**UQ School of Pharmacy - Guidelines for writing a Research Translation and Impact Plan**

As part of the [project documents for progress reviews](https://graduate-school.uq.edu.au/school-pharmacy-progress-review-guidelines), UQ School of Pharmacy HDR students are asked to consider the following topics, if applicable, to their research project: a research translation and impact plan; and/or a research commercialisation plan; and/or a consumer and community involvement plan. This document provides guidance on the contents of a **Research Translation and Impact plan**. Students should address the following questions succinctly in 1-2 pages. Additional information beyond 1-2 pages can be provided in an appendix. Note: This preamble and the guidance text below, if included in your plan, does not count as part of the one-page limit.

Impact is the provable effects of research in the real world. Impact is the changes we can see

(demonstrate, measure, capture), beyond academia (in society, economy, environment) which

happen because of our research (caused by, contributed to, attributable to)1. Impact refers to the change itself, not the process of getting there. The process is research translation. It is never too early or too late to think about and plan for impact. See also the [Impact Literacy Workbook](https://www.emeraldgrouppublishing.com/sites/default/files/2020-06/Impact%20Literacy%20Workbook%20Final.pdf).

**What is the problem?**

*Points to possibly consider/address -*

* What is the gap into which your work may contribute, it should be framed negatively here. For example, too much…, too little…, poor…, unsafe…, declining…, underutilized… etc
* Consider the evidence that this problem exists. This evidence may come from literature, policy documents and/or stakeholders (those people directly affected by the problem you are working to address).
* Within the broad problem area identified above, identify the specific aspect that your work is focussed on.

**What would impact on this problem look like?**

*Points to possibly consider/address -*

* Flip the specific problem statement you devised above and state it in positive terms. This is the impact your work is seeking to make.
	+ Too much… might become ‘Reduced…’
	+ Too little… might become ‘Increased…’
	+ Poor… might become ‘Improved…’
	+ Declining… might become ‘Increasing…’ or ‘Sustained…’
	+ Under-utilised … might become ‘Improved uptake…’
* How will your research contribute to this impact?

**What will you do to achieve these changes?**

*Points to possibly consider/address -*

* Who needs to know about your research, and what kinds of research outputs are most likely to reach them? How and when will you engage these stakeholders?
* Can you use an implementation theory or framework to develop a plan to influence those stakeholders2:
	+ Who needs to do what differently? What types of strategies will help people make that change? (See also the [Strateg-ease Tool](https://thecenterforimplementation.com/strategease-tool))
	+ Which barriers and facilitators need to be addressed?
	+ Which intervention components could overcome barriers and enhance enablers?
	+ How can the change be measured and understood?
* Have you considered developing a logic model or theory of change, such as one based on theFramework to Assess the Impact from Translational Health Research (FAIT) model.3
* What kinds of impact is your research likely to have? Can impact be framed in one or more of the NMHRC domains that go beyond knowledge, such as health, economic or social impact? Refer to the [NHRMC website](https://www.nhmrc.gov.au/research-policy/research-translation-and-impact/research-impact) for examples of each.
	+ What metrics are relevant to this kind of impact?

**Will making these changes require your findings to be implemented in clinical practice?**

*Points to possibly consider/address -*

* Is there already sufficient clear evidence to inform a change in clinical practice?
* What theories, models or frameworks have you considered to guide implementation? The [Qld Health AH-TRIP website](https://www.health.qld.gov.au/clinical-practice/database-tools/translating-research-into-practice-trip) contains information on how to select and use various theories, models and frameworks, including [RE-AIM](https://re-aim.org/learn/what-is-re-aim/), the Knowledge to Action Framework,4 Theoretical Domains Framework,5,6 Consolidated Framework for Implementation Research,7 Behaviour Change Wheel8 and Expert Recommendations for Implementing Change (ERIC)9.
* How will you measure practice before and after implementation?
* What adaptations to your intervention might be needed to tailor it to different clinical settings?
* What might be the likely barriers and facilitators to implementation? How will you maxisise facilitators, while mitigating barriers?
* Is there a need/opportunity for implementation research? That is, research which investigates the ‘methods to improve the uptake of research and other evidence-based practices into practice’10

**References**

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