

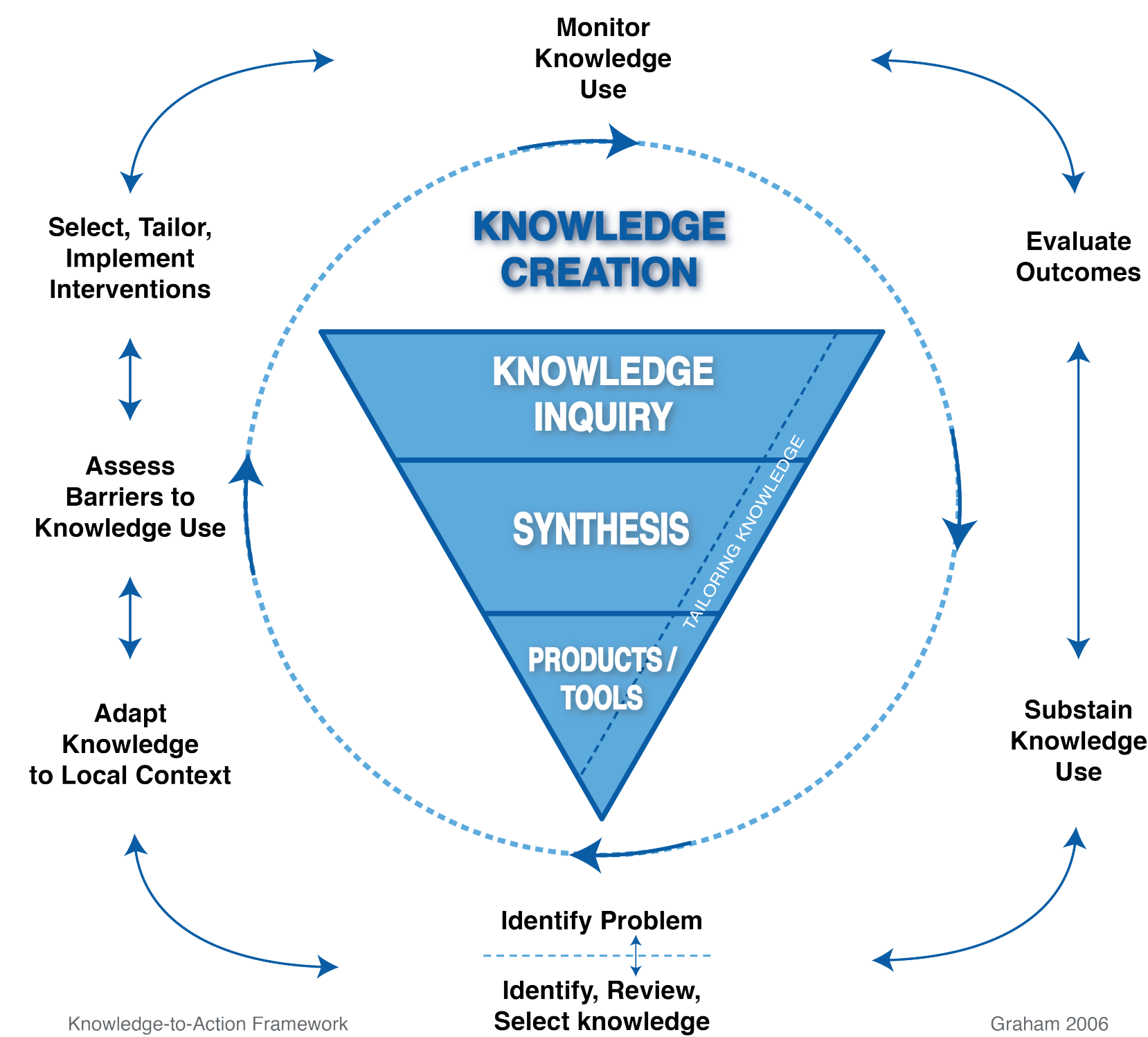
# Development and Implementation of a Knowledge Translation Model for Rehabilitation

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## Introduction

- Knowledge Translation (KT) is a dynamic and iterative process that includes:
  - synthesis
  - dissemination
  - exchange
  - ethically-sound application of knowledge
- KT requires coordinated effort among all stakeholders
- Knowledge-to-Action (KTA) provides framework for implementation (Fig. 1)

## Fig. 1 KTA Framework



- KTA includes Knowledge Creation and Action Cycle
- RKR KT model incorporates KTA

## Fig. 2 KT Model



## Implementation

- Practices recommended by KEs
  - Assessments
  - Interventions (with dose)
- Implemented at each facility by Knowledge Ambassador (KA)
  - Assesses/overcomes local barriers
  - Coordinates stakeholder involvement
  - Mentors staff in EBP
  - Ensures standardization and quality
- Model illustrated in Fig. 2

## Project Description

- Regional Center of Knowledge Translation in Rehabilitation (RKR) serves the South Eastern Health Region in Norway
  - 9 Public Hospital Trusts
  - 30 Private Rehabilitation facilities
- Provides KT infrastructure to support regional KT efforts to:
  - 1) Expedite implementation of evidence-based practice (EBP)
  - 2) Standardize rehabilitation assessments and interventions
  - 3) Improve patient outcomes

## Key Components

- RKR's KT model (Fig. 2) has two primary components:
- Creation of Knowledge Translation Tools (KTTs)
    - Summaries of adapted evidence
    - Recommendations for application of evidence in practice
  - Implementation model
    - Knowledge Ambassadors facilitate implementation at local sites
    - KT process based on KTA Cycle

## Adapt the Evidence

- Knowledge Experts (KEs) collaborate to develop KTTs
  - Clinicians, researchers or educators
  - Adapt evidence
  - Content experts in EBP
- Assessment Summaries
  - Psychometric properties
  - Clinical utility
  - Indices of change
- Intervention Summaries
  - Dose (frequency, intensity, time, duration, type)
  - Parameters of application

## Evaluation Plan

- Impact on the health region
  - Beliefs and perspectives of EBP
  - EBP Implementation Scale
  - Perceived use of EBP within and between facilities in health region
- Evaluation of implemented EBPs
  - Use of the EBP before and after implementation
  - Patient outcomes before and after implementation
- Validated surveys will be used to assess these outcomes