

Alberta Innovates - Health Solutions

Knowledge Translation Strategic Plan

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1. Executive Summary

With its focus on connecting health research with its application, knowledge translation (KT) will change the way in which the research community generates knowledge. KT will influence how end-users link with research processes so that they might increasingly apply knowledge. KT will change the way in which practitioners adapt and apply knowledge, in which industry interacts with the research community, in which civil society advocates for research-informed change, and in which the Alberta Innovates corporations manage, exchange, and apply knowledge. And KT will change the way in which Alberta Innovates – Health Solutions (AIHS) itself functions, and how it influences – and is influenced by – each of these core stakeholders. This *Knowledge Translation Strategic Plan* describes how AIHS will embed KT as a fundamental principle throughout the organization.

We define knowledge translation (KT) as *a process connecting contextualized knowledge with its application to improve the health and wellness of Albertans*. Through KT, we envision a research and innovation system that effectively produces, manages, and applies contextualized knowledge, resulting in improved health outcomes for all Albertans. And we will achieve this vision by focusing on the three strategic directions described in this *Strategic Plan*:

1. A strengthened and vibrant knowledge culture in the province;
2. A coordinated research and innovation system for the province;
3. Leadership in knowledge translation.

1. A strengthened and vibrant knowledge culture in the province.

Knowledge is a crucial asset in guiding decision-making, in informing policy and practice, and in developing and commercializing technologies and products. Yet, for many different reasons, the knowledge gained from research is often insufficient, not directly relevant or not timely enough to influence application processes. Through knowledge translation (KT), Alberta Innovates – Health Solutions (AIHS) will strengthen the province’s knowledge culture by:

- Opening up the research process so that the priorities of end-users routinely influence the research agenda. This will result in research that is both responsive to the knowledge needs of those end-users, and that identifies and addresses high-priority topics.
- Developing and strengthening the capacities of end-users (including government, health-care providers, industry, and civil society) to participate in research processes, partner with researchers, interact with research findings or syntheses, and demand research evidence.
- Developing and strengthening the capacities of the research community so that the design and execution of health research considers and incorporates application considerations.
- Supporting knowledge syntheses, from systematic reviews to the development of synthesis tools that blend explicit (i.e. research evidence) and tacit (i.e. experience, expertise) knowledge for the primary intent of influencing decision-making.
- Supporting networks that catalyze specific knowledge communities within the province.

2. A coordinated research and innovation system for the province.

Influencing the province's knowledge culture can best succeed in an environment where knowledge – and its major creators and users – are increasingly connected and coordinated. Through knowledge translation (KT), Alberta Innovates - Health Solutions (AIHS) will use its unique position within the province's research and innovation system to better coordinate, leverage, and align resources. This will see AIHS:

- Brokering and networking among government, AI corporations, universities, health services, industry, civil society, and the research community. This will create an increased awareness of research/policy/practice/industry processes; will actively connect researchers with other researchers or with end-users; will lead to new partnerships creating multi-disciplinary, multi-sectoral research approaches; and will foster new relationships, collaborations, and modes of interaction.
- Contributing to knowledge management capabilities so that the research and innovation system: effectively harvests both tacit and explicit knowledge; synthesizes this into an influential input; and makes this knowledge easily and readily accessible. This will allow for better coordination among the major research stakeholders, reduce duplication or unnecessary overlap, lead to the identification of expertise in a particular area, and contribute to networking as individuals increasingly connect on specific issues.

- Identifying pathways of collaboration between and among the AI Corporations, with Alberta Health Services, with the university system, with government, with civil society, and with other end-users and research stakeholders.

3. Leadership in knowledge translation.

Reflecting the centrality of knowledge translation (KT) within Alberta's Health Research and Innovation Strategy (AHRIS) and the province, Alberta Innovates – Health Solutions (AIHS) will provide dynamic leadership in KT. AIHS will build on the previous two strategic directions by:

- Contributing to a critical mass of people and institutions capable of creating KT strategies, interacting with research evidence, and strengthening the many linkages between the creation of knowledge and its application.
- Supporting initiatives that advance the knowledge and practice of KT by understanding the precise ways in which KT works within Alberta's health research and innovation system.
- Learning from its investments in KT so that AIHS can regularly use knowledge to adjust and sharpen its KT focus. As a learning organization, AIHS sees itself as a major stakeholder in KT, and commits itself to generating evidence on its own performance and applying that evidence to ensure we remain on the leading edge.
- Identifying, communicating and advocating sound and successful research and innovation practices, and best KT practice within the province and beyond.

