



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



Scientist Knowledge Translation Training™



Welcome to Fireside Chat # 308  
November 30, 2012 1:00 – 2:30 PM Eastern Time

# NCCMT Spotlight on KT Methods & Tools #5 Knowledge Translation Planning Template

### Advisors on Tap:



**Melanie Barwick, PhD, C.Psych.**  
Hospital for Sick Children / University of Toronto

**Keri West**

The Centre for Addiction and Mental Health



[www.chnet-works.ca](http://www.chnet-works.ca)  
A project of  
Population Health Improvement Research Network  
University of Ottawa

## Housekeeping :



**Step #1: Backup PowerPoint Presentation**  
Access, download, print... [www.chnet-works.ca](http://www.chnet-works.ca)

### Step #2: Teleconference



**All Audio is by telephone (no audio via internet)**

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- We are recording today's presentation
- POST YOUR COMMENTS/Questions – via email

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*From our computer to yours (no audio via internet)*  
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# How to post comments/questions during the Fireside Chat



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(‘Bridgit’ software)

*click: participant’s icon – person/blue shirt*

Please introduce yourself!  
**Name**  
**Organization**  
**Location...**  
 Group in Attendance?



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 Respond to the ‘access instructions email’  
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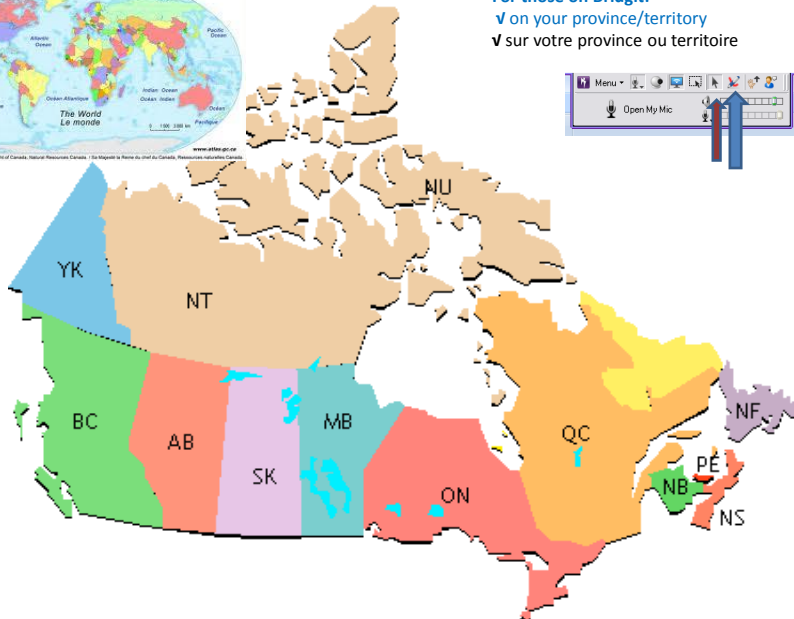
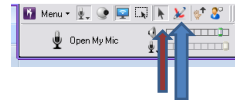


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## Where are you located? Où habitez-vous?



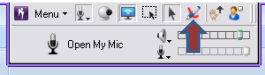
For those on Bridgit:  
 ✓ on your province/territory  
 ✓ sur votre province ou territoire



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4

# What Sector are you from?

Put a ✓ on your answer (or RSVP via email)



Public Health	Education/Research Faculty/Staff/Student	Provincial /Territorial Government/Ministry
Municipality	Health Practitioner	Other

