Knowledge-to-Action Awards Application 2022

Applications are due by 4 pm on Tuesday, October 11, 2022.

We recommend that you answer the application questions in Word before completing this online form. If you wish to save this online application and return later: Click the "Save and Return Later" button at the bottom of the page.

You will be provided with a Return Code and instructions on how to continue the application at a later time.

Copy or write down the Return Code. Without it, you will not be able to access your saved application again.

Project Team and Title Lead Applicant Name

Lead Applicant Email

Applicant Role/Job Title

Project Title

Additional Team Members and Departments: Identify all other team members and roles, as well as all departments or Island Health sites involved in or impacted by this project.

1. Project Details

1.1 Lay Summary: In plain English, describe the evidence you used (or are using), how you implemented it, and what the outcomes were. This summary should be suitable for publication or press release. See this tip sheet on how to write effective summaries:

https://beta.mssociety.ca/uploads/files/guide-to-writing-lay-summary-eng-final20130726.pdf. (200 word limit)

1.2. Geographic Region: Indicate where your project took place. Select all that apply. If island-wide, select all.

Campbell River, Comox, Courtenay, Mt. Waddington, Strathcona

Port Alberni, West Coast, Nanaimo, Oceanside

Cowichan Valley, Ladysmith, Saanich (Northern), Gulf Islands

Victoria, Saanich (Southern), Esquimalt, Sooke, West Shore



1.3 Priority Area:

Please indicate the priority areas addressed by the research.

- Indigenous health
 Mental Health and Substance Use
 Seniors Health
 Primary Care Networks and Clinics
 Population Health and Health Promotion
 Underserved and/or Marginally Housed Populations
 Acute and Ambulatory Services
 Care Team Safety and Wellness
 Virtual and Technology Enabled Care
- COVID-19

1.4 Alignment with Island Health's Strategic Framework (https://connect.islandhealth.ca/strategic-framework/SitePages/overview.aspx): Indicate the goal/s this project supports.

Goal 1: Improve the experience, quality and outcomes and health and care services for patients, clients and families.

Goal 2: Improve the experience, health and well-being of all people working and volunteering at island Health.

Goal 3: Increase health system value and ensure the sustainability of health and care services.

Goal 4: Improve the Health and Wellness of the Population

1.5 Describe how your project addresses the goals and priorities selected above. Reference other planning documents or priority plans as appropriate. (300 words maximum)

2. Description

2.1 What was your source (or sources) of evidence, and what did it say? Describe how you generated, identified, evaluated, and/or synthesized the evidence. (300 words maximum)

2.2 Change: What was the existing practice or process, and how did it compare to the change you made based on the evidence above? (300 words maximum)

2.3 Planning and Implementation: How did you plan for and take action to implement the change? (300 words maximum)

2.4 Audience and Engagement: Who were your target audiences and collaborators (e.g. co-workers, patients, decision-makers), and how did you engage them in planning and implementation? (300 words maximum)



2.5. Challenges: What barriers or challenges did you encounter in making change (for instance, institutional or within your team), and how did you overcome them? (300 words maximum)

2.6. Impact: How did you measure the impact of the change and evaluate the outcomes? Include details about your measurements and any relevant data. (300 words maximum)

2.7. Sustainability and Spread: What strategies have you deployed to sustain the change and the use of evidence? Did you expand to other areas or departments within Island Health? (300 words maximum)

I confirm that my manager and director (or executive director) are aware and supportive of this application. If my application is successful, they agree to manage the funds through the departmental operating account.

 \bigcirc Yes \bigcirc No

Island Health Operating Account Number: If my application is successful, funds should be deposited in the following account (enter number)

How to save your work and return later:

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When you click submit below, you will be forwarded automatically to a brief Equity and Diversity self-identification Questionnaire. This survey allows us to collect data on important equity dimensions like gender, age, identity, and disability.