In pursuit of these three strategic directions, AIHS will remain an influencer, innovator, and catalytic funder of innovative research projects, a broker and a networker, a builder of the community's capacities to undertake various KT activities – and, with KT embedded throughout its operations, an organization generating and applying evidence to continually improve its operations.

2. Background

In January 2010, the Government of Alberta developed a new framework for its research and innovation system. The province created four Alberta Innovates (AI) corporations to support research mandates “directed to the discovery of new knowledge and the application of that knowledge to improve the quality of life of Albertans” (Province of Alberta, 2010).¹ These AI corporations – Bio Solutions, Energy and Environment Solutions, Technology Futures, and Health Solutions – were designed to realign the province’s research and innovation system and strengthen the province’s abilities to perform, manage, and apply world-class research.

Building on this momentum, the Alberta Health Research and Innovations Strategy (AHRIS) has provided direction for the future of health research in the province.² With its two broad themes of Wellness at Every Age and Innovative Health Service Delivery, AHRIS detailed three strategic focus areas – Highly Skilled People, Innovation Platforms, and Knowledge Translation. This latter focus – on the relevance, uptake and application of knowledge – would see knowledge translation (KT) approaches increasingly influence:

- **Practice and Policy**

KT tools and techniques support the spirit of innovation and the identification and implementation of best practices across the province. An emphasis on relationships – particularly between researchers and end-users – would deepen the culture of evidence-informed decision-making and expand Alberta’s health technology assessment capacity and coordination.

- **Commercialization**

KT techniques will help accelerate research-based discoveries into marketable applications by, among other things, brokering new partnerships among industry and the health research community.

¹ The *Alberta Research and Innovation Act* can be found [here](#).

² For the full AHRIS report, see [Appendix 10.1](#).

- **Health Literacy**

KT approaches will increasingly engage the public in the province’s health-related challenges, while also encouraging public debate and deliberation on major issues facing the health system.

With its mandate to fund and support research and innovation in the province, AIHS has responded to AHRIS’ KT emphasis in several ways. In 2011, AIHS created a Working Group on KT to determine the precise niche and role that would provide added value. This generated a wealth of recommendations. AIHS then sought input on those Working Group recommendations from a wide array of stakeholders – from decision-makers to the general public – to solicit their ideas and feedback on KT.³

There is tremendous enthusiasm for KT within the province. This *KT Strategic Plan* details how AIHS will remain a leader in KT – not only to improve health outcomes in the province, but to routinely facilitate a return on the province’s investment in health research. Aligning with AIHS’ Initial Strategic Framework (2010), this *Strategic Plan* documents how AIHS will pursue three strategic directions that will embed its KT philosophy across both the organization and the health system itself. This will see AIHS continue as an influencer, innovator and catalytic funder, a broker, networker, synthesizer, builder of the community’s capacities, and an organization generating and applying evidence to continually improve its operations.

AIHS Initial Strategic Framework (2010)

“The Government of Alberta created AIHS on January 1, 2010, to build on the Alberta Heritage Foundation for Medical Research’s legacy of excellence and capacity. Health research has evolved into a major enterprise...funding is now a more proactive, outcomes-focused activity that expects timely returns on investments. Global trends have resulted in changes in research agencies’ funding models and processes, including:

- selecting research that gives timely societal and economic benefits,
- agreeing with researchers and knowledge users on expected deliverables,
- identifying ways to assess progress towards deliverables, and
- creating management processes that allow both supportive and corrective action”.

³ For the full report from the KT Working Group, see [Appendix 10.2](#); for the KT Stakeholder Implementation Process Summary, see [Appendix 10.3](#).

3. Knowledge Translation Defined

There are many useful definitions of knowledge translation (KT) in literature. As defined by the Canadian Institutes of Health Research (see, for instance Graham and Tetroe (2009) and Graham et al (2006)), KT is “a dynamic and iterative process” that focuses on the synthesis, dissemination, exchange, and application of knowledge to strengthen the health system. In this and other definitions,⁴ KT can be best described as a series of strategies designed to position research as a dynamic input to policy, practice, and product/technology development.

