



Knowledge Translation Working Group Position Paper

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Introduction

The process of generating knowledge and of moving that knowledge into action is the essence of knowledge translation (KT). Alberta Innovates – Health Solutions (AIHS) recognizes KT as an integral component of research; foundational for effective change, and therefore foundational for innovation. The translation of knowledge into effective policy, practice, products, and services requires our entire health research and innovation system to embrace a culture that facilitates the application of knowledge.

KT figures prominently in AIHS's Strategic Implementation Process, which is closely aligned with the strategic framework of *Alberta's Health Research and Innovation Strategy* (AHRIS). AHRIS aims to improve the health and socio-economic status of Albertans through two strategic priorities: Wellness at Every Age and an Innovative Health Service Delivery System. The AHRIS framework further identifies three cross cutting themes: Highly Skilled People, Innovation Platforms, and Knowledge Translation. AIHS has established a working group for each theme to develop recommendations for AIHS programs and initiatives. The key determinants for AIHS in adoption of these will be: quality of the proposed initiatives, relevance to the strategic framework of AHRIS, and availability of resources.

The KT Working Group is composed of KT leaders from AIHS's stakeholder groups, including: Government of Alberta, private sector, the health delivery sector, KT and technology commercialization proponents, and the post-secondary institutional system. The Working Group focused on rationale and recommendations for programs and initiatives that will optimize the impact of AIHS investments in health research, optimize the spread of knowledge, improve the uptake of knowledge into policy and practice, support technology commercialization, and improve health research literacy in the public.

AIHS's legislated mandate is to "support, for the economic and social well-being of Albertans, health research and innovation activities aligned to meet government of Alberta priorities, including, without limitation, activities directed at the development and growth of the health sectors, the discovery of new knowledge and the application of that knowledge."

AIHS acknowledges that successful KT does not occur by working in isolation. The best way of integrating KT throughout our health research and innovation system is to collaborate with the health research community to share valuable knowledge, insights, and expertise. By working together, we can help to effectively incorporate KT into AIHS programming, and establish AIHS as a leader in KT development in health research and innovation systems throughout the province.

Context

WHAT IS KNOWLEDGE TRANSLATION?

In its simplest form, knowledge translation is about using research; moving it out to where it can do some good. The Working Group acknowledges that there are many definitions of knowledge translation; however, the Canadian Institutes of Health Research (CIHR) definition was adopted for this report:

*“Knowledge translation is 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.*

*This process takes place within a **complex system of interactions** between researchers and knowledge users **that may vary in intensity, complexity and level of engagement** depending on the nature of the research and the findings as well as the needs of the particular knowledge user.”*

The Working Group further recommends that the term, “knowledge translation,” be used to describe this process and that it includes the multitude of terms that *may* be used to describe this process.

GUIDING PRINCIPLES

In developing their recommendations, the working group emphasizes the importance of these guiding principles:

- **Sustainability**
Programs and initiatives receive sustainable funding. Sustainability is also facilitated through:
 - community support, which could be acquired during the consultation process
 - partnerships, financial and in-kind
 - effective mechanisms for information retention and dissemination
 - integrated KT, i.e. engagement with knowledge users
 - engagement of leaders with KT awareness who can support and/or champion initiatives.

- **Reliance on best practices**
The planning and operation of KT programs and initiatives is guided by evidence of best practices.

- **Meaningful interaction with knowledge users**
Meaningful interaction with diverse knowledge users appropriate to the research is a critical factor for successful KT at a project, program, or organizational level.
- **Recognition of traits/skills/tools required for KT**
Programs and initiatives enhance an individual's ability to consider and promote evidence use and user engagement in any aspect of health research or innovation.
- **Recognition of the full continuum of research and innovation**
Programs and initiatives recognize the value of research across the continuum, from curiosity to issue driven.
- **Recognition of different methodologies among user communities**
Programs and initiatives recognize that different users adopt different methodologies and rely on different measures of success. The goal is to utilize the highest quality methods for every research question in every research setting.
- **Recognition of the importance of multi-disciplinarity/transdisciplinarity to research and innovation**
AIHS programs and initiatives facilitate the exchange of diverse perspectives and methodologies to solve problems.
- **Leveraging**
The impact of programs and initiatives are maximized through leveraging opportunities, preferably financially or through in-kind contributions.

