KNOWLEDGE TRANSLATION & THE PUBLIC HEALTH INSPECTOR

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Outline

- What is Knowledge Translation (KT)?
- Why is KT important to PHIs?
- Research Project
  - Methods
  - Results
  - Limitations
  - Next Steps
- Concluding Remarks
The World Health Organization estimates that approximately 50% of all premature deaths could be prevented every year through the application of already existing and available knowledge (CCGHR, 2012).
What is Knowledge Translation?

“a dynamic and iterative process that includes synthesis, dissemination, exchange and ethically-sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the health care system” (CIHR, 2014)
Community Health Issues, Local Context

Community and Political Preferences and Actions

Public Health Expertise

Research

Public Health Resources

(NCCMT, 2012)
Effective KT

- Research informed by best currently available knowledge
- Effective tools that meet needs/circumstances of users
- Knowledge uptake and use
Example

- Influenza immunization among nurses
  - Current rate: 55-70%
  - Canadian National Advisory Committee on Immunization recommends 90%
  - Despite widespread evidence that:
    - worker-patient transmission, morbidity & deaths

**WHY?** Knowledge users: attitudes, experiences & misperceptions
## Barriers to KT

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<thead>
<tr>
<th>Research</th>
<th>Organizational</th>
<th>Individual</th>
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<tbody>
<tr>
<td>Poor quality evidence</td>
<td>Lack of understanding KT needs</td>
<td>Lack of time</td>
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<td>One-off studies</td>
<td>Limited resources</td>
<td>Lack of skills</td>
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<td>Competing agendas</td>
<td>Values</td>
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<td>Staff turnover</td>
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<td>Restrictive Policies</td>
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<td>Lack of resources</td>
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<td>No familiarity with evidence</td>
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<td>Cultural/language differences (MSFHR, 2012)</td>
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What’s being done?

- Federally

Public Health Agency of Canada

Centre de collaboration nationale
sur les politiques publiques et la santé
National Collaborating Centre
for Healthy Public Policy

National Collaborating Centre
for Infectious Diseases
Centre de collaboration nationale
des maladies infectieuses

National Collaborating Centre
for Methods and Tools
Centre de collaboration nationale
des méthodes et outils

NATIONAL COLLABORATING CENTRE
FOR ABORIGINAL HEALTH
CENTRE DE COLLABORATION NATIONALE
DE LA SANTÉ AUTOCHTONE

National Collaborating Centre
for Environmental Health
Centre de collaboration nationale
en santé environnementale

National Collaborating Centre
for Determinants of Health
Centre de collaboration nationale
des déterminants de la santé
What’s being done?

- Provincially
Hot Topics in Public Health

- Charcuterie
- Isolation Flotation Tanks
- Sushi Robots
- Eyelash Extensions Lounges
- Mechanically Tenderized Beef
- Sous Vide
Why is KT important to PHIs?

- New knowledge does not impact health by itself
- More effective and cohesive public health protection
- Positive public perception
1) Information PHIs use when making public health decisions

2) How PHIs go about finding the information required

3) Level of trust invested into each source of data
Methods

- Google Forms
  - Qualitative data
- Distribution
  - Social media
  - BCIT
  - CIPHI

Knowledge Translation & the Public Health Inspector - Turning Evidence Into Practice

Section II: Sources of Information Used

Knowledge Translation is the process of using research evidence to improve health. Application refers to the development and integration of programs, policies, and services based on research evidence (MSFHR, 2012). How important is this concept of application to your work as a PHI?

- Very important
- Important
- Moderately Important
- Of Little Importance
- Unimportant

In daily practice, how regularly do you use evidence-based information to advise your decisions and actions?

- Always
- Often
- Sometimes
- Rarely
- Never
Results

Knowledge Translation is the process of using research evidence to improve health. Application refers to the development and integration of programs, policies, and services based on research evidence (MSFHR, 2012). How important is this concept of application to your work as a PHI?

- Very Important: 43 (55%)
- Important: 24 (30%)
- Moderately Important: 12 (15%)
- Of Little Importance: 0 (0%)
- Unimportant: 0 (0%)

What do the findings suggest?

- Majority of PHIs regard KT as important to their practice. However, the availability and delivery of resources need to be improved to optimize KT action.
Learning Preferences

{What do the findings suggest?}

- Digested, straight forward information from established organizations preferred
- Discussion with small group of peers facilitates learning
Sources of Information

When faced with unfamiliar situations:

86% government agencies frequently or very frequently

82% referred to colleagues

64.5% professional literature

63% internet searches

56.5% professional organizations
Electronic Resources

- Very accessible but variable reliability

- **Common Remarks:**
  - “…government websites are not easily searchable and confusing to navigate”
  - “…not conducive to real life application”
Perceived Barriers

In your practice, do barriers exist that impede your access to evidence-based information?

- Yes [61] 77%
- No [18] 23%

If YES, what barriers impede your access to evidence-based information? Select all that apply.

- Costs 33 42%
- Time constraints 52 66%
- Inconsistent/unreliable information 20 25%
- Interprofessional miscommunication 8 10%
- Lack of relevant information 22 28%
- Lack of awareness of available resources 18 23%
- Other 8 10%
Common Remarks

- **Time**
  - Lack of allotted time during work day
  - Not easily searchable

- **Cost**
  - No funding for training, journal subscriptions

- **Lack of relevant/consistent information**
  - Discrepancies in approach to change
  - No central resource to manage updates
Professional Development

What do the findings suggest?

- 94% of PHIs believe that continued professional development is important but opportunities to do so are insufficient.
What can Info Providers Do Better?

- **More educational opportunities**
  - Funding to attend workshops, journal subscriptions
  - In-person training & discussion

- **Create a central PHI-specific e-library**
  - Concisely worded, written for application
  - Newsletters for updates

- **Further promote communication with other agencies**
Limitations

- 63% of respondents were 20 – 39 years old
- 80% of respondents have Bachelor degrees
- 91% of respondents from British Columbia
  - 50% from Fraser Health & Vancouver Coastal Health
Next steps
Concluding Remarks

- KT specific to PHIs complex and multifactorial
- Always room for improvement!
Thank you!
References


