



ARC Knowledge Mobilisation Strategy

Vision: By 2028, ARCs will be recognised as international leaders in knowledge mobilisation, ensuring evidence is meaningfully integrated into public health, health, and social care decision-making. Our work will drive policy, practice, and system change, improving health and social care.

Mission: We (ARCs) undertake applied health and care research and evaluation, using knowledge mobilisation (KM) approaches to increase visibility, accessibility, and use of evidence. Through collaboration, co-production, and capacity building, we deliver impactful, sustainable change at local, regional, and national levels.

KM Strategic Goal	KM Within (local ARC KM activity)	KM Between (Cross-ARC KM activity)	KM Beyond (KM beyond ARC Network)
Goal 1: To increase the visibility, accessibility and usability of evidence aligned with regional and national priorities	<ul style="list-style-type: none"> Strengthen local KM strategies with shared best practice, utilising evidence from multiple sources Generate KM case studies and rapid evidence reviews Build KM into all research and evaluation projects Maintain local evidence repository of ARC projects and outputs. 	<ul style="list-style-type: none"> Develop cross-ARC Knowledge Sharing Platform (Internal central repository of ARC projects, case studies, KM products, evidence reviews) Coordinate and support joint working conducted by groups of ARCs with common interests/ themes (where possible, aligned with health and care policy) 	<ul style="list-style-type: none"> Create a visible and accessible Webspace to support the ARC KM Programme. Host decision-maker round tables/ policy clinics that bring ARC researchers together with policy makers and practitioners. Policy Briefing Series: short, high impact, tailored to need Embed KM within ARC Communications and Dissemination Strategies
Goal 2: To build capacity, capability and shared infrastructure to effectively mobilise knowledge	<ul style="list-style-type: none"> Develop local KM role profiles and competencies Establish local KM leadership (e.g. KM Fellows/ Champions, wider system roles) Provide KM training 	<ul style="list-style-type: none"> Establish KM Fellows Network Develop KM Resource Library Support, and signpost to, KM training approaches and materials. Establish an ARC KM National Evaluation Framework 	<ul style="list-style-type: none"> Convene a national KM Community of Practice Publish methodological guidance to strengthen KM evidence base
Goal 3: To create the systemic conditions in which evidence uptake in policy, practice and strategy is maximised	<ul style="list-style-type: none"> Implement Local KM strategy that reflect system/regional priorities Enhance bi-directional system and cross-sector partnerships Advocate for KM Specialists on regional decision-making groups Strengthen regional research and innovation ecosystems 	<ul style="list-style-type: none"> Facilitate cross-regional ARC collaborations on shared priorities (where possible, aligned with health and care policy) Share 'Pathways to Influence' from the ARC Network to encourage cross-ARC learning (e.g. impact case studies) 	<ul style="list-style-type: none"> Establish strategic partnerships to influence change in practice and policy Showcase ARC 'Evidence into Practice' exemplars that illustrate conditions/ mechanisms for evidence uptake and adaptation