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Mobilising knowledge from complex intervention evaluations into policy and practice: how to deal with lazy academics and stubborn policy-makers?

Workshop hosts:

Dr Sebastian Potthoff, Northumbria University, UK

Dr Peter van der Graaf, Northumbria University, UK

Future of Evaluation Symposium, 14-16 January 2025

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Welcome and introduction from your hosts

Dr Peter van der Graaf

Associate Professor in Public Health and Knowledge Mobilisation

Northumbria University, UK

Dr Sebastian Potthoff

Assistant Professor in Implementation Science

Northumbria University, UK

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Learning outcomes

- Demonstrate a critical understanding of the **concepts of translational research, knowledge mobilisation and co-production** in the context of complex intervention evaluations
- Understand **how to design research** to benefit from the expertise of users
- Recognise **the importance of building and maintaining relationships** to maximise impact
- **Apply this learning** to their future knowledge mobilisation efforts

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Structure of the workshop

When	What	Who
2:00 – 2:10pm	Welcome, introductions and overview of session	Peter/ Seb
2:10 – 2:25pm	Presentation 1: Introducing the Fuse KE model and SPHR knowledge sharing principles	Peter
2:25 – 2:40pm	*Group activity 1*: How to design complex intervention evaluations that benefit from the expertise of knowledge users?	Peter
2:40 – 2:55pm	Presentation 2: Engaging stakeholders in implementation research and practice	Sebastian
2:55 – 3.10pm	*Group activity 1*: Applying the Implementation-Stakeholder Engagement Model (I-STEM)	Sebastian
3:10 – 3:15pm	Reflections, Q&A, workshop evaluation	All

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Part 1: Introducing the Fuse KE model and SPHR knowledge sharing principles

Dr Peter van der Graaf

How long does it take for research to get into practice?

And how much research makes it into practice?

17 Years

14 Percent

(Morris et al. 2011)

What stops knowledge from being mobilised?

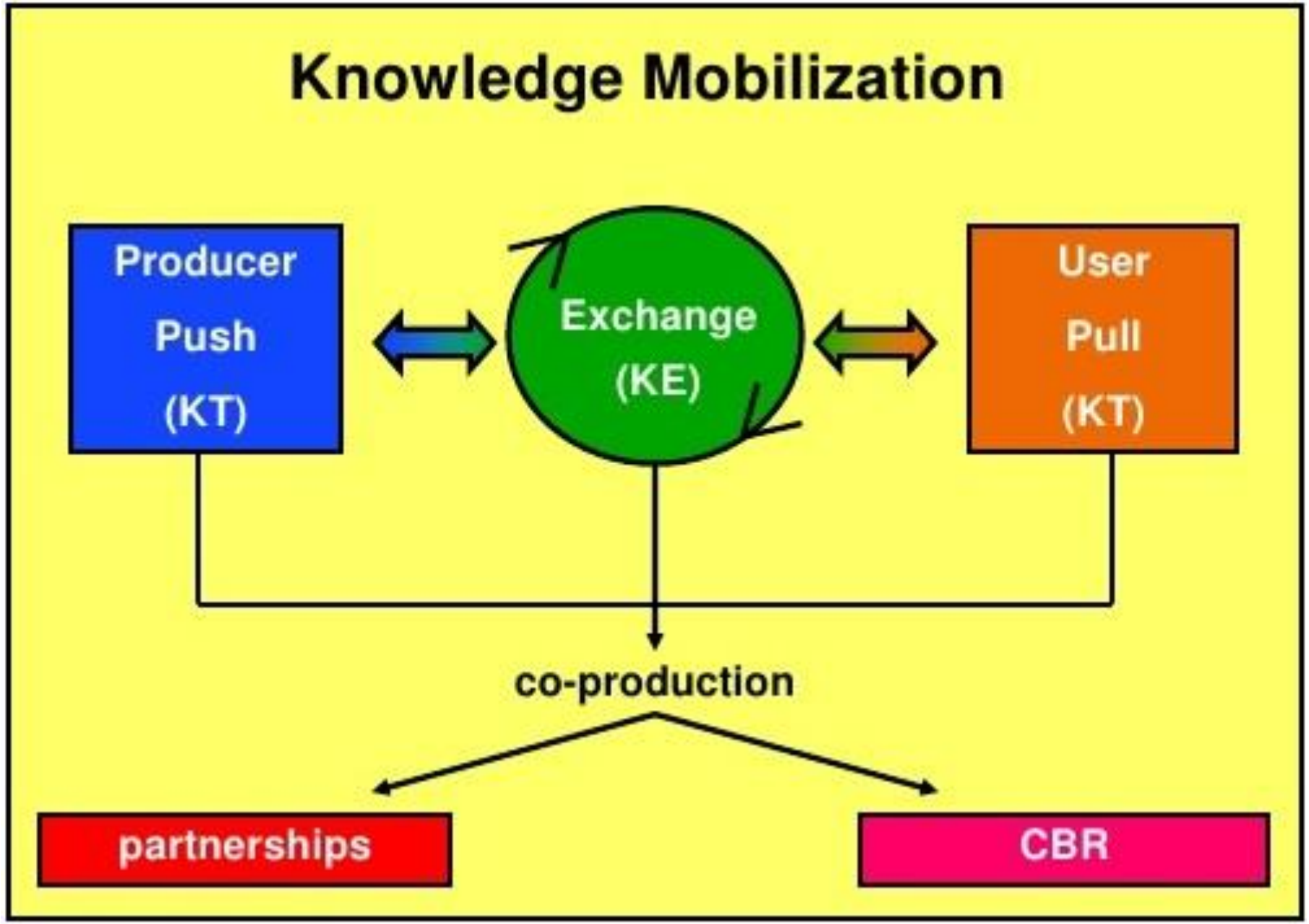
- Takes **too long** to report
- No **actionable** recommendations
- Fails to address **most pressing local issues**
- Research evidence still has to be **adapted to local context**
- Evidence needed may **not be available**
- Practitioners may **lack skills** searching, appraising and synthesising evidence
- Research evidence only one **type of knowledge** (technical expertise, practical wisdom)

(Van Der Graaf, Forrest, Adam, Shucksmith, White, 2017)

Stubborn practitioners and lazy scientists

- **Implementation barriers** for knowledge are often **personal**
- Importance of **acknowledging feelings**
- Spending time in each other's **context**
- **Practicing everyday skills**: listening, emotional intelligence and persuasion
- Relating knowledge to **people's sense of self** to make it relevant

CLOSE THE GAP



Knowledge Mobilisation: what is in a name?

- Translational research
- Knowledge translation
- Integrated knowledge translation
- Knowledge exchange
- Knowledge mobilisation
- Co-production
- Co-design
- Co-creation …

What's it about?

- "The process of moving knowledge to where it can be most useful." (Ward, 2017).
- "Bringing **diverse communities** together to **share** and **create** new knowledge **in the context of its use** to actively **change** something" (Knowledge Mobilisation Alliance, https://kmalliance.co.uk/)
- "knowledge is created within the context of its use; working with those who are likely to use it, and **boundaries between knowledge producer and knowledge user are purposely blurred and utilised**. We define KMb as the activation of available knowledge within a given context. (Langley, Wolstenholme & Cooke, 2018).

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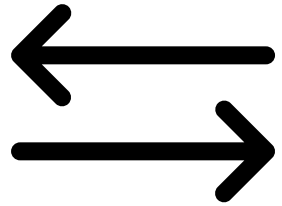
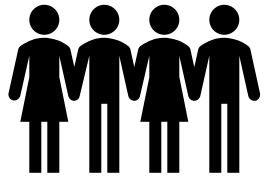
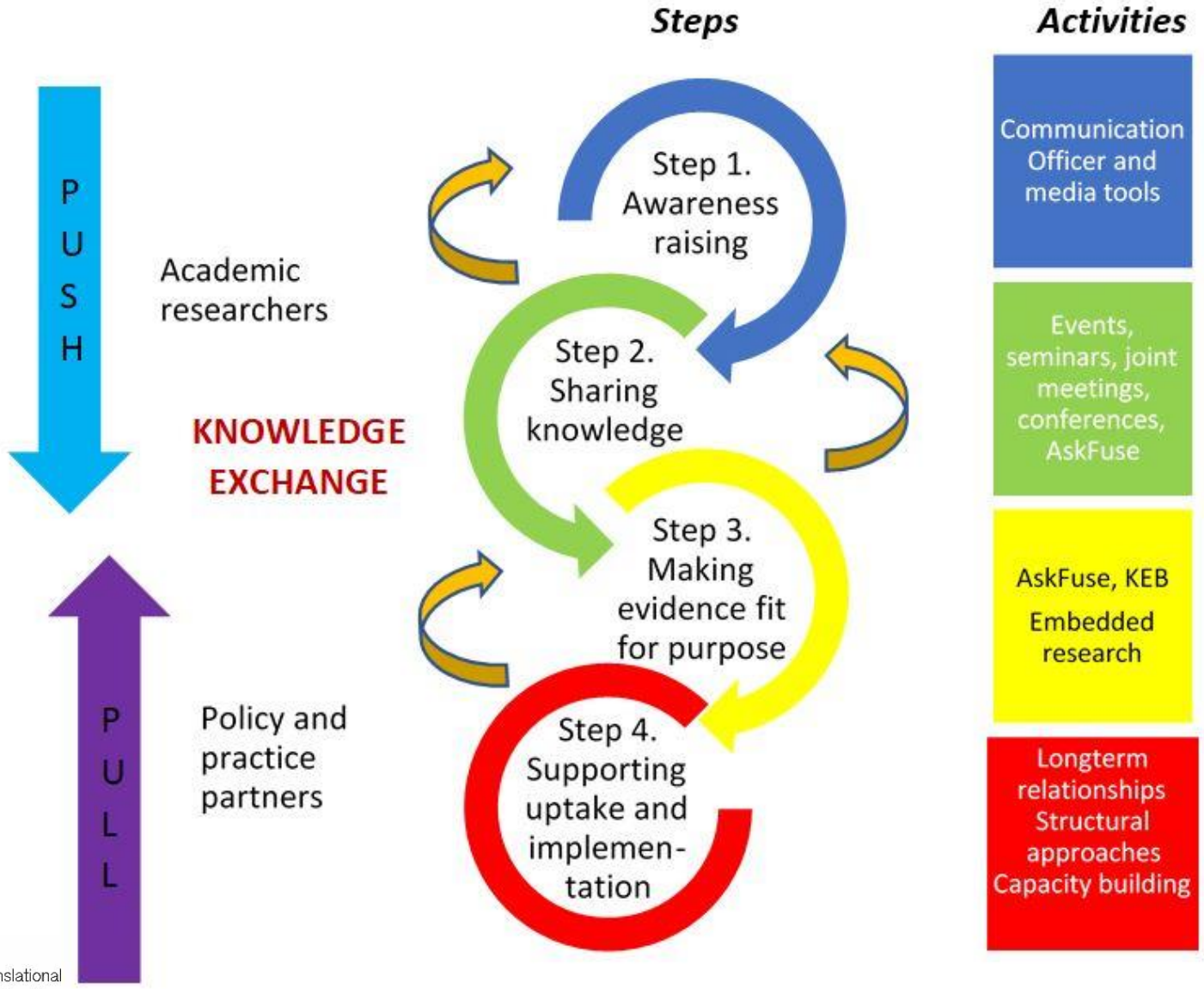




Fuse knowledge exchange model



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(Van der Graaf et al. 2019)

Step 1. Awareness raising: creative communication

- Fuse briefs
- Fuse Open Science Blog
- Fuse podcasts ‘Public Health Research and Me’
- Stand-up comedy ‘Hazardous Waists’
- Theatre performance: 'Credit', based on embedded research
- Animation and gaming
- Mobile apps (FeedFinder)
- Infographics

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Step 3. Making evidence fit for purpose: embedded researchers

- **Co-located** research roles within non-academic organisations
- Co-produce findings which **fit** organisation's unique **context and culture**
- Working across **organisational boundaries**

(Ward et al. 2021, Cheetham et al. 2017)

NIHR SPHR six knowledge sharing principles

1. Clarify your purpose and knowledge sharing goals	What do you want your findings to do, or to change?
2. Identify knowledge users and stakeholders	Who would be interested in this research, or need to know about it?
3. Use knowledge users' expertise	• How will you design the research to benefit from their expertise and knowledge?
4. Agree expectations	• How will you get a shared understanding what is expected of everyone and what can be achieved?
5. Monitor, reflect and be responsive	• How will you know if your knowledge sharing activities have met your goals?
6. Leave a legacy	• How can you develop, capture and sustain any benefits?

https://sphr.nihr.ac.uk/wp-content/uploads/2018/10/Appendix-2_Knowledge-sharing-principles.pdf

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Principle 1. Clarify your purpose and knowledge sharing goals

- What knowledge are you planning to mobilise? What are your key messages?
- What do you want your findings to do, or to change? What are your intended goals?

Why are you doing this? What impact are you trying to have with your KMb efforts?

- ☐ change attitudes
- ☐ change behaviour or practice
- ☐ engage stakeholders
- ☐ fulfill funding requirements
- ☐ generate interest or awareness
- ☐ influence policy action
- ☐ share knowledge, experience or tools
- ☐ validate, legitimize or defend a position
- ☐ other:

(Knowledge mobilization toolkit, 2023)

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Principle 2. Identify knowledge users and stakeholders

- Who are you sharing this information with?
- Who is involved in sharing the knowledge?
- Who are your partners and who are your champions?
- Who should be engaged in your KMb activities?

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Group activity 1: Mapping/ listing exercise

Principle 3. Use knowledge users' expertise

Question: *How can you design complex intervention evaluations that benefit from the expertise and knowledge of knowledge users?*

Activity:

- First discuss in pairs, listing options on A4 sheet of paper; (5 minutes)
- Followed by group discussion to compare and explore lists (10 minutes)

Enhancing Post-injury Psychological Intervention and Care (EPPIC) study: using Forum Theatre to mobilise knowledge and improve NHS care (Evidence & Policy 18, 2; 10.1332/174426421X16420902769508

ENGAGING STAKEHOLDERS IN IMPLEMENTATION RESEARCH AND PRACTICE

Dr Sebastian Potthoff, Assistant Professor of Implementation Science
Co-Lead Innovation & Implementation Research
Director at Open Digital Health
Head Editor at Practical Health Psychology

The Future of Evaluation in Health and Social Care, 15th Jan 2025

WHY ENGAGE STAKEHOLDERS IN IMPLEMENTATION?

Guidelines

Techniques

Medication

Intervention

Policy

Technology

No implementation without stakeholders

This framing allows us to draw on systematic implementation science approaches

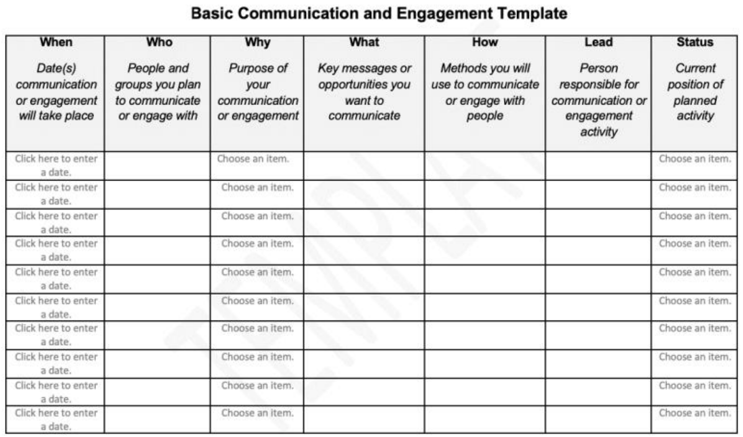
WHO IS A STAKEHOLDER?

A stakeholder is anybody who may be affected by your implementation/ improvement project

May include patients and the public, providers, policy makers, product makers, payers, and purchasers

EXISTING TOOLS FOR STAKEHOLDER ENGAGEMENT

Communication templates



Basic Communication and Engagement Template

When *Date(s) communication or engagement will take place*	**Who** *People and groups you plan to communicate or engage with*	**Why** *Purpose of your communication or engagement*	**What** *Key messages or opportunities you want to communicate*	**How** *Methods you will use to communicate or engage with people*	**Lead** *Person responsible for communication or engagement activity*	**Status** *Current position of planned activity*
Click here to enter a date.		Choose an item.				Choose an item.
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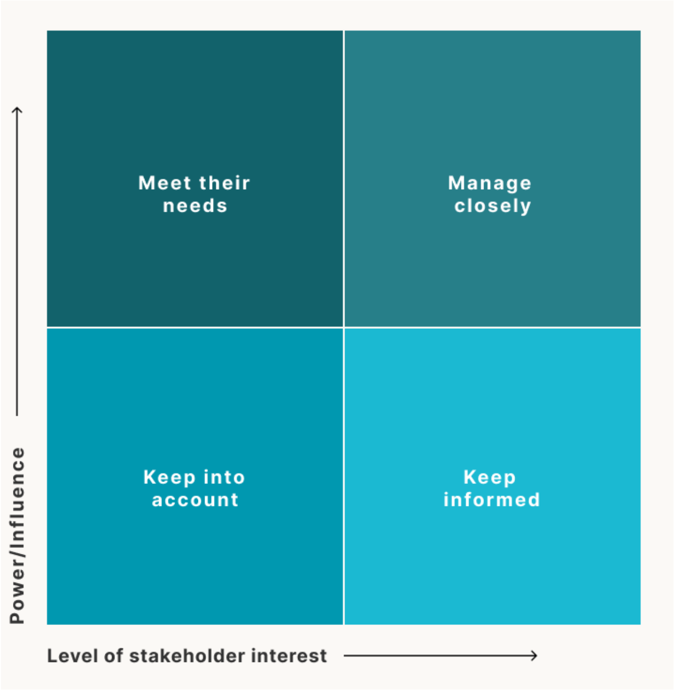
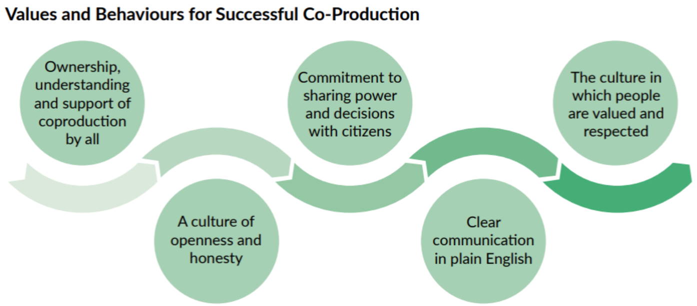
Matrices for prioritisation



Guiding principles



THE IMPLEMENTATION STAKEHOLDER ENGAGEMENT MODEL (I-STEM)

Received: 8 March 2023 | Revised: 29 May 2023 | Accepted: 18 June 2023

DOI: 10.1111/hex.13808

ORIGINAL ARTICLE

WILEY

Towards an Implementation-STakeholder Engagement Model (I-STEM) for improving health and social care services

Sebastian Potthoff PhD, Assistant Professor[1] | Tracy Finch PhD, Professor[2] | Leah Bührmann MSc, PhD Candidate[1,3] | Anne Etzelmüller Dipl.-Psych., Lead Clinical Researcher[4,5] | Claire R. van Genugten PhD, Assistant Professor[3,6] | Melissa Girling PhD, Research Fellow[2] | Carl R. May PhD, Professor[7] | Neil Perkins MPhil, Research Fellow[1] | Christiaan Vis PhD, Senior Researcher[3,8,9] | Tim Rapley PhD, Professor[1] | On behalf of the ImpleMentAll consortium

[1]Department of Social Work, Education, and Community Wellbeing, Northumbria University, Newcastle Upon Tyne, UK

[2]Department of Nursing, Midwifery and Health, Northumbria University, Newcastle upon Tyne, UK

[3]Clinical, Neuro-, & Developmental Psychology Faculty of Behavioural and Movement Sciences, VU Amsterdam, The Netherlands

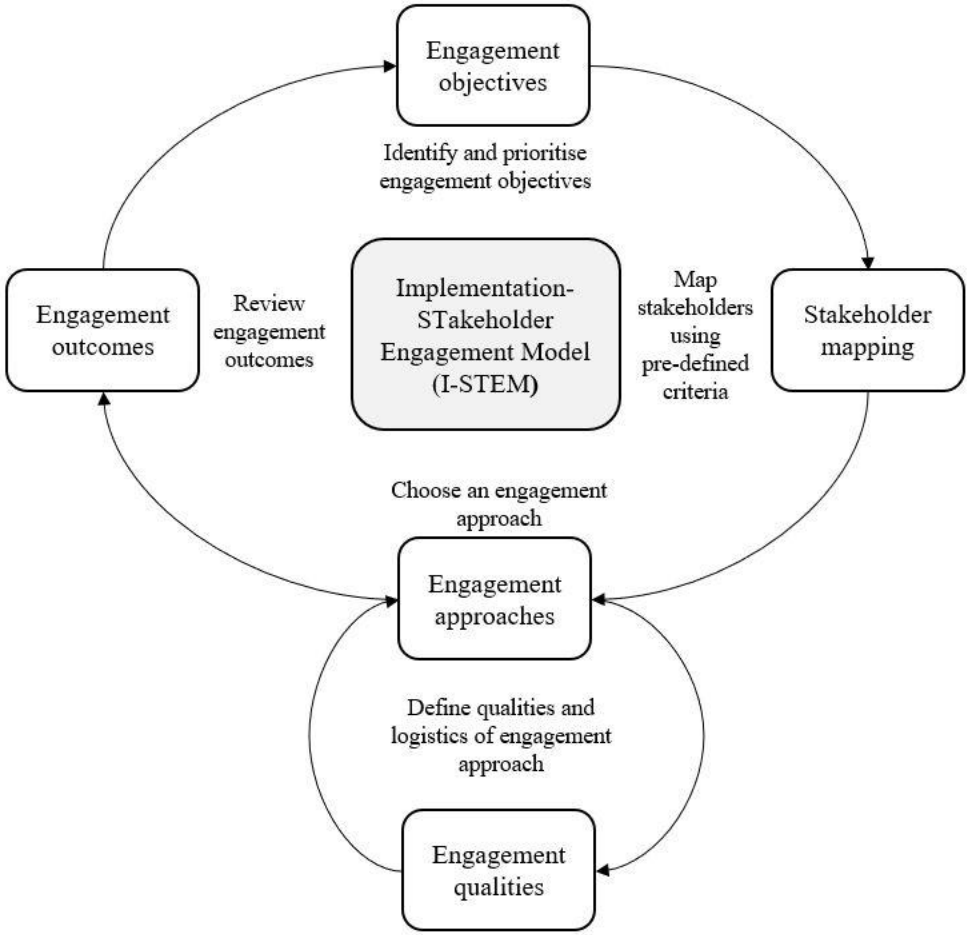
[4]Department Sports and Health Sciences, Technical University of Munich, Munich, Germany

[5]HelloBetter, GET.ON Institute für Online Gesundheitstrainings GmbH, Hamburg/Berlin, Germany

[6]Amsterdam Public Health Research Institute—Mental Health, Amsterdam, The Netherlands

Abstract

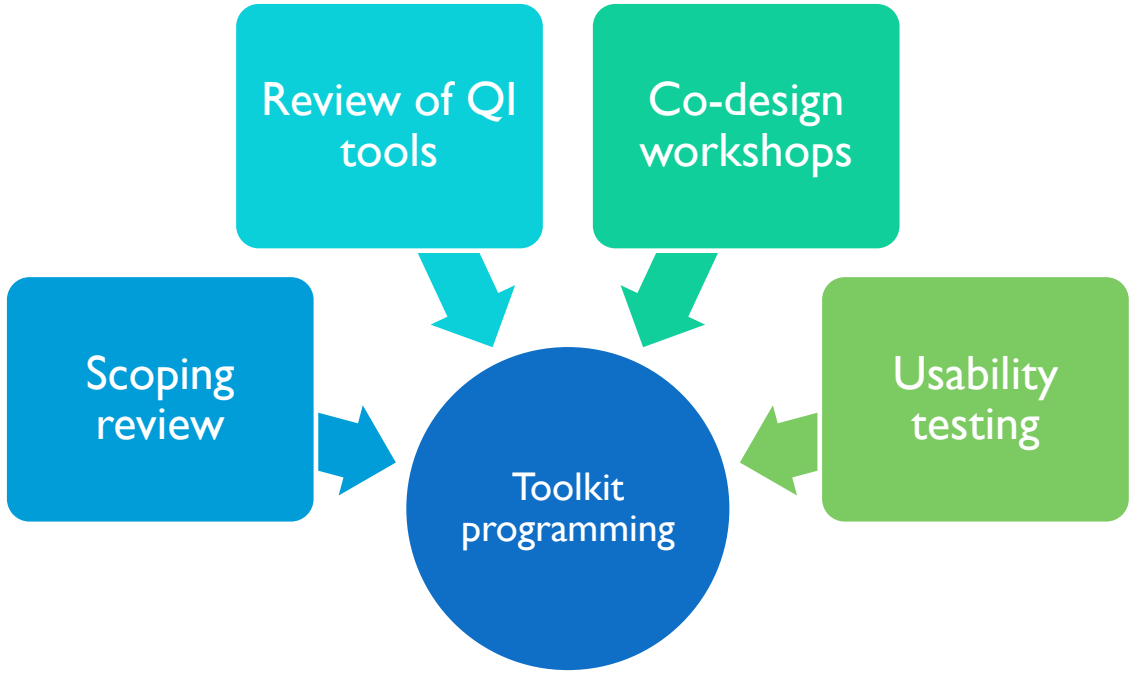
Background: The implementation science literature acknowledges a need for engagement of key stakeholders when designing, delivering and evaluating implementation work. To date, the literature reports minimal or focused stakeholder engagement, where stakeholders are engaged in either barrier identification and/or barrier prioritisation. This paper begins to answer calls from the literature for the development of tools and guidance to support comprehensive stakeholder engagement in implementation research and practice. The paper describes the systematic development of the Implementation-STakeholder Engagement Model (I-STEM) in the context of an international, large-scale empirical implementation study (ImpleMentAll) aimed at evaluating the effectiveness of a tailored implementation toolkit. The I-STEM is a sensitising tool that defines key considerations and activities for undertaking stakeholder engagement activities across an implementation process.



Potthoff et al, 2023. *Health Expectations*

CO-DESIGNING TOOLS FOR STAKEHOLDER ENGAGEMENT

- Project aim: To co-develop the I-STEM into a user-friendly toolkit for non-academic users



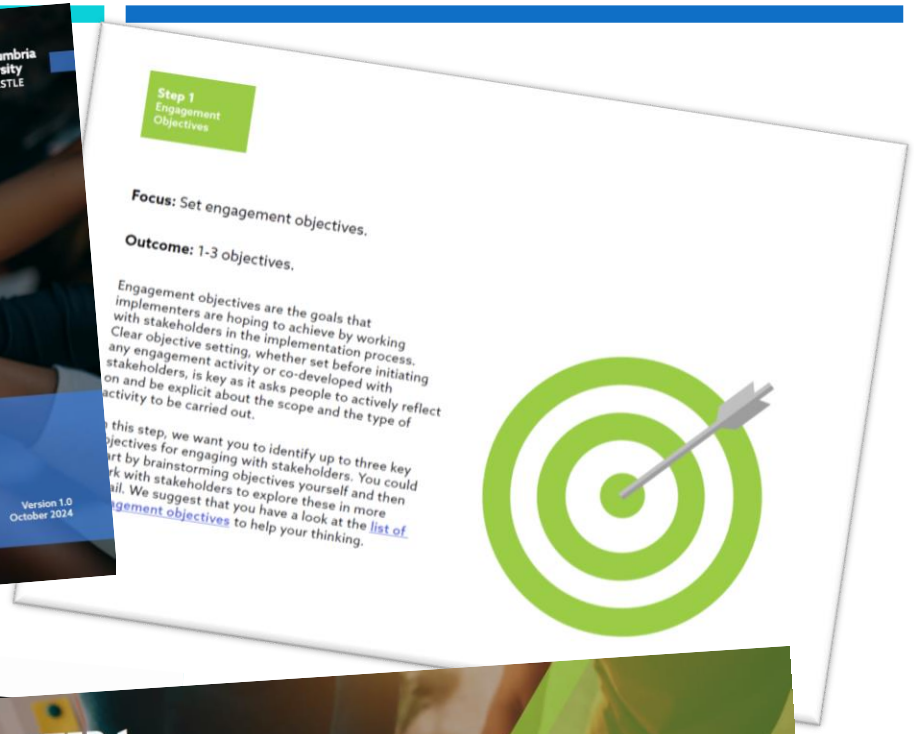
I-STEM TOOLKIT SIX-STEP APPROACH

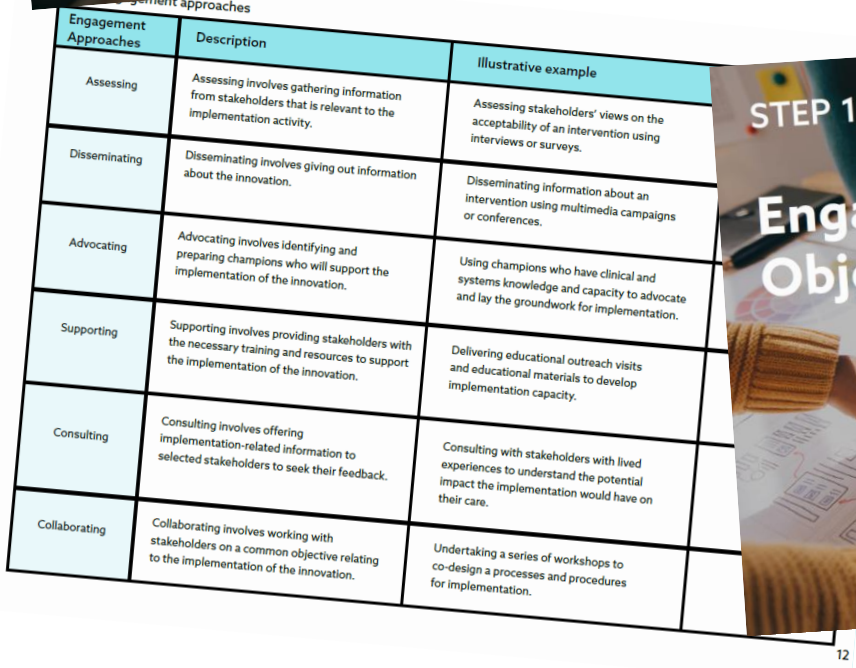
Scan QR to download the I-STEM toolkit

Embedded evidence & resources:

- STEP 1: I-STEM
- STEPS 2 & 3: I-STEM & BSR Five-step approach to stakeholder engagement
- STEP 4: Powell's taxonomy of implementation strategies (2015)
- STEP 5: TIDieR checklist (Hoffman 2014)
- STEP 6: Proctor's implementation outcomes (2011)

Figshare download link: Potthoff et al 2024 https://doi.org/10.25398/rd.northumbria.27248193.v1





Engagement Approaches	Description	Illustrative example
Assessing	Assessing involves gathering information from stakeholders that is relevant to the implementation activity.	Assessing stakeholders' views on the acceptability of an intervention using interviews or surveys.
Disseminating	Disseminating involves giving out information about the innovation.	Disseminating information about an intervention using multimedia campaigns or conferences.
Advocating	Advocating involves identifying and preparing champions who will support the implementation of the innovation.	Using champions who have clinical and systems knowledge and capacity to advocate and lay the groundwork for implementation.
Supporting	Supporting involves providing stakeholders with the necessary training and resources to support the implementation of the innovation.	Delivering educational outreach visits and educational materials to develop implementation capacity.
Consulting	Consulting involves offering implementation-related information to selected stakeholders to seek their feedback.	Consulting with stakeholders with lived experiences to understand the potential impact the implementation would have on their care.
Collaborating	Collaborating involves working with stakeholders on a common objective relating to the implementation of the innovation.	Undertaking a series of workshops to co-design a processes and procedures for implementation.

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Innovation and Implementation Research

Toolkit characteristics:

- Structured, theory-based process
- Supports engagement at any implementation stage
- Flexible and adaptive responding
- Includes worksheet, case studies, and user testimonials

STEP 2: STAKEHOLDER IDENTIFICATION & MAPPING

- **Task**: Add stakeholder groups and individuals to the table and chart them against the criteria with short descriptions of how stakeholders fulfil them. Assign values (low, medium, or high) to these stakeholders.
- **Example**: Implementing alcohol screening and brief intervention (SBI) in acute hospital wards

Stakeholder	Influence	Expertise	Orientation	Impact	Capacity	Trust
Consultants responsible for training programme of junior doctors	**High:** Responsible for overseeing the junior doctor training programme. Influence learning objectives for doctors in training.	**Medium:** Good clinical knowledge of relevant conditions in the acute setting. Limited knowledge of SBI strategies.	**Reluctant**: Agreeing that it's important but may not see it as a prioritised learning objective for junior doctors.	**Medium:** Will be responsible for this additional learning objective. Includes monitoring learning progress of mentees and oversight of other consultants.	**Medium:** Have allocated time to oversee doctor training. Additional time will be needed to implement this change to learning objectives.	**High:** They are respected and trusted by junior doctors and other consultants.

Stakeholder mapping has implications for the engagement approach

ACTIVITY: IDENTIFY AND MAP STAKEHOLDERS

- In groups think about a specific implementation problem
- Discuss in groups who are the key stakeholders involved in the implementation
  - Think of patients and the public, providers, policy makers, commissioners, community and advocacy groups, industry partners, and researchers
- Prioritise one stakeholder group and chart them against the I-STEM criteria

STAKEHOLDER ENGAGEMENT BLUEPRINT

1. Engagement objectives

1. Understand
2. Enrol
3. Collaborate

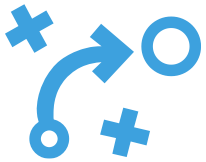
2. Stakeholder identification

1. Influence +
2. Expertise +
3. Trust +
4. Orientation -

3.Engagement approach

1. Assess
2. Collaborate

4. Engagement strategies



1. Assess readiness & identify barriers/ facilitators
2. Create a formal implementation blueprint

5. Engagement plan

-Who

-What

-When

-How much

-Where

-Local adaptations

6. Engagement outcome

1. Acceptability
2. Feasibility

CORE PRINCIPLES

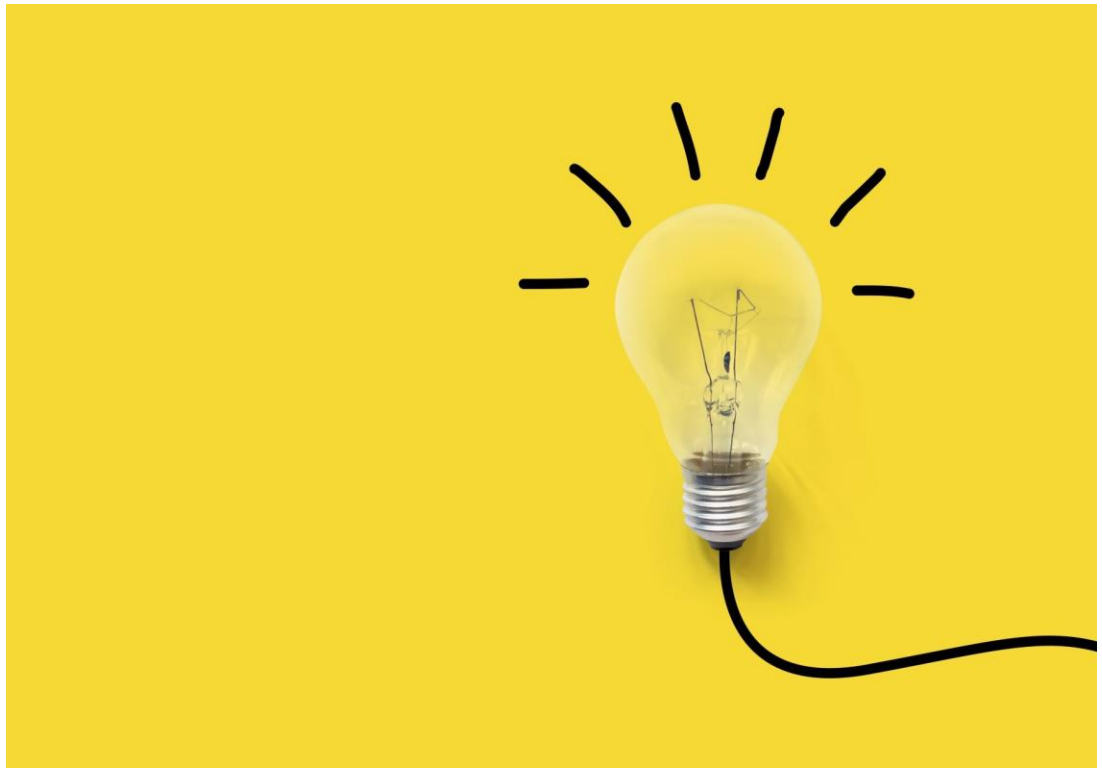
Be focused	Engagement should be focused and relevant to ensure alignment.
Be timely	Ensure stakeholder perspectives can inform implementation outcomes.
Be representative	Enable diverse stakeholder to contribute their perspectives.
Be inclusive	Engage vulnerable, underrepresented groups.
Be respectful	Manage power dynamics and allow everyone to listen and share their perspectives.

