

It's about us, too: Approaches to partnering with clinicians in KT and implementation research

KT Connects

Michael Smith Foundation for Health Research

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Coast Salish territory



Objectives

1. Origin of the PHC/VCH KT Challenge
2. Describe the PHC/VCH KT Challenge
3. Highlight examples of 2016 projects
4. Outline KTC program evaluation



KT definition

- In the PHC/VCH KT Challenge program, we use the term 'KT' to refer to:

Implementation of evidence into clinical practice to improve health care in real life

Story of an initiative

We knew we had a successful framework and wanted to use a similar model to support teams of clinicians with implementation projects.

“As new researchers, the structure and guidance provided by the Research Challenge made us feel confident and inspired by our abilities to conduct front-line clinical research.”

Research Challenge participant



2016: Inaugural KT Challenge!

Providence
HEALTH CARE
How you want to be treated.

Vancouver Coastal Health
Promoting wellness. Ensuring care.

KNOWLEDGE TRANSLATION CHALLENGE

What is knowledge translation?
Knowledge translation is the art and science of moving evidence into health care policy and practice.

Want to learn how to use evidence to improve health care in real life?
The KT Challenge is for you!

Benefits of participation

- Support for staff who do not have knowledge translation experience
- Help in designing your own KT project
- Easy access to KT resources, mentorship, and funding

Have you identified a need for a practice improvement?
Your KT project will help you integrate evidence into best practices.

Brief Letters of Intent are due October 31, 2016 at 4pm

For more information

Providence Health Care
Contact Aggie Black ablack@providencehealth.bc.ca
Web <http://professionalpractice.providencehealthcare.org/research/knowledge-translation-challenges>
Q&A session on October 18 12:00pm to 1:00pm
Dining Rooms 1 and 2, St Paul's Hospital

Vancouver Coastal Health
Contact Kerri Abramson kerri.abramson@vch.ca
Web vchri.ca/ktchallenge
Q&A session on October 17 11:30am to 12:30pm
Room 2254 Diamond Health Care Centre, VGH
Video conferencing available

Benefits of regional programs

- Networking
- Cross pollination of great ideas
- Sharing resources
- Similar opportunities available at each organization
- Staff engagement



We started small...

- Secured support from VP, Professional Practice and VP, Research at both PHC and VCH to offer regional program
- With \$10,000 in funding committed from PHC (Professional Practice & the PHC Research Institute) and \$10,000 committed from VCHRI, the first PHC/VCH KT Challenge was launched in 2016

