

Best practice groups: A unique method of translating knowledge into practice at a multi-site rehabilitation facility

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Introduction: The challenge of translating knowledge into practice is amplified when organizations are composed of multiple programs and geographically-separated sites. Successful strategies to accomplish this must be creative, in order to bring together networks of therapists who might not normally work with each other. This is an analysis of a best practice strategy that has been successful over the past seven years at a multi-site facility. **Objectives:** This purpose of this paper is to describe the use of best practice groups as a mechanism to translate knowledge and advance practice in a multi-site facility. **Description:** Ten years ago, Toronto Rehabilitation Institute was formed from five existing rehabilitation centres. Fifty-two occupational therapists practicing in diverse locations and rehabilitation programs (spinal cord, neurology, geriatrics, orthopaedics and complex care) came together at a retreat in 2002 to determine how to best advance practice. The result of this meeting was to formulate four best practice groups that would span across the sites. These included occupational performance evaluation; low vision/visual perception; wheelchair; and return to driving groups. Today we continue to have the original best practice groups and have added return to work; cognition; and splinting groups. Each best practice group uses unique approaches to attain advanced practice goals. **Discussion:** Utilizing strong champions, setting goals annually, presenting best practice group accomplishments, and developing successful processes which simplify and ensure the success of therapeutic interventions are the key factors that have contributed to the success of these groups. Staff turn-over and the amount of support time for this professional development are challenges that have been faced. **Conclusion:** The use of the best practice group strategy has been instrumental in advancing the practice of the occupational therapists from diverse sites. All practice areas have made significant achievements. The development in some practice areas has resulted in professional presentations, workshops, and research linkages, which surpassed our earliest expectations for these practice groups. **Contribution to practice:** This strategy for knowledge translation and practice development has been successful in this multi-site setting. The lessons learned from this approach could serve as a model for larger communities of practice.