Each program and initiative considers the value of a pan-Alberta approach, bringing the advantages of leveraging the resources and expertise available across the province, attracting a broader range of stakeholders, and creating broad collaborations.
- **Evaluation**
Evaluation of the results of a KT strategy is foundational to Knowledge Translation. This iterative evaluation and monitoring should be integral to the KT process and the results from the evaluation should be used to inform revisions to the KT process.
- **Adoption of a broad definition of “health research” and “health researcher”**
Health research and innovation is conducted in a wide range of disciplines beyond the traditional domains, such as social sciences, environmental protection, various branches of engineering, agriculture and food, information and communications technologies.

Recommendations

STRATEGIES

Using the KT-related actions outlined in AHRIS as a structure and the Position Paper as a reference point, the Working Group recommends that AIHS adopt the three following strategies:

1. Embed KT Principles into AIHS programs and initiatives

KT principles will be considered in the development and operations of all of the programs and initiatives supported by AIHS.

All programs should ask the question, “what is the appropriate KT requirement?” The Highly Skilled People Working Group and the Innovation Platforms Working Group endorsed the concept of ‘integrated KT’ as vital to AIHS’s success in meeting its mandate. Integrated KT is a spectrum of activities that requires meaningful engagement of users in all stages of the research process and is the favoured approach, where appropriate. In some circumstances, end of grant KT or dissemination may be more appropriate.

Objectives

The objectives of embedding these principles into AIHS programs and initiatives are to:

- maximize the impact of health research and innovation;
- consider (during the development of program guidelines) the best methods and approaches which can demonstrate this impact.

Enabling Actions

- The appropriateness and relevance of KT will be a primary consideration in the development and implementation of AIHS program guidelines. KT principles will be reflected in the goals and objectives of each AIHS program.
- AIHS will develop a KT evaluation strategy for each program or initiative that defines and measures its impact.
- AIHS will also practice KT. Evaluation of a program or initiative will include learning related to KT.
- AIHS will make resources that develop and support KT capacity and practice readily available to grant applicants. Resources will also be available to a broad community of users, e.g. academic researchers, clinicians, policy makers, product/technology developers and users.
- The grant/research proposals submitted to AIHS will include a KT component appropriate to the research being planned. It may include integrated KT, explaining how knowledge users/decision makers will be involved as partners, as well as describing plans for appropriate dissemination of results. Partnerships should be appropriate and relevant to the proposed research.

2. Advance the Science of KT

Description

Currently, there is limited research evidence on the effectiveness of and the appropriate context for the methods and mechanisms used to promote evidence use. Alberta requires more capacity in KT science to meet its goal of effective KT as the foundation for the provincial approach to research and innovation.

Objectives

The objectives of this strategy are to:

- build provincial capacity in the area of KT science;
- expand the scientific rigour and methodological sophistication employed in KT research.

3. Support Knowledge to Action Approaches

Description

Alberta requires that KT theory and practice become an integral part of the work performed by the health research and innovation communities in order to realize the socio-economic benefits of health research.

Objective

The objectives of these initiatives are to:

- build capacity and understanding of KT practice within the health research and innovation and decision maker communities;
- implement research knowledge and technology to enable public access of health innovations, including commercial products and services.

PROGRAMS AND INITIATIVES

To support these strategies, the Working Group recommends that AIHS implement the following programs and initiatives.

1. Knowledge Translation Science Grant.

Strategy Addressed: Advance the Science of KT

Description

AIHS will support projects dedicated to building capacity in the area of KT science. The KT Science Grant will be flexible in its consideration of eligible areas of focus; innovative approaches will be welcomed. For example, areas of focus could include:

- **KT theories, methods, and mechanisms** – to develop new KT tools or study the effectiveness of existing theories, methods, and mechanisms;
- **KT Implementation in community based settings;**
- **Health research literacy** – to study how best to advance health research literacy. In this area, the Working Group endorses the continuing work of the Collaborative Health Innovation Network on Public Engagement (CHIN);
- **Commercialization** – to study the effectiveness of existing methods and mechanisms or to develop new strategies for commercialization;
- **AIHS KT programs** - to study the effectiveness of AIHSKT-focused programs.