While we support the CIHR definition, for Alberta Innovates – Health Solutions (AIHS), KT reaches much deeper. If the principle at the heart of KT is the application of knowledge, with research evidence routinely informing the development of policies, practices, and programs, the *generation* of evidence must also change. Research evidence must be shaped by the needs and priorities of policy, practice, industry, and other core stakeholders. More responsive evidence can be more actively pushed (with KT techniques determining ways and means for connecting research evidence with end-users) *and* pulled (with KT techniques determining ways and means for end-users to demand, adapt, adopt, and apply research evidence). Whether focused on creating new evidence or synthesizing existing evidence, KT techniques allow research processes and findings to become more sensitive to their context, to align with policy, with industry, and to take into account the wider practice context.⁵

⁴ See in particular the definitions advanced by Campbell (2012), McWilliam (2007) and Ward et al (2010). Most usefully, for McWilliam (2007), KT is “an ongoing interactive human process of critically considering relevant, quality research results and findings, whether factual or tacit knowledge or humanistic understanding, blending this broader researcher-based knowledge with experiential knowledge and contextual appreciation, and constructing a shared understanding and knowledge application...”

⁵ “Research” is defined as “any original and systematic investigation undertaken in order to increase knowledge and understanding, and to establish facts and principles”. “Knowledge” includes explicit knowledge (e.g. replicable, research-based evidence) and tacit knowledge (often created through experience, evaluation and best practice; a sense of how things are done). “Researcher” refers to individuals (or research institutions) who design and execute research projects. “End-users” refer to those who might use research in their decision-making processes or as a more general input to their own knowledge base. They include: government ministries, health service delivery institutions, health care institutions, practitioners (doctors, nurses), civil society, the media, industry, the research community, etc.

For AIHS, KT is a bridge connecting the processes of knowledge generation and knowledge application – with this act of connection transforming both. With the application of knowledge an end goal, KT necessarily transforms the research culture (orienting more inclusive processes towards application), the decision-making culture (both as receptor and demander of health research evidence), the practice culture (again as receptor and demander of evidence), the culture of industry (creating beneficial partnerships with researchers in order to bring discoveries to market), and, at the level of the health system, the overarching culture of collaboration, integration, and partnership.

Recognizing the unique position of AIHS as a funder of research and as an integral supporter of research processes, AIHS defines knowledge translation simply yet broadly. For AIHS, KT *connects contextualized knowledge with its application to improve the health and wellness of Albertans*. KT is not a discrete set of programs but rather a *process*, an approach that unfolds over time involving many different stakeholders. Its fundamental unit is *knowledge*, a blend of the explicit (i.e. research evidence) and the tacit (i.e. expertise, experience, best practice) that must be *contextualized* to reflect specific opportunities for its *application* (in policy, in practice, in product or technology development).

KT connects stakeholders in circular and iterative processes, transforming how each creates, responds to, adapts, and applies knowledge. As in AIHS' Performance Management Framework pictured in *Figure 1* below, KT can be imagined as a series of connected loops: research results inform a wider pool of knowledge, which informs an improved decision-making process, which creates better health decisions, which contribute to positive health outcomes, which are the basis for socio-economic prosperity – which then inform the type of research evidence that is now required and the loops reset.⁶

⁶ For more on this concept, see the CAHS (2009) Health Impacts framework.

