Implementing Cochrane’s Knowledge Translation Framework
Seeking your support!

Sally Green and Julie Wood
Co-chairs of the KT Advisory Group

July 5 and 6, 2017

Trusted evidence.
Informed decisions.
Better health.
Purpose of KT

KT is the vital ‘other half’ to Cochrane’s investment in producing systematic reviews.

We have to take responsibility for getting our knowledge used (there are currently Cochrane reviews published, that then ‘fall off a cliff’, never to be heard from again).

Only through a serious investment in KT can we achieve Cochrane’s vision of ‘a world of improved health where decisions about health and health care are informed by high quality, relevant and up to date synthesized research evidence’
Work to date

Convened a working group of experienced KT leaders, internal and external to Cochrane

Scoping meeting in London last year at MYM and follow up consultation at Symposium in Seoul

Formal interview and analysis with diverse group of internal and external stakeholders about what they thought Cochrane needed for KT and what it would mean for them

Synthesis and drafting of the framework by working group

KT Framework approved by Board in April 2017, and available as guidance and reference doc.

And not to forget: The many ongoing KT activities throughout the community and by CET, illustrating we are not starting from zero!
Today’s Webinar

- A quick recap of the KT Framework
- A presentation of our current thinking about how best to move from framework to implementation and set some priorities to meet the Board’s timelines. This presentation includes suggested priority areas of work - to start the discussion;
- Feedback and input from you on these suggested priorities: are these the right ones? Are we missing anything?
Framework Structure

- Cochrane’s Vision and Mission
- Themes (6)
- Work Packages (17)
- Activities (many)
Themes

- Improve climate / building demand
- Prioritisation and co-production
- Exchange
- Packaging / push
- Facilitating pull

Effective and Sustainable KT
Themes mapped to Goals

Goal 1: Producing evidence
- Prioritization and co-production

Goal 2: Accessible evidence
- Packaging, push and support to implementation
- Facilitating pull

Goal 3: Advocating for evidence
- Exchange
- Improving climate

Goal 4: Effective & sustainable
- Sustainable KT processes
Audiences

Consumers and the public

Those seeking health care, their families and carers, and the public

Practitioners

of health care including clinicians and public health practitioners

Policy-makers & healthcare managers

making decisions about health policy within all levels of management

Researchers & Research Funders

who need information regarding important gaps in the evidence
## Work packages (WPs)

<table>
<thead>
<tr>
<th>Strategy to 2020 Goal</th>
<th>KT Theme</th>
<th>Work Package Area</th>
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</table>
| **Goal One:** Producing Evidence | Prioritization and co-production | Embed prioritization processes as an essential part of Cochrane review production  
Increase the number of reviews co-produced with users to ensure that reviews are aligned with users’ needs |
| | Packaging, push and support to implementation | Adapt review formats and production processes to ensure reviews are ‘fit for purpose’ and are complemented by appropriate review-derived products for dissemination and support to implementation  
Improve and scale up existing products, and innovate new products, which package and present Cochrane Reviews to suit different stakeholder needs  
Translate our reviews and products to support the uptake of evidence in non-English speaking countries |
| **Goal Two:** Accessible Evidence | Facilitating pull | Continuously evolve the Cochrane Library so it makes Cochrane reviews easy to find in appropriate formats and languages  
Grow capacity in our users through development and delivery of training in using Cochrane evidence and (in relation to theme five) in understanding the concept and importance of evidence in decision-making  
Scale up mechanisms for engaging with, and responding to key user groups and meeting their evidence needs |
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<tr>
<th>Strategy to 2020 Goal</th>
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<tr>
<td><strong>Goal Three: Advocating for Evidence</strong></td>
<td>Exchange</td>
<td>Further define and implement policies to formalise strategic partnerships at all levels of the organization</td>
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<td>Establish forums and processes to exchange ideas with partners, learn about their evidence needs and support their decision making for issues of importance to them</td>
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<td>Improving climate</td>
<td>Develop a systematic and sustainable approach to contributing to efforts to improve the climate for use of research evidence in health and health care decisions</td>
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<td><strong>Goal Four: Effective and Sustainable Organization</strong></td>
<td>Sustainable KT Processes</td>
<td>Agree and adapt or establish structures for the governance, leadership, oversight and implementation of Cochrane’s KT Strategy</td>
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<td>Using evidence to inform our KT and continuously evaluate our KT Strategy</td>
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Defining priority Work Packages (WP)

There are 17 WPs – we cannot tackle them all at the same time. We need to define the priorities for the next 24 months (until end 2019). Some WPs cover areas in which Cochrane is already active, others are more at inception stage and will take longer to develop.