Terms of Grant

Competitive, peer-reviewed grant competition: AIHS will be flexible in the length of the term and amount of funding provided through this grant, recognizing that different approaches and project focuses will have varying needs.

2. KT Practice Grant

Strategy Addressed: Support Knowledge to Action Approaches

Description

AIHS will support projects which target the application of KT.

Terms of Grant

A competitive, peer-reviewed grant of up to \$25,000 for 1 year

3. AIHS Chair(s) in Knowledge Translation

Strategy Addressed: Advance the Science of KT

Description

AIHS Chair(s) in KT will be recruited through the AIHS Chairs program, which was approved by the AIHS Board in October 2011 (described below). The KT Working Group relies on a broad definition of 'health researcher' and therefore individuals in a wide range of disciplines will be eligible for support as a Chair in Knowledge Translation.

The AIHS Chairs program facilitates the *recruitment* of faculty researchers who focus on identified priority health research areas. AIHS will work with the universities to determine these priority areas and the appropriate allocation of AIHS Chair funds among the institutions. AIHS Chair candidates identified by the universities will undergo a merit review by AIHS. The level of support depends upon the experience of the recruit and the needs of the research program. *The creation of Chairs under this program, including any KT chairs, relies on institutional support.*

Terms of Grant

Up to seven years funding directed to the development of the Chair's research program. *AIHS will not provide salary support for the Chair.*

4. Engagement Grants

Strategy Addressed: Support Knowledge to Action Approaches

Description

The Engagement Grant will facilitate researchers' skills in engaging with key knowledge users or product/technology users. The grant will also enable key knowledge users or product/technology users to engage with researchers:

- before project implementation;
- throughout the project.

The input provided by these end users will help researchers develop their questions and amend the project agenda or, in support of commercialization, help to define markets and provide industry perspectives and expertise.

The end users will also function as ambassadors, helping to create receptivity for the research.

Terms of Grant

- The event, or a series of events, will show evidence of strong participation by relevant and key stakeholders, including investigators, decision makers, private industry partners, etc., as appropriate. Alberta-based investigators or research groups will be eligible to apply.

- AIHS will contribute a maximum of 50% of the projected cost of the event (or series of events) to a maximum of \$50,000.

5. PhD and postdoctoral training

Strategy Addressed: Through educational opportunities: Advance the Science of KT and Support Knowledge to Action Approaches

- Trainees focused on KT Science will be eligible for support through AIHS training programs;
- Trainees in other health research related disciplines will be exposed to and receive training in KT theory and practice.

Description

AIHS will provide an opportunity for trainees to gain exposure to the broad spectrum of Alberta's health research and innovation environment, including academia, the private sector, and policy settings.

PHD PROGRAM

Trainees will be provided with support for their PhD studies and encouraged to participate in an additional year of support. This will provide them the opportunity to gain valuable experience and skills beyond those acquired through research training for the PhD. Trainees can utilize the opportunity to seek a training or internship opportunity in education, business, industry, government and/or health policy, or within clinical sites and other research-related environments.

POSTGRADUATE PROGRAM

Trainees completing this program will have the knowledge and experience to bridge careers in academic research and/or other areas of activity requiring scientific and additional expertise, e.g. clinical competency, policy development and decision making, entrepreneurship, research management, project management, health literacy, KT, or teaching competence. They will receive this additional training throughout the term of their postdoctoral fellowship.

6. Educational training programs

Strategy Addressed: Through educational opportunities: Advance the Science of KT and Support Knowledge to Action Approaches

AIHS will support cross-sectorial training programs that build capacity and understanding of KT theory and practice within the health research and innovation community, including the

implementation of knowledge and technology. The training program will provide a flexible mechanism for a group of educators and mentors to create a supportive, directed learning environment. The format and content of the training program will be determined largely by the applicants, although it is anticipated that the applicants will represent a range of perspectives, e.g. clinical or industrial. The training will accommodate a wide range of health researchers and innovators, including trainees, academic and clinical researchers, policy makers, industry employees, etc.

AIHS will avoid duplicating available resources, supporting existing opportunities whenever reasonable.

