

KM by numbers: a beginner's guide to getting started with KM in your organisation

KfH Leadership Programme KM Project

Alison Day, Ayo Ogundipe, Carol McCormick, Chris Johns, Kaye Bagshaw, Samantha Unamboowe, Tim Jacobs



The KM Project Team

How did we get here?

As part of the Leadership Programme we were tasked to complete a project:

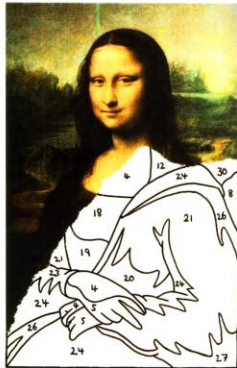
To develop a model that can be used by LKS to encourage the capture, storage and sharing of knowledge in an organisation to support service improvement and innovation

We carried out scoping and identified national databases of innovations and best practice but we wanted our model to support knowledge sharing at a local level

The project started as a request to develop a database to facilitate people to people connections supporting innovations and service improvements. but the scope of the project grew to consider how you would implement capture, storage and sharing of knowledge in an organisation. At the same time KM became a central theme of the Knowledge for Healthcare Framework and we worked with newly formed KM working group agreeing to test elements of the KM toolkit.

We all regarded ourselves as KM novices but working on the project has given us an opportunity to improve our own knowledge and skills around KM and put into practice some of the elements of the wider leadership programme.

So to today...



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We are hoping that by the end of the session today you will have your own template of KM things to try.

We will share our experiences and we will ask for your feedback about the model.

Learning Outcomes:

- Know more about Leadership Programme
- Know more about KM model
- Produce an action plan of KM things to try in own organisation



So where are you with KM?

Dan Mason
Conversation - three women talking
Charming bronze statue in Montreal old town
<https://www.flickr.com/photos/masondan/3881873678>

How established is knowledge sharing in your organisation?

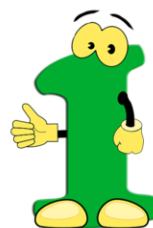
How much has your service (library & knowledge services) been involved?

Discussion - KM activity

Engagement: Kaye's Story

Who are you going to approach in your organisation to discuss KM?

What is the business critical issue your organisation is currently facing that KM can assist with?



KAYE: Engagement with Chief Nurse, misunderstanding about terminology, conversation led to greater understanding about LKS services. Perseverance is key. Sent leaver's toolkit to HR Director – no response followed up with PA and now keen to pilot.

In two's start to answer questions on action planner

Choose your KM tool

Turn your action planner over and put a sticker next to the KM tool you want to trial or find out more about

Let's play BINGO





Allow 3 minutes for sticker selection

Call out random KM tools for people, when someone has all 3 they shout BINGO and table get some sweets


A wide range of tools from toolkit selected to find out more about

Adapt the tool: Alison's Story

 East Dorset
Library and Knowledge Service

 Poole Hospital
NHS Foundation Trust

**Knowledge Retention & Transition
Quick Tips for
Leavers & their Managers**
Adapted from the Leavers Toolkit prepared by
Surrey & Sussex Library & Knowledge Services
Last updated 23/9/2016




Getting Started

Start thinking about your knowledge transfer as early as possible and get dates for activities/events in diaries with colleagues early on.

1. Identify what you think are the key knowledge areas you are taking with you when you leave.
2. Ask team/colleagues what they think they would like to know from you before you go – it may be different!
3. Agree with line manager the priorities to focus on.
4. Agree with line manager reasonable actions for each priority. These activities may include a combination from the toolbox below.
5. If possible, identify a key colleague to help and to facilitate your knowledge transfer activities.
6. Create your 'legacy'. Capture output from the activities and store in a central area accessible to all the team.

A toolbox of knowledge transfer activities:
(Select as appropriate, don't try to do them all)


What do others need to know about my job? – create a table of the key priorities relating to your job and identify who needs to know this information and how you are going to give it to them.