Criteria for selecting priority WPs:

- The WP builds on existing expertise within Cochrane;
- Investment in the WP creates ‘easy win’ (i.e. scaling up an activity to be of use across the community)
- The WP needs innovation and investment now (i.e. building capacity) in order for it to provide the expected gains in the longer term;
- The WP facilitates the implementation of other KT activities;
- The WP is crucial for Cochrane to achieve Strategy to 2020; and/or
- The WP is not dependent on other activities within Cochrane which could delay its implementation.
Good priority setting processes allow a certain level of flexibility to respond to new opportunities or challenges.

While we would like to reach agreement on the priority WPs, we therefore also propose to:

- Map current KT activities taking place throughout the community and assess areas of work that we should focus on (possibly moving beyond the proposed priority WPs) because of their excellence, potential, or innovative nature;
- Establish some kind of innovation fund to encourage community members to come up with ideas for innovative approaches to KT within Cochrane.
## WPs against criteria (1)

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<th>Embed prioritization</th>
<th>Increase co-production</th>
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<th>Improve &amp; scale up products</th>
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Suggested Priority Work Packages

The priority WPs address each theme of the KT Framework:

1. **Embed prioritization** processes as an essential part of Cochrane review production.

2. **Improve and scale up existing products**, or innovate new products, which package and present Cochrane Reviews to suit different stakeholder needs.

3. **Translate** our reviews and products to support the uptake of evidence in non-English speaking countries.

4. **Grow capacity in our users** through development and delivery of training in using Cochrane evidence and understanding the concept and importance of evidence in decision making.

5. Further define and implement policies to formalize **strategic partnerships** at all levels of the organization and support partners in their evidence-informed decision making.

6. **Convene deliberative dialogues** to contextualize global guidance to national or sub-national levels and to address emerging health system challenges.

7. **Build infrastructure** and resources to enable KT and **develop common KT language**.
1. **Embed prioritization (Theme 1, WP 1)**

What is already happening:

- Priority review list compiled by CEU, building on input from CRGs
- Several CRGs engage in formal priority setting through a range of approaches (experiences being documented)
- Priority setting methods group work (providing methods overview of various resources)

Suggested areas of focus for next 24 months: Facilitate prioritization of:

- Reviews appropriate for KT efforts (development of KT plans and implementation of a range of KT efforts)
- Reviews appropriate for co-production with users, harnessing and exploring various methods
- Reviews to be produced in line with CRG, field and geographic priorities
- Develop resources and provide support for Groups to implement prioritization
2. Improve and scale up existing products (Theme 2, WP 2)

What is already happening:

- Many activities across Cochrane Groups: blogs; blogshots; infographics; podcasts; websites; newsletters; social media, corners—all in many languages and shared in comms network weekly digest.
- Media work around priority reviews developed jointly with CRGs, authors and CEU—disseminated through centres, fields across many languages.

Suggested areas of focus for next 24 months:

- Map and document current activity across all groups to facilitate shared learning and identify activities for scale up.
- Determine which formats are best for which review and audiences.
- Prioritize products for further development and scale up.
3. Translate (Theme 2, WP 3)

What is already happening:

- Cochrane.org translated into 14 languages & many Group websites available in more than one language
- Podcasts, blogshots and PLSs and some abstracts translated
- Blogs published in various languages by Groups

Suggested areas of focus for next 24 months:

- Link translation work to WP2: translate products most appropriate for specific reviews, audiences and settings
- Consider how to improve on existing translations initiatives
4. Grow capacity in our users (Theme 3, WP 2; Theme 7, WP 4)

