

## KERTI at NHMRC: Scenario

*“The University Vice Chancellor has noted the increasing interest in Knowledge Exchange, Research Translation and Research Implementation. Your Faculty Executive Dean has been directed to hold a ‘research user engagement forum’ to discuss issues and challenges in the translation and implementation of research undertaken.*

*As a researcher you have been provided with the attached Tip Sheet that outlines feedback raised by consumers, policy makers and industry (health service planners, funders and practitioners) about using and accessing research.*

In your group consider the perspectives of one or more of these user groups.  
How might you lead your research team to better address the challenges raised?

**Note: any research users on your table can add value by contributing from their experience.**

### Timeframe

**Option A:** Working within the **current operating environment; say 2 – 5 years.**

Working within the current system, what could be done differently that would have an Impact?

How can KERTI influence and help build capacity?

**Option B:** The extended version for tables that wish to consider **more extensive system changes; say over 5 – 10 years +**

What could be done to effect major change in the system?

How can KERTI help change the landscape?

### Points to tease out

- What in your experience have been systems barriers to engaging with research users?
- What strategies (short and long term) can you suggest to overcome these barriers?
- What training and educational resources do you think are required by the research workforce to develop a KERTI mindset?
- Where do you see opportunities to build capacity (of researchers and research users)?
- How can we establish and nurture trans-disciplinary relationships?

#### KERTI

KERTI is an informal national network of people with a shared vision of improving health care policy and practice through routine application of relevant research. The network name acknowledges the fundamental elements of research application: knowledge exchange (KE), research translation (RT), and implementation (I) – KERTI.

The purpose of KERTI is to share learnings, identify mutual priorities, test innovation in the field and build the capacity of researchers as well as research users. Importantly, it seeks to cultivate a systems wide culture that values multi-level engagement between policy, management, practice, research and consumer perspectives. Central to this culture is an attitude or mindset that views research as a resource to be utilised.

The KERTI Secretariat is based at the Primary Health Care Research and Information Service (PHCRIS)



## KERTI at NHMRC: Tip Sheet

A knowledge exchange/research translation mindset appreciates that research is only one part of the answer to complex health issues. Research is most useful, not as an isolated product, but when it is informed, produced and contextualised from multiple sources – known in the UK National Health Service as ‘curating’ rather than creating knowledge.

Such a systems view seeks multi-level engagement between policy, management, practice, research and consumer perspectives. This tip sheet offers a few general pointers...

### Policy makers

Public servants serve the government of the day, recognising its policy parameters and philosophical leanings. We are expected to be impartial, apolitical, professional, objective and efficient in all that we do and to maintain appropriate levels of confidentiality.

We often work to tight deadlines with only limited time available to read relevant research and research findings.

In providing advice to government, the key issues we generally need to address are:

- what is the problem;
- what is the background;
- what are the possible solutions including implementation details;
- what are the risks and sensitivities;
- what are the costs; and,
- what is the preferred way forward and why?

We appreciate succinct summaries of your research and findings (eg 1-2 pages) that seek to address the issues outlined above.

### Health service planners, funders and practitioners

As health professionals, we seek robust research evidence to underpin operational policy, program development and interventions. Increasingly we recognise the value of working with research users to inform research directions and improve the quality of our work. Some key issues reported by users of primary health care research include:

- the need to be involved in devising research priorities. Much research isn’t focused on our key challenges; e.g. research on ‘chronic disease’ or ‘integration’ is a priority, but what about studies orientated to address issues we face day-in/day-out?
- not involving us means research may not be designed with reality at the core
- funding is always an issue, but if we work together with researchers to build a good evidence base we have better chances of securing it
- we often don’t have a strong knowledge base in research – even things like reviewing literature
- we reinvent the wheel as we don’t know what we don’t know. As an example, if we have evidence of unmet need, we might start a project only to find out there is already lots of information and there were mistakes we could have avoided.

We appreciate robust relevant research and evidence that is easily accessible and provided in a useful format that addresses our needs.

## Consumers

Engaging consumers or consumer representatives in health research can be a new challenge for many researchers. Consumer involvement allows researchers to inform and strengthen their research. This creates more transparency, openness and accountability, and research which is more relevant to the community.

It is useful for researchers to consider the following:

- Working with us helps determine the value your research can bring to a community. It develops a focus on the real issues and how they can be addressed.
- Using co-design principles brings our values into the research design process.
- Involving us in the research process can enable researchers to access services/ information/ networks they may not have known existed, and can also help to problem solve when the planned research process doesn't go as expected.
- Be sure to factor in adequate time/ funding to foster relationships. This can be as simple, and important, as covering costs of invited consumer representatives to attend your meetings.
- Engage in different ways: on-line forums; face-to-face; formal/ informal meetings.
- Working with consumer/ consumer representatives can build research literacy in consumers and consumer literacy in the research team.

We appreciate being involved as partners from the beginning of and throughout the research process.

## Selected References

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PHCRIS Getting Started Guide, Introduction to Knowledge Exchange

[http://www.phcris.org.au/guides/knowledge\\_exchange.php](http://www.phcris.org.au/guides/knowledge_exchange.php)

<http://www.involvingpeopleinresearch.org.au/>

<http://www.nihr.ac.uk/documents/about-NIHR/NIHR-Publications/Extra%20Mile2.pdf>

Resource prepared by Hagger C (PHCRIS) and E Whitehead (APHCRI), 2015