

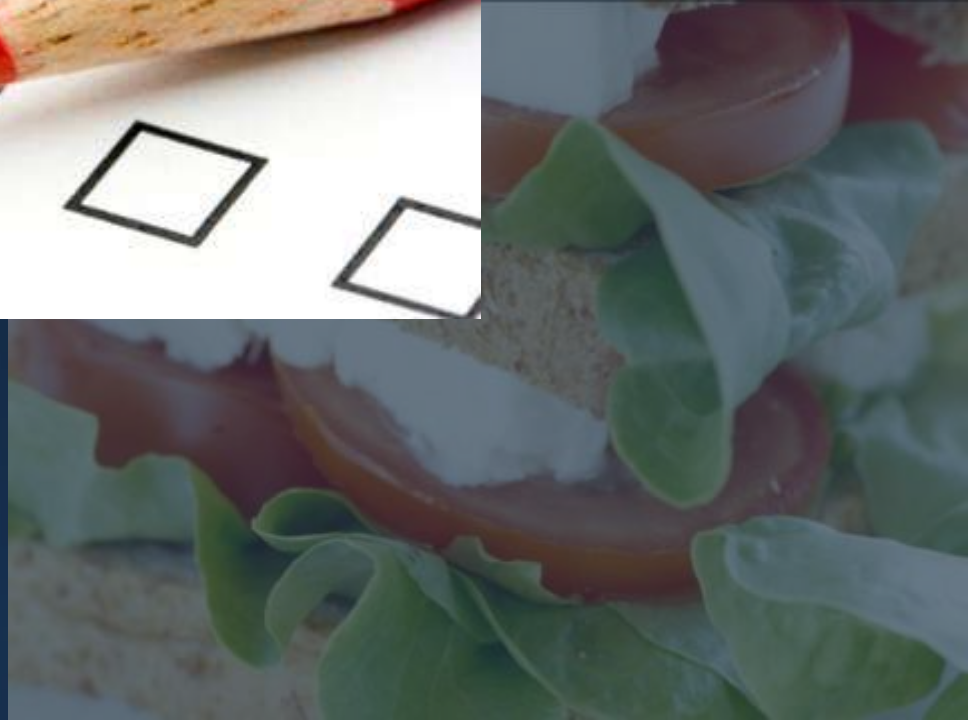
Knowledge for Healthcare: Mobilising Evidence and Organisational Knowledge

Leeds 30th June 2017

Joanne Naughton – HEE / HCLU
Caroline Storer _ NHS Digital
Dominic Gilroy - HEE / HCLU

Developing people
for health and
healthcare

www.hee.nhs.uk



Time	Topic
10.00	Welcome & Introductions.
10.30	What do we mean by 'KM'?
11:00	Refreshment Break
11.15	KM toolkit for librarians and knowledge specialists
11.30	Knowledge Cafés #1
12:00	Lunch
13:00	Knowledge Cafés #2
13:30	Signposting opportunities to build your skills
14:00	Managing organisational knowledge Introduction to the Board self-assessment tool
14.30	Refreshment Break
14:45	Board Tool Feedback
15.00	Using KM tools with the healthcare workforce
15.30	Evaluation and Next Steps

Our ambition

To bring Knowledge for Healthcare to all NHS funded organisations in England

Why?

Knowledge is a valuable asset that needs to be managed so that healthcare organisations are able to **apply** knowledge, **build** know-how and **continue** to learn in order to improve organisational efficiencies and patient outcomes

