Bridging the worlds of research and policy in European health systems





Appendix A

Glossary and list of online resources

Terms, definitions and sources

Capacity

The set of skills, structures and processes, as well as the organizational culture, that allows, encourages and rewards efforts to use health systems information in policy-making and that supports such efforts.

Source: Adapted from Canadian Health Services Research Foundation, 2014 (now called Canadian Foundation for Healthcare Improvement).\(^1\)

Community of practice

The process of social learning that occurs when individuals who have a common interest in a health systems subject or problem collaborate to share ideas, find solutions and build innovations.

Source: Adapted from Scottish Government, 2005.2

Data

Facts and statistics collected together for reference or analysis.

Source: Oxford Dictionaries, 2014a.3

Dissemination

The process of extracting clear, simple and actionable messages or implications from health systems information; pinpointing key policy-maker or stakeholder audiences; identifying credible 'carriers' of the messages for these audiences; and delivering the messages in ways that are appropriate to the audiences being targeted and will encourage them to factor the messages or implications into their work.

Source: Adapted from Canadian Health Services Research Foundation, 2014 (now called Canadian Foundation for Healthcare Improvement).¹

Health policy

A formal statement or procedure within institutions (notably government) that defines priorities and the parameters for action in response to health needs, available resources and other political pressures.

Source: European Observatory on Health Systems and Policies.

Health systems information

Data (on performance and outcomes, among other topics) and research evidence (about policy and programme options to improve performance or achieve better outcomes, among other topics).

Source: BRIDGE.4

Information-packaging mechanisms

Information products in a variety of media that are focused at least in part on health systems information and that are intended to support policy-making. The outputs can take the form of policy briefs, issue notes, research summaries, policy dialogue reports, research reports, presentations, audio podcasts, video podcasts, videos, blogs, impact summaries, newsletters, annual reports, and cartoons and other visual media, among others.

Source: BRIDGE.4

Interactive knowledge-sharing mechanisms

Mediating interactions that are focused at least in part on health systems information and that are intended to support policy-making. The interactions can take the form of policy dialogues, personalized briefings, training workshops, online briefings or webinars, online discussion forums, formalized networks, informal discussions, and presentations.

Source: BRIDGE.4

Knowledge broker

An individual or organization that engages in knowledge brokering. We distinguish between dedicated knowledge brokers (whose work is focused on intermediating between producers and users of health systems information) and researchers (who produce health systems information but also have a role in disseminating and supporting its use among various groups).

Source: Canadian Health Services Research Foundation, 2014 (now called Canadian Foundation for Healthcare Improvement);1 BRIDGE.4

Knowledge brokering

The use of information-packaging mechanisms and/or interactive knowledge-

sharing mechanisms to bridge policy-makers' (and stakeholders') and researchers' contexts, and thereby address the four possible explanations for the disjuncture between information and action: (i) health systems information is not communicated effectively; (ii) health systems information is not available when policy-makers and stakeholders need it and in a form that they can use; (iii) policy-makers and stakeholders lack the capacity to find and use health systems information efficiently and (in some countries) lack mechanisms to prompt them to use health systems information in policy-making; and (iv) policy-makers and stakeholders lack opportunities to discuss system challenges with researchers.

Source: BRIDGE 4

Knowledge exchange

Collaborative problem-solving between researchers and policy-makers (or stakeholders) that happens through ongoing interaction, collaboration and exchange of ideas in the context of a specific research process, and that results in mutual learning.

Source: Adapted from Canadian Health Services Research Foundation, 2014 (now called Canadian Foundation for Healthcare Improvement).1

Organizational culture

In short, 'the way we do things around here'. An organization's culture is a mixture of its traditions, values, attitudes and behaviours.

Source: NHS Evidence, 2010.5

Organizational models for knowledge brokering

The features of organizations that are focused at least in part on health systems information and that are intended to support policy-making. These features can relate to the role of policy-makers and stakeholders in governance; rules that ensure independence and address conflicts of interest; authority to ensure accountablity to a knowledge-brokering mandate; size, mix and capacity of staff with knowledge-brokering responsibilities; size of budget and mix of funding sources for knowledge brokering; approach to prioritizing activities and accepting commissions/requests; location within another organization or network; collaboration with other organizations; and functional linkages with policy-making and stakeholder organizations.

Source: BRIDGE.4

Policy-makers

The government officials who will be directly involved in decision-making as part of a policy-making process, either as decision-makers themselves (notably 4 Bridging the worlds of research and policy in European health systems

politicians) or as advisers working in close proximity to these decision-makers (notably political staffers and civil servants).

Source: BRIDGE.4

Research evidence

The results of a systematic study of materials and sources in order to establish facts and reach new conclusions. The results can take the form of conceptual frameworks, primary research studies, and systematic reviews, among other forms.

Source: Adapted from Oxford Dictionaries, 2014b6; BRIDGE.4

Stakeholders

The individuals and groups who will be involved in or affected by (i.e. who have an interest in) a policy-making process, not including government officials who will be directly involved in the decision-making. Stakeholders can come from industry, professional associations and patient groups, among others.

Source: BRIDGE;4 adapted from European Observatory on Health Systems and Policies.

Tacit knowledge

The knowledge or know-how that people carry in their heads. Compared with explicit knowledge (such as published research evidence), tacit knowledge is more difficult to articulate or write down, and so it tends to be shared between people through discussion, stories and personal interactions. It includes skills, experiences, insight, intuition and judgement.

Source: NHS Evidence, 2010.5

Online resources

Canadian Best Practices Portal

 Portal for knowledge-brokering terms related to best practices in public health

http://cbpp-pcpe.phac-aspc.gc.ca

European Observatory on Health Systems and Policies

 Glossary of knowledge-brokering and health systems terms (not available online at time of publication)

International Development Research Centre (IDRC)

 Knowledge-brokering toolkit http://network.idrc.ca/cfp/ev-133179-201-1-DO_TOPIC.html Knowledge-brokering theories, approaches and applications http://web.idrc.ca/es/ev-125826-201-1-DO TOPIC.html

Knowledge Brokers' Forum

 Collaborative space to promote knowledge sharing and dissemination on knowledge brokering

http://www.knowledgebrokersforum.org

Knowledge Translation+ (KT+)

Evidence service focused on knowledge brokering http://plus.mcmaster.ca/kt/default.aspx

KT Clearinghouse (KTCH)

Glossary of knowledge-brokering terms http://ktclearinghouse.ca/glossary

WhatisKT

Wiki focused on knowledge brokering http://whatiskt.wikispaces.com.

NHS Evidence - knowledge management

Glossary of knowledge-brokering terms http://collections.europarchive.org/tna/20100509080731/http:/www. library.nhs.uk/knowledgemanagement/Page.aspx?pagename=GLOSSARY.

Research Unit for Research Utilisation (RURU)

Keywords related to knowledge brokering (but not definitions) (not available online at time of publication).

Scottish Government

Background to knowledge brokering http://www.scotland.gov.uk/Publications/2005/09/2782919/29225.

- 1. Canadian Health Services Research Foundation (2014). Glossary of knowledge exchange terms. In: Resources and tools [website]. Ottawa: Canadian Foundation for Healthcare Improvement (http://www.cfhi-fcass.ca/ PublicationsAndResources/ResourcesAndTools/GlossaryKnowledgeExchange.aspx, accessed 1 April 2014).
- 2. Scottish Government (2005). Background, introduction and SAHPM overview. In: New directions for knowledge transfer and knowledge brokerage in Scotland, Part 4. Edinburgh (http://www.scotland.gov.uk/ Publications/2005/09/2782919/29225, accessed 1 April 2014).
- 3 Oxford Dictionaries (2014a). Data. In: Oxforddictionaries.com [online]. Oxford: Oxford University Press (http://www. oxforddictionaries.com/definition/english/data?q=data, accessed 1 April 2014).
- 4 BRIDGE series. In: European Observatory on Health Systems and Policies [website]. Copenhagen, WHO Regional Office for Europe (http://www.euro.who.int/en/about-us/partners/observatory/bridge-series, accessed 1 April 2014).
- 5. NHS Evidence (2010). Glossary of health knowledge management terms. In: Knowledge management [website]. London: National Institute for Health and Clinical Excellence (http://collections.europarchive.org/tna/20100509080731/ http://www.library.nhs.uk/knowledgemanagement/Page.aspx?pagename=GLOSSARY, accessed 1 April 2014).
- 6 Oxford Dictionaries (2014b). Research. In: Oxforddictionaries.com [online]. Oxford: Oxford University Press (http:// www.oxforddictionaries.com/definition/english/research#m_en_gb 0703100, accessed 1 April 2014).

Inclusion criteria for knowledge-brokering organizations in the BRIDGE study

This is a copy-edited version of this study instrument, but no substantive changes have been made.

Knowledge-brokering organizations included in the BRIDGE study should have the following characteristics.

- 1. Fund, conduct or disseminate research
 - exclude lobby groups and think tanks that support political activities but do not employ systematic methods and do not report their methods and findings transparently.
- 2. Focus at least in part on governance, financial and delivery arrangements within health systems
 - exclude units that focus solely on *clinical* programmes, services or drugs (and other technologies) or on *public health* programmes and services, and not on how clinical or public health programmes and services are governed, financed/funded and delivered;
 - note this means that guideline-producing organizations and health technology assessment agencies, which are routinely studied, are not covered.
- 3. Identify policy-makers as being among the target audiences for their research
 - exclude units that focus solely on supporting the use of decision aids by
 patients, increasing the consumption of particular prescription drugs by
 patients, supporting the uptake of practice guidelines by clinicians, and
 improving the prescribing of particular drugs by clinicians.

- 4. Function as a semi-autonomous or autonomous organization
 - exclude university departments that do not have some independence, but include (for example) an institute with an external advisory council.
- 5. Put all (or almost all) of their products in the public domain (whether or not there is a small charge) in order to advance the public interest
 - exclude consulting firms that produce reports for clients in order to advance the clients' commercial interests but do not make the report publicly available;
 - also exclude government strategy units that advance the public interest but that do not make their reports publicly available.
- 6. Add value beyond the simple collection and collation of data, and
 - exclude statistical agencies that do not have a semi-autonomous unit that produces analytical reports based on the data collected or collated by the agency.
- 7. Target Member States of the European Union or European Free Trade Association, groupings of these states, or constituent units of these states above the level of municipality (e.g. provinces, counties):
 - exclude units serving only the needs of city councils (with the exception of Finland where health care is a municipal responsibility).