 YOUR TABLE
Knowledge preferred


Create a physical handover folder which you can put a copy of all key documents (with file path added in the footer) and a printed copy of any of the documents you created from the list below.


Emails 75% of organisational knowledge is transferred via email and is lost when your email account is deleted when you leave. Go through your mailbox thoroughly and collate the ones you know will be useful to colleagues. Save as actual document.


My Key Contacts – draft a key contacts list, add you use to get your job done. Internally, externally. Annotate with useful background context.


 Contacts list.doc

Calendar of my job – create table of activities/events that take place during a standard year and note what must happen when and who is involved etc. either calendar list or a handover sheet for each work area

 HANDOVER TOOL
MASTER TOOL

 East Dorset
Library and Knowledge Service


 Poole Hospital
NHS Foundation Trust



Electronic documents/files transfer to your team's shared drive. Prune and Organise. You could also leave colleagues a guide to your unique file structure. The guide could be added to your prioritisation plan (above).

'Work in hand' – draft a brief position statement for each on going/unfinished area of work. The position statement could be added to your prioritisation plan (above).


Useful resources – draft a list (not too long) of the resources you use to get your job done (favourite databases, websites, books etc.)

 Useful
Resources.doc

Handover guides – write up 'How to', 'Best practice' and procedure guides.

My FAQs – write up the Top 5 questions you are always/repeatedly asked by colleagues.

Elicitation interview – 1:1 with line manager or other appropriate colleague on specific area of knowledge to draw out tacit knowledge (what's in your head). You may find the questions in the facilitation tool helpful.

 100 Questions to use
in a subject review


'Audience with...' – this is a CLA session with your immediate (and sometimes wider) team, and can be linked to a last team meeting. Colleagues get to ask you anything they want to know. Prepare the team in advance to think of questions. Works best if made an informal social event – i.e. over tea & cakes.

Knowledge Exchange – quick and dirty transfer of essential knowledge. You and the team in a room, for an hour. Team draft top 10 things we want to know about X. You simultaneously draft Top 10 things you need to know about X. Bring lists together, work through and answer questions there and then. Ensures the crucial knowledge is exchanged in a short space of time, no lengthy documenting. Team members are responsible for capturing their own notes.

Masterclass – in-depth training for a group of people in a specific area of knowledge. Prepare an annotated PowerPoint presentation to leave for colleagues reference after the event.

Coaching/On passing – arrange 1:1 sessions with key colleague.

Don't forget if you would like some assistance with using any of these knowledge transfer and retention tools please contact a member of the Library & Knowledge Service Team library@poole.nhs.uk who will be happy to help.



ALISON trialling Knowledge retention and transition for high profile leavers – piloted with Dir Nursing, Matrons and Assoc Dir Nursing – feedback led to incorporation of an additional tool – next step to get added to Trust leavers procedure and share with Heads of Department

Knowledge Capture: Carol's Story

KH Leadership Programme KM Project Group

Knowledge Capture Template: Share to innovate and improve

Thank you for sharing your knowledge. We will submit your information to the in-house database where it will be made available for your colleagues to access. Please complete the following template. You can expand the boxes. If needed and include any additional information at the end such as reports or posters. Add [contact name] if you would like to discuss your input or if you need some help. Please submit your completed template to [contact email].

Name

Email

Your department

Describe your service improvement/innovation/best practice/initiative

What worked well?

What did not work well?

Who else did you involve

Lessons learned - key learning points

KM Conference Capture Template

Heading

Details

Title of session: An end to duplication in current awareness services? **KnowledgeShare, CASH** other models for collaboration

Presenters & contact details: Ben Skinner (Brighton & Sussex LHFT) & Helen Bingham (H&M)

Aims and objectives of the session:

To explain the benefits of using KnowledgeShare and CASH for producing Current Awareness bulletins. This is to help reduce duplication of work across the NHS - currently over 700 CA bulletins produced nationally. The workload producing these bulletins is also seen as unsustainable for many Trusts going forward. Some of the bulletins produced fall short on professional standards either in content, by not adding value or in design.