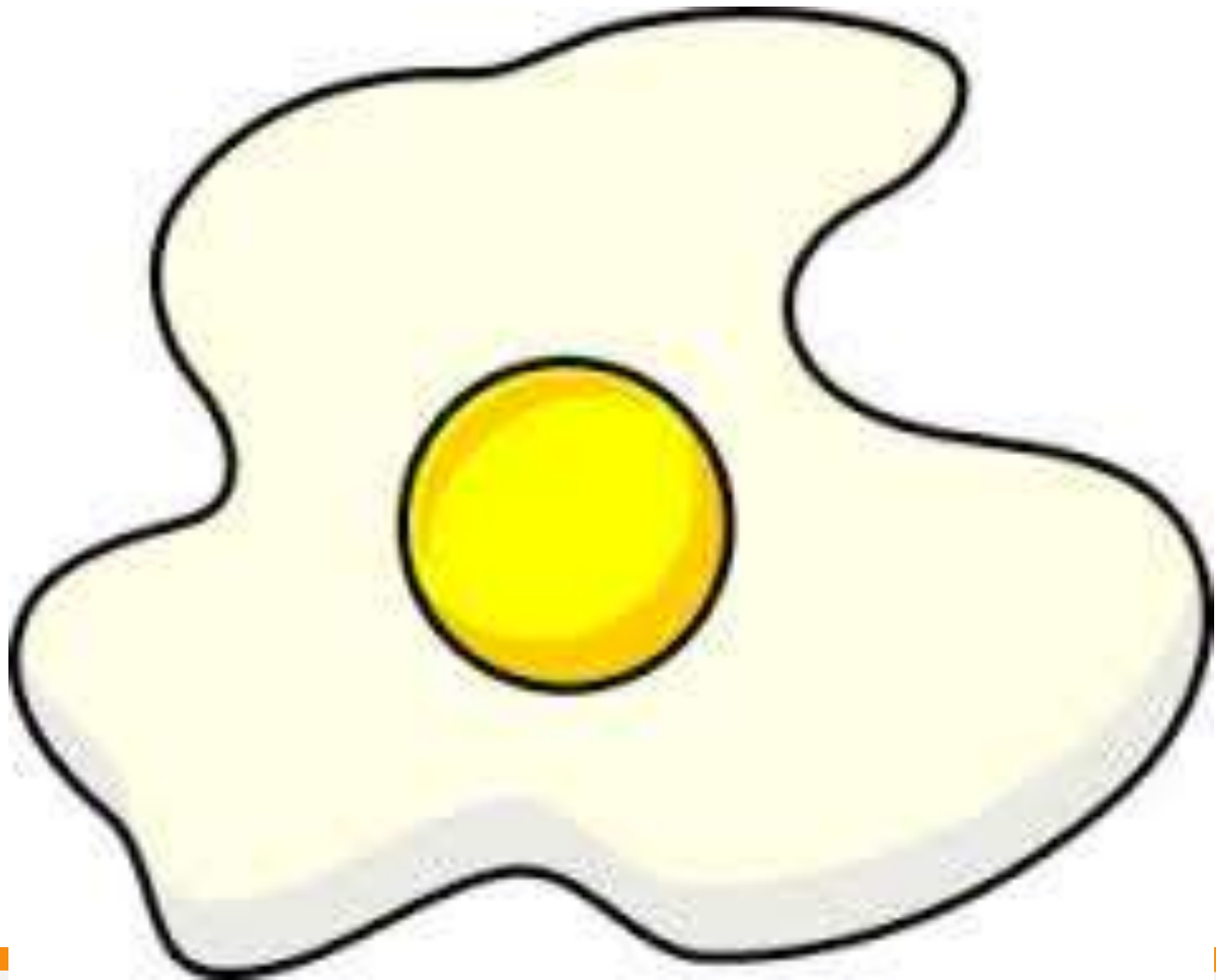


Purpose

To enable and encourage healthcare librarians and knowledge specialists to:

- Build skills and confidence in using selected tools and techniques
- better manage knowledge as a routine element of our everyday work
- collaborate on 'Knowledge Management' solutions across library services, and across internal teams
- engage our colleagues - librarians, knowledge specialists and other healthcare professionals – in better mobilising the evidence and using organisational knowledge

Introductions



Healthcare library and knowledge services are a powerhouse for education, lifelong learning, research and evidence-based practice.

Our ambition is to extend this role so that healthcare knowledge services become business-critical instruments of informed decisions making and innovation.

Professor Ian Cumming

- Knowledge for Healthcare Development Framework

Mobilising the evidence base

“Evidence does not speak for itself but needs to be mobilised at the right time, and through the right people, to make a difference in decision making.”