Appendix C

Data-collection tool for the website reviews

This is a copy-edited version of the original study instrument, but no substantive changes have been made.

1.	Write your name (as the country correspondent completing this tool):			

2. Circle the **number** corresponding to the country that you are covering:

#	Country	#	Country	#	Country
01	Austria	15	Latvia	28	Iceland*
02	Belgium	16	Lithuania	29	Liechtenstein*
03	Bulgaria	17	Luxembourg	30	Norway*
04	Cyprus	18	Malta	31	Switzerland*
05	Czech Republic	19	Netherlands	32	Global, European or cross-
06	Denmark	20	Poland		national focus
07	Estonia	21	Portugal		
08	Finland	22	Romania		
09	France	23	Slovakia		
10	Germany	24	Slovenia		
11	Greece	25	Spain		
12	Hungary	26	Sweden		
13	Ireland	27	United Kingdom		
14	Italy				

^{*}Member States of the European Free Trade Association; others are states of the European Union.

Write the name of the organization that you are reviewing:

4.	Describe the level at which it is operating (pan-European, cross-national, national, subnational):

5.	Describe the scale at which it is operating and the basis for your assessment (e.g. small with <10 staff and <30 published outputs per year, versus large with >100 staff and >300 published outputs per year)
6.	Insert the URL (website address) that you are using to review the organization:

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Eligibility

Indicate which of the following types of policy-makers in Europe are identified as being among the organization's target audiences:

Target audiences	Tick if yes (and transcribe verbatim any descriptions, including seniority of target audiences)	Rank the order of priority assigned to target audiences, if described
National and subnational policy-makers – politicians (i.e. ministers of health or finance, among others, who take the major health-policy decisions)		
National and subnational policy-makers – civil servants in health, finance and other relevant ministries (i.e. civil servants who draft position papers and legislation, oversee reforms and have a significant influence on the decisions of politicians and parliaments)		e.g. 1 (primary audience)
International policy-makers – politicians (i.e. members of pan-European bodies such as the European Parliament who play an increasing role in shaping social and economic policy at a pan-European level)		
International agencies – staff (i.e. staff of pan-regional or global bodies such as the European Commission or World Bank who directly or indirectly affect policy-making in countries)		e.g. 2 (one of two secondary audiences of equal priority)
International agencies/NGOs – advisers and consultants on health-care reform (i.e. individuals who may have a direct impact on decisions, such as those who support national policy-makers in central and eastern Europe)		e.g. 2 (one of two secondary audiences of equal priority)

Please note that ticking one or more of these boxes is typically required for inclusion in the BRIDGE study. However, we will address other possibilities on a case-by-case basis. In such situations, please use the next item as an opportunity to introduce the rationale.

Indicate which of the following <i>other types</i> of policy-makers in Europe are identified as being among the organization's target audiences :
☐ health system managers (i.e. senior managers who take hands-on responsibility for the running of health-care services, purchasing authorities, sickness funds and other institutions);
$\hfill \Box$ other types of policy-makers (e.g. medical associations in Germany), please specify:

Please note that organizations targeting the general public, patients, clinicians or the media – but not also one of the groups described in items 7 and 8 – are not normally considered for inclusion in the BRIDGE study.

Information-packaging mechanisms

 List each type of information-packaging mechanism¹ used by the organization (i.e. each type of product that can be downloaded from its website, sent upon request or subscribed to). Tick any applicable codes from the list next to the table. Write any applicable comments in the final column (add additional pages if necessary).

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Observations about its innovativeness or its impact			
Supporting its wider use	86	8	 86
Packaging	5 6 7 1	5 6 7 1	5 6 7
Preparation	1	1	1
Mechanism			

Preparation

- Does it target (or appear to target) policy-makers as a key audience?
 Does it stem from one or more of the following?
 - Does it stell from one of fride of the follows. research project (i.e. primary research);
- b. systematic review;
- .. meeting with policy-makers or stakeholders;
- collation of research-related products (e.g. a and b) or activities (e.g. c); or
 - issue raised by policy-makers.
 Does it focus primarily on one or more of the following?
- Descriptions of principally of the common problems of the collowing:

 Descriptions for addressing a problem or achieving a policy objective; or

 Descriptions for addressing a problem or achieving a policy objective; or
- c. implementation considerations.
 Was it reviewed before publication by members of its target audience (i.e. not just by researchers)?

ackaging

- Does it use language that is clearly designed to be accessible?
- 6. Does it follow a graded-entry format with key messages, possibly an executive summary, and a full report?
- . Does it highlight decision-relevant information explicitly (e.g. benefits, harms and costs of options)?

upporting its wider use

- A Are online commentaries or briefings about the product provided by representatives of its target audiences?
- . Is there an option to sign up for an e-mail alert/listserv when new products are posted online?

briefs, research summaries, policy dialogue reports, research reports, presentations, audio podcasts, video podcasts, videos, blogs, impact summaries, newsletters, annual reports, and cartoons and other visual media, I Information products in a variety of media that are focused, at least in part, on health systems information and that are intended to support policy-making. The outputs can take the form of policy briefs, issue among others

Interactive knowledge-sharing mechanisms

۳ چ	, .	ςi
 List each type of interactive knowledge-sharing mechanism² used by the organization. Tick any 	applicable codes from the list next to the table. Write any applicable comments in the final column	(add additional pages if necessary).

mgnt be morned	3. Does it stem from a research agends b. research project	Systematic revie Collation of reserve Source raised by it training need ide Does it focus prime	a. problem of points b. options for addr c. implementation Organization 5. Does the timing rel	bolicy-makers? 6. Does it involve one a. closed list of inv b. pre-circulation of c. rules about whe	a. presentations by b. questions and a c. policy-maker co c. policy-maker co d. dialogue where the discussion.
	Observations about its innovativeness or its impact				
	Supporting its wider use	00000	00000	001	100
	Organization	5	5	5 0 6a 06b 6c 0 7a 0 7b 0 7c 0 7d 0 8a 08b 08c 0	5 U 66 C C 74 C C C C 74 C C C C C C C C C C C
	Preparation	1	1	1	1
	Mechanism				

paration

- Does it target (or appear to target) policy-makers as a key audience?
- Does it target stakeholders who will be involved in or affected by decisions that d by the mechanism?
 - one or more of the following?
- setting;
- (i.e. primary research);
- arch-related products (e.g. a and b) or activities (e.g. c); olicy-makers; or
- entified by policy-makers.
- irily on one or more of the following?
- essing a problem or achieving a policy objective; or considerations. y objective;
- ate explicitly to a policy-making process or to requests from
- or more of the following?
- products described in question 9 above; or her and how comments can be attributed.
- or more of the following?
 - an expert;
- swers targeted at an expert;
- each participant has the potential to contribute equally to mmentaries on an expert's input; or
- Does it involve one or more of the following?
 - a. in-person interactions;
- b. synchronous online interactions; or c. asynchronous online interactions.

- Supporting its wider use
- Is there an option to sign up for an e-mail alert/listserv when new interaction- Are any products based on the interactions?
 Is there an option to sign up for an e-mail aler related products are posted online?

² Mediating interactions that are focused, at least in part, on health systems information and that are intended to support policy-making. The interactions can take the form of policy dialogues, personalized briefings, training workshops, online briefings or webinars, online discussion forums, formalized networks, informal discussions, and presentations.

Organizational model

- 11. Cut and paste (and translate if necessary) any available descriptions of the organizational model used by the organization, which can include:
 - role of policy-makers in its governance and management (e.g. located within government, director appointed by government, and staff paid by civil service grade; arms-length agency with an independent board comprised of policy-makers from several ministries and stakeholders such as insurance funds):
 - size, disciplinary mix, and knowledge translation expertise of staff;
 - size of budget and contributions of national and regional policy-making authorities to the budget;
 - approach to setting its agenda or annual programme of work (e.g. 30% directed by government, 70% set at the discretion of the director);
 - location within another organization (e.g. government or university) or network; and
 - use of rapid-response functions, exchange programmes and other efforts to support responsive relations between researchers and policy-makers.

Monitoring and evaluation

- 12. Cut and paste (and translate if necessary) any available descriptions of the approach to monitoring and evaluation used by the organization, which can include (but is not limited to):
 - media coverage
 - citation in policy documents, and
 - independent evaluations of impact on systems and policies.