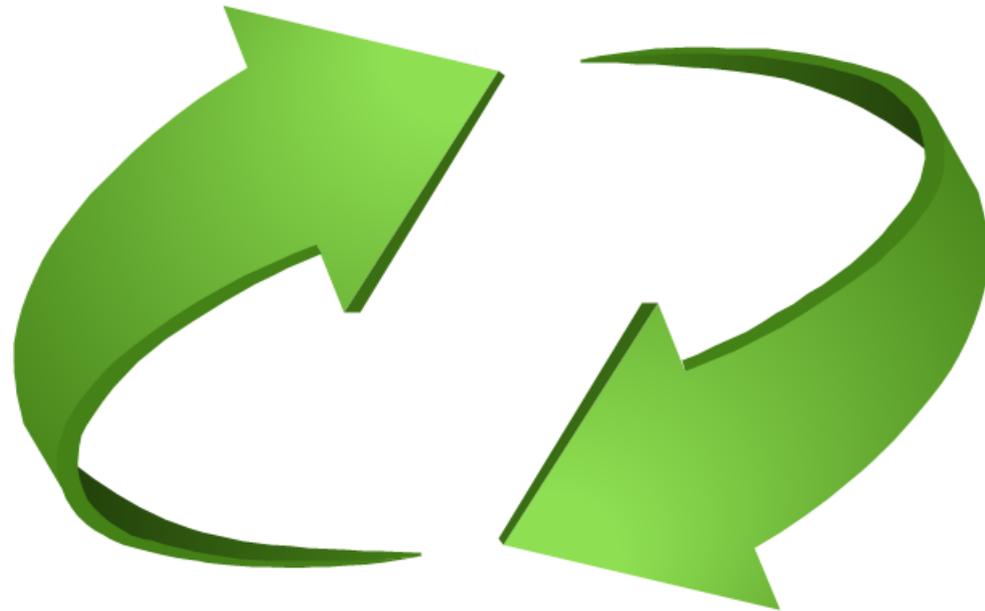


KT Challenge Advisory Committee

- Representatives from both PHC & VCH
- Multi-disciplinary members
- Professional Practice Offices and researchers represented
- The Advisory Committee planned workshops, identified mentors, reviewed initial applications and full proposals

Aim of the KT Challenge

- Build capacity for moving research evidence into practice.
- Provide supportive environment, rather than competitive.



Components of the KT Challenge

- **Workshops:** two skills-building workshops
- **Mentorship:** each team paired with a mentor
- **On-line Learning Platform:** documents & worksheets
- **Funding:** up to \$5000 per team



Participation in First Year

- 10 teams & 34 clinicians participated
- 10 mentors recruited
- 8 teams funded



Stakeholder Engagement

- All funded proposals include plans for engaging relevant stakeholders, such as patients, families, clinicians and management



PHC: Addressing In-Hospital Malnutrition

Implementing Integrated Nutrition Pathway for Acute Care (INPAC)

Increase awareness, screening, treatment for malnutrition in acute care



Addressing In-Hospital Malnutrition

- “As dietitians, this project allows us to work on systems level change in addition to our day-to-day work where we provide patient-specific nutrition interventions. Everyone has a right to be well-nourished!”



PHC: Implementation of screening program for psychological distress in acute cardiac setting

- Depression is common in cardiac patients & those with depression have more complications and higher rates of mortality
- Introduce validated questionnaires
- Provide patients info about depression, why screening is important, available resources
- Share screening results with primary care provider



Implementation of screening program for psychological distress in acute cardiac setting

“This project will help the Heart Centre begin to address this problem, and represents a step towards improved patient outcomes.”



Cognitive Evaluation: Translating a Clinical Practice Guideline into Occupational Therapy Clinical Practice

- CPG released in 2013
- No formal KT implemented
- Implementation plan: Education, Mentoring, Champions
- Use this project as a feasibility study for VCH-wide implementation plan
- Share results

Cognitive Evaluation: Translating a Clinical Practice Guideline into Occupational Therapy Clinical Practice

“It is important that occupational therapists across VCH become knowledgeable about this CPG and implement it in their practice.”

Implementation of the McGill Ingestive Skills Assessment in Vancouver Coastal Health Residential Care Facilities

- The goal is to implement use of a standardised assessment of feeding, eating and swallowing by OTs at all VCH residential care facilities in order to improve decision making to decrease the effects of dysphagia.
- A variety of implementation strategies
- Follow up survey with OTs

Implementation of the McGill Ingestive Skills Assessment in Vancouver Coastal Health Residential Care Facilities

“This consistent approach for all residents who require assessment of their feeding and eating skills will ensure that residents, families and staff have the information they need to create appropriate plans of care and will help to clarify the role of OT in feeding and eating for staff, residents and families.”

KT Challenge Evaluation

We're using surveys and interviews to answer these questions:

- Did the program support learning & practice?
- Have KT knowledge & skills increased?
- To what extent was KT knowledge applied?
- What are the results from funded KT Challenge projects?
 - Was patient care improved?

Who Were the Mentors?

- Our mentors came from:
 - our networks
 - the networks of our KT Challenge Advisory Committee
- Recruited mentors who had content experience to match the topic of the KT Challenge team, and/or KT expertise to support the team
- Academics, clinicians, and professional practice leaders from PHC, VHC and other local settings.



Challenges

- Many teams needed support to understand KT, implementation science, and necessary components for successful KT plans
- Need to emphasize 3 pillars of KT, and provide examples of great KT plans

Challenges



Future goals

- Continue annual KT Challenge
- Support funded teams with dissemination of findings & sustaining change
- Offer workshops
- Share evaluation results
- CoP for funded teams?

Acknowledgements

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