



## Review article

# Identifying knowledge gaps between practice and research for implementation components of sustainable interventions to improve the working environment – A rapid review



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## ABSTRACT

In a recent study, we involved all relevant stakeholders to identify practice-based implementation components for successful implementation and sustainability in work environment interventions. To understand possible knowledge gaps between evidence and practice, the aim of this paper is to investigate if effectiveness studies of the 11 practice-based implementation components can be identified in existing scientific literature. PubMed/MEDLINE, PsycINFO, and Web of Science were searched for relevant studies. After screening, 38 articles met the inclusion criteria. Since some of the studies describe more than one practice-based implementation concept a total of 125 quality criteria assessments were made. The overall result is that 10 of the 11 practice-based implementation components can be found in the scientific literature, but the evaluation of them is poor. From this review it is clear that there are knowledge gaps between evidence and practice with respect to the effectiveness of implementation concepts.

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## 1. Introduction

“There is no public health without good workplace health” (European Network for Workplace Health Promotion, 2002). The workplace is increasingly being viewed upon as a setting not only to prevent occupational injury, but also to improve overall health and well-being (World Health Organization, 1986). However, despite many efforts by introducing various strategies such as programs, policies and interventions, improvements in work environment and health remains a challenge. Insignificant or modest findings in these strategies may be attributable to them being poorly designed or theorised, poorly implemented, or having inadequate evaluation methods (Glasgow et al., 1999; Oakley et al., 2006).

Evidence-based practice has been increasingly popular in the recent years within the work environment (Kuijer et al., 2014; Nayback-Beebe et al., 2013; Slaughter et al., 2015), whereas only few studies have focused on practice-based evidence (Dunet et al., 2008; Reavley et al., 2010). Evidence-based practice provides evidence that often comes from artificially controlled research that does not fit the realities of practice (Green, 2006), since research studies require strict adherence to protocols to control threats to study validity (Trewick and Zwarenstein, 2009). However, practice-based evidence provides knowledge of what is needed in practice. Workplaces, practitioners or other end users that are involved in programs, policies or interventions to improve the work environment are an important source of information about strategies that may be effective. Strategies already being implemented are obviously feasible, in contrast to research-based interventions that may not necessarily be adaptable to multiple workplace settings. Closer engagement with practitioners or other end users could contribute to closing the gap between research and practice (Green, 2008) and provide information about effective strategies for improving the work environment and health.

In a recent study, we involved all relevant stakeholders in a comprehensive concept mapping process to identify the prerequisites for effective interventions for improving the working environment among nursing assistants. This resulted in 11 practice-based implementation components (PBIC's), which are structures and processes that need to be present for successful implementation and effect of work environment interventions: “Engaged and Active Management”, “Available and Ready to Use”, “Connected with Daily Work Tasks”, “General Structures and Resources in Place to make it happen”, “Process Steering”, “Relevant to Current Workplace Needs”, “Easy Transfer to Action”, “Engaged Employees”, “Awareness, Mutual Goals and Co-production”, “Support from Internal and External Stakeholders”, “Delivered in an Attractive Form” (Højberg et al., 2017) (Fig. 1).

In order to fully understand possible knowledge gaps between evidence and practice for sustainability in work environment, the aim of this paper is to investigate if effectiveness studies that include the 11 PBIC's can be identified in existing scientific

literature through a rapid review. Therefore, the overall research question is: Is there scientific research to support practice-based knowledge regarding implementation components for effective work environment interventions for nursing assistants?

## 2. Methods

We used a rapid review (RR). RR's are often described as “reviews that use methods to accelerate or streamline traditional systematic review processes” (Ganann et al., 2010). RR's do not appear in the literature with one single definition (Watt et al., 2008b), and there are no clear published guidelines on how to conduct RR's, but it is stated that an RR can be carried out when there is a need for a time- and resource sensitive review process, and that it can provide a way to generate similar types of knowledge synthesis as more comprehensive systematic reviews do, but in a much shorter time period (Ganann et al., 2010; Khangura et al., 2012; Watt et al., 2008a). The benefit of such reviews is that they meet policy and practice needs by providing an overview of the field in a short time frame; hence they do not aim to assess each piece of evidence systematically. Limitations include the short time frames and need to review materials. This increases the possibility that some literature might be overlooked.

To make the review process transparent we used the PRISMA statement to guide us (Moher et al., 2009). Due to the short time frame, no protocol is published and nor has it been registered.

### 2.1. Search strategy

Our search strategy included searching in the following scientific databases by an information scientist: PubMed/MEDLINE, PsycINFO, and Web of Science. The searches were carried out between September 25th and November 19th, 2015. We did not include grey literature, references list of relevant papers were not inspected to identify further relevant articles and we did not do any additional citation search or contact study authors to identify additional studies. The search was not limited to years. Only articles published in English were included in the search.

A basic search strategy with three clusters of keywords was used. The first cluster referred to the target population, i.e., “eldercare workers”, “nursing assistants”, “nurses' aides” and “care workers” etc. The second cluster referred to the setting, i.e. “Employee”, “Job”, “Work”, “Occupation” etc. The third cluster referred to the intervention to search for implementation of changes, i.e. “intervention”, “program”, “change”, “implement” etc. The keywords for the second and third cluster were inspired by the search strategy used in the review by Van Eerd and colleagues (van Eerd et al., 2010) and by the article on search strategy by Verbeek and colleagues (Verbeek et al., 2005). All clusters included variations of the keywords. This basic search was then combined with an individual search for each of the 11 PBIC's (all in all 11 separate literature searches (reviews) in all three databases). We used the

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