Poland's experiences with EVIPNet Europe's knowledge translation (KT) tools – making use of synergetic effects
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**Background**
In 2016, the Polish Government started to develop a new legislation to improve national primary health care (PHC). This was seen as a window of opportunity to demonstrate the importance of a holistic approach to using evidence in the healthcare system reform process. Two KT mechanisms, the evidence brief for policy (EBP) and policy dialogue (PD), were implemented to facilitate the uptake of evidence in decision-making.

**Methods**
A multidisciplinary team was convened to develop an EBP on PHC improvement. The team identified, retrieved and appraised relevant global and local evidence, synthesised the literature and examined it for local applicability. Related benefits, damage, equity and costs were also taken into account. This EBP was further discussed at a PD complementing the research evidence identified in the EBP.

**Results**
The EBP "Optimizing the role of general practitioners to improve PHC in Poland" proposed three options to address the identified problem: (1) develop a list of indicators measuring the effectiveness of general practitioner (GP) practice, (2) modify how GPs are remunerated to include target-based incentives, and (3) promote the use of PHC guidelines for prevention/promotion/education/treatment. The PD - the very first of its kind in Poland - mobilized all key national PHC stakeholders. The brief and its options were deliberated and their suitability for future policy implementation confirmed.

**Conclusions**
In Poland, EBP and PD were shown to beneficially complement each other. Whereas the EBP provides reliable research evidence, the PD aims at validating the viability of the proposed solutions by tapping into the tacit knowledge of experienced PHC stakeholders, increasing the likelihood of research uptake.