National Institute for Health Research, 2013

What are we contributing?

The Carter Review



How can hospitals reduce cost variations across clinical and non-clinical hospital settings in procurement, running costs, sickness and absence rates

Sustainable Transformation Plans

- **Health and Wellbeing:** Improve health outcomes and preventable diseases
- **Care and Quality:** High quality, consistent and equitable standards of care for all
- **Finance and Efficiency:** STP process as a pathway to financial sustainability as a system

Achieving evidence-based care?

There is often a large gap between evidence-based treatment guidelines and current practice. (Nolte and McKee, 2008)

In a cohort of 16,000 patients in England aged 50+, with one or more of four common Long Term Conditions, the researchers viewed quality by looking at the % of quality indicators for healthcare received by patients. (Hardcastle *et al*)

84.2% for cardiovascular disease

59.8% for depression

76.5% for diabetes; 70.9% for the diabetes 'care bundle' indicators

35.6% for osteoarthritis

Business critical

Healthcare Library and Knowledge Specialists can play a pivotal role in helping organisations to identify and seize opportunities to achieve productivity, realise efficiency savings and improve the quality of patient care. For example -

- Increase and improve the use of evidence into practice through provision of synthesised, summarised evidence and horizon scanning products
- Develop tools, processes and resources so that healthcare staff can effectively share organisational knowledge and know-how

Library and Knowledge Services Policy

HEE is committed to:

- Enabling all NHS workforce members to freely access library and knowledge services so that they can use the right knowledge and evidence to achieve excellent healthcare and health improvement.
- Developing NHS librarians and knowledge specialists to use their expertise to mobilise evidence obtained from research and organisational knowledge to underpin decision-making in the National Health Service in England

#AMillionDecisions



Joint campaign by HEE and CILIP, launched 30th January:

- #AMillionDecisions highlights the role of librarians and knowledge specialists in delivering evidence to support more than a million decisions a day across the healthcare sector.
- Raises awareness amongst health organisations that “the use in the health service of evidence obtained from research” is a legal requirement under the [Health and Social Care Act 2012](#).
- Official launch was extremely wide-reaching with over a million impressions for the #amilliondecisions hashtag



What do we mean by Knowledge Management?



Knowledge Management

*"...It's not about creating an encyclopaedia that captures everything that anybody ever knew. Rather, it's about **keeping track** of those **who know** the recipe, and **nuturing the culture** and the **technology** that will get them talking..."*

Arian Ward of Work Frontiers International

Knowledge Management

The use of knowledge in your work.

The use of resources and or people.

Using knowledge to improve care.

Knowing what we know
who, where & what
for critical information

From staff at Maidstone and Tunbridge Wells NHS Trust

Managing organisational knowledge

Mobilising knowledge to deliver on NHS priorities	
Using knowledge to inform healthcare policy	Embedding best evidence into practice
Developing an organisational memory	Supporting innovation
Making implicit knowledge explicit	Meeting the information needs of staff
Horizon scanning; keeping staff up to date	Meeting the information needs of patients
Knowledge sharing – to spread the learning	Promoting actionable knowledge tools

Case study – Calderdale and Huddersfield

First ever study to look at noise reduction on the ward: librarian instrumental in finding evidence to support successful funding-bid



“The service from the library was invaluable in the preparation of a research bid for funding, which was successful. As a result we have started a research study which will influence service development about how noise can be reduced in a ward setting to improve patient sleep quality. The service from the library was excellent.”