7. Demonstration Projects

Strategy Addressed: Support Knowledge to Action Approaches

These grants will target purpose-driven preparatory activities for determining the most important questions to be answered during the next phase of a research program or the overall feasibility of an approach. The program will provide seed funding to enhance the value of the initial idea, question, hypothesis, or line of enquiry, ultimately increasing its potential for future success in attracting further investment.

This program will also support innovation and help researchers move their discoveries toward practical implementation. The intent of this funding opportunity is to increase the value of inventions or interventions and improve the chance of realizing socio-economic benefits from research.

The Pilot Grant or Proof of Concept Grant will be used to support activity that:

- provides a health research-based opportunity to advance down the research/innovation spectrum towards commercialization;
- generates preliminary data to support a larger or more in-depth study;
- provides evidence that the proposed model or innovative approach is feasible and viable and will add value along the research or technology development continuum;
- promotes the movement of research findings towards practical health applications;
- tests new methodological approaches to a health research challenge.

Terms of Grant

Non-renewable grant of up to \$100,000 for 1 year.

8. Network Support

Strategy Addressed: Advance the Science of KT and Support Knowledge to Action Approaches

AIHS will fund the creation and support of KT networks whose activities relate to the achievement of the AHRIS framework. Examples of support may include:

- **Secretariat support of a network**
- **Financial support and/or facilitation** of learning opportunities such as:
 - **Integrated learning and development programs** which provide participants with support throughout the continuum of a project, e.g. evidence-informed information, to help them work through issues as they arise.
 - **KT Bootcamps** for health related users at all career levels.

Strategic Observations

From its discussion of the health research environment and review of the current state of KT science and practice, the KT Working Group made several key observations. These observations act as important considerations for the development and implementation of the recommendations. The strategic observations are:

Strategic Observation 1

To build capacity in the understanding of KT theory and practice within the health research and innovation community, AIHS must expand its current KT programs and initiatives.

AIHS's Knowledge Transfer Initiatives (KTI) promotes the use of evidence in decision-making and supports programs that enhance understanding of KT theory and practice. The Working Group suggests the creation or expansion of programs which provide skill building opportunities to practice KT, direct KT support to researchers, and facilitate relationships between researchers and decision makers.

Strategic Observation 2

AIHS funding must help create a critical mass of highly skilled people in the area of KT/implementation science, i.e. research on what is effective in moving knowledge into action and application.

To best facilitate knowledge to action, AIHS must support KT science, not only KT practice. KT/implementation science builds a different capacity than programs focused on building KT practice. KT science focused initiatives will identify and evaluate promising practices for promoting appropriate use of evidence. Although KTI currently provides some funding for KT science through the Knowledge Translation Research Grant program, more support is required to build the necessary capacity in KT science.

Strategic Observation 3

To meet its mandate, AIHS must support initiatives that advance the knowledge and practice of KT evaluation expertise.

Alberta requires more expertise in the area of evaluation, including performance management and outcome measurement. Alberta Advanced Education and Technology identified accountability as a principle informing the restructuring of the provincial research and innovation framework. Their framework requires clear and specific outcome accountabilities for each organization within the system. Recognizing the limitations of relying only on performance measurement and outcome measures, the Working Group promotes a broad approach to evaluation that will support systematic inquiry and promote transferability of findings.

Strategic Observation 4

AIHS must support effective collaborative linkages within the provincial research and innovation system and its other stakeholder groups in order to fulfill its mandate and to capitalize on opportunities.

AIHS could take a leadership role in facilitating partnerships and linkages among the health research communities, including the health delivery system and the private sector, acting as an information conduit between communities.

These linkages help foster:

- the alignment of AIHS funding priorities with the priorities of knowledge users;
- better alignment with the needs of the system;
- the development of partnerships, which could include financial, as well as in-kind investments.

AIHS must also look beyond the province for collaborative linkages and partnerships, ensuring that the organization does not replicate accessible resources available beyond Alberta's borders.

Glossary

Commercialization - In this context, commercialization involves the facilitation of the KT processes that lead to the commercialization of new knowledge. Research is translated through knowledge, expertise, and skilled people between the science base and user communities contributing to the economic and social well-being of Albertans.