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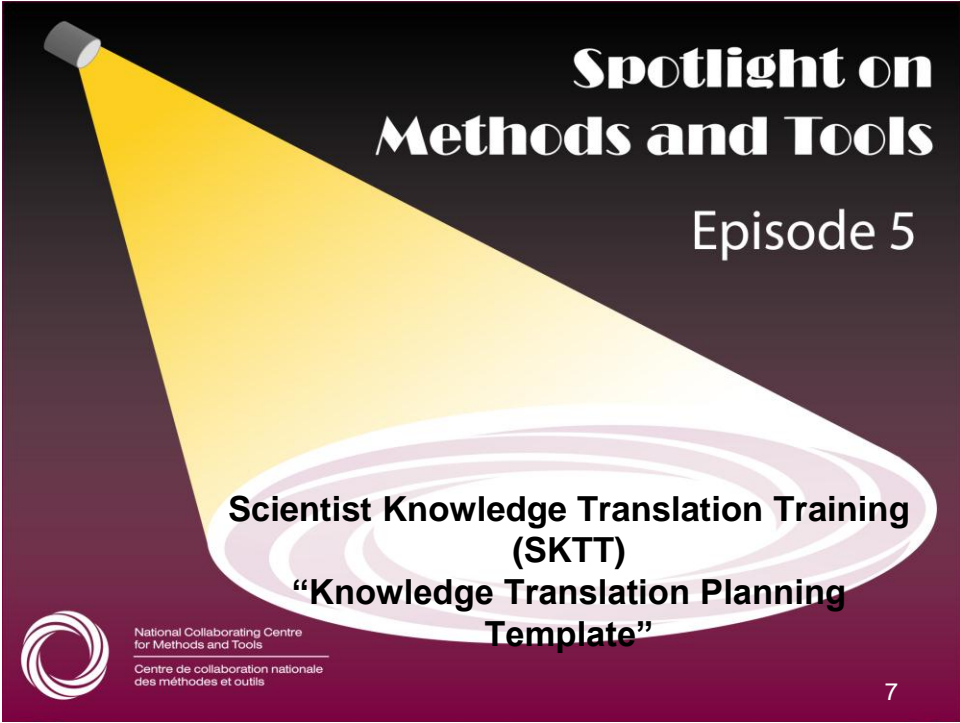
# Spotlight on Methods and Tools

A webinar series hosted by the  
National Collaborating Centre  
for Methods and Tools  
and highlighting resources for knowledge  
translation.



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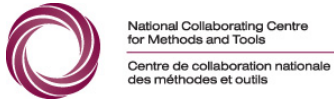
**Spotlight on  
Methods and Tools**

Episode 5

**Scientist Knowledge Translation Training  
(SKTT)  
“Knowledge Translation Planning  
Template”**

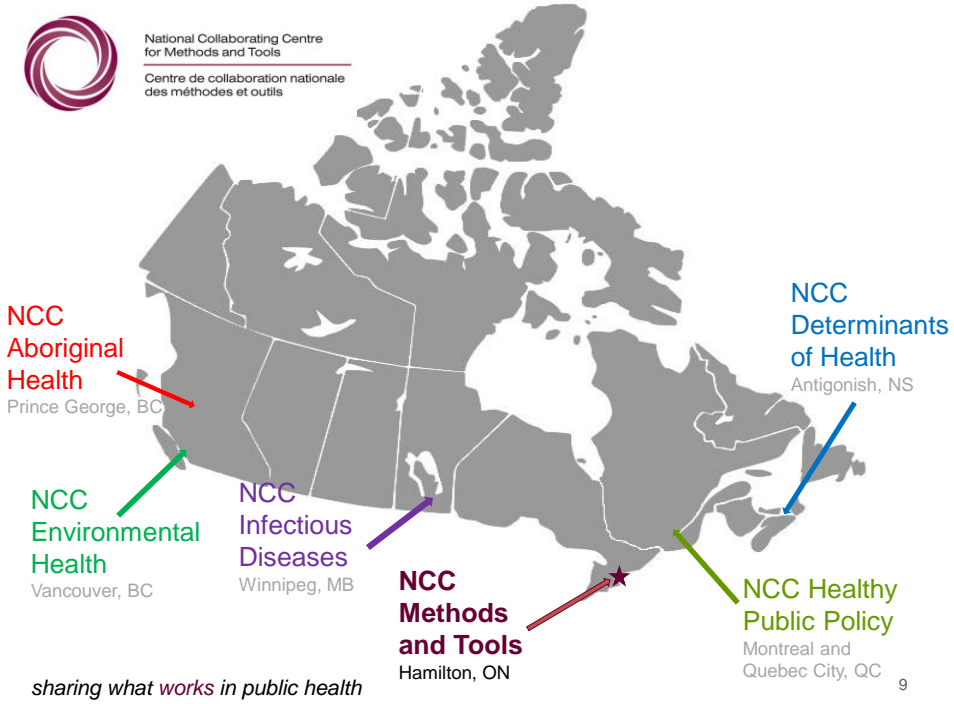
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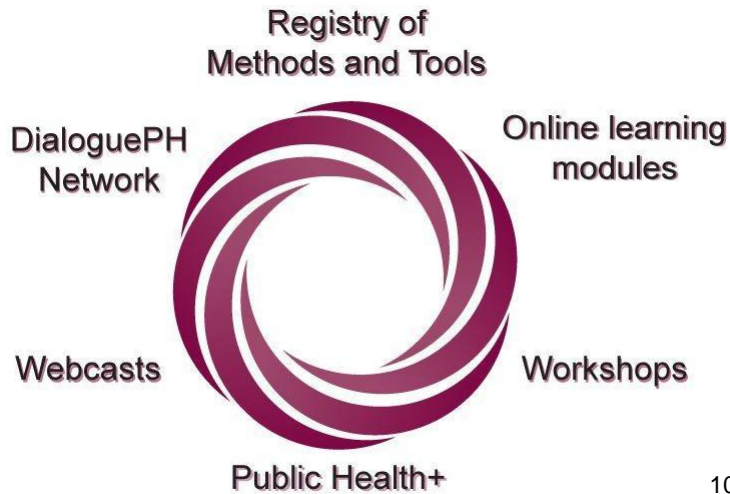