AIHS Mission & Vision

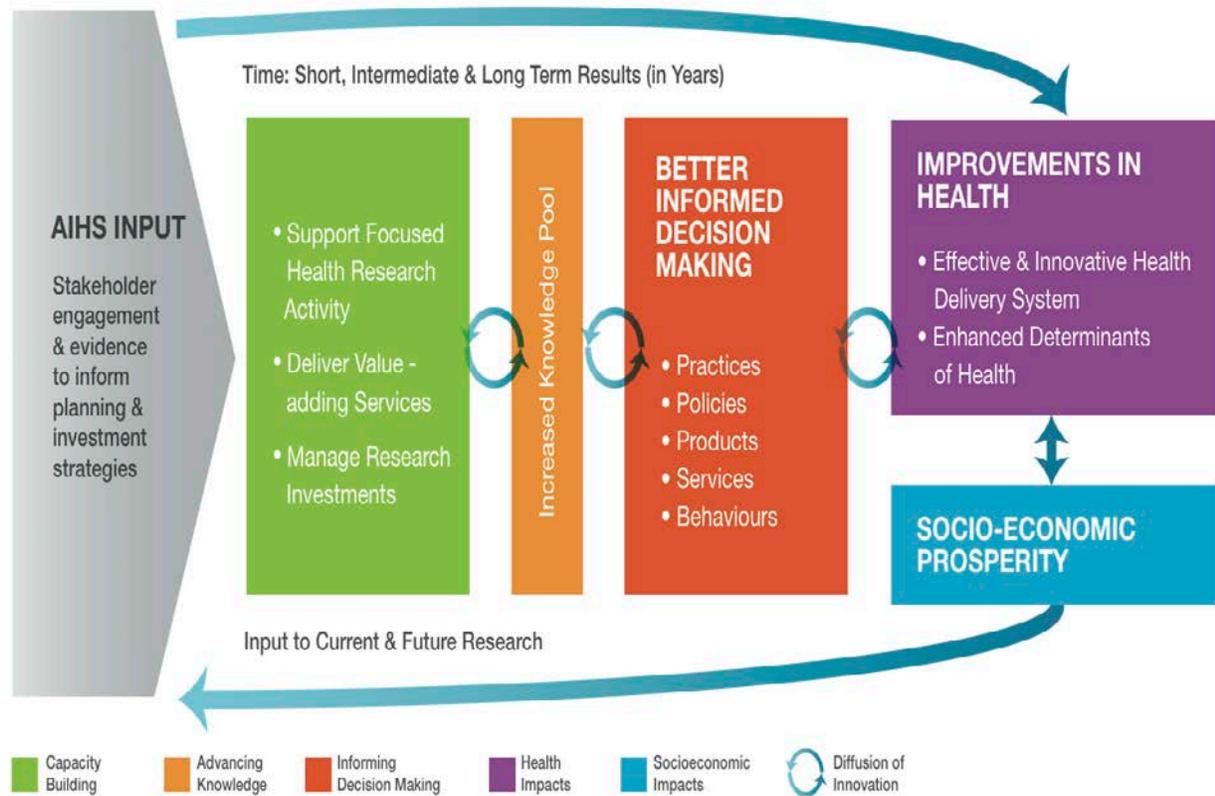


Figure 1: AIHS Performance Management Framework

4. Vision Statement

Aligned with Alberta Health Research and Innovation Strategy (2010), the Alberta Innovates – Health Solutions Initial Strategic Framework (2010) and the above definition, our vision statement is: *Through knowledge translation, AIHS envisions a research and innovation system that effectively produces, manages and applies contextualized knowledge that results in improved health outcomes for all Albertans.*

To expand upon this, AIHS envisions a research and innovation system that:

- Effectively and efficiently generates and supports user-informed evidence and then sees that evidence applied in policies, programs, practices, and technology/product development.
- Is fully coordinated and networked so that each component part understands its role in the wider picture, and can easily share and exchange knowledge with others.
- Is marked by collaboration and partnerships that exploit synergies among like-minded groups, or that create new linkages between the creators of health research (from individual researchers to research institutions) and those that apply health research (from government to industry).
- Routinely generates solutions to recognized problems.

As discussed in *Section 6* below, AIHS will pursue this vision through three strategic directions.

5. Guiding Principles

As an organization, Alberta Innovates – Health Solutions embraces five principles that guide its programming and operations. These include **relevance** (listening and responding to the needs of Albertans); **leadership** (seizing opportunity, taking on tough issues, transforming perspectives); **creativity** (finding unique ways to work); **accountability** (openly assessing impact and progress); and **excellence** (striving for the highest quality in our processes, in the research we fund, and in the organization we are).

In embedding its knowledge translation (KT) philosophy, AIHS will build on the above principles with further attention to:

- **Knowledge**

Knowledge is an essential aspect of any health system, and we will make routine and far-reaching contributions to a robust knowledge culture among our major stakeholders and across the organization. We commit ourselves to identifying (or assisting our partners in identifying) and implementing sustainable knowledge practices and solutions.

- **Alignment**

We believe that our unique position allows us to align health research with the needs and priorities of Albertans and with the strategic priorities of Alberta's health system. Further, we believe that an understanding of the unique challenges faced by end-users is critical to aligning research with its prevailing context.

- **Collaboration**

We believe that collaboration is essential in addressing complex health issues, and will pursue it through institutional partnerships, networking, and support for multi-disciplinary, multi-stakeholder approaches. We believe that optimizing research efforts in the province will require the regular facilitation of provincial, national and international collaboration.

- **Innovation**

We believe that a holistic view of health research will foster a culture of innovation capable of generating creative and sustainable solutions extending beyond the health system.

- **Learning**

We seek to encourage an evaluative spirit in ourselves, our partners, recipients and other stakeholders, while also working to understand, document, and review our own performance in order to continually improve upon it.

6. Strategic Directions

To pursue Alberta Innovates – Health Solutions’ KT vision, AIHS will focus on the following interwoven strategic directions.