Dissemination - In this context, dissemination can be broadly defined as the act of conveying knowledge to a wider audience. In addition, dissemination involves identifying the appropriate audience, and tailoring the message and medium to that audience.

Health literacy - The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. This includes the ability of individuals to effectively communicate their health needs and concerns, as well as listen to the recommendations of health professionals and interpret the information accordingly.

Health research literacy - The degree to which individuals have the capacity to obtain, process, and understand information on the advances and challenges of health research and technology..

Knowledge to application - An active attempt to engage knowledge users and adopt the research evidence to a practice or policy setting. This encompasses such activities as adapting knowledge and evaluating the implementation process and outcomes.

Knowledge transfer - A systematic, uni-directional approach to capture, collect, and share tacit knowledge in order for it to become explicit knowledge. This process allows individuals and/or organizations to access and utilize essential information, which was previously known intrinsically to only one person or a small group of people.

Knowledge Translation - 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.

Knowledge users - An individual who is likely to be able to use the knowledge generated through research to make informed decisions about health policies, programs and/or practices. A knowledge-user can be, but is not limited to: a practitioner, policy-maker, educator, decision-maker, health care administrator, community leader, or an individual in a health charity, patient group, private sector organization, or media outlet.

Linkage and Exchange - Part of the organizational capacity for successful knowledge translation. It refers to such things as the support of networks and communities of practice, and relationships between researchers and the end-users of research.

Transdisciplinarity - The mobilization of a range of theoretical perspectives and practical methodologies to solve problems. But, unlike inter- or multi-disciplinarity, it is not necessarily

derived from pre-existing disciplines, nor does it always contribute to the formation of new disciplines.

Appendix A - State of KT in Alberta and beyond

ALBERTA

Knowledge Transfer: An Environmental Survey, prepared by the Alberta Heritage Foundation for Medical Research and revised in October 2009, presents a scan across the broad spectrum of KT activity in Alberta.

The provincial KT landscape has continued to evolve since 2009. The reorganization of the provincial research and innovation system included the creation of Alberta Innovates and its corporations in January 2010. Each of these corporations, including Alberta Innovates - Health Solutions, gives strong consideration to various aspects of KT as they position themselves within the new system. As well, the growth and reorganization of Alberta Health Services also reflects a new perspective and emphasis on KT.

OTHER PROVINCIAL ORGANIZATIONS

Other provinces have organizations which target KT, at least in part. A brief survey of provincial agencies outside of Alberta with this focus include:

Michael Smith Foundation for Health Research (MSFHR), BC

MSFHR has been involved in KT and exchange activities for several years in the Health Services and Policy Research Support Network (2005), the BC Health of Population Networks, (2005), the BC Nursing Research Initiative (2007), and the Technology/Methodology Platforms (2007). To some degree, basic elements of KT can be found in all MSFHR programs.

MSFHR KT goals for 2011-2015 are to:

- Build KT skills of BC researchers and research users;
- Bring synthesized evidence to bear on resolving BC health/health system issues;
- Maximize the impact of MSFHR research.

Saskatchewan Health Research Foundation (SHRF)

In 2007, SHRF released a provincial framework to build capacity in the province to share and use health research. The framework is intended to serve as a template that agencies can use to improve their capacity for sharing and using research. The framework, based on extensive provincial consultation, is three-part:

- guiding principles
- strategic directions and actions which advise agencies to:
 - explicitly acknowledge knowledge translation in job descriptions and work plans and reward these activities
 - educate and support people to share and use health research
 - create and enhance structures, tools and policies that facilitate the process
- implementation guidelines

Nova Scotia Health Research Foundation (NSHRF)

The NSHRF Knowledge Programs support stakeholders across the health system in integrating evidence into their decision-making processes, which relates directly back to identified knowledge needs in the province. Knowledge Programs, one of three newly set priority programs (along with Research Enterprise Development Initiatives and Research Programs), provides competitive and non-competitive funding for KT, as well as opportunities for learning about new and innovative methods in KT/exchange. The Knowledge Programs involve scoping and synthesis activities, targeted initiatives, workshops, and training.