Felicity Astin, Professor of Nursing, Calderdale and Huddersfield NHS Trust

Working with:

Helen Curtis, Librarian, Calderdale & Huddersfield NHS Trust

Case study – Mid Yorkshire Hospitals

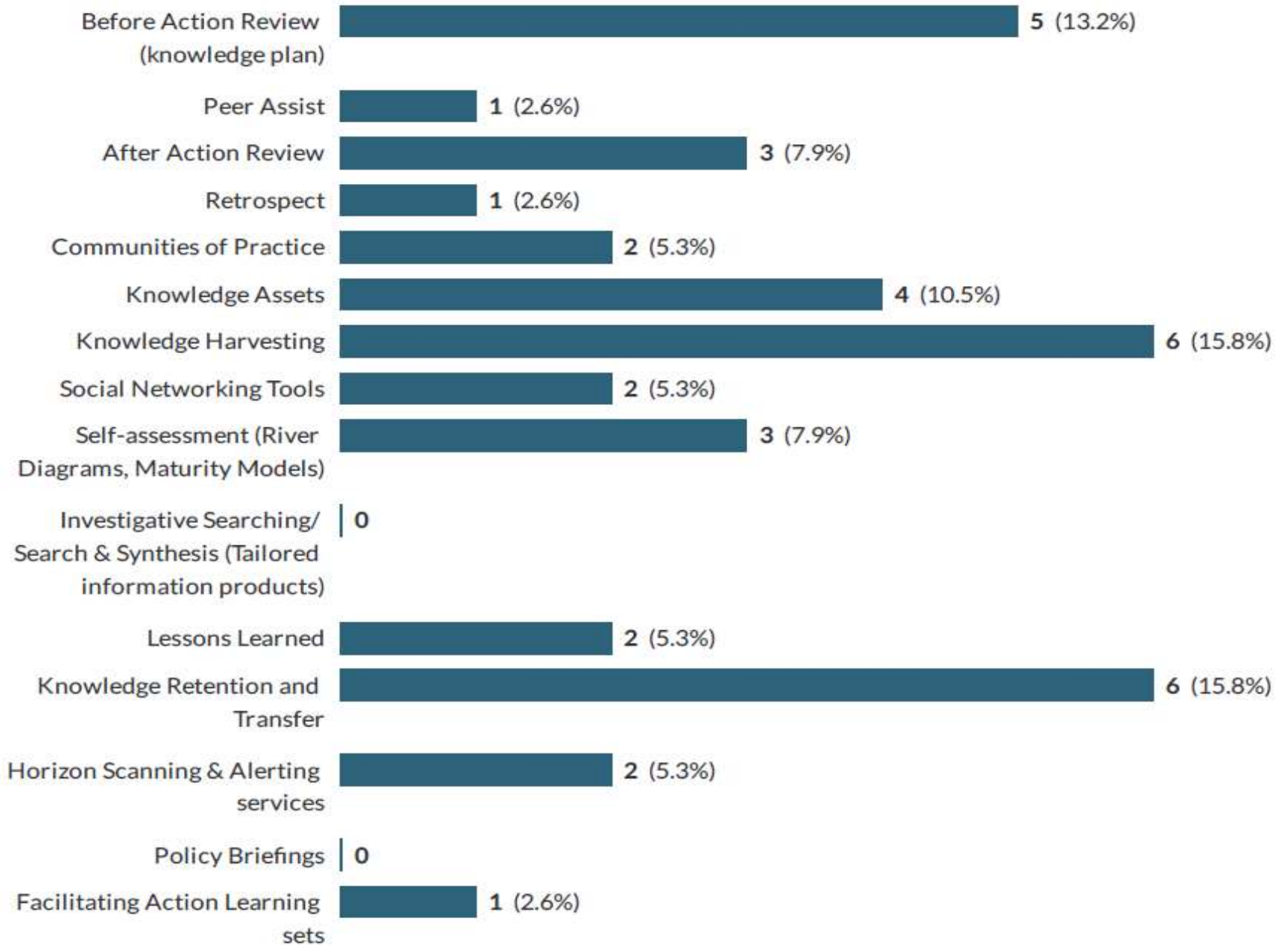
Following a service audit of routine practice in outpatient clinics some evidence emerged that the practice of physiotherapists prescribing was of great benefit to patients and the local health economy in general.

Colleagues requested an evidence search from the library to compare results and implications of supplementary prescribing and polypharmacy in secondary care.

‘Massive saving of clinical time and this is of direct patient benefit, if the library service did not carry this out then I would be looking at least several days of work to do this myself and have to cancel patient clinics’.

