

## Publishable Summary



Scoping study of approaches to **B**rokering knowledge and **R**esearch Information to support the **D**evelopment and **G**overnance of health systems in **E**urope

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### Background

The BRIDGE project was designed by the European Observatory to understand and respond to the gap between evidence and information on health systems, and the reforms and strategies designed to shape them. The need for governments and other stakeholders to take well-informed decisions is well recognized and yet policy is often made without reference to the best available health systems information. Knowledge brokering is a term used to describe the efforts to ensure that the two do connect and that there is a link between policymakers and researchers, the information they generate and need, and the contexts they operate in. BRIDGE sought: to map the various organizations undertaking such brokering work on health systems policy across the European Union and European Free Trade Area countries; to understand the knowledge brokering mechanisms that are being used and the reasons they work and do not work; and to examine the ways that information could be more effectively brought to bear on decision making.

BRIDGE has:

- Developed a framework to understand knowledge-brokering approaches and their interconnections
- Produced criteria that can be used to assess knowledge brokering mechanisms and organizational models for knowledge brokering (See Box 1 and 2)
- Described and compared European Union and EFTA country experiences with:
  - Knowledge brokering mechanisms that package information and that allow interactive knowledge sharing and
  - Organizational models (whether national or European focused) that foster knowledge brokeringHighlighting good practices
- Undertaken a set of national case studies that explore further the contextual factors that support the brokering of research into policy making.

### ***Box 1 . Building blocks to assess knowledge brokering mechanisms***

- **What it covers:** Does it cover a topical / relevant issue and address the many features of the issue based on the best available health systems evidence?
- **What it includes:** Does it include knowledge from synthesized, assessed health systems information and from tacit knowledge, views and experiences from policy makers and stakeholders?
- **For whom it's targeted:** Does it explicit target policy makers and stakeholders and engage them as key participants (interactive knowledge sharing mechanisms) and in reviewing the product for relevance and clarity (knowledge packaging mechanisms). Is it timed to relate to a policy making process or to requests from policy makers?
- **How it's packaged (knowledge packaging mechanisms):** Is it organized to highlight decision-relevant information, written in understandable language, and prepared in a format that makes the information easy to absorb?
- **How it's organized (interactive knowledge sharing mechanisms):** Are optimal participants proactively identified, invited and engaged in-person or at least real-time online interactions? Are key information products pre-circulated? Does each participant have the potential to contribute equally to the discussion, and are there explicit rules about whether and how comments can be attributed?
- **How its use is supported?** Are insights captured through the creation of products based on the knowledge-sharing interactions? Are these insights publicly shared and brought to the attention of target audiences through email alerts/listservs? Is the knowledge package mechanism supported through online commentaries or briefings that contextualize the information and through ongoing communication that brings the new information to the attention of policy audiences?

### ***Box 2 . Building blocks to assess knowledge brokering organizations***

- **How it's governed:** does it ensure that policymakers, stakeholders and researchers have and exercise a governance role with transparency and with an objectivity that ensures values and interests do not pre determine outcomes? Does it have and enforce rules that ensure independence and address conflicts of interest?
- **How it's managed and staffed:** does it grant to the director the authority needed to ensure accountability to its knowledge-brokering mandate? Does it ensure an appropriate size, mix and capacity of staff with knowledge brokering responsibilities?
- **How its resources are obtained and allocated:** does it ensure an appropriate size of budget and mix of funding sources for knowledge brokering? Does it have an explicit approach to prioritizing activities and accepting commissions/requests from policy makers and stakeholders?
- **How it collaborates:** is it located within another organization or network that supports its knowledge brokering activities? Does it collaborate with other organizations? Does it establish functional linkages with policymaking and stakeholder organizations?

### **Key lessons**

1. There is insufficient sustained effort to support knowledge brokering in European health systems
  - Health systems information is not consistently used to inform decision making
  - The most successful mechanisms for packaging and sharing information interactively, while increasingly recognized, are not widely used and there is a continued reliance on traditional ways of packaging and sharing information and organizing knowledge brokering that insufficiently reflect current understanding and good practice
  - There is not adequate support for knowledge brokering or enough encouragement of its use
2. The “how to” of communicating evidence for decisions is hugely context dependent; thus how people broker knowledge varies between countries and within them. Despite this context dependence there are lessons that can be learned and models that can be used to help broker knowledge better throughout EU health systems whatever the national, regional or local context.

3. The models that can usefully be applied include
- Packaging mechanisms (policy briefs, summaries etc.) that are customized to target policy makers and reflect their specific needs, focusing on a specific policy issue, examining the evidence around select options to tackle the policy issue or problem, and presenting messages in a graded format and in language designed to be accessible. See Box 3.

***Box 3. Innovative examples of information-packaging mechanisms***

- **Study summary:** a summary of an article or report that describes findings from a single study;
- **Systematic review summary:** a summary of an article or report that describes finding from a systematic review;
- **Compendium of summaries:** a thematically focused grouping of summaries of articles or reports;
- **Policy briefs:** a report that begins with a priority policy issue and mobilizes the relevant synthesized research evidence about the underlying problem(s), and related implementation considerations; and
- **Policy dialogue report:** a report that describes the insights derived from a policy dialogue where policymakers, stakeholders and researchers deliberate about a policy issue.

- Approaches to knowledge sharing (policy dialogues, networks, workshops etc.) that encourage two way interaction and allow for formal, organized exchange and informal dialogue, again targeting policy makers and concrete policy issues in tailored ways. See Box 4.

