

## An evaluation of the Canadian Task Force on Preventive Health Care's 2018 knowledge translation activities

### Summary

The knowledge translation (KT) team at St. Michael's Hospital evaluated the impact and uptake of the Canadian Task Force on Preventive Health Care (TF)'s clinical practice guidelines (CPGs), KT tools, and KT resources during the period between January and December 2018. The evaluation focused on guidelines and associated KT tools related to topics released in 2018, as well as previously released topics that recommended significant practice change, including; screening for impaired vision; screening for asymptomatic bacteriuria (ASB) in pregnancy; breast cancer screening update; breast cancer screening (released in 2011); cervical cancer screening (released in 2013), and prostate cancer screening (released in 2014).

### Implications

Primary care practitioners (PCPs) completed a total of 244 surveys and 30 semi-structured interviews.

Most participants were aware of the breast, cervical, and prostate cancer guidelines and considered the TF to be a trustworthy source for guidelines. Future TF activities could focus on engaging patients throughout the guideline enterprise and enhancing outreach to French-speaking stakeholders.

**Reference:** Burnett, L., Silveira, K., Einarson, K. et al. An evaluation of Canadian Task Force on Preventive Health Care's 2018 knowledge translation activities. Prepared for the Canadian Task Force on Preventive Health Care; 2018.

**Available from:** <https://canadiantaskforce.ca/get-involved/annual-evaluation/>

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### How was the evaluation conducted?

- To gather data on key KT activities, we collected administrative data, tracking documents reports, and analytics, and engaged PCPs through a total of 244 surveys and 30 semi-structured interviews.
- We recruited survey participants through advertisements promoted via TF communication channels (e.g. TF newsletter, TF Twitter, TF website, etc.), and identified interview participants through survey responses.
- We analyzed survey results in SPSS to determine response frequencies, and analyzed interview transcripts in NVIVO using framework analysis.

### What did the evaluation find?

- PCPs identified factors that increase awareness and adoption of guidelines including: 1) trustworthiness of a guideline development organization, measured by factors such as the composition of guideline development team, quality and strength of evidence used to inform guidelines, and guideline presentation and usability 2) use and promotion of guidelines by preceptors and in curricula, and 3) endorsement of guidelines by reputable organizations (see recommendation #1)
- Many PCPs reported accessing Task Force KT tools on the TF website, and suggested improving digital accessibility of guidelines and tools. Many PCPs were not aware of the existing Task Force newsletter, but expressed interest in this type of resource to increase engagement and awareness of new or updated guidelines. PCPs identified expanding KT activities to include French may improve reach and accessibility of guidelines and tools (see recommendation #2)
- PCPs identified factors that facilitate implementation of guidelines and KT tools, including 1) patient awareness, understanding, and acceptance of guidelines (see recommendation #3), 2) training for PCPs in shared decision making (see recommendation #2), and 3) consensus across organizations, particularly provincial guidelines (see recommendation #5)

### Recommendations:

Based on this evaluation, we identified opportunities for enhancing the impact and uptake of the TF's CPGs, KT tools, and resources including:

1. Increase awareness of TF guidelines, TF KT tools, and TF organization among PCPs (e.g. build the TF brand and highlight trustworthy elements, prioritize partnerships, and integrate TF guidelines into curricula)
2. Optimize existing TF guideline and KT tool dissemination activities (e.g. improve website accessibility, optimize the TF newsletter, develop summary tools, and create training modules for shared decision making)
3. Directly target and engage patients in guideline production
4. Enhance TF French presence
5. Encourage alignment of provincial guidelines with TF