Summary
We conducted a longitudinal evaluation of a Knowledge Translation (KT) practice training initiative, “Foundations in KT”. We collected data from program participants and their decision making partners (DMPs) up to 24 months after the initial workshop. The training contributed to a sustained, significant increase in participants' self-efficacy in executing KT activities and in evidence-based practice.

Implications
This project provided the first longitudinal evaluation of a training initiative focused on building capacity in KT practice. The results of this evaluation provide support for the potential sustained and generalizable impact of KT training initiatives on knowledge and self-efficacy in KT. This project substantiates the importance of utilizing an integrated KT approach for program development, and highlights the necessity of longitudinal evaluations. The results of this project will be relevant to those involved with, or interested in designing and evaluating KT training initiatives.

What is the current situation?
- There is a lack of KT training initiatives focused on building capacity in KT practice. Further, there is a paucity of assessments to evaluate the sustained outcomes of these programs, beyond immediate participant satisfaction metrics.
- Building capacity in KT practice is a critical facilitator to the successful implementation of evidence-based clinical interventions.
- Long-term evaluations of KT training programs that assess contextual factors influencing outcomes at an individual and organizational level are essential to understanding their continued impact.

What did we do?
- A KT practice training initiative, titled “Foundations in KT”, was developed and administered through St. Michael’s Hospital (SMH), in partnership with knowledge users from the Michael Smith Foundation for Health Research (MSFHR) and the Vancouver Coastal Health Research Institute (VCHRI), using an integrated KT approach. The training was composed of three in-person workshops, an online learning environment, and two years of KT coaching. The training was designed to augment participants’ capacity in KT practice and guide them through the execution of a KT project.
- We used a mixed methods, longitudinal study design to evaluate the prolonged impact of the training initiative on three outcome areas: (1) participant-level outcomes (e.g., self-efficacy in executing KT activities), (2) contextual factors (e.g., organization perceptions of KT) and (3) training initiative outcomes (e.g., progression on KT activities). The training evaluation was coordinated by SMH and the MSFHR.
- 46 program participants and 16 DMPs consented to participate in the study. Data were collected through surveys, focus groups (participants only), and interviews (DMPs only) at multiple time points up to 24 months after the first workshop.

What were the results?
- Participants had significant increases in their self-efficacy in completing KT activities ($p < 0.001$), and their self-efficacy ($p = 0.001$) and comfort ($p = 0.03$) in evidence-based practice, were sustained at 24 months following the first workshop.
- By 24 months, all participants achieved their KT project goals, and reported applying KT knowledge outside of their projects.
- Program participants identified organizational factors that influenced the ability to effectively execute KT, including the availability of resources (i.e., time, funding, and personnel).


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