Adrian Robertson, Consultant Physiotherapist,
Mid Yorkshire Hospitals NHS Trust





What the questionnaire said

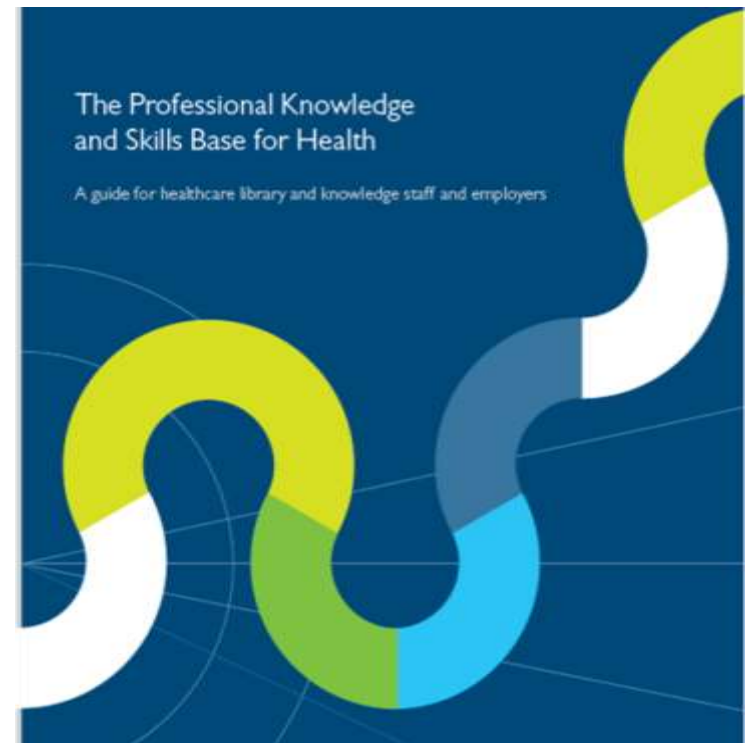
Signposting opportunities to build your skills