## National Collaborating Centre for Methods and Tools

- dedicated to improving access to, and use of, methods and tools that support moving research evidence into decisions related to public health practice, programs, and policy in Canada.



## NCCMT Products and Services



For more information about the NCCMT  
or to access any of the resources noted  
in these slides :

NCCMT website [www.nccmt.ca](http://www.nccmt.ca)

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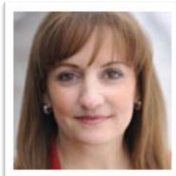
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## Advisor on Tap

**Melanie Barwick, PhD, C.Psych.**

Psychologist and Health Systems Scientist,  
Community Health Systems Resource Group,



Scientific Director Knowledge Translation,  
Child Health Evaluative Sciences,  
Research Institute,  
The Hospital for Sick Children;

Associate Professor,  
Department of Psychiatry, and Dalla Lana  
School of Public Health, University of Toronto

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## Advisor on Tap



### **Keri West**

Knowledge Broker  
Evidence Exchange Network  
The Centre for Addiction and Mental Health

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## Scientist Knowledge Translation Planning Template

A tool to assist in the development of a KT plan  
<http://www.melaniebarwick.com/training.php>

## Why the template was developed

2004-2007 CHSRF funding in Knowledge Broker Demonstration Grants saw the development of the Scientist KT Training Course.

Circa 2008 - the first version of the KT Planning Template emerged from a personal need to develop a KT plan for collaborations in which I was not the content expert.

I needed a way of ensuring that the key elements were considered.

During this time, funders – in particular CIHR – were beginning to use KT language and to request greater detail about KT activities in grant applications. This request was met with uncertainty by scientists across all pillars.



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## Instructions

- This template was designed to assist with the development of KT plans for research but can be used to plan for non-research projects.
- It is universally applicable to areas beyond health.
- Begin with Box #1 at right and work through to box #14 to address the essential components of the KT planning process.
- It is recommended that you use this worksheet as a reflective and planning tool from which to write your KT plan.

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# Knowledge Translation Planning Template-R™

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 Fillable form available online at [www.melaniebarwick.com/training.php](http://www.melaniebarwick.com/training.php)

**INSTRUCTIONS:** This template was designed to assist with the development of KT plans for research but can be used to plan for non-research projects. It is universally applicable to areas beyond health. Begin with Box #1 at right and work through to box #14 to address the essential components of the KT planning process. It is recommended that you use this worksheet as a reflective and planning tool from which to write your KT plan.

Project Title: \_\_\_\_\_

(1) Research Partners	(2) Degree of Partner Engagement	(3) KT Expertise on Team
<input type="checkbox"/> researchers <input type="checkbox"/> consumers - patients & their families <input type="checkbox"/> the public <input type="checkbox"/> decision-makers <input type="checkbox"/> policy makers (government or other) <input type="checkbox"/> private sector / industry <input type="checkbox"/> research funding body <input type="checkbox"/> volunteer health sector / NGO <input type="checkbox"/> practitioners	<input type="checkbox"/> from idea formulation straight through <input type="checkbox"/> after idea formulation & straight through <input type="checkbox"/> at point of dissemination & project end <input type="checkbox"/> beyond the project	<input type="checkbox"/> scientist(s) with KT expertise <input type="checkbox"/> consultant with KT expertise <input type="checkbox"/> knowledge broker / specialist <input type="checkbox"/> KT supports within the organization <input type="checkbox"/> KT supports within partner organization