Description of the session:

The KnowledgeShare software provides automated CA Bulletins along with literature search requesting and allows for breaking training. Subject specific bulletins can be tailored for individual users based on user interests and are then sent out as personalised emails which contain Trust contact details. Sources for the Bulletins are secondary, not primary as it is felt that primary sources are well covered elsewhere, e.g. HCAIS alerts. Local resources can also be added. The inclusion of literature searches allows these to be turned into current awareness for other users with the same interests.

CASH is mainly aimed at Primary Care, Mental Health & Health Management and can produce RSS feeds, Newsletters and e-mails. It is also collaborative in nature.

LHNN Horizon Scanning bulletins are another option.

What did the presenter say worked well and not so well about the project/initiative?

KnowledgeShare: The number of bulletins growing has grown steadily and feedback from end users has been positive, and has included suggestions for added functionality. New developments are slow to evolve however.

How will you "capture" knowledge?

CAROL: Using knowledge capture templates at HLG and then demonstrating use at organisation

A gap was identified in sharing and storing knowledge gained by colleagues from attending conferences. Useful information and the value of this information was often not passed on to colleagues within the wider organisation and was 'lost' over time as it was not stored systematically by the organisation.

The KM toolkit was identified as providing a way of capturing this knowledge. One of the templates from the toolkit was adapted to fit the case of Conference presentations. The Template was shared amongst NHS Librarians in the North East and based on their feedback a pilot was agreed whereby they would use the template when attending the HLG conference at Scarborough in September 2016.

Feedback by the librarians will be formally given at a NE Library Managers meeting in December but sample feedback so far has been extremely positive with the form allowing for a structured sharing of the knowledge gained at team meetings.

During a meeting with the Trust's Lead in Service improvement and Innovation an opportunity was also identified for using this form within the Trust and was presented to her. The Service Improvement Lead was again very positive and has agreed that this KM template would be an excellent way of improving knowledge storage and sharing throughout the Trust, with the knowledge gained shared amongst colleagues and kept on a central database to allow wider access and access over time.

Knowledge Storage: Tim's Story

Royal Brompton & Harefield NHS Foundation Trust

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Home » Services and departments » Library » Library Services » Library » Innovations Database » RBHT Innovations Database

RBHT INNOVATIONS DATABASE

A collection of healthcare innovations by RBHT staff - sharing the results of innovative projects and research to provide information to multi-disciplinary healthcare professionals across the Trust who are seeking to implement new policies, products or practices, or to build on the ideas of others to improve the quality of their work and patient care.

If you have a project or research you would like to share please email library@rbht.nhs.uk or call ext 5947 (Hx).