6.1 A strengthened and vibrant knowledge culture in the province

Knowledge is a crucial asset in guiding decision-making, in informing practice, and in developing technologies and products. Using KT techniques and approaches, AIHS will strengthen the province’s knowledge culture by focusing on:

- **Priority Setting** – identifying the needs of end-users and connecting these with the research agenda. Support for priority setting will see AIHS routinely engaging a wide range of stakeholders for their input into research topics, converting broad government priorities, industry imperatives, and AHS-identified needs (among others) into researchable topics and questions. World-class mechanisms will identify, balance and prioritize competing topics within the health research agenda, and orient AIHS funding opportunities towards high-priority topics from across the research and innovation system. All of this will contribute to research that is increasingly responsive to the knowledge needs of end-users.
- **Capacity Building** – strengthening the capacities of both end-users and researchers. For *end-users* (from health-system decision-makers to civil society), AIHS will regularly identify capacity needs – including how end-users might participate in research processes, partner with researchers, interact with research findings or syntheses, and demand research evidence – and then design or support training opportunities that will deepen their skills to become more dynamic participants in research processes. Opening up research processes to incorporate application considerations, however, requires new or different skills for many researchers. To

- hat end, for *researchers*, AIHS will regularly identify their capacity needs and then design or support responsive training opportunities, including those that focus on push mechanisms (e.g. using plain language to synthesize, tailor, and target key messages) and those that focus on pull mechanisms (e.g. involving end-users in multi-disciplinary research projects).
- **Knowledge Syntheses** – supporting activities designed to synthesize existing knowledge into a form tailored and targeted for specific audiences. Research evidence is only one part of “knowledge”. As an input to change, knowledge must reflect explicit knowledge (i.e. research evidence) and tacit knowledge (i.e. experience, expertise, organizational culture). This work includes synthesis efforts that are policy-oriented (e.g. a policy brief), that harvest the best-available knowledge (e.g. a systematic review), or that target specific end-users (e.g. a press release).
- **Networks** – identifying and supporting those networks that catalyze specific knowledge communities. Specific knowledge communities are already thriving in Alberta (e.g. the Strategic Clinical Networks of AHS, civil-society work in child health), with each playing an essential role in deepening specialized aspects of the province’s knowledge culture.

From the AIHS Stakeholder Consultation

“As AIHS moves forward, it is predicted that efforts aimed at coordination and integration among its stakeholder community will become increasingly important.... In the current context, AIHS seems particularly well positioned to (i) facilitate the brokering of necessary relations among its stakeholder community, and to (ii) successfully leverage and align system resources to maximize potential investment returns and related system benefits”.

6.2 A coordinated research and innovation system for the province

Influencing the province's knowledge culture can best succeed in an environment where knowledge – and its major creators and users – are increasingly connected and coordinated. Using KT techniques and approaches, AIHS will use its unique position within the province's research and innovation system to better harmonize, leverage, and align the system's resources. This will see AIHS focus on:

- **Brokering and Networking**

As AIHS straddles the worlds of government, health services, universities, industry, and civil society, it has strong and routine opportunities to broker and network among these key organizations and sectors. Brokering and networking serves to: create an increased awareness of research/policy/practice/industry processes; actively connect researchers with other researchers or end-users; create multi-disciplinary and even multi-sectoral research projects involving end-users in their design and execution; and foster strategic relationships, partnerships, and modes of interaction leading to a much more integrated and collaborative research and innovation system.

- **Knowledge Management**

Further expanding AIHS' focus on integration is its attention to knowledge management (KM). A KM focus will see AIHS play a leading role in identifying, harvesting, connecting, and facilitating access to knowledge from across the health system – in the end making knowledge much more accessible. This will allow for better coordination among the major research stakeholders, reduce duplication or unnecessary overlap, identify and capture tacit knowledge (along with the ways in which it compliments explicit knowledge), lead to the easy identification of expertise in a particular area, support research projects access to data, and contribute to social networking (within and beyond Alberta) as individuals increasingly connect on particular issues. This may play a strong role in AIHS' work

Strategic Observations from the KT Working Group (2012)

In concluding its work, AIHS' KT Working Group made four observations it deemed "important considerations for the development and implementation" of its KT recommendations:

- 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 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 meet its mandate, AIHS must support initiatives that advance the knowledge and practice of KT

with other AI corporations, ensuring that knowledge is easily captured, shared and/or transferred on key issues.

- **Collaboration**

AIHS will routinely look for new (or will improve upon existing) pathways of collaboration between and among the AI Corporations, with Alberta Health Services, with the university system, with government, and with other major research stakeholders.