Professional Knowledge and Skills Base for Health

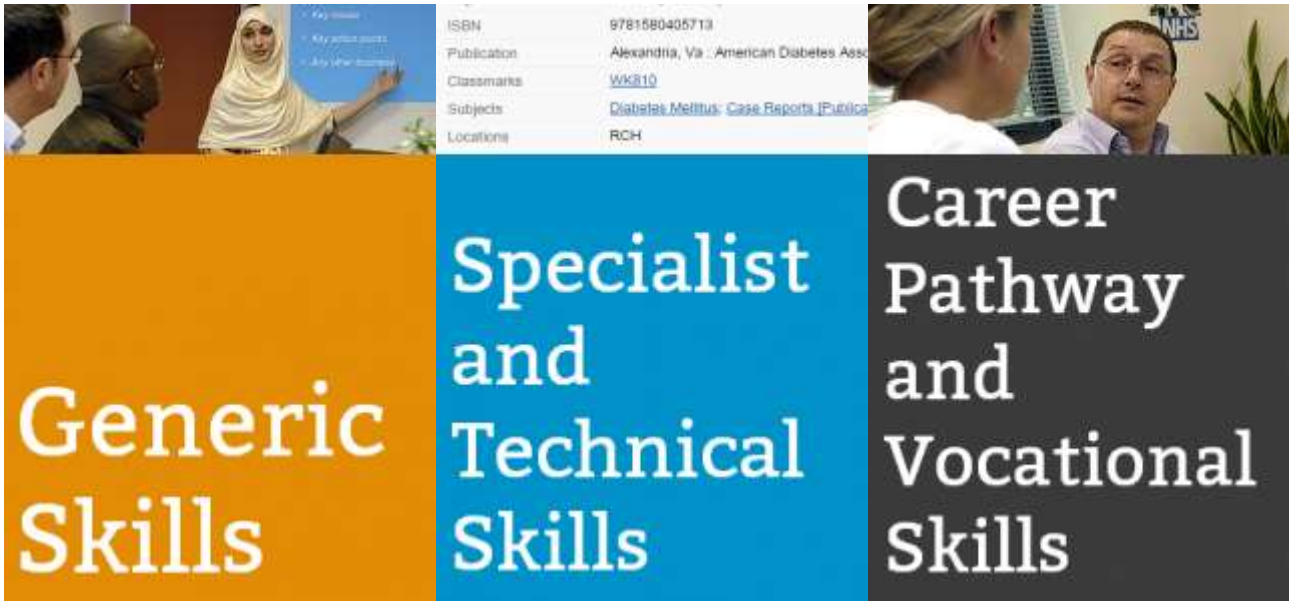


- Enriched CILIP's tool for healthcare settings
- Framework for skills analysis
- Self-assessment tool; Professional Development Plans; CILIP Registration
- Help employers understand our unique skills; appraisals
- Inform CPD programmes



The Learning Zone

Signposting learning resources to support professional development



From May 2016 –
February 2017

2,381 visitors

6,758 unique page views

Hot Topics:

Marketing and
Promotion

Advanced/ Basic
Searching

Knowledge
Management

CILIP PKSB

Critical Appraisal

Development opportunities

A wealth of opportunities and learning resources have been put in place enabling individuals to progressively enhance their skills, confidence and roles in mobilising evidence and organisational knowledge

- **Core skills**
Introducing knowledge and evidence
Everyday knowledge and evidence in health care settings
- **Expanding the core skill set**
Mobilising organisational knowledge in health care settings
- **Leadership skills**
Leading knowledge services
- **Advanced specialist skills**
Advanced KM: formal qualifications
- **Resources and Tools**

A business critical workforce

- Synthesising and Summarising – Tim Buckley Owen
 - Plus 3 follow- up packs & group sessions

“It has given me confidence when writing summaries”

“I now have a method to quickly evaluate the evidence prior to writing the summary”

- Making LKS Business Critical – Anne Gray

“This was a really useful session and introduced me to quite a few resources I hadn’t encountered before. Between the discussion of what managers want and seeing the range of documents at the end of the day, I have a much clearer idea about what is required and where I need to change my approach from that of a clinical librarian.”

Building a national community of practice for Knowledge Management

Aim: to establish a community of practice for healthcare librarians and knowledge specialists with an interest in knowledge management

Create a space in which people can share ideas and network as we expand our experience and expertise and build capability

Contact: caroline.storer@nhs.net



Northern KM Group

- Historically Yorkshire and Humber and North West
- Membership includes:
 - National Organisations: NHS England, Public Health England, NHS Digital, Health Education England
 - Acute, community and mental health trusts
 - Non NHS healthcare organisations
 - 20 members representing 12 organisations

What do you think?

- What is our driver?
- What value are we trying to create?
- How do you want to share knowledge?



Knowledge Management Toolkit



KM Toolkit

- Aim: to support LKS to fulfil the KM purpose & goals in KfH
- Task & finish group carried out scoping for good examples
- Gathered together good practice and tools
- Toolkit is to share and spread good practice and *how* to achieve the KM goals
- Not static – we still want more examples
- It will develop along with KM work in LKS

The task & finish group



Contact us: kmstories@libraryservices.nhs.uk

Toolkit – example section

Sharing Learning ← KM goal

Key activities: Making implicit knowledge explicit | Knowledge sharing – to spread the learning | Supporting innovation | Promoting actionable knowledge tools

Links to tools & techniques

Links to short case studies of real-life examples.

Includes contact details of the service, for more information

KM Activities, Tools & Techniques	Case Studies
<p>Facilitating action learning sets</p> <p><i>Implementing techniques to learn from experience:</i></p> <ul style="list-style-type: none">▪ Knowledge Harvesting▪ Knowledge Retention & Transfer<ul style="list-style-type: none">▪ After Action Reviews▪ Elicitation interviews▪ Knowledge assets▪ Rapid on boarding▪ Retrospective / Baton passing▪ Post project appraisal <p>Knowledge Plan (lessons before/before action reