

Sustainability of knowledge translation interventions in healthcare decision-making: a scoping review

Summary

We conducted a scoping review of KT interventions to manage chronic diseases that have been used for healthcare outcomes beyond 1 year or beyond the termination of funding. Sixty-two unique studies were identified. Few studies focused on the sustainability of KT interventions, and most of the included studies focused on patient-level outcomes and patient-level KT interventions.

Implications

Our results showed several gaps in the literature worth exploring in future research. In particular, our findings suggest that more work is needed on exploring sustainability of KT interventions for patients with chronic diseases. A future systematic review can be conducted of the randomized trials to examine the impact of sustainable KT interventions on health outcomes.

Reference: Tricco AC, Ashoor HM, Cardoso R, et al. Sustainability of knowledge translation interventions in healthcare decision-making: a scoping review. *Implementation science* : IS. 2016;11:55.

PMID: [27097827](https://pubmed.ncbi.nlm.nih.gov/27097827/)

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What is the current situation?

- Knowledge translation interventions facilitate the uptake of research into practice and/or policy; however, less research has been done to examine the long-term sustainability of KT interventions.
- Sustainability of KT interventions is paramount to ensure the long-term quality of care for patients. And KT interventions that are not sustained in the long-term may result in worse patient outcomes, such as decreased quality of care and quality of life.
- Sustainability of KT interventions is of particular challenge in chronic disease management, as most research initiatives and pilot projects focus on short-term implementation. Rather, interventions should extend beyond 1 year to reflect the course of patients with chronic disease.
- Frameworks for implementing sustainable interventions are likely useful for empirical research to develop, implement, or measure sustainability of KT interventions. However, they have not been formally evaluated.

What is the objective?

- 1) To conduct a scoping review of KT intervention research to characterize KT interventions to manage chronic diseases that have been used for healthcare outcomes beyond 1 year or termination of initial grant funding. 2) To determine the uptake of frameworks that focus on the sustainability of KT interventions.

How was the review conducted?

- Literature searches were conducted from inception until February 2013 in MEDLINE, Embase, Cochrane CENTRAL, CINAHL and the Campbell databases.
- The KT interventions were coded independently by a clinician and a methodologist using a pre-existing taxonomy.

What did the review find?

- 62 unique studies were identified with 260,688 patients after screening 12,328 citations and 464 full-text articles.
- Nine chronic conditions were examined across the studies, such as diabetes (34%), cardiovascular disease (28%), and hypertension (16%).
- Most commonly examined KT intervention was patient education (20%), followed by self-management (17%). QI strategies targeting the entire system of chronic disease management were associated with the largest effects on outcomes overall.
- Most studies (61%) focused on patient-level outcomes, while 31% included system-level outcomes, and 8% used both.
- Interventions were aimed at the patient (58%), health system (28%), and healthcare personnel (14%) levels.
- None of the studies reported using a framework to develop, implement, or measure sustainability and only 15% defined sustainability.

Funded by CIHR