USER EXPERIENCES

‘It [toolkit] brings a systematic approach to planning your engagement approach.’

‘The process of thinking through different objectives and reasons helps you clarify your thoughts. It is a different way of thinking. An opportunity to reconsider one’s approach to engagement.‘

‘It was a nice exercise, sort of, especially for somebody who's very new to sort of engaging with stakeholders.’



NEXT STEPS

- Test and validate the toolkit across different contexts
- Develop different toolkit versions (e.g. light version and online version)
- Advance the development of a theory of stakeholder engagement

THANK YOU

For more information contact:

sebastian.potthoff@northumbria.ac.uk

- Co-investigators:
- Prof. Tim Rapley
- Prof. Tracy Finch
- Helen Clegg
- Beckie Gibson
- Caroline Charlton

Scan QR to download the I-STEM toolkit

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Next steps/ reflections

Was this helpful? Any questions or reflections?

Next steps: Have a go at applying the SPHR six knowledge sharing principles in your research projects!

What we haven't talked much about:

- Principle 5: Monitor, reflect and be responsive in sharing knowledge - How will you know if your knowledge sharing activities have met your goals? (*see resources*)
- Principle 6: Leave a legacy - How can you develop, capture and sustain any benefits? (*maintaining and developing new relationships*)

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References

- Morris, Z.S., S. Wooding, and J. Grant, The answer is 17 years, what is the question: understanding time lags in translational research. Journal of the Royal Society of Medicine, 2011. 104(12): p. 510-520.
- Langley, J., Wolstenholme, D. & Cooke, J. 2018. 'Collective making' as knowledge mobilisation: the contribution of participatory design in the co-creation of knowledge in healthcare. BMC health services research 18(1) 585.
- Rushmer, R., Cassidy, K., Dinsdale, S., McCabe, K. *Co-creating an agreed set of theoretically and empirically-informed knowledge sharing principles for the SPHR research programme*, Final report. NIHR SPHR, 2018 (SPHR-FUS-PH106-KNS).
- Van der Graaf P, Forrest LF, Adams J, Shucksmith J, White M. How do public health professionals view and engage with research? (2017) A qualitative interview study and stakeholder workshop engaging public health professionals and researchers. BMC Public Health. Dec;17(1):892
- Van der Graaf, P., Cheetham, M., Lake, A., Welford, M., Rushmer, R., Shucksmith. J., Mobilising knowledge in public health: reflections on 10 years of collaborative working in Fuse, the Centre for Translational Research in Public Health. Evidence & Policy. 2019.
- Ward, V. Tooman, T. Reid, B. Davies, H. O' Brien, B. Mear, L. and Marshall, M. (2021). A framework to support the design and cultivation of embedded research initiatives. Evidence & Policy, DOI:10.1332/174426421X16165177707227.
- Ward, V. 2017. Why, whose, what and how? A framework for knowledge mobilisers. Evidence and Policy 13(3) 477-497.
- Cheetham et al (2017) Embedded research: a promising way to create evidence-informed impact in public health, Journal of Public Health, Vol. 40 suppl. 1, ppi64-i70

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Resources

- Planning for impact – NIHR toolkit for researchers, https://arc-nenc.nihr.ac.uk/resources/planning-for-impact-nihr-toolkit-for-researchers/
- Plan Knowledge Mobilisation (NIHR), https://www.nihr.ac.uk/researchers/i-need-help-designing-my-research/plan-knowledge-mobilisation.htm
- KM Theories, models, and frameworks, https://www.nihr.ac.uk/documents/knowledge-mobilisation-research/22598
- Knowledge mobilization toolkit; Doing more with what you know (Updated 2023) - Knowledge Institute on Child and Youth Mental Health and Addictions, www.kmbtoolkit.ca
- Keele University Knowledge Mobilisation https://www.keele.ac.uk/iau/knowledgemobilisation/#knowledge-mobilisation-theory
- NIHR ARC West, I've got the basics, I want to develop my knowledge and skills further, https://arc-w.nihr.ac.uk/training-and-capacity-building/arc-west-courses/an-nihr-arc-guide-to-resources-about-implementation-knowledge-mobilisation-and-impact/ive-got-the-basics-i-want-to-develop-my-knowledge-and-skills-further/