6.3 Leadership in Knowledge Translation

Reflecting the centrality of KT within AHRIS and the province, AIHS is committed to a leadership role in KT. In leading by doing, AIHS will build on the previous two strategic directions by focusing on:

- **KT Capacity Strengthening**

AIHS will contribute to a critical mass of people and institutions capable of creating KT strategies, interacting with research evidence, and strengthening the many linkages between the creation of knowledge and its application. Researchers will deepen their basic KT skills, approaches, and methodologies to develop KT strategies and partnerships that, ultimately, will orient their work (when and where appropriate) towards its application.

- **Evaluation**

AIHS will work to advance the knowledge and practice of KT to understand precise ways in which KT works within Alberta's health research and innovation system, and to measure the impact of our funded research.

- **Learning**

Recognizing the wealth of knowledge AIHS will support and create through its KT leadership – and recognizing as well the wealth of knowledge harvested through its KM activities – AIHS will regularly use knowledge to adjust and sharpen its KT focus. As a learning organization, AIHS sees

From AIHS: Staying the Course (2012)

“Partnerships and collaborations with other Alberta Innovates corporations, the health sector, private industry, and the post-secondary institutions will also be key elements necessary to our collective success. Working collaboratively with all of the entities, AIHS will continue to understand health sector needs (gaps in knowledge, policy, and practice) and develop opportunities in priority thematic areas that will result not only in the discovery of new knowledge, but also in its transfer and application of that knowledge for the benefit of Alberta”.

7. Partnership

There are many different partners whom Alberta Innovates – Health Solutions seeks to influence in pursuing its knowledge translation (KT) philosophy. They differ in terms of the way in which AIHS will interact with them, and the degree of this interaction. Partners include:

- **Alberta Health Services (AHS)**

In recognition of the sheer size of AHS, there are multiple entry-points or partnership possibilities connecting AIHS and AHS. Possible entry points could be the Strategic Clinical Networks (SCNs), AHS-supported health researchers, and/or with its knowledge management team, and these may all be involved in any of the above strategic directions.

- **Government Decision-makers**

AIHS particularly references those sitting within Alberta Health, Alberta Enterprise & Advanced Education, and to members of the legislative assembly (MLAs). These institutions and individuals may be best involved and/or influenced through priority-setting mechanisms (where they would be active participants), capacity-building efforts (to improve their facility with health research), and synthesis.

- **Other AI Corporations**

While each AI Corporation pursues a discrete mandate, there are areas that require greater collaboration and coordination, including agreements on how to “hand over” research findings or processes that play to particular AI strengths, and develop activities or programmes that are cross-sectoral. Technology and commercialization is one topic area of note, and through brokering and priority setting, AIHS can play a strong role in influencing how the AI corporations respond to opportunities in the commercialization of health research. KM techniques could improve the flow of knowledge among the corporations, and help to clarify processes and pathways.

- **The Research Community**

Researchers in Alberta can be university – based, health system or community based and thus AIHS may wish to influence the research community via institutional arrangements, via specific arrangements with individual teams or grant recipients or through our various innovation platforms. Each of AIHS’ strategic directions can bear profound influence on the research community at large.

- **Private Industry**

Recognizing the call in AHRIS to “accelerate the movement of discoveries and new applications into commercial products and services,” AIHS has a strong role to play in brokering partnerships among the research community and industry, offering capacity building courses to industry and to the research community, and in supporting synthesis work that focuses on these linkages.⁸

⁸ Note this area still requires further investigation in terms of AIHS’ precise role. A structured environmental survey, needs analysis, asset map or situation analysis may be required.

8. Evaluation

AIHS' Performance Management & Evaluation (PME) unit is central to achieving this KT vision. PME will guide the evaluation of all AIHS research and innovation activities and their KT efforts, including the development of metrics to assess progress within each of the three strategic directions. PME can also assist this KT philosophy through: the evaluation of individual projects and groups of grants to identify best KT practices and developing processes and metrics to better measure the impact of AIHS-supported KT efforts.

In 2015, AIHS will commission an external evaluation to assess progress against this *KT Strategic Plan*. This will involve the identification of external evaluators and working with them to create an evaluation plan that will be completed during 2015-16.

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10. Appendices

Appendix 10.1

[Alberta's Health Research and Innovation Strategy \(AHRIS\)](#) (external link)

Appendix 10.2

[Knowledge Translation Working Group Position Paper](#)

Appendix 10.3

[Stakeholder Implementation Process Summary Report](#)