Manitoba – “The Need to Know” Project

The Need to Know (NTK) project is a collaboration among the Manitoba Centre for Health Policy researchers at the University of Manitoba, two top-level planners from each of the 11 Regional Health Authorities (RHAs), and planners from Manitoba Health. It has been supported from 2001 to the present through various CIHR grants, and co-directed by Drs. Patricia Martens and Randy Fransoo. This research collaboration is designed to address the critical need for research to support high level planning and policy making for Manitoba’s RHAs, and to further promote and develop models of collaborative research through “integrated KT” models (i.e., user involvement from start to finish). Research projects are based on the use of the administrative databases housed at the Manitoba Centre for Health Policy, which enables population-based analyses and cross-comparisons across RHAs. Activities to get research moving to action include: two-day meetings held three times a year; an annual workshop involving NTK Team members plus CEOs, Boards of Directors, and front-line workers from the RHAs; “homework” related to critiquing or gathering information to further research projects; opportunities to attend other conferences; and opportunities for NTK members to hear directly from researchers on reports and research in progress. The NTK approach involves new knowledge creation and development; improving capacity to support collaboration; and developing processes to communicate, disseminate, and apply research results.

NATIONAL ORGANIZATIONS

Nationally, many organizations are involved in KT activities specific to their area of focus, e.g. Alzheimer Society of Canada, and Canadian Diabetes Association. As well, there are several publicly-funded, general health research funding organizations with formal KT programs and activities including:

Canadian Institutes of Health Research

One of the four strategic directions in CIHR's strategic plan (2009/10 to 2013/14) is to accelerate the capture of health and economic benefits of health research. This direction encompasses two areas:

- 1) reaping socio-economic benefits from research through knowledge translation (KT) and partnerships, and
- 2) enhancing the application of research and its evaluation by building the capacity of researchers and knowledge users to engage in KT and increasing the number of researchers to advance the science of KT

CIHR lists its KT initiatives under the headings of synthesis, integrated KT, end-of-grant KT, science of KT, recognizing KT excellence, KT training and capacity-building, Evidence on Tap, and Best Brains, which brings researchers together with provincial government decision makers to help provide answers to specific questions.

In September 2011, CIHR announced the CIHR Roadmap Signature Initiative in Evidence-informed Healthcare Renewal which focuses on financing and funding models, health system sustainability, and governance and accountability.

CIHR has funded two major national initiatives: Knowledge Translation Canada, with nodes at both the University of Alberta and University of Calgary; and Knowledge Synthesis Canada, which involves researchers at the University of Alberta. In addition, CIHR has funded Cochrane Collaboration network and groups across several provinces.

Canadian Health Services Research Foundation

The mission of CHSRF is to improve the health of Canadians by:

- capturing the best evidence about how healthcare and other services can improve the health of Canadians;
- filling gaps in evidence about how to improve the health of Canadians by funding research and evaluation;
- supporting policymakers and managers to develop skills to apply evidence about services to improve the health of Canadians.

CHSRF focuses on three priorities:

- engaging and supporting citizens;
- accelerating evidence-informed change;
- promoting policy dialogue.

Canadian Agency for Drugs and Technologies in Health (CADTH)

The Canadian Agency for Drugs and Technologies in Health (CADTH), formerly called the Canadian Coordinating Centre for Health Technology Assessment (CCOHTA), provides Canada's federal, provincial and territorial health care decision makers with

credible, impartial advice, and evidence-based information about the effectiveness and efficiency of drugs and other health technologies.

The Health Technology Assessment Program at CADTH provides high-quality objective, comprehensive factual assessments about the clinical effectiveness, cost-effectiveness, and broad impact of drugs, medical technologies, and health systems. Evidence-based reports and information products are tailored to support and inform policy, practice, and management decisions. CADTH produces technology assessments on topics they select and also in response to requests from their government partners. Much of the KT work done by CADTH is targeted dissemination. However, they have explored other methods of KT including cafés scientifiques.

INTERNATIONAL REVIEW

For this environmental scan, AIHS chose to focus on the activities performed by other provincial and national organizations. Three important international groups should be mentioned:

Cochrane Collaboration (global)

Agency for Health Care Research and Quality (USA)

National Institute for Health and Clinical Evidence (UK)

CIHR is currently undertaking a review of KT activities with an international perspective. AIHS will consider this review upon its release and consider how it could affect the organization's KT activities or its approach to KT.