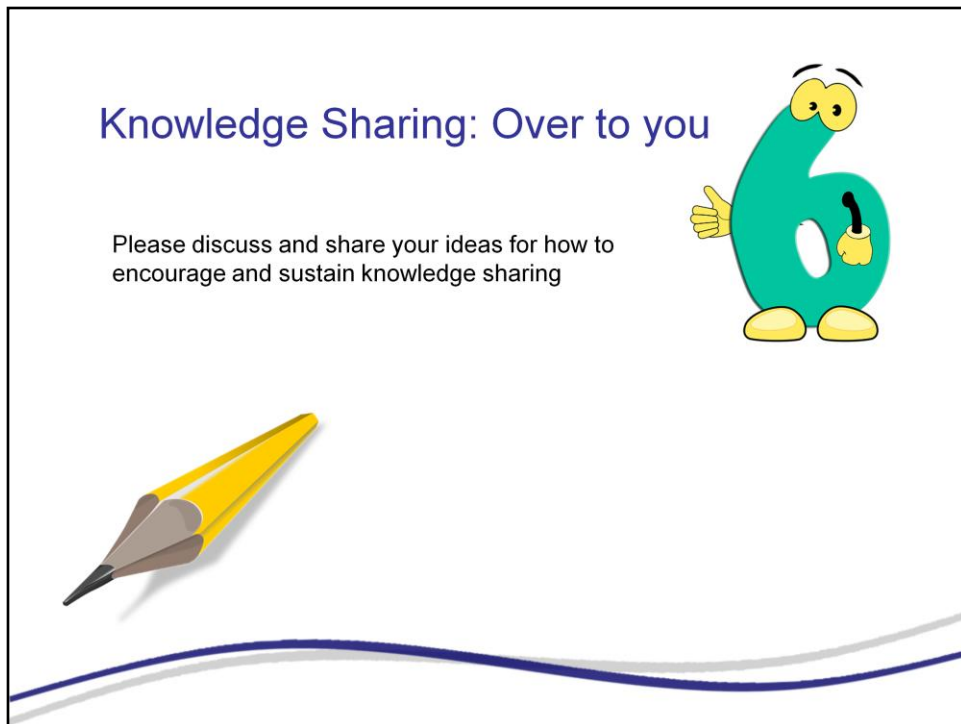
Library - RBHT Innovations

Category:

Keywords:

Title	Description
The clinical utility of rapid infection to detect infection and assess success of eradication in non-expectorating children with cystic fibrosis 2015	Early detection of organisms such as Pseudomonas Aeruginosa (PA) in CF is essential for successful eradication. Detection is difficult in non-expectorating children. We are increasingly using SI in non-expectorating children both to detect infection and assess the assess the response to an eradication intervention. Our objective, to compare culture results from SI and same day C/S and assess the impact on treatment decisions.
ECG and Handover on the Acute Cardiac Care Unit (ACCU) 2015	In ACCU, a handover sheet was implemented with all sensitive patient details to enable staff to read when coming on duty and before Meeting and Greeting the patients. This meant a full handover was not required to the beds and thereby maintained the privacy and dignity of the patients.
ECG Team Nurse Approach to Educational Boards 2015	A team approach to education boards was required on the surgical unit that would involve all staff, which would not take up too much time and also fulfil the requirements of the Nursing & Midwifery Council (NMC) required standards of keeping staff updated, through sharing skills and experience for the benefit of patients and colleagues. Creating the vision and recommendations were mapped to nurse education & the ECG.
A Holistic Approach to Compassionate Care	Within the Acute Cardiac Care Unit (ACCU) a discharge folder was to be introduced with a 'to do' checked, with all the relevant information for the nursing staff. This was

TIM Rationale to include a schema for a database – different organisations will have different needs and requirements and different systems so model will contain a schema for a database. Sam at Brompton & Harefield held an event to gather quality improvement and innovation initiatives and then produced a database for Trust intranet



ALISON Post its to gather ideas on how to share knowledge and encourage use of an organisational knowledge database (each to work with a table to facilitate/stimulate discussion, answer questions and gather feedback)

Knowledge champions in departments – one person had used this successfully but stressed the need for ongoing engagement and follow through if people leave
Randomised Coffee Trials

Problems wall – with an aim for people to select the “problem” and have a conversation based on the issue

Wrap-Up



By Anonymous, After Leonardo da Vinci
[Public domain], via Wikimedia Commons

"Do 3 things in 6 months"

Paul J Corney, Managing Partner of
Knowledge et al

<http://cilipconference.org.uk/wp-content/uploads/Man-Info-weds-11.25-1.-Corney-Paul-reduced.pdf>

ALISON You now have a template to help you to introduce KM to your organisation. What 3 things will you do in 6 months – Paul J Corney Take-Away Messages from CILIP Conference

Thank-you

We would love to hear your feedback about this workshop session, the model, KM generally or how you get on implementing your own KM by numbers – please get in touch by contacting:

Alison Day
E-mail: alison.day@poole.nhs.uk
Twitter: @alisonday3