***Box 4. Innovative examples of knowledge sharing mechanisms***

- **Online discussion forum:** offers policymakers and stakeholders an opportunity to interact (but not in real time) with researchers and knowledge brokers;
- **Online briefing or webinar:** involves a web-based presentation by a researcher or knowledge broker where policymakers and stakeholders can interact in real time about issues raised in the presentation;
- **Training workshop:** aims to help policymakers and stakeholders enhance their skills in finding and using health systems information;
- **Personalized briefing:** provides policymakers and stakeholders with a formal in-person presentation and discussion of health systems information on an issue that they have prioritized and framed; and
- **Policy dialogue:** convenes policymakers, stakeholders and researchers to deliberate about a policy issue, and is ideally informed by a pre-circulated brief and organized to allow for a full airing of participants' tacit knowledge and real-world views and experiences.

- Interactive approaches and specifically organizations that focus on knowledge brokering in light of the evidence on timeliness and trust; on the need to build sustained links between researchers generating knowledge and policy makers taking decisions; and reflecting on context and on the changing state of knowledge. See Box 5.

***Box 5. Five promising examples of organizational models***

- **Poliitikauuringute Keskus (PRAXIS):** providing strategic counsel to health policymakers and promoting public debate about health in Estonia.
- **Observatorio de Salud en Europa:** facilitating integration of European health policies and programmes in the Spanish province of Andalusia.
- **Nasjonalt Kunnskapssenter for Helsetjenesten:** supporting evidence-based quality-improvement initiatives in the Norwegian health system.
- **The King's Fund:** purveying health-care policy ideas and analysis in England.
- **European Observatory on Health Systems and Policies:** enhancing evidence-based policymaking in health systems across Europe.
- **ZonMw,** a Dutch organization that funds, steers and engages in knowledge brokering.

4. There are some underlying and cross-cutting issues that need to be understood and which can be tackled through effective and adequately funded knowledge brokering activities – this implies
  - Greater focus on interaction between those that generate evidence and decision makers (the suppliers and the demanders)
  - Developing long term relationships between them that foster trust
  - Working within the recognition that groups and individuals are most receptive to information and evidence that is in line with their established beliefs, values and interests
  - Prioritizing timeliness
  - Making information readily available and accessible and easy to interpret
  - Emphasizing applicability of information and its practical use, including generating tangible solutions and practical tools
  - Building up a track record of quality outputs that inspire confidence in the information source
  - Capacity building so that researchers understand how and why information can be policy relevant and so that policy makers can appreciate the value of evidence
  
5. Current approaches to brokering are surprisingly traditional and there is strikingly little innovation – this suggests both that while some approaches may be robust and regarded as credible in different settings, there is scope for further development. This includes
  - Basic improvements in knowledge brokering outputs by explicit targeting of audiences and signaling objectives, routine use of accessible language and by routine review by stakeholders
  - Development of innovation in the way options and tools are generated and in interactive mechanisms
  - Support for organizations that broker knowledge for health systems in light of the evidence
  - Fostering of more involvement of policy makers in the shaping and governance of knowledge brokering and knowledge brokering organizations
  
6. The European Commission, national governments and other funders could make a significant impact by supporting
  - Further research on how to contextualize information
  - Innovation particular in interactive mechanisms
  - Rolling out of existing good practice and ongoing evaluation
  - Organizations that can serve as knowledge brokers and making links between them.

#### **Key areas of work, scientific and technical outputs from BRIDGE**

- An updated systematic review of the factors that influence the use of health systems information in policy making
- A “map” of knowledge brokering mechanisms and organizational models for knowledge brokering
- A framework capturing the relationship between knowledge generators, knowledge brokers and policy making
- A glossary of terms around which some consensus has been built;
- A network of country correspondents across the EU and European Free Trade Association
- Data from 319 organisations outlining their role in knowledge brokering
- Key informant interviews on promising examples of knowledge brokering
- Laying the groundwork for further comparative research on this area
- Lessons which will help increase health system actors’ understanding of knowledge brokering and what it implies for the re-organization and better management of health information systems
- Lessons on how to broker knowledge better which will help support the development and governance of European health systems
- Lesson which will optimize the delivery of health care to European citizens

- 2 policy briefs on knowledge brokering at national and European level
  - ***How Can Knowledge Brokering Be Better Supported Across European Health Systems.***  
Lavis JN, Permanand G, Catallo C, Fahy N, BRIDGE Study Team  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).
  - ***How Can Knowledge Brokering Be Advanced in a Country's Health System?***  
Lavis JN, Permanand G, Catallo C, BRIDGE Study Team  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).
  
- 3 BRIDGE summaries on: information-packaging mechanisms for knowledge brokering; interactive knowledge-sharing mechanisms for knowledge brokering; and organizational models for knowledge brokering.
  - ***Communicating Clearly: Enhancing Information-Packaging Mechanisms to Support Knowledge Brokering in European Health Systems.***  
Lavis JN, Catallo C, Permanand G, Zierler A, BRIDGE Study Team.  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).
  - ***Learning from One Another: Enriching Interactive Knowledge-Sharing Mechanisms to Support Knowledge Brokering in European Health Systems.***  
Lavis JN, Catallo C, Jessani N, Permanand G, Zierler A, BRIDGE Study Team.  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).
  - ***Matching Form to Function: Designing Organizational Models to Support Knowledge Brokering in European Health Systems.***  
Lavis JN, Jessani N, Permanand G, Catallo C, Zierler A, BRIDGE Study Team.  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).
  
- BRIDGE volume including the BRIDGE framework and criteria; a systematic review and scoping review of published literature; website reviews from key knowledge brokering organizations in 31 countries; results of site visits to 28 knowledge brokering organizations; multi-method case studies of knowledge brokering in action in Belgium, England, Norway and Spain; and next steps for knowledge brokering in Europe.
  - ***Bridging the Worlds of Research and Policy in European Health Systems.***  
Lavis JN, Catallo C, (editors).  
Brussels, Belgium: European Observatory on Health Systems and Policies (2011).