Other

13.	Indicate whether the organization is no longer active but has a publicly accessible (archived) website that
	permitted this assessment.
	□ inactive

Appendix D

Country correspondents for the website reviews and validators for the eligibility assessments

#	Country (or jurisdiction)	Country correspondent	Associate country correspondent	Validator
1	Austria	Maria Hofmarcher	Elisabeth Breyer	Manfred Huber
2	Belgium	Mark Leys		Lieven De Raedt
3	Bulgaria	Emilia Tontcheva	Nyulifer Jacub	Antoniya Dimova
4	Cyprus	Aris Sissouras	Charalampos Economou	Panos Pashardes
5	Czech Republic	Jan Šturma		None identified
6	Denmark	Peter Kjær		Allan Krasnik
7	Estonia	Jarno Habicht	Triinu Tikas	Ain Aaviksoo
8	Finland	Ilmo Keskimäki	Liina-Kaisa Tynkkynen	None identified
9	France	Karine Chevreul	Karen Brigham	Frédéric Bousquet
10	Germany	Reinhard Busse	Verena Gramse	Helmut Brand
11	Greece	Aris Sissouras	Charalampos Economou	Elias Mossialos
12	Hungary	Peter Gaal	Blanka Csilla Török	Zsofia Pusztai
13	Ireland	David McDaid		None identified
14	Italy	Giovanni Fattore	Alessandra Susi	Antonio Giulio De Belvis
15	Latvia	Aiga Rurane	Jolanta Skrule	Gunta Rozentāle
16	Lithuania	Romualdas Gurevicius	Lina Muleronkaitė	Robertas Petkevičius
17	Luxembourg	Mark Leys		None identified
18	Malta	Miriam Dalmas	Roberto Debono	Natasha Muscat and Neville Calleja
19	Netherlands	Ewout van Ginneken	Verena Gramse	Willemijn Schäfer
20	Poland	Barbara Niedzwiedzka	Ewa Dobrogowska- Schlebusch	Paulina Miśkiewicz
21	Portugal	Paulo Sousa	Paula Perdigão	Pedro Pita Barros
22	Romania	Victor Stefan Olsavszky		None identified
23	Slovakia	Darina Sedláková	Jana Potúčková	Peter Pažitný
24	Slovenia	Tit Albreht	Marjetka Jelenc	Marijan Ivanusa
25	Spain	José M Martín-Moreno	Meggan Harris	José Ramón Repullo Labrador
26	Sweden	Henrik Lundström	Jesper Olsson	Anders Anell

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#	Country (or jurisdiction)	Country correspondent	Associate country correspondent	Validator
27	United Kingdom	David McDaid	Lucia Kossarova and Anna Sagan	Sean Boyle
28	Iceland*	Sigurbjörg Sigurgeirsdóttir		None identified
29	Liechtenstein*	Govin Permanand		None identified
30	Norway*	John-Arne Røttingen	Kari Håvelsrud	Olav Valen Slåttebrekk
31	Switzerland*	Gaudenz Silberschmidt	Markus Weber	Luca Crivelli
32	Global, European or cross-national	Cristina Catallo and Gabriele Pastorino		Nick Fahy

^{*}Member States of the European Free Trade Association; others are states of the European Union.

Appendix E

Organizations included in the BRIDGE study and those carefully considered but excluded

#	Country (or jurisdiction)	Organization	
Εu	uropean Union		
1	Austria	Included Department für Evidenzbasierte Medizin und Klinische Epidemiologie, Donau- Universität Krems/Department for Evidence-based Medicine and Clinical Epidemiology, Danube University Krems Gesundheit Österreich GmbH (GÖG)/Austrian Health Institute (GÖG) Institut für Gesundheitsplanung/Institute for Healthcare Planning	
		Institut für Höhere Studien (IHS)/Institute for Advanced Studies (IHS) Joanneum Research/Joanneum Research, Institute of Medical Technologies and Health Management	
		Ludwig Boltzmann Institute of Health Promotion Research (LBIHPR)/Ludwig Boltzmann Institute, Health Promotion Research (LBIHPR)	
		Ludwig Boltzmann Institute of Health Technology Assessment (LBI-HTA)/Ludwig Boltzmann Institute, Health Technology Assessment (LBI-HTA)	
		Österreichische Agentur für Gesundheit und Ernährungssicherheit (AGES)/Austriar Agency for Health and Food Safety (AGES)	
		Österreichisches Institut für Wirtschaftsforschung (WIFO)/Austrian Institute of Economic Research (WIFO)	
		Statistik Austria/Statistics Austria	
		Carefully considered and found to meet some but not all criteria Arbeitskreis für Vorsorge und Sozialmedizin gemeinnützige BetriebsGmbH (AKS)/ Working Group for Preventive and Social Medicine (AKS)	
		Institut für Pharmaökonomische Forschung/Institute for Pharmacoeconomic Research (IPF)	
		Österreichisches Rotes Kreuz/Austrian Red Cross	

#	Country (or jurisdiction)	Organization
2	Belgium	Included Federaal Kenniscentrum voor de Gezondheidszorg (KCE)/Centre fédéral d'expertise des soins de santé (KCE)/Belgian Health Care Knowledge Centre (KCE)
		Steunpunt Welzijn, Volksgezondheid en Gezin (SWVG)/Knowledge Centre for Welfare, Public Health and Family
		Wetenschappelijk Instituut Volksgezondheid (WIV)/Institut Scientifique de Santé Publique (ISP)/Scientific Institute of Public Health (WIV-ISP)
		Carefully considered and found to meet some but not all criteria
		Agence fédérale pour la sécurité de la chaîne alimentaire (AFSCA)/Federaal Agentschap voor de veiligheid van de voedselketen (FAVV)/Föderalagentur für die Sicherheit der Nahrungsmittelkette (FASNK)/Federal Agency for the Safety of the Food Chain (FASFC)
		Institut national d'assurance maladie (INAMI)/Rijksinstitut voor ziekte- en invaliditeitsverzekering (RIZIV)/National Institute for Health and Disability Insurance (NIHDI)
		Itinera Institute/Itinera Institute
		Observatoire de la santé et du social de Bruxelles-Capitale/Observatorium voor Gezondheid en Welzijn van Brussel-Hoofdstad/Brussels-Capital Health and Social Observatory
		Observatoire de la santé du Hainaut/Observatory for Health in Hainaut
		Observatoire de la santé du Hainady Observatory los Fredit III Hainade Observatoire franco-belge de la santé (OFBS)/Franco-Belge Observatory for Health
		Vlaams Agentschap voor Personen met een Handicap (VAPH)/Agence flamande
		pour les personnes handicapées (VAPH)/Flemish Agency for Disabled Persons (VAPH)
3	Included	
		Национален център по здравна и нформация/National Center of Public Health and Analyses (NCPHA)
		Национален център по опазване на общественото здраве/National Centre of Public Health Protection
		Carefully considered and found to meet some but not all criteria Bulgarian Association of Nurses
		Bulgarian Dental Association
		Български лекарски съюз (Блс)/Bulgarian Medical Association
		Народно събрание на Република България/Healthcare Committee, National Assembly of the Republic of Bulgaria
		Национална здравноосигурителна каса/National Health Insurance Fund
		Ministry of Health, Bulgaria
4 Cyprus Included Not applicable		
		Carefully considered and found to meet some but not all criteria
		Ανοικτό Πανεπιστήμιο Κύπρου/Department of Health Management, Open University of Cyprus
		Υπογργείο Υγείασ Τhσ Κуπρίαkhσ Δ hmokpatiaσ/Health Monitoring Unit, Ministry of Health of Cyprus
5	Czech Republio	
		Evropské Centrum pro medicínskou informatiku, statistiku a epidemiologíí (EruolSE centrum)/European Centre for Medical Informatics, Statistics and Epidemiology (EuroMISE Centre)
		Národní Referenční Centrum (NRC)/National Reference Centre (NRC) Občanské Sdružení Reforma Zdravotnictví - Forum.cz/HealthReform.cz
		Státní Zdravotní Ústav (SZU)/National Institute of Public Health (NIPH)
		Ústav zdravotnických informací a statistiky ČR (ÚZIS ČR)/Department of Analyses, Publication and External Collaboration, Institute of Health Information and Statistics of the Czech Republic (IHIS)

Country (or jurisdiction)

Organization

(contd)

Czech Republic Carefully considered and found to meet some but not all criteria

Akademie věd České republiky/Academy of Sciences of the Czech Republic

Centrum kardiovaskulární a transplantační chirurgie (CKTCH)/Center for Cardiovascular and Transplant Surgery

České národní fórom pro eHealth (O ČNFeH)/Czech National Forum for eHealth

Endokrinologický ústav (endo.cz)/Institute of Endocrinology

Fórum pro Otevřené Zdravotnictví/Forum for Modern Health Care

Institutu Klinické a Experimentální Medicíny (IKEM)/Institute for Clinical and Experimental Medicine

Koalice pro zdraví/Coalition for Health

Koordinační středisko transplantací (KST)/Czech Transplantations Coordinating

Center (KST)

Masarykův onkologický ústav/Masaryk Memorial Cancer Institute_

Svaz zdravotních pojišťoven (SZP ČR)/Association of Companies' Health Insurance Funds Technology Centre (AS-CR)

Denmark

Included

Danish Institute of Governmental Research (AKF)

Dansk Sundhedsinstitut (DSI)/Danish Institute for Health Services Research

Carefully considered and found to meet some but not all criteria

Center for Anvendt Sundhedstjenesteforskning og Teknologivurdering, Syddansk Universitet/Centre for Applied Health Services Research and Technology Assessment, University of Southern Denmark

Centre for Health Management, Copenhagen Business School (CBS)

Evidence in Research and Action Network (EIRA), Syddansk Universitet

Forskningsenheden for Sundhedsøkonomi, Syddansk Universitet/Research Unit of

Health Economics, University of Southern Denmark

Kræftens Bekæmpelse/Danish Cancer Society Institut for Folkesundhedsvidenskab. Afdeling for Sundhedstienesteforskning. Københavns Universitet/Section for Health Services Research, Department of Public Health, University of Copenhagen

Statens Institut for Folkesundhed, Syddansk Universitet/Danish National Institute of Public Health (NIPH), University of Southern Denmark

Estonia

Included

Poliitikauuringute Keskus PRAXIS/PRAXIS Center for Policy Studies

Tervise Arengu Instituut (TAI)/National Institute for Health Development (NIHD)

Carefully considered and found to meet some but not all criteria

Eesti Haigekassa/Estonian Health Insurance Fund (EHIF)

Ravimiamet/State Agency of Medicines (SAM)

Sotsiaalvaldkonna uuringud ja analüüsid, Sotsiaalministeerium/Social Policy Information and Analysis Department, Estonian Ministry of Social Affairs (SPIAD)

Tartu Ülikool tervishoju instituut/Department of Public Health, Faculty of Medicine. Tartu University

Tervisekaitseinspektsiooni/Health Protection Inspectorate (EHPI)

Tervisevaldkonna uuringud ja analüüsid, Sotsiaalministeerium/Health Information and Analysis Department, Estonian Ministry of Social Affairs (HIAD)

Finland

Kunnat.net Kuntatiedon Keskus/Association of Finnish Local and Regional Authorities Suomen itsenäisyyden juhlarahasto (Sitra)/Finnish Innovation Fund (Sitra)

Teknologian ja innovaatioiden kehittämiskeskus (TEKES)/Finnish Funding Agency for Technology and Innovation (TEKES)