What is already happening:

- Cochrane Groups provide training on evidence informed healthcare (including for guideline developers; health practitioners, consumers and the public).
- Cochrane Training: providing training; establishing infrastructure to facilitate training across Cochrane

Suggested areas of focus for next 24 months:

- Strengthening KT capacity within the Cochrane community, developing KT leadership, developing learning opportunities in core KT Framework components.
- Scaling up existing training & sharing resources
- Training of intermediaries, especially media
5. Formalize strategic partnerships (Theme 4, WP 1)

What is already happening:

- Organizational level partnership development (i.e. WHO, G-I-N, Wikipedia, other)
- Almost all Groups have their own strategic partnerships

Suggested areas of focus for next 24 months:

- Support Groups in the development of strategic partnerships (providing tools, resources, guidance)
- Develop capacity for working in partnership & share best practice
- Involve partners in KT planning and implementation
6. Convene deliberative dialogues (Theme 4, WP 3)

What is already happening:

- Partnering in two initiatives: EVIPNet/Euro and SURE (Science for Using Research).
- Various other types of dialogues being conducted by Cochrane Groups and Community which need to be captured.

Suggested areas of focus for next 24 months:

- Map current activity within the community
- Link to priority setting (WP 1) and evidence products (WP2): identify priority policy questions and develop reviews and evidence products to inform deliberative dialogues
- Develop capacity for deliberative dialogues
- Pilot and document deliberative dialogues
7. Build KT infrastructure and develop common KT language (theme 6, WP 2 and WP 3)

What is already happening:

- Communication network weekly email digest
- Resources on Cochrane community website

Suggested areas of focus for next 24 months:

- Redesign Cochrane community webpages on KT
- Develop KT repository of resources, tools and products for undertaking KT
- Develop workflow tools to facilitate KT and communication around KT outputs
- Identify and make accessible examples of excellence
- Clarify KT terms and strive to use consistent, plain language in our communication and KT outputs
## Priority WPs and target audiences

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<tr>
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<th>Consumers &amp; the public</th>
<th>Practitioners</th>
<th>Policy makers &amp; healthcare managers</th>
<th>Researchers &amp; research funders</th>
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<td>Embed prioritization</td>
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How will we implement these priorities?

• For each priority WP a Working Group will be established involving people from the community with interest and expertise in the area, as well as members from the KT advisory group.

• The Working Groups will be in charge (with oversight by the KT Advisory Group) of further developing the WP: defining in further detail the activities; identifying best practices, tools and resources, key resource people etc.

• Each Working Group will be supported and facilitated by a CET staff member.

• The exact structure and work process may vary per WP.
Implementing KT—Next steps (1)

1. Setting up the governance structures for KT implementation:
   
   • KT Advisory Group:
     – Co-chairs: Sally Green and Julie Wood
     – John Lavis
     – Therese Doherty
     – Sarah Chapman
     – Claire Glenton
     – Nancy Santesso (board link)
     – Sophie Hill
     – Rebecca Armstrong
     – Maureen Dobbins
     – Taryn Young
     – Rachel Churchill
     – Denise Thomson
     – Juan Erviti Lopez
     – Stefano Negrini
   
   • Working groups per priority work package (WP)
Implementing KT—Next steps (2)

2. Engaging the Cochrane Community:
   • Webinars
   • Blogs & news items
   • Asking for volunteers to engage in priority WPs

3. Informing the Board & asking approval of KT implementation plan

4. Detailed WP planning will commence after the Board approves the plan in September with final WP plans complete by the end of 2017.
Discussion

• Do you agree with the 7 prioritized Work Packages? Are there other Work Packages you would suggest ahead of these 7? If so, why?

• Any other thoughts re: the KT implementation plan?
Express your interest

If you are interested in joining a Working Group on:

1. Embed prioritization
2. Improve and scale up of existing products
3. Translate
4. Grow capacity in our users
5. Formalize strategic partnerships; and/or
6. Convene deliberative dialogues
7. Build KT infrastructure and common language

Let us know, by sending an email to Sylvia de Haan (sdehaan@cochrane.org) by 31 July