(4) Main Messages	(5) KT Audience(s) <sup>1</sup>	(6) KT Goals <sup>1</sup>	(7) KT Methods <sup>1</sup>	(8) KT Process	(9) KT Impact & Evaluation	(10) Partner(s) Role	(11) Resources	(12) Budget Items	(13) Estimated Costs
Briefly, your research seeks to: > What messages do you anticipate sharing (up to 3 audiences can be included on this form)? Audience @ > <input type="checkbox"/> in organization > <input type="checkbox"/> in community > <input type="checkbox"/> policy makers > <input type="checkbox"/> private sector / industry > <input type="checkbox"/> research funders > <input type="checkbox"/> venture capital > <input type="checkbox"/> volunteer health sector / NGO > <input type="checkbox"/> Other (specify below) > OR <input type="checkbox"/> No idea yet; messages will emerge during research through collaboration with partners. > NOTE: Consider what you can feasibly do within this project, given time and resources. >	What audiences will you target? <input type="checkbox"/> researchers <input type="checkbox"/> health practitioners or service providers <input type="checkbox"/> public <input type="checkbox"/> media <input type="checkbox"/> patients / consumers <input type="checkbox"/> decision makers <input type="checkbox"/> in organization <input type="checkbox"/> in community <input type="checkbox"/> policy makers <input type="checkbox"/> private sector / industry <input type="checkbox"/> research funders <input type="checkbox"/> venture capital <input type="checkbox"/> volunteer health sector / NGO <input type="checkbox"/> Other (specify below) >	What are your KT Goals for each audience? Audiences (B) @ @ @ 1 1 1 i. <b>Caritate</b> — <input type="checkbox"/> awareness <input type="checkbox"/> interest <input type="checkbox"/> practice change <input type="checkbox"/> behaviour change <input type="checkbox"/> policy action ii. <b>Impact</b> — <input type="checkbox"/> knowledge <input type="checkbox"/> tools iii. <b>Inform</b> — <input type="checkbox"/> research <input type="checkbox"/> product <input type="checkbox"/> patient <input type="checkbox"/> Other (specify) > NOTE: KT is applicable to all research; even single studies are shared via journal articles, however, intent to change practice, behaviour or policy must be supported by a body of research. > Other (specify): <input type="checkbox"/> Other > NOTE: Always consider legal and ethical principles in your KT efforts. >	What KT methods will you use? For example: Audiences (B) @ @ @ 1 1 1 i. <b>Interactive</b> — <input type="checkbox"/> interactive small group <input type="checkbox"/> webinars <input type="checkbox"/> educational outreach <input type="checkbox"/> decision support <input type="checkbox"/> multi-prof collaboration <input type="checkbox"/> mass media campaign <input type="checkbox"/> financial incentive <input type="checkbox"/> combined interventions * ii. <b>Disseminate</b> — <input type="checkbox"/> conferences (abstract) <input type="checkbox"/> opinion leaders <input type="checkbox"/> champions <input type="checkbox"/> educational materials <input type="checkbox"/> patient-mediated inter. <input type="checkbox"/> performance feedback <input type="checkbox"/> submission of tasks <input type="checkbox"/> peer reviewed publication iii. <b>Unidirectional</b> — <input type="checkbox"/> press release <input type="checkbox"/> poster session <input type="checkbox"/> arts-based KT <input type="checkbox"/> social media <input type="checkbox"/> networks <input type="checkbox"/> community of practice <input type="checkbox"/> Café Scientifique <input type="checkbox"/> webinar >	When will KT occur? <input type="checkbox"/> integrated into research operations, e.g. setting the research questions, deciding the methodology, involvement in data collection and tools development, interpretation of findings and dissemination of research results. <input type="checkbox"/> end of grant etc. > NOTE: KT undertaken at the completion of the research process. <input type="checkbox"/> Both > Comment on the specifics of your KT procedures: >	(a) Where do you want to have an impact? <input type="checkbox"/> health/well-being outcomes <input type="checkbox"/> clinical practice <input type="checkbox"/> health policy/service <input type="checkbox"/> research > (b) How will you evaluate if you achieved your KT goals? The following are examples – <input type="checkbox"/> Search indicators (if distributed, # requests, # downloads, media exposure) <input type="checkbox"/> Usability indicators (reach/trend, satisfied with usefulness of gained knowledge, changed views) <input type="checkbox"/> Link indicators (if intend to use, # adopting the information, # using to inform policy/practice/advance program, training, education, or research, # using to improve practice or performance) <input type="checkbox"/> Partnership/commitment indicators (if products/services developed or disseminated with partners, if or type capacity building efforts, social network growth, influence, collaboration/awareness) <input type="checkbox"/> Practice change indicators (commitment to change, observed change, reported change) <input type="checkbox"/> Program or service indicators (documentation, feedback, process measures) <input type="checkbox"/> Policy indicators (documentation, feedback, process measures) >	How will your partner(s) assist with developing, implementing or evaluating the KT plan? > NOTE: Capture that specific roles/initiators of support to funders. > <input type="checkbox"/> Leadership <input type="checkbox"/> Management <input type="checkbox"/> Worker <input type="checkbox"/> Board <input type="checkbox"/> Volunteer <input type="checkbox"/> Other: (list) >	What resources are required? <input type="checkbox"/> Human <input type="checkbox"/> Financial <input type="checkbox"/> IT <input type="checkbox"/> Web > <input type="checkbox"/> Leadership <input type="checkbox"/> Management <input type="checkbox"/> Worker <input type="checkbox"/> Board <input type="checkbox"/> Volunteer <input type="checkbox"/> Other: (list) >	What budget items are related to the KT plan? <input type="checkbox"/> Accommodation <input type="checkbox"/> Art installation <input type="checkbox"/> Evaluation specialist <input type="checkbox"/> Graphic/imagery <input type="checkbox"/> Knowledge Broker <input type="checkbox"/> KT Specialist <input type="checkbox"/> Mailings <input type="checkbox"/> Media Release <input type="checkbox"/> Media product (video) <input type="checkbox"/> Networking functions <input type="checkbox"/> Open access Journal <input type="checkbox"/> Plain text writer <input type="checkbox"/> Production/writing <input type="checkbox"/> Programming <input type="checkbox"/> Public relations <input type="checkbox"/> Reimbursements for partners (e.g., time, parking, travel) <input type="checkbox"/> Tech Transfer/ <input type="checkbox"/> Commercialization <input type="checkbox"/> Teleconferencing <input type="checkbox"/> Travel conferences <input type="checkbox"/> Travel meetings <input type="checkbox"/> educational purposes <input type="checkbox"/> Web 2.0 (blogs, podcasts, wikis) <input type="checkbox"/> Webinar services <input type="checkbox"/> Website development <input type="checkbox"/> Venue <input type="checkbox"/> Other: (list) >	(a) Do you intend to seek additional support for KT? > From whom? > (b) List estimated costs for items listed in box #12. > NOTE: Be sure to include all KT costs in your budget for funders. >