Terveyden ja hyvinvoinnin laitos (THL)/National Institute for Health and Welfare (THL) (merger of the National Research and Development Centre for Welfare and Health [STAKES] and the National Public Health Institute [KTL])

Carefully considered and found to meet some but not all criteria

Not applicable

Country (or jurisdiction)

Organization

France

Included

Centre de recherche médecine, sciences, santé, santé mentale, société (CERMES3)/ Research Centre for Medicine, Science, Health, Mental Health and Society

Institut de recherche en santé publique (IReSP)/French Institute for Public Health Research (IReSP)

Institut de recherche et documentation en économie de la santé (IRDES)/Institute for Research and Information in Health Economics (IRDES)

Laboratoire d'économie et de gestion des organisations de santé, Université Paris-Dauphine (LEGOS)/Laboratory of Economics and Healthcare Management, University of Paris-Dauphine (LEGOS)

Sciences economiques et sociales, systèmes de santé, sociétés, UMR 912 Inserm-IRD-Université Aix-Marseille/Economy & Social Sciences, Health Care Systems & Societies Unit 912 of Inserm, IRD, University of Aix-Marseille

Unité de recherche clinique en économie de la santé d'Ile-de-France (URC Eco)/ Paris Health Services and Health Economics Research Unit (URC Eco)

Carefully considered and found to meet some but not all criteria

Centre d'analyse stratégique (CAS), Gouvernment de France

Chaire d'Economie et gestion des services de santé, Conservatoire national des arts et métiers (CNAM)/Chair of Economics and Management of Health Services, National Conservatory of Arts and Trades (CNAM)

Département des sciences humaines, sociales et des comportements de santé (SHSC), École des Hautes Études en Santé Publique (EHESP)/Department of Human and Social Sciences and Health Behaviour, EHESP School of Public Health

Direction de la recherche, des études, de l'évaluation et des statistiques (DREES), Ministère du Travail, de l'Emploi et de la Santé/Directorate of Research, Studies, Evaluation and Statistics (DREES), Ministry of Labour, Employment and Health

Direction de la stratégie, des études et des statistiques (DSES), Caisse nationale de l'assurance maladie des travailleurs salariés (Cnamts)/Strategy, Research and Statistics Directorate (DSES), French National Health Insurance Fund for Salaried Workers (Cnamts)

Haute autorité de santé (HAS)/National Health Authority (HAS)

Haut conseil pour l'avenir de l'assurance maladie (HCAAM)/High Council for the Future of Health Insurance (HCAAM)

Inspection générale des affaires sociales (IGAS)/General Inspectorate for Social Affairs

Institut de la protection sociale européene (IPSE)/Institute of European Social Protection (IPSF)

Institut de veille sanitaire (InVS)/French Institute for Public Health Surveillance

L'Observatoire national de la démographie des professions de santé (ONDPS), Ministère du travail, de l'emploi et de la santé

10 Germany

Included

Bertelsmann Stiftung/Bertelsmann Foundation

Fritz Beske Institut für Gesundheits-System-Forschung Kiel/Fritz Beske Institute for Health System Research Kiel

Robert Koch Institut (RKI)/Robert Koch Institute

Wissenschaftliches Institut der AOK (WIdO)/Scientific Institute of the AOK Wissenschaftszentrum Berlin für Sozialforschung (WZB)/Berlin Social Science Center (WZB)

Zentrum für Sozialpolitik (ZeS), Universität Bremen/Centre for Social Policy Research (ZeS), University of Bremen

Carefully considered and found to meet some but not all criteria

Akademie für Ethik in der Medizin (AEM)/Academy for Ethics in Medicine (AEM) Ärztliches Zentrum für Qualität in der Medizin (ÄZQ)/Agency for Quality in

Bayerisches Landesamt für Gesundheit und Lebensmittelsicherheit/Bayarian State Office for Health and Food Safety

Country (or Organization jurisdiction) Carefully considered and found to meet some but not all criteria 10 Germany Bundesministerium für Bildung und Forschung (BMBF)/Federal Ministry of (contd) Education and Research (BMBF) Das Deutsche Cochrane Zentrum (DCZ)/German Cochrane Center (GCC) Deutsche Gesellschaft für Medizinische Informatik, Biometrie und Epidemiologie e.V. (GMDS)/German Society for Medical Computer Science, Biometry and Epidemiology Deutsche Gesellschaft für Public Health e.V. (DGPH)/German Society of Public Health Deutsche Gesellschaft für Sozialmedizin und Prävention e.V. (DGSMP) Deutsches Institut für Gesundheitsrecht (DIGR)/German Institute of Health Legislation (DIGR) Deutsches Institut für Medizinische Dokumentation und Information (DIMDI)/ German Institute of Medical Documentation and Information (DIMDI) Deutsches Netzwerk Evidenzbasierte Medizin-/German Network of Evidencebased Medicine Deutsche Verband für Gesundheitswissenchaften und Public Health e.V. (DVGPH)/ German Association for Health Sciences and Public Health (DVGPH) Europäisches Public Health Zentrum Nordrhein-Westfalen (EPHZ)/European Public Health Centre (EPHC) North Rhine-Westphalia (EPHZ) Evidence.de, University of Witten/Herdecke Forum Gesundheitspolitik Gesundheitsforschungsrat/Health Research Council Institute for Evidence Based Medicine (DIeM) Institut für Public Health und Pflegeforschung, Universität Bremen/Institute for Public Health and Nursing Research, Bremen University Institut für Oualität und Wirtschaftlichkeit im Gesundheitswesen (IOWiG)/Institute for Quality and Efficiency in Health Care (IQWIG) Koordinierungs zentren für Klinische Studien (KKS)/Coordinating Centres for Clinical Trials (KKS) Landesinstitut für Gesundheit und Arbeit des Landes Nordrhein-Westfalen (LIGA. NRW) Telematikplattform für medizinische Forschungsnetze e.V. (TMF)/Telematics Platform for medical research (TMF) 11 Greece Included Εργαστηριο Οργάνωσης και Αξιολόγησης Υπηρεσιών Υγείας/Center for Health Services Management and Evaluation Carefully considered and found to meet some but not all criteria Εθνική Σχολή Δημόσιας Υγείας (ΕΣΔΥ)/National School of Public Health 12 Hungary Egészség-gazdaságtani és Egészségügyi Technológiaelemzési Kutatóközpont (Corvinus)- /Health Economics and Technology Assessment Research Centre Egészségpolitika és Egészség-Gazdaságtan Tanszék, Egészség-Gazdaságtani Kutatóközpont/Health Economics Research Centre, Faculty of Social Sciences, **Eotvos Lorand University** Egészségügyi Menedzserképző Központ, Semmelweis Egyetem/Health Services Management Training Centre, Semmelweis University Egészségügyi Stratégiai Kutatóintézet/National Institute for Strategic Health Research Országos Egészégfejlesztési Intézet/National Institute for Health Development Carefully considered and found to meet some but not all criteria Állami Népegészegügyi és Tisztiorvosi Szolgálat (ÁNTSZ)/Hungarian National Public Health and Medical Officer Service (ÁNTSZ) Debreceni Egyetem Orvos- és Egészségtudományi Centrum Népegészségügyi Kar/ Faculty of Public Health, University of Debrecen Egészségügyi Minőségfejlesztési és Kórháztechnikai Intézet (EMKI)/Institute for

Healthcare Quality Improvement and Hospital Engineering (EMKI)

#	Country (or jurisdiction)	Organization
12	Hungary (contd)	Carefully considered and found to meet some but not all criteria Egészségügykutató Intézet (GKI-EKI)/Healthcare Research Institute (GKI-EKI) Orvos- és Kórháztechnikai Igazgatóságának tevékenysége/Directorate of Medical and Hospital Engineering
13	Ireland	Included
		Adelaide Hospital Society Centre for Behaviour and Health, UCD Geary Institute
		Economic and Social Research Institute (ESRI)
		Carefully considered and found to meet some but not all criteria
		Combat Poverty Agency
		Department of Health and Children
		Health Information and Quality Authority (HIQA)
		Health Insurance Authority
		Health Policy and Management, Trinity College
		Health Promotion Ireland
		Health Research Board
		Institute of Public Administration
		Institute of Public Health in Ireland
		Ireland–Northern Ireland–National Cancer Institute
		Irish Centre for Social Gerontology, NUI Galway Jesuit Centre for Faith and Justice
		Mental Health Commission
		National Centre for Pharmacoeconomics
		National Economic and Social Council
		National Institute for the Health Sciences
		National Office for Suicide Prevention
		Public Health and Primary Care, Trinity College Dublin
		UCD Centre for Insurance Studies
14	Italy	Included Agenzia Nazionale per i Servizi Sanitari Regionali (Age.Na.S)/National Agency for Regional Health Services (Age.Na.S)
		Agenzia Regionale per i Servizi Sanitari (ARESS)/Regional Agency for Health Services in Piemonte (ARESS)
		Agenzia Regionale Sanitaria/Regional Agency for Health Services in Marche
		Agenzia Sanitaria e Sociale Regionale (ASSR)/Regional Agency for Social and Health Services in Emilia-Romagna (ASSR-EM-ROM)
		Centro di Richerche sulla Gestione dell'Assistenza Sanitaria e Sociale (CERGAS), Università Bocconi/Centre for Research on Health and Social Care Management (CERGAS), Bocconi University
		Università degli Studi di Roma "Tor Vergata" / Centre for Economic and Internationa Studies (CEIS), Faculty of Economics, University of Rome "Tor Vergata"
		Centro per la Valutazione dell'Efficacia dell'Assistenza Sanitaria/Centre for the Evaluation of the Effectiveness of Medical Care (CeVEAS)
		Laziosanità Agenzia di Sanità Pubblica/Agency of Public Health of Lazio
		Management e Sanità, Laboratorio di Ricerca e Formazione per il Management de Servizi alla Salute, Università di Pisa/Research and Training Department, Laborator for the Management of Health Services (MES), University of Pisa
		Osservatorio Nazionale sulla Salute nelle Regioni Italiane/National Observatory on Health Status in the Italian Regions
		Carefully considered and found to meet some but not all criteria Centro Cochrane Italiano (CCI)/Italian Cochrane Centre
		Federation of Health Care Services Organizations (FIASO) (website no longer available)
		Il Pensiero Scientifico Editore

#	Country (or jurisdiction)	Organization
15	Latvia	Included
		Not applicable
		Carefully considered and found to meet some but not all criteria Ārstu Biedrība/Physicians' Association of Latvia
		Centre of Health Economics (website no longer available)
		Papardes Zieds/Association for Family Planning and Sexual Health
		Rīgas Stradiņa Universitāte/Riga Stradina University
		Veselības Inspekcija, Lavitijas Republikas Veselības Ministrija/Health Inspectorate, Ministry of Health of the Republic of Latvia
		Veselības Statistikas un Medicīnas Tehnoloģiju (HSMTSA)/Health Statistics and Medical Technology State Agency (HSMTSA) (now part of the Centre of Health Economics)
16	Lithuania	Included
		Biomedicininių tyrimų institutas, Lietuvos sveikatos mokslų universitetas (formerly Kauno medicinos universiteto, KMU)/Institute for Biomedical Research, Laboratory of Preventive Medicine, Lithuanian University of Health Sciences (formerly Kaunas University of Medicine, KMU)
		Higienos institutas/Institute of Hygiene
		Klaipėdos universitetas/Institute of Research on Quality of Life, Faculty of Health Sciences, Klaipeda University
		Sveikatos ekonomikos centras/Health Economics Centre
		Carefully considered and found to meet some but not all criteria
		Klaipėdos universitetas/Faculty of Health Sciences, Klaipeda University
		Medicinos istorijos ir etikos skyrius, Vilniaus universiteto Medicinos fakultetas/ Department of Medical History and Ethics, Medical Faculty of Vilnius University
		Valstybinė visuomenės sveikatos priežiūros tarnyba prie Sveikatos apsaugos ministerijos Visos teisės saugomos/National Public Health Research Centre, State Public Health Service, Ministry of Health
		Visuomenės sveikatos fakulteto, Kauno medicinos universitetas/Faculty of Public Health, Kaunas University of Medicine (KMU)
17	Luxembourg	Included Not applicable
		Carefully considered and found to meet some but not all criteria Centre de Recherche Public de la Santé/Centre for Health Studies, Public Health Research Centre
		Centre de Recherche Public de la Santé/Systems Analysis and Health Services Unit, Public Research Centre for Health
		Centre de Ressources des Technologies pour la Santé (CR SANTEC) Départements du CRP Henri Tudor/Resource Centre for Health-care Technologies, Public Research Centre Henry Tudor
18	Malta	Included Not applicable
		Carefully considered and found to meet some but not all criteria Institute of Health Care, University of Malta
		Malta Council for Science and Technology
		National Statistics Office (NSO)
19	Netherlands	Included Centraal Planbureau (CPB)/Bureau for Economic Policy Analysis (CPB)
		College voor Zorgverzekeringen (CVZ)/Health Care Insurance Board (CVZ)
		De Gezondheidsraad (GR)/Health Council of the Netherlands
		Kwaliteitsinstituut voor de Gezondheidszorg (CBO)/Institute for Health Care Improvement (CBO)
		Nederlands instituut voor onderzoek van de gezondheidszorg (NIVEL)/Netherlands Institute for Health Services Research (NIVEL)
		Organisatie voor gezondheidsonderzoek en zorginnavatie (ZonMw)/Organization for Health Research and Development (ZonMw)

Country (or Organization jurisdiction) 19 Netherlands Included Raad voor de Volksgezondheid & Zorg (RVZ)/Council for Public Health and Health (contd) Care (RV7) Riiksinstituut voor Volksgezondheid en Milieu (RIVM)/National Institute for Public Health and the Environment (RIVM) Sociaal en Cultureel Planbureau (SCP)/Social Cultural Planning Office (SCP) Wetenschappelijk centrum voor zorg en welzijn, Universiteit van Tilburg/Scientific Center for Care and Welfare (Tranzo), Tilburg University Carefully considered and found to meet some but not all criteria Care and Public Health Research Institute (CAPHRI), University of Maastricht Department of Science, Technology, Health and Policy Studies (STeHPS), University Graduate School for Health Research (SHARF), Rijksuniversiteit Groningen/Graduate School for Health Research (SHARE), University Medical Centre Groningen Instituut Beleid & Management Gezondheidzorg (iBMG), Erasmus Universiteit Rotterdam/Institute of Health Policy and Management, Erasmus University of Rotterdam Institute for Research in Extramural Medicine (EMGO), VU University Medical Centre Institute of Mental Health and Addiction (Trimbos instituut)/Institute of Mental Health and Addiction (Trimbos) Julius Center, Universitair Medisch Centrum Utrecht/Julius Center, University Medical Centre Utrecht Kennis en advies voor maatschappelijke ontwikkeling (Movisie)/Netherlands Centre for Social Development (Movisie) Landelijk Expertisecentrum Verpleging & Verzorging (LEVV)/Centre for Excellence in Nursing (LEVV) Nationaal Instituut voor Gezondheidsbevordering en Ziektepreventie (NIGZ)/ Health Institute for Health Promotion and Disease Prevention (NIGZ) Nederlands Jeugdzorgprijzen (NJI)/Netherlands Youth Institute (NJI) Nederland Sociaal- Economische Raad (SER)/ Social and Economic Council of the Netherlands (SER) Nederlands Paramedisch Instituut (NPi)/Dutch Paramedic Institute (NPi) Nederlandse Organisatie voor Wetenschappelijk Onderzoek (NWO)/Netherlands Organization for Scientific Research (NWO) Nijmegen Centre for Evidence Based Practice (NCEBP), Radboud Universiteit/ Nijmegen Centre for Evidence Based Practice (NCEBP), Radboud University Prismant, Synzo Public Health and Primary Care, Leids Universitair Medisch Centrum/Department of Public Health and Primary Care, Leiden University Medical Centre Rob Giel Onderzoekcentrum, Universitair Medisch Centrum Groningen/Rob Giel Research Center, University Medical Centre Groningen Vilans/Vilans Wetenschappelijke Raad voor Het Regeringsbeleid (WRR)/Scientific Council for Government Policy (WRR) 20 Poland Included Państwowa Agencja Rozwiązywania Problemów Alkoholowych (PARPA)/

State Agency for the Prevention of Alcohol-Related Problems (PARPA) Zakład-Centrum Monitorowania i Analiz Stanu Zdrowia Ludności, Narodowy

Instytut Zdrowia Publicznego/Centre for Monitoring and Analyses of Population Health Status and Health Care System, National Institute of Public Health (NIZP)

Carefully considered and found to meet some but not all criteria Agencja Oceny Technologii Medycznych (AOTM)/Agency for Health Technology Assessment (AOTM)

Centrum Onkologii - Instytut im. Marii Skłodowskiej-Curie, Warsazawie (COI)/ Oncology Centre - Institute of Maria Skłodowska-Curie in Warsaw (COI) Centrum Systemów Informacyjnych Ochrony Zdrowia (CSIOZ)/Center for Health Information Systems (CSIOZ)

#	Country (or jurisdiction)	Organization
20	Poland (contd)	Carefully considered and found to meet some but not all criteria Department of Health Care Organization, Institute of Psychiatry and Neurology (IPIN)
		Instytut Matki i Dziecka (IMID)/Institute of Mother and Child (IMID)
		Instytut Medycyny Pracy im. prof. dra J. Nofera (IMP)/Noffer Institute of Occupational Medicine (IMP)
		Instytut Medycyny Wsi (IMW)/Institute of Agricultural Medicine (IMW)
21	Portugal	Included
		Alto Comissariado da Saúde/Office of the High Commissioner for Health Centro de Estudos e Investigação em Saúde da Universidade de Coimbra/Center of Studies and Research in Health, University of Coimbra (CEISUC)
		Instituto Nacional de Saúde Doutor Ricardo Jorge/National Health Institute Doutor Ricardo Jorge
		Instituto Superior de Serviço Social do Porto/Investigation Centre in Social Services Sciences (CICSS)
		Observatório Português dos Sistemas de Saúde (OPSS)/Portuguese Observatory on Health Systems (OPSS)
		Carefully considered and found to meet some but not all criteria Associação Portuguesa para o Desenvolvimento Hospitalar (APDH)/Portuguese Association for Hospital Development (APDH)
		Autoridade Nacional do Medicamento e Produtos de Saúde (Infarmed)/National Authority of Medicines and Health Products (INFARMED)
		Entidade Reguladora da Saúde (ERS)/Health Regulation Authority (ERS)
		Escola Nacional de Sáude Pública (ENSP)/National School of Public Health (NSPH)
		Institute for Medicines and Pharmaceutical Services (iMED)
		Instituto Gulbenkian de Ciência/Gulbenkian Institute of Science
		Instituto Nacional de Estatística/National Institute of Statistics
22	Romania	Included Centrul pentru Politici și Servicii de Sănătate (CPSS)/Center for Health Policies and Services (CPSS)
		Carefully considered and found to meet some but not all criteria Centrul National de Statistica Informatică/National Institute of Statistics (NIS) (website no longer available)
		Institutal National de Sanatate Publica_National Institute of Public Health (formerly National Centre for Organization and Provision of the Information and Informatics System in Health, CCSS)
		Institutes of Public Health Institute of Public Health Bucharest (IPHB) Institute of Public Health "Prof. Dr. Iuliu Moldovan" Cluj-Napoca (IPHCN) Institute of Public Health Iaşi (IPHI)
		 Institute of Public Health Timisoara (IPHT) National School of Public Health and Management (NSPHM) (website no longer available)
		Romanian Angel Appeal (RAA)
23	Slovakia	Included Inštitút informatiky a štatistiky (INFOSTAT)/Institute of Informatics and Statistics (INFOSTAT)
		Národné centrum zdravotníckych informácií (NCZI)/National Health Information Center (NCZI)
		Stredoeurópsky inštitút pre zdravotnu politiku/Health Policy Institute (HPI)
		Carefully considered and found to meet some but not all criteria Agentúra na podporu výskumu a vývoja/Slovak Research and Development Agency Statistical Office of the Slovak Republic
		Úrad verejného zdravotníctva Slovenskej republiky/Public Health Institute of the Slovak Republic

#	Country (or jurisdiction)	Organization
24	Slovenia	Included Institut za ekonomske raziskave v zdravstvu (INERHC)/Institute of Economic Research in Health Care (INERHC)
		Inštitut za varovanje zdravja Republike Slovenije/National Institute of Public Health of the Republic of Slovenia
		Zavod za zdravstveno zavarovanje Slovenije (ZZZS)/Health Insurance Institute of Slovenia (ZZZS)
		Carefully considered and found to meet some but not all criteria Center za zdravje in razvoj Murska Sobota (CZR)/Centre for Health and Development Murska Sobota (CZR)
		Združenje zdravstvenih zavodov Slovenije (ZDRZZ)/Association of Health Institutions of Slovenia (ZDRZZ)
25	Spain	Included Agencia de Evaluación de Tecnologías Sanitarias (AETS)/Health Technology Assessment Agency (AETS)
		Agencia de Evaluación de Tecnologías Sanitarias de Andalucía (AETSA)/Agency for Health Technology Assessment in Andalusia (AETSA)
		Agència d'Informació, Avaluació i Qualitat en Salut (AIAQS)/Agency for Health Technology and Research Assessment of Catalonia (AATRM)
		Centre de Recerca en Economia, Salut (CRES), Departament d'Economia i Empresa Universitat Pompeu Fabra/Centre for Research in Health and Economics (CRES), Department of Economics and Business, Pompeu Fabra University
		Centro de Investigación Biomédica en Red de Epidemiología y Salud Pública (CIBERSP)/ Biomedical Research Centre Network for Epidemiology and Public Health (CIBERESP)
		Observatorio de Salud en Europa, Escuela Andaluza de Salud Pública/Observatory of Health (OSE) at Andalusian School of Public Health (EASP)
		Foro Español de Pacientes/Spanish Patient Forum
		Fundación Gaspar Casal (FGC)/Gaspar Casal Foundation (FGC)
		Fundación Instituto de Investigación en Servicios de Salud (IISS)/Health Services Research Institute (IISS)
		Instituto Universitario Avedis Donabedian/Avedis Donabedian University Institute Servicio de Evaluación de Tecnologías Sanitarias (OSTEBA)/Basque Office for Health Technology Assessment (OSTEBA)
		Sociedad Española de Salud Pública y Administración Sanitaria (SESPAS)/Spanish Society of Public Health and Health Administration (SESPAS)
		Carefully considered and found to meet some but not all criteria Not applicable
26	Sweden	Included Centrum för utvärdering av medicinsk teknologi (CMT)/Center for Medical Technology Assessment (CMT)
		Forskningsrådet för arbetsliv och socialvetenskap (FAS)/Swedish Council for Working Life and Social Research
		Qulturum/Qulturum
		Socialstyrelsen/National Board of Health and Welfare
		Statens folkhälsoinstitut (SFI)/Swedish National Institute of Public Health (FHI) Vårdalstiftelsen/Vårdal Foundation
		Carefully considered and found to meet some but not all criteria Centre for Health Equity Studies, Stockholm University (CHESS)
		Kunskapscentrum för hälso-och sjukvården (SBU)/Swedish Council on Health Technology Assessment (SBU)
		Medical Management Centre (MMC), Karolinska Institute
		Svenska Reumatologi Register (SRR)/Swedish Rheumatology Registry (SRR) Swedish Research Council
		Uppsala Clinical Research Center (UCR) (website no longer available)

Country (or Organization jurisdiction 27 United Included Kingdom **England** Audit Commission Civitas – Institute for the Study of Civil Society Healthcare Commission (now defunct) Health Foundation • Health Services Management Centre, University of Birmingham • Institute for Public Policy Research Joseph Rowntree Foundation • LSE Health National Audit Office National Institute for Health Research SDO National Primary Care Research and Development Centre NHS Confederation Nuffield Trust Personal Social Services Research Unit Picker Institute Europe • Sainsbury Centre for Mental Health Social Care Institute for Excellence Social Market Foundation • The Kings Fund, London Chief Scientist Office (CSO) Northern Ireland Not applicable Wales Not applicable Carefully considered and found to meet some but not all criteria Centre for Analysis of Social Exclusion (CASE) – LSE • Centre for Evidence Based Public Health Policy Centre for Health Economics, University of York • Centre for Health Planning and Management, Keele University (website no longer available) • Centre for Innovation in Health Management, University of Leeds · Centre for Policy on Ageing • Centre for Public Policy and Health, University of Durham Dr Foster • Health and Care Infrastructure Research and Innovation Centre · Health Economics Research Centre, University of Oxford Health Economics Research Group, Brunel University • Imperial College Healthcare Management Group • Institute for Healthcare Management • Judge Business School (Cambridge University Health) National Centre for Social Research • National Institute for Clinical Excellence (NICE) • National Institute for Health Research • National Institute for Mental Health in England National Mental Health Development Unit NHS Centre for Reviews and Dissemination NHS Evidence • NHS Information Centre NIHR HTA programme • Royal Colleges (many but counted as one) • Royal Society for the Arts School of Héalth and Related Research (ScHARR), University of Sheffield • The Smith Institute UCL International Institute for Society and Health • University of East Anglia, Health and Social Sciences Wellcome Trust

York Health Economics Consortium

Scotland Not applicable

#	Country (or jurisdiction	Organization
27	United Kingdom (contd)	Carefully considered and found to meet some but not all criteria Northern Ireland Not applicable
	(corred)	Wales
		 Institute of Medical and Social Care Research IMSCaR, University of Bangor Wales Centre for Health
u	ropean Free Tra	
28	Iceland	Included
		Institute of Economic Studies, University of Iceland Stofnun stjórnsýslufræða og stjórnmála/Institute of Public Administration and Politic
		Carefully considered and found to meet some but not all criteria
		Lýðheilsustöð/Public Health Institute of Iceland
		Research Institute for Pharmaceutical Outcomes and Policy (RIPOP), University of Iceland
9	Liechtenstein	Included
		Konjunkturforschungsstelle Liechtenstein (KOFL)/Liechtenstein Economic Research Centre
		Carefully considered and found to meet some but not all criteria Not applicable
0	Norway	Included
		Arbeidsforskningsinstituttet (AFI)/Work Research Institute (WRI)
		Helseøkonomi Bergen (HEB)/Health Economics Bergen (HEB)
		Helseøkonomisk Forskningsprogram ved Universitetet i Oslo (HERO)/Health Economics Research Programme at the University of Oslo (HERO)
		Helse Sør-Øst kompetansesenter for helsetjenesteforskning (HØKH)
		Nasjonalt Folkehelseinstitutt/Norwegian Institute of Public Health
		Nasjonalt Kunnskapssenter for Helsetjenesten (NOKC)/Norwegian Knowledge Centre for the Health Services (NOKC)
		Senter for Klinisk Dokumentasjon og Evaluering (SKDE)/Centre for Clinical Documentation and Evaluation (SKDE)
		SINTEF Teknologi og Samfunn/SINTEF Technology and Society
		Statistisk Sentralbyrå (SSB)/Statistics Norway (SSB) Stein Rokkan Senter for Flerfaglige Samfunnsstudier/Stein Rokkan Centre for Soci
		Studies (Rokkan-UIB)
		Carefully considered and found to meet some but not all criteria Avdeling for helseledelse og helseøkonomi, Universitetet i Oslo (UiO)/Departmer of Health Management and Health Economics, University of Oslo
		Institutt for administrasjon og organisasjonsvitenskap, Universitetet i Bergen (UiB Department of Administration and Organization Theory, University of Bergen (Uil
		Institutt for samfunnsmedisin, Norges teknisk-naturvitenskapelige universitet (NTNU)/ Department of Public Health and General Practice, Norwegian University of Science and Technology (NTNU)
		Institutt for samfunnsmedisin, Universitetet i Tromsø (UiT)/Institute for Communi Medicine, University of Tromso (UiT)
		Nasjonal kompetanseenhet for minoritetshelse (NAKMI)/Norwegian Centre for Minority Health Research (NAKMI)
		Norwegian School of Management(SFLOH)-BI) (includes the Center for Health Management Studies, which does not yet have a website)
31	Switzerland	Included Bundesamt für Gesundheit (BAG)/Office Fédéral de la Santé Publique (OFSP)/ Ufficio Federale della Sanità Pubblica (UFSP)/Swiss Federal Office of Public Health (FOPH)
		Bundesamt für Statistik/Office Fédéral de la Statistique/Ufficio Federale di Statistica/ Swiss Federal Statistical Office (FSO)
		Schweizerisches Gesundheitsobservatorium (Obsan)/Observatorire Suisse de la Santé (Obsan)/Osservatorio Svizzero della Salute (Obsan)/Swiss Health Observato (Obsan)

Country (or jurisdiction

Organization

31 Switzerland (contd)

Carefully considered and found to meet some but not all criteria

Horten-Zentrum für praxisorientierte Forschung und Wissenstransfer/Helmut Horten Foundation

Institut d'Economie et de Management de la Santé (IEMS), Université de Lausanne/ Institute of Health Economics and Management, University of Lausanne Institute of Microeconomics and Economics of the Public Sector (MecoP), University of Lugano

Schweizerisches Tropen-und Public Health-Institut (SwissTPH), Universität Basel/ Institut Tropical et de Santé Publique Suisse (SwissTPH), Université de Bâle/Swiss Tropical and Public Health Institute (SwissTPH), University of Basel

Wintherthurer Institut für Gesundheitsökonomie, Zürcher Hochschule für Angewandte Wissenschaften (ZHAW)/School of Management and Law, Zurich University of Applied Sciences (ZHAW)

International

32 Global

(a) but with Europetargeted initiatives

Please note that the names of alobal organizations

Included

Innocenti Research Centre, United Nations Children's Fund (UNICEF)

International Social Security Association (ISSA)

ISSA European Network

Organisation for Economic Co-operation and Development (OECD)

World Bank

World Bank in Europe and Central Asia

Carefully considered and found to meet some but not all criteria

appear in English International Labour Organization (ILO)

because this Europe and Central Asia is the main

United Nations Children's Fund (UNICEF) language of their Onited Nations Children's Fund (Onice) / • Central and Eastern Europe and the Commonwealth of Independent States

United Nations Economic Commission for Europe (UNECE)

World Medical Association

32 European

(b) Please note

that the names of European organizations when this is the Public Health main language of their websites, in the original language when multiple languages are used on their

websites

Included

EuroHealthNet

European Centre for Social Welfare, Policy and Research

European Commission (EC)

- organizations appear in English Employment, Social Affairs and Equal Opportunities

 Employment, Social Affairs and Equal Opportunities

 European Centre for Disease Prevention and Control

 - Research Directorate-General

and they appear European Foundation for the Improvement of Living and Working Conditions (Eurofound)

European Health Management Association

European Monitoring for Drugs and Drug Addiction

European Observatory on Health Systems and Policies

European Policy Centre

Health Consumer Powerhouse

Internationalen Netzwerks Gesundheitspolitik, Health Policy Monitor/International

Network Health Policy and Reform, Health Policy Monitor

Observatoire Social Européen/European Social Observatory

Rand Europe

World Health Organization Regional Office for Europe

- Health Evidence Network
- Regions for Health Network

Carefully considered and found to meet some but not all criteria

Association Internationale de la Mutualité

Association of Schools of Public Health in the European Region

Centre of Excellence in Finance

# Country (or jurisdictio	Organization
32 European	Carefully considered and found to meet some but not all criteria
(b) (contd)	Association Internationale de la Mutualité
	Association of Schools of Public Health in the European Region
	Centre of Excellence in Finance
	European Commission DG Health and Consumer Protection FUROSTAT
	Public Health Systems2 (website no longer available) Public Health Systems3 (website no longer available)
	European Consumer Organisation
	European Federation of Nurses Associations
	European Federation of Public Service Unions
	European Hospital and Healthcare Employer's Association
	European Hospital and Healthcare Federation
	European Public Health Association
	European Social Insurance Platform
	Geneva Health Forum
	Madariaga – College of Europe Foundation
	Standing Committee of European Doctors
	Stockholm Network
	World Health Organization Regional Office for Europe European Health for All database
32 Intra-Europe	ean Included
(c) cross-nation	al Northern Dimension Partnership in Public Health and Social Well-being
initiatives	Carefully considered and found to meet some but not all criteria British-Irish Council

Appendix F

Interview guide for the site visits

This is a copy-edited version of the original study instrument, but no substantive changes have been made.

Information-packaging mechanisms

- 1. Describe your organization's key **information-packaging mechanism(s)**, including:
 - whether a mechanism or combination of mechanisms is innovative and/or influential
 - why the mechanism(s) or combination of mechanisms is innovative and/or influential, and
 - how long and how extensively the mechanism(s) has been used.

Provide representative examples that can be shared.

Handout 1 – "Attributes of information-packaging mechanisms that may help to describe a particular mechanism or to explain why it is innovative and/or influential" – will be provided during the interview. (See Appendix G for all interview handouts)

Note that we consider **information-packaging mechanisms** to be information products in a variety of media that are focused, at least in part, on health systems information and that are intended to support policy-making. The outputs can take the form of policy briefs, issue briefs, research summaries, policy dialogue reports, research reports, presentations, audio podcasts, video podcasts, videos, blogs, impact summaries, newsletters, annual reports, and cartoons and other visual media, among others. By **health systems information** we mean data (on performance and outcomes, among other topics) and research evidence (about policy and programme options to improve performance or achieve better outcomes, among other topics).

- Describe other innovative and/or influential information-packaging mechanisms that are being used in the country or region your organization serves, including:
 - why each mechanism or combination of mechanisms is innovative and/or influential, and
 - how long and how extensively the mechanisms have been used.

Provide representative examples that can be shared.

3. Describe whether and how features of the national, European and international context influenced the choice and perceived effectiveness of a particular information-packaging mechanism or combination of mechanisms. In thinking about perceived effectiveness, please consider the acceptability, use and impact of mechanisms (at the level of the organization and of the country or region your organization serves).

Handout 2 – "Features of the national, European and international context that may have influenced the choice and perceived effectiveness of the mechanisms/model" – will be provided during the interview. The same handout will be used for a number of other questions about how context has influenced your organization and other similar organizations in the country or region your organization serves.

Interactive knowledge-sharing mechanisms

- 4. Describe your organization's key interactive knowledge-sharing mechanism(s), including:
 - whether a mechanism or combination of mechanisms is innovative and/or influential
 - why the mechanisms or combination of mechanisms is innovative and/or influential, and
 - how long and how extensively the mechanism(s) has been used.

Provide descriptions of representative mechanisms that can be shared.

Handout 3 – "Attributes of interactive knowledge-sharing mechanisms that may help to describe a particular mechanism or to explain why it is innovative and/or influential" – will be provided during the interview.

Note that we consider interactive knowledge-sharing mechanisms to be mediating interactions that are focused, at least in part, on health systems information and that are intended to support policy-making. The interactions can take the form of policy dialogues, personalized briefings, training workshops, online briefings or webinars, online discussion forums, formalized networks, informal discussions, and presentations.

- 5. Describe other innovative and/or influential interactive knowledge-sharing mechanisms that are being used in the country or region your organization serves, including:
 - why each mechanism or combination of mechanisms is innovative and/or influential, and
 - how long and how extensively the mechanism(s) has been used.

Provide descriptions of representative mechanisms that can be shared.

6. Describe whether and how features of the national, European and international context influenced the choice and perceived effectiveness of a particular interactive knowledge-sharing mechanism or combination of mechanisms. In thinking about perceived effectiveness, please consider the acceptability, use and impact of mechanisms (at the level of the organization and of the country or region your organization serves).

See handout 2 as a prompt for this question and the next three questions.

All types of knowledge-brokering mechanisms

- 7. Describe whether and how features of the national, European and international context influenced the relative balance between local and external knowledge-brokering mechanisms (at the level of the organization and the country or region your organization serves). Please consider the influence in terms of both choice and perceived effectiveness (i.e. acceptability, use and impact of mechanisms).
- Describe whether and how features of the national, European and international context influenced the relative balance between information-packaging mechanisms and interactive knowledgesharing mechanisms (at the level of the organization and the country or region your organization serves). Please consider the influence in terms of both choice and perceived effectiveness (i.e. acceptability, use and impact of mechanisms).
- 9. Describe whether and how features of the national, European and international context influenced the relative balance between interactive knowledge-sharing mechanisms that engage both policymakers and stakeholders and mechanisms that engage policy-makers only (at the level of the organization and the country or region your organization serves). Please consider the influence in terms of both choice and perceived effectiveness (i.e. acceptability, use and impact of mechanisms).

Organizational model for knowledge brokering

- 10. Describe the features of your **organizational model** for knowledge brokering, including:
 - whether a feature or combination of features is innovative and/or influential
 - why the feature or combination of features is innovative and/or influential, and
 - how long the current organizational model has been used and why it was last changed.

Provide descriptions of the organizational model that can be shared.

Handout 4 - "Features of the organizational model currently in use" - will be provided during the interview. The handout lists features of organizational models for knowledge brokering that may help you to describe a particular feature or explain why it is innovative and/or influential.

Note that we consider an organizational model to be the features of organizations that are focused, at least in part, on health systems information and that are intended to support policy-making. These features can relate to the role of policy-makers and stakeholders in governance; rules that ensure independence and address conflicts of interest; authority to ensure accountability to a knowledgebrokering mandate; size, mix and capacity of staff with knowledge-brokering responsibilities; size of budget and mix of funding sources for knowledge brokering; approach to prioritizing activities and accepting commissions/requests; location within another organization or network; collaboration with other organizations; and functional linkages with policy-making and stakeholder organizations.

- 11. Describe other innovative and/or influential organizational models that are being used in the country or region your organization serves, including:
 - why each organizational model is innovative and/or influential, and
 - how long and how extensively the organizational model has been used.

Provide descriptions of each organizational model that can be shared.

12. Describe whether and how features of the national. European and international context influenced the choice and perceived effectiveness of particular features of the organizational model or combination of features, and especially whether the organizational model places mechanisms within a policy-making institution or outside of it. In thinking about perceived effectiveness, please consider the acceptability, use and impact of mechanisms (at the level of the organization and of the country or region your organization serves).

See handout 2 as a prompt for this question.

Monitoring and evaluating knowledge brokering

- 13. Describe your organization's approach to monitoring and evaluating knowledge brokering, including:
 - whether a feature or combination of features is innovative and/or influential
 - why the feature or combination of features is innovative and/or influential, and
 - how long the current appraoch to monitoring and evaluation has been used and why it was last changed.

Provide descriptions of the approach to monitoring and evaluation that can be shared, as well as any monitoring and evaluation reports (or findings from reports) that can be shared.

Handout 5 - "Features of the approach to monitoring and evaluation currently in use" - will be provided during the interview. The handout lists features of approaches to the monitoring and evaluation of knowledge brokering that may help you to describe a particular feature or explain why it is innovative and/ or influential.

- 14. Describe other innovative and/or influential approaches to monitoring and evaluating knowledge brokering that are being used in the country or region your organization serves, including:
 - why each approach is innovative and/or influential, and
 - how long and how extensively it has been used.

Provide descriptions of each approach that can be shared.

15. Describe whether and how features of the national. European and international context influenced the choice and perceived effectiveness of the approach to monitoring and evaluating knowledge brokering. In thinking about perceived effectiveness, please consider the acceptability, use and impact of mechanisms (at the level of the organization and of the country or region your organization serves). See handout 2 as a prompt for this question.

Follow-up

16. Can you suggest individuals within your organization, or in other knowledge-brokering organizations, or key policy-makers and stakeholders, who might be able to provide additional insights on some or all of the questions asked in this interview?

Final checks

- 17. Interviewers, ensure that you have requested:
 - · examples of information-packaging mechanisms
 - · descriptions of interactive knowledge-sharing mechanisms
 - descriptions of the organizational model
 - descriptions of the monitoring and evaluation approach (and/or monitoring and evaluation reports), and
 - names (and contact information, if applicable) of others to be interviewed about the organization.

Preparing for the case studies *** for use in Belgium, England, Norway and Spain only ***

- 18. To assist with the final phase of the study, describe at least three policy processes (ideally completed ones) with which your organization has intersected over the last five years. Please also consider other knowledge-brokering organizations in the country or region your organization serves and how they have intersected with the same policy processes. Some types of policy processes to consider are:
 - budget setting
 - · post-election strategy development, and
 - reaction to political/external developments.

Alternative ways of categorizing possible policy processes for consideration include:

- functional categories (i.e. roles or services performed for society or the sector, such as governance arrangements, financial arrangements, delivery arrangements and programme content);
- intentional categories (i.e. purposes, goals or objectives);
- population-focused (i.e. actions and statements that benefit or harm particular groups); and
- programmatic (i.e. part of a package of similar or related policies).

- 19. For each process, identify:
 - key documents that could help us to understand the process and what influenced it (including the role of your organization); and
 - key individuals who could help us to understand the process and what influenced it (including the role of your organization).
- 20. Identify one or more **individuals in the organization** who can help to locate these key documents and the contact information for key individuals.

Additional final checks for case study preparation

- 21. Interviewers, ensure that you have requested:
 - names (and contact information, if applicable) of others to be interviewed about the organization, and
 - for each policy process key documents and contact information for key individuals.

Appendix G

Handouts for the site visits

This is a copy-edited version of the original study instrument, but no substantive changes have been made.

Handout 1 Attributes of information-packaging mechanisms that may help to describe a particular mechanism or to explain why it is innovative and/or influential

Attributes of information-packaging mechanisms	Innovative or influential attribute?
How the information is prepared	
Targets (or appears to target) policy-makers as a key audience	
Originates from a research project (i.e. primary research)	
Originates from a systematic review (i.e. a review of the research literature that takes steps to be systematic and transparent in identifying, selecting, appraising and synthesizing studies, as opposed to a narrative review in which it is not clear which databases were searched, what inclusion criteria were used, what data were extracted, etc.)	
Originates from a meeting with policy-makers or stakeholders	
Originates from collation of research-related products or activities	
Originates from an issue raised by policy-makers	
Focuses on a problem or policy objective	
Presents options for addressing a problem or achieving a policy objective	
Offers implementation considerations when addressing the policy problem or when achieving the policy objective	
Reviewed prior to publication by members of the target audience (i.e. not just researchers)	
Other – please describe (e.g. frequency, responsiveness):	
How the information is packaged	
Uses language that is clearly designed to be accessible for policy-makers (e.g. free of scientific jargon)	
Follows a graded-entry format (e.g. key messages, possibly an executive summary, and a full report)	
Highlights decision-relevant information explicitly (e.g. benefits, harms and costs of options)	
Other – please describe (e.g. many formats for the same information, produced by a team that includes a journalist):	
How wider use of the information is supported	
Online commentaries or briefings about the information product provided by representatives of its target audiences	
Option to sign up for an e-mail alert/listserv when new products are posted online	
Other – please describe (e.g. personalized briefings, deliberative dialogues):	

Handout 2 Features of the national, European and international context that may have influenced the choice and perceived effectiveness of mechanism(s)/model

Please consider the choice and perceived effectiveness (including acceptability, use and impact) of mechanisms/models at the level of the organization and the country/region the organization serves, for any of the following:
 a particular information-packaging mechanism or combination of mechanisms;
 a particular interactive knowledge-sharing mechanism or combination of mechanisms;

- the relative balance between local and external knowledge-trokering mechanisms;
 the relative balance between information-packaging mechanisms and interactive knowledge-sharing mechanisms;
- the relative balance between interactive knowledge-sharing mechanisms that engage both policy-makers and stakeholders and mechanisms that engage policy-makers only;
- particular features of the organizational model (or combination of features) currently in use (at the level of the organization and the country);
- whether the organizational model places mechanisms within a policy-making institution or outside of it; and
 particular features of the approach to monitoring and evaluation of knowledge brokering.

Features of the context	Influenced choiceeffectiveness of mechanism(s)/model?
General features of the national policy-making context	
Languages spoken (especially whether English is spoken, given that so much health systems information available globally is written in English)	
Openness, including the ease with which ideas and information are disseminated	
Size (e.g. population)	
Affluence (e.g. gross domestic product [GDP] per capita)	
Other – please describe:	
National policy-making institutions and processes	
Federal versus unitary state	
Single-party versus coalition government	
Turnover within the governing party/coalition	
Political party versus civil service influence over decision support within government	
Centralized versus decentralized decision support within government	
Turnover within the civil service	
Role of professional associations (e.g. medical associations) in policy-making	
Open versus closed policy networks	
Size of policy-making institutions (relative to the size of the policy-making context)	
Financial resources available to policy-making institutions (relative to the affluence of the policy-making context)	
Donor dependence of policy-making institutions	
Other – please describe:	
Nationally focused research institutions, activities and outputs	
Number of research institutions doing similar work	
Number of health system-focused systematic reviews produced in the last year by an author based in the policy-making context	
Other – please describe:	
Stakeholder capacities and opportunities for engagement	
Internet connectivity/usage	
Civil society engagement	
Stakeholder engagement	
Media freedom	
Other – please describe:	
European policy-making context	
Nature of relations within and across European subregions (competitive/adversarial or importer/exporter of innovations)	
Number of European-focused research institutions doing similar work	
Other – please describe:	
International context	
Existence, visibility and use of 'one-stop shops' for research evidence internationally	
Other – please describe:	

Handout 3 Attributes of **interactive knowledge-sharing mechanisms** that may help to describe a particular mechanism or to explain why it is innovative and/or influential

Attributes of interactive knowledge-sharing mechanisms	Innovative or influential attribute?
How interactive knowledge-sharing is focused	
Targets (or appears to target) policy-makers as a key audience	
Targets (or appears to target) stakeholders involved in, or affected by, decisions arising from the mechanism	
Originates from a research agenda-setting process	
Originates from a research project (i.e. primary research)	
Originates from a systematic review (i.e. review of the research literature that takes steps to be systematic and transparent in identifying, selecting, appraising and synthesizing studies, as opposed to a narrative review in which it is not clear which databases were searched, what inclusion criteria were used, what data were extracted, etc.)	
Originates from collation of research-related products or activities	
Originates from an issue raised by policy-makers	
Originates from a training need raised by policy-makers	<u> </u>
Focuses on a problem or policy objective	
Presents options for addressing a problem or achieving a policy objective	
Offers implementation considerations when addressing the policy problem or when achieving the policy objective	
Other – please describe (e.g. frequency, responsiveness):	
How interactive knowledge-sharing is organized	
Timed to relate explicitly to a policy-making process or to requests from policy-makers	
Involves closed list of invitees	
Involves pre-circulation of information products	
Includes rules about whether and how comments can be attributed	
Involves presentations by an expert	
Involves questions and answers targeted at an expert	
Involves policy-maker commentaries on an expert's input	
Involves a dialogue where each participant has the potential to contribute equally to the discussion	
Occurs through in-person interactions	
Occurs through synchronous online interactions	
Occurs through asynchronous online interactions	
Other – please describe:	
How wider use of the interactive knowledge-sharing outputs is supported	
Products created based on the knowledge-sharing interactions	
Option to sign up for an e-mail alert/listserv when new interaction-related products are posted online	
Other – please describe:	

Handout 4 Features of the organizational model currently in use

Features of the organizational model for knowledge brokering	Innovative or influential feature?
Role of policy-makers in organizational model's governance and management (e.g. located within government, director appointed by government, and staff paid by civil service grade; armslength agency with independent board comprising policy-makers from several ministries and stakeholders such as insurance funds, and with a formal agreement with a policy-making body)	
Bylaws or other regulations that describe and secure independence	
Size, disciplinary mix, and knowledge translation expertise of staff	
Size of budget, contributions of national and regional policy-making authorities to the budget, and contributions of competitive peer-reviewed funds to the budget	
Approach to setting its agenda or annual programme of work (e.g. 30% directed by government and 70% set at the discretion of the director; formal prioritization process)	
Location within another organization (e.g. academic institution, scientific academy, foundation, think tank, disease-specific association, professional association, science and technology policy body, government, international agency) or network	
Use of rapid-response functions, exchange programmes, and other efforts to support responsive relations between researchers and policy-makers	
Public availability of its working procedures (e.g. approach to priority setting, data collection, analysis, review)	
Functions in more than one language	
Other – please describe:	

Handout 5 Features of the approach to monitoring and evaluation currently in use

Features of the approach to monitoring and evaluation of knowledge brokering	Innovative or influential feature?
Focus of the evaluation (e.g. packaging, knowledge sharing, organizational model):	
Nature of the evaluation (e.g. access/use, usefulness, impact):	
Sources of data for the evaluation (e.g. media coverage, citation in policy documents, independent evaluations of impact on systems and policies):	
Context for the evaluation (e.g. self-monitoring, internal evaluation, formal external evaluation):	
Efforts to attribute impacts to the organization and/or to specific mechanisms used by the organization:	
Other – please describe:	

Policy makers need to access up-to-date and high-quality health system information. Stakeholders may try to influence health policy as well as make decisions within their own area of work. Both groups want easily obtainable and clear evidence based on systematic and transparent research methods. Knowledge brokers (including researchers) want to know how to best communicate to decision-makers and need information about policy priorities in order to inform policy processes and share health system information effectively.

The purpose of this book is to spark innovation in knowledge brokering and to encourage debate on how information is prepared and how it will be understood and used. Part I looks at knowledge brokering from different vantage points and part II describes knowledge brokering in action.

It is hoped that this book will give health system policy-makers, stakeholders and researchers a clear understanding of knowledge brokering and its implications for the organization and management of knowledge-brokering initiatives.

This book results from a study on knowledge-brokering practices in Europe that was undertaken between 2009 and 2011, called BRIDGE (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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Observatory Studies Series No. 36



