Wallin

Review Purpose: To update and expand upon the evidence published in a previous systematic review (Estabrooks et al.2003) on individual characteristics that influence nurses' use of research evidence in clinical practice



Methods and Findings

Methods

- Systematic review of published and grey literature
 - 42,770 titles; Final sample: N=45 articles (N=41 studies)
- Double data extraction, quality assessment

Findings

- Individual characteristics and research use generally; N=30
- Individual characteristics and kinds of research use; N=6
- Conclusions drawn on 10 individual characteristics:
 - 7 characteristics significant determinants of research use
 - 3 characteristics not significant determinants of research use
 - 9 of 10 conclusions represent new evidence from 2003 review



A Systematic Review of the Reliability and Validity of Knowledge Translation Instruments in Healthcare



Team and Study Purpose

Review Team

- Janet Squires (Lead)
- Carole Estabrooks
- Hannah Jerke
- Petter Gustavsson
- Lars Wallin

Review Purpose: To conduct a systematic review of the psychometric properties of instruments designed to Measure the use of research among healthcare providers, decision makers, and organizations



Methods and Findings

Methods

- Systematic review of published and grey literature
 - 42,770 titles; Final sample: N=108 articles (N=99 studies)
- Double data extraction, validity by Educational Standards

Findings

- N=60 unique instruments; N=6 instruments assessed in > 1 study
- Instrument reliability
 - Internal consistency assessed in 31 studies (67% of which it was applicable for assessment)
 - Stability assessed in 3 of 99 studies
- 3 level Instrument validity hierarchy developed
 - Level 1, N=5 instruments, Level 2, N=16 instruments, Level 3, N=36 instruments



Organizational context

Maaike Janssen Alison Hutchinson

Organizational context

Fieuren et al.,	ivieljers et al.,	טון אוט et al.,	Gifford et al.,	Francke et al.,	Hutchinson et
2004	2006	2006	2007	2008	al., 2010
11 databases	5 databases	6 databases	2 databases	5 databases	13 databases
1990-2000	Up to 2005	Up to 1998	1995-2005	Up to Nov 2006	Up to May 2009 preliminary findings
Health	Nurses	Medical health	Nursing	Medical staff,	Health
professionals		care	healthcare	nurses or other	professionals
		professionals in hospitals	professionals	professionals	
Empirical	Quant and Qual	RCTs and CCTs	Quant and Qual	Systematic	Quant and Qual
studies	studies	or Controlled	studies	reviews	studies
		before and after			
		studies			
57 studies	10 studies	53 studies	12 studies	12 studies	88 studies
Determinants of	Contextual	Effectiveness of	Leadership	Factors affecting	Characteristics
innovation	factors related	strategies to	activities/	implementation	of
processes in	to RU	implement	interventions	of CPGs	organizations
health care		CPGs	influencing		
organizations			nurses' use of		
			research		

Author	Overall conclusions		
Fleuren, 2004	 Several methodological flaws The determinants identified in literature were consisted with opinions of experts 		
Meijers, 2006	•Studies of sufficient quality; methodological limitations •Results were mixed		
Dijkstra, 2006	 Single and multifaceted interventions seemed effective Evidence for effects of organisational determinants is limited; for most there were no significant differences 		
Gifford, 2007	 Insufficient information on what interventions are effective to improve research use Facilitative and regulatory activities appear to be necessary Qualitative methods are essential for understanding the process 		
Francke, 2008	 Evidence of factors influencing the use of CPGs is thin Comparison between single and multifaceted strategies is needed 		
Hutchinson, 2010	•Ongoing		



Characteristics identified in several studies

Characteristics	Studies
Support	Fleuren, Meijers, Giffort, Francke, Hutchinson
Time	Fleuren, Meijers, Francke, Hutchinson
Resources (financial, equipment, manuals, administrative support, opinion leaders)	Fleuren, Meijers, Dijkstra, Francke, Hutchinson
Organizational characteristics (size, structure and stability)	Fleuren, Dijkstra, Francke, Hutchinson
Staff capacity	Fleuren, Francke, Hutchinson
Organizational climate	Fleuren, Meijers, Dijkstra, Hutchinson
Education	Meijers, Gifford
Professionals' role	Meijers, Dijkstra, Gifford, Hutchinson
Leadership	Gifford, Hutchinson



Knowledge Translation Interventions

Anne-Marie Boström



Knowledge Translation Interventions

Cochrane Effective Practice and Organization of Care Group (EPOC)

- Classification of KT Interventions
 - Professional interventions
 - Educational material
 - Educational meetings
 - Local opinion leaders
 - Audit and Feedback
 - Organizational interventions
 - Provider oriented interventions such as revision of roles, clinical multidisciplinary teams, skill mix changes
 - Patient oriented interventions such as mail order pharmacies, consumer participation
 - · Structural interventions such as changes in physical structure, facilities and equipment
 - Financial interventions
 - · Provider interventions such as fee-for-service, capitation
 - Patient interventions such as premium, co-payment, user-fee
 - Regulatory interventions
 - Changes in medical liability, management of patient complaints



What do we know?

- Effective KT interventions
 - Educational outreach
 - Clinical reminders systems
 - Multifaceted interventions
 - Interactive educational meetings
- Variable effectiveness
 - Audit and feedback
 - Use of local opinion leaders
 - Local consensus processes
 - Patient mediated interventions
- Ineffective KT interventions
 - Educational materials
 - Didactic educational meetings
 - Passive approaches

(Bero et al, (1998); Grimshaw et al. (2001); Wensing et al. 2006; Prior et al. 2008)



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Discussion Groups

Aims: To have meaningful conversations about the state of translation science To identify the development of working groups over the next year(s)

What are the next steps in developing translation science?

(20 minutes)

- Determinants of Research Use (Facilitators: Cheryl Stetler, Judith Ritchie)
- Knowledge Translation Interventions (Facilitators: Margaret Harrison, Bonnie Stevens)
- Context (Facilitator: Bridie Kent)
- Economic Evaluation (Facilitator: Deb Kenny)
- How to Build Capacity for KT (Facilitator: Nancy Donaldson)
- Expediting KT Through Strategic Alignment
- Other TBD (Facilitator: Nadine Janes)
- Other- TBD (Facilitator: Christian Rochefort)

Reporting back (3 points in 3 minutes) - use transparencies & overhead projector



Discussion Groups

What are the next steps in developing translation science? (20 minutes)

- Determinants of Research Use
- Knowledge Translation Interventions
- Context
- Economic Evaluation
- How to Build Capacity for KT
- Expediting KT Through Strategic Alignment

Reporting back (3 points in 3 minutes)

Wrap up - Looking towards KU-11