(14) Describe how you will **implement** your KT strategy. Implementation refers to the process involved with applying your KT strategies, and ensures that the knowledge you are transferring is done with fidelity and maintains quality.  
 >

<sup>1</sup> Ross, S., Goering, P., Jacobson, N., & Buttery, D. (2006). Towards more effective peer review of knowledge translation plans in research grant proposal. Final Research Report. Toronto, Canada: Centre for Addiction and Mental Health. <http://www.camh.ca>  
 Ouellet & Gendreau (2003) The Lancet, 361(9321): 1202. Ross et al (2011) BMC Research Notes 2(1): 4212. \*Note that multidirectional/combined KT strategies are more effective than single strategies. \*KT strategies may have support from individual studies. - CSM

Version Date: Nov 13, 2012

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## (1) Research Partners

- researchers
- consumers - patients & their families
- the public
- decision-makers
- policy makers (government or other)
- private sector / industry
- research funding body
- volunteer health sector / NGO
- practitioners

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## (2) Degree of Partner Engagement

- from idea formulation straight through
- after idea formulation & straight through
- at point of dissemination & project end
- beyond the project

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## (3) KT Expertise on Team

- scientist(s) with KT expertise
- consultant with KT expertise
- Knowledge Broker / Specialist
- KT supports within the organization
- KT supports within partner organization

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**(4) Main Messages**

Briefly, your research seeks to:



What messages do you anticipate sharing (up to 3 audiences can be included on this form)?

Audience ①



Audience ②



Audience ③



**OR**

No idea yet; messages will emerge during research through collaboration with partners.

*NOTE: Consider what you can feasibly do within this project, given time and resources.*

**Consider:**

**BLAM – Bottom Line Actionable Messages**

**SMIT – Single Most Important Thing**

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**(5) KT Audience(s)<sup>1</sup>**

**What audiences will you target?**

- researchers
- health practitioners or service providers
- public
- media
- patients / consumers
- decision-makers
  - in organization
  - in community
- policy makers
- private sector/ industry
- research funders
- venture capital
- volunteer health sector / NGO
- Other: (specify below)

**Consider: Audiences = Knowledge Users**

<sup>1</sup> Ross, S., Goering, P., Jacobson, N., & Butterill, D. (2006). Towards more effective peer review of knowledge translation plans in research grant proposal. Final Research Report. Toronto, Canada: Centre for Addiction and Mental Health. <http://tinyurl.com/bvp3afn>

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**(6) KT Goals<sup>1</sup>**

What are your KT Goals for each audience?

Audiences (☑)

① ② ③

↓ ↓ ↓ Generate...

awareness

interest

practice change

behaviour change

policy action

Impart...

knowledge

tools

Inform...

research

product

patent

Other: (specify)

Other

NOTE: KT is applicable to all research; even single studies are shared via journal articles. However, intent to change practice, behaviour or policy must be supported by a body of research evidence.

Always consider legal and ethical principles in your KT efforts.

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**(7) KT Method(s)<sup>2</sup>**

What KT methods you will use?

For example:

Audiences (☑)

① ② ③

↓ ↓ ↓

☺ Mostly Effective<sup>2</sup>

interactive small group

educational outreach

reminders

IT decision support

multi-prof collaboration

mass media campaign

financial incentive

combined interventions<sup>3 \*</sup>

☺ Mixed Effects<sup>2</sup>

conferences (didactic)

opinion leaders

champions

educational materials

patient-mediated interv.

performance feedback

substitution of tasks

peer reviewed publication

☹ Limited Effects<sup>2</sup>

CQI

ⓘ Unknown Effects<sup>4</sup>

press release

patent license

arts-based KT

social media

networks

communities of practice

Café Scientifique

webinar

<sup>2</sup> Grol R & Grimshaw J 2003 The Lancet, 362(i9391): 1225. <sup>3</sup> Baoz A, et al 2011 BMC Research Notes 2011, 4:212. \*Note that multifaceted/combined KT strategies are more effective than single strategies. <sup>4</sup> KT strategies may have support from individual studies

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**(8) KT Process**

When will KT occur?

Integrated KT<sup>5</sup> – researchers and research users will collaborate to shape the research process, e.g., setting the research questions, deciding the methodology, involvement in data collection and tools development, interpretation of findings and dissemination of research results.

End of grant KT<sup>5</sup> – KT undertaken at the completion of the research process.

Both

Comment on the specifics of your KT procedures:

<sup>5</sup> CIHR <http://www.cihr.ca/e/29418.html>

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**(9) KT Impact & Evaluation**

**(a) Where do you want to have an impact?**

- health / well-being outcomes
- [clinical] practice
- [health] policy/service
- research

**(b) How will you evaluate if you achieved your KT goals?**

The following are examples –

- Reach Indicators (# distributed, # requested, # downloads/hits, media exposure)
- Usefulness Indicators (read/browsed, satisfied with, usefulness of, gained knowledge, changed views)
- Use Indicators (# intend to use, # adapting the information, # using to inform policy/advocacy/ enhance programs, training, education, or research, # using to improve practice or performance)

Partnership / collaboration Indicators (# products /services developed or disseminated with partners, # or type capacity building efforts, social network growth, influences, collaborativeness)

Practice change indicators (commitment to change, observed change, reported change)

Program or service indicators (documentation, feedback, process measures)

Policy indicators (documentation, feedback, process measures)

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**(10) Partner(s) Role**

*How will your partner(s) assist with developing, implementing or evaluating the KT plan?*

*NOTE: Capture their specific roles in letters of support to funders.*

**(11) Resources**

*What resources are required?*

- Human
- Financial
- IT
- Web

- Leadership
- Management
- Worker
- Board
- Volunteer
- Other: (list)

**(12) Budget Items**

*What budget items are related to the KT plan?*

- Accommodation
- Art installation
- Evaluation specialist
- Graphics/Imagery
- Knowledge Broker
- KT Specialist
- Mailing
- Media Release
- Media product (video)
- Networking functions
- Open access journal
- Plain text writer
- Production/printing
- Programming
- Public relations
- Reimbursements for partners (e.g., time, parking, travel)
- Tech Transfer/Commercialization
- Teleconferencing
- Travel: conferences
- Travel: meetings/educational purposes
- Web 2.0 (blogs, podcasts, wikis)
- Webinar services
- Website development
- Venue
- Other: (list)

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**(13) Estimated Costs**

*(a) Do you intend to seek additional support for KT?*



*From whom?*



*(b) List estimated costs for items listed in box #12:*



*NOTE: be sure to include all KT costs in your budget for funders.*

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(14) Describe how you will implement your KT strategy.

Implementation refers to the process involved with applying your KT strategies and ensures that the knowledge you are transferring is done with fidelity and maintains quality.

# Adaptations

1. <http://www.mentalhealthresearch.ca/RIC/resources/Lists/kttools/DispForm.aspx?ID=2>

Current Location: AMH-RPE > Directory > Resources

Close

<b>Title</b>	Knowledge Exchange Plan Worksheet
<b>About</b>	This table helps you summarize your knowledge exchange plans.
<b>External Link</b>	<a href="#">community ke worksheet.doc</a>
<b>Attachments</b>	community ke worksheet.doc

Created at 1/17/2011 3:22 PM by DS354Igarybarron  
Last modified at 9/7/2011 1:25 PM by DS354Lisa.Bergerman

Site Map

### Knowledge Exchange Plan

Exchanging information or "knowledge" is important at all stages of your project. This table helps you summarize your knowledge exchange plans.

Note: o = o refers to the accompanying Knowledge Exchange Menu.

Plan #	What information to exchange? o o	Who to exchange with? o	How will it be exchanged? o o	What is needed? o o	When? o
	<small>(e.g., report content, preliminary results, abstracts)</small>	<small>(e.g., clients, staff, visitors, colleagues)</small>	<small>(e.g., meetings, reports, posters)</small>	<small>(e.g., staff resources)</small>	<small>(i.e., date)</small>
1					
2					
3					
4					
5					
6					
7					



## Other Adaptations

- SickKids Foundation
- York University KM Office
- The Canadian Partnership Against Cancer reproduced the “Scientific Knowledge Translation Plan Template” as a table; see [www.cancerview.ca](http://www.cancerview.ca).
- Quebec public health
- Multiple requests for sharing and distribution

## Renewal

- New version coming in 2013, will have a less linear look



## National Collaborating Centre for Methods and Tools

Spotlight on KT Methods and Tools Webinar: SKTT KT Planning Template™  
*Evidence Exchange Network's User Story*

Presented by Keri West, Knowledge Broker, Centre for Addiction and Mental Health

Friday, November 30<sup>th</sup>, 2012

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## My goals for today.



- Tell you a little bit about Evidence Exchange Network (EENet)
- Explain how EENet has used the SKTT KT Planning Template™ to support two major initiatives
- Discuss some of the benefits and challenges of using the tool in these contexts
- Answer your questions!

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# EENet in a nutshell.



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# Introducing Evidence Exchange Network...



**Evidence Exchange Network (EENet)** is a mental health and addictions knowledge exchange (KE) network that connects stakeholders across Ontario.



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## About EENet.



- The EENet community includes researchers, clinicians, decision-makers, service providers, system planners, policymakers, persons with lived experience, and families
- The network promotes the use of evidence in decision-making, develops targeted knowledge translation products and tools, and supports interactive exchanges
- EENet encourages **shared learning, rapid diffusion** of new knowledge, **cross fertilization** of diverse ideas, efficient **problem solving** & enhanced **group ownership**

EENet works to:

- 1 **Filter** evidence to aid in its productive use
- 2 **Amplify** complex ideas to make them more understandable
- 3 **Build** capacity within the system to use evidence effectively
- 4 **Connect** stakeholders
- 5 **Support** communities
- 6 **Facilitate** action

*Adapted from Enrique Mendizabal's  
Understanding Networks: The Functions of  
Research Policy Networks" (2006) 39*

## What do we mean by evidence?



EENet recognizes that there are multiple forms of evidence and that the application of evidence must take into consideration local and contextual factors.

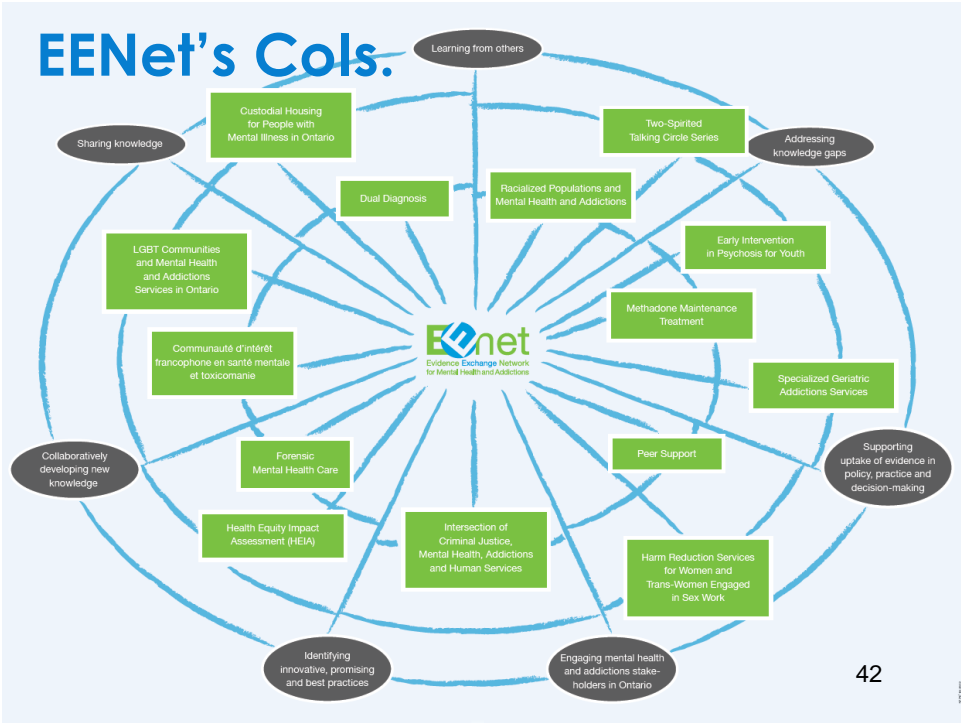
The 3 primary types of evidence are:

- Research evidence
- Expertise and tacit knowledge based on professional experience
- Lived experience of people and families



# What we're doing...

- ✓ Creating easy-to-use products and tools, such as Research Report Round-Ups, Research Snapshots, Student Spotlights, evidence briefs, webinars, and more
- ✓ Identifying, appraising, and making available review-level evidence on substance use and addictions (partnership with health-evidence.ca)
- ✓ Developing an evaluation framework for EENet
- ✓ Reaching stakeholders through our new website
- ✓ Seeding and supporting 14 Communities of Interest (ColS)
- ✓ KE support for Health Canada's Drug Treatment Funding Program (DTFP)



## EENet's Cols.



- EENet envisions a Community of Interest (Col) as a forum for knowledge exchange (KE) and collaborative knowledge creation
- Members of a Col have a common interest in a particular topic, and in:
  - Sharing what they know
  - Learning from others
  - Addressing knowledge gaps
  - Collaboratively developing new knowledge
  - Identifying innovative, promising and best practices
  - Meaningfully engaging mental health and addictions stakeholders in Ontario
  - Supporting uptake of evidence in policy, practice and decision-making
- EENet Cols have broad representation from stakeholder groups (including researchers, clinicians, service providers, decision-makers, system planners, policymakers, persons with lived experience, and families) from across the mental health and addictions sectors, and other related sectors
- Each Col is supported by an EENet Knowledge Broker

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## How Cols have used the KT Planning Template™.



- EENet expects that Cols engage in some form of KE planning
- At our Col launch event in September, we gave an overview of KE planning and provided a “tour” of the KT Planning Template™
- Cols are not required to use the KT Planning Template™ but many have elected to do so
- Some Cols have used the tool to help them identify partners in the very early stages; others have used or plan to use the tool for individual activities they are undertaking as a Col (e.g., development of fact sheets for service providers, hosting symposiums and webinar series, website redevelopment, etc.)

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# Health Canada's Drug Treatment Funding Program



- The DTFP is a federal contribution program designed to support provinces and territories in their efforts to strengthen evidence-informed substance abuse treatment systems; and address critical gaps in substance abuse treatment services, particularly for at-risk youth
- Eleven Systems Projects have been funded in Ontario, of which EENet is one
- EENet is the vehicle through which knowledge exchange is taking place for the suite of systems initiatives receiving funding through the DTFP in Ontario
- EENet leverages its 'network of networks' and targeted knowledge translation and exchange products and tools to bring visibility to Ontario's DTFP-funded systems projects

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# How the DTFP Ontario Systems Projects have used the KT Planning Template™.



- EENet Knowledge Brokers provide dedicated KE support to the Ontario Systems Projects; Knowledge Brokers have worked collaboratively with each project team to develop a KE plan using the tool as a guide
- KE plans were developed at various stages in each project, however, KE planning generally took place after idea formulation (i.e., KE plans were not developed as part of the project proposal)

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## Strengths of using the tool.



- + Flexible; able to adapt KE plan to the needs of the project
- + Helps to operationalize nebulous KE concepts
- + Encourages KE thinking from the start of the project
- + Provides an easy-to-use, comprehensive framework for KE planning for all experience levels
- + Assists in the development of key messages and strategies to deploy these messages
- + Helps to identify opportunities for and support the uptake of project findings in policy and practice to maximize the impact of the project and the value of investments
- + Promotes impacts-oriented thinking from the outset

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## Challenges of using the tool.



- Lack of clarity regarding the format of the final product
- The research language often does not resonate in a non-research context
- Lack of guidance/prompts in the implementation section of the template
- Buy-in from the project team is critical! The KE plan will not be effective if the project team is not invested or does not see the value in the planning process
- Engaging in KE planning either too early or too late in the project may limit its effectiveness

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## To learn more:

- Visit [www.ontariodtfp.ca](http://www.ontariodtfp.ca)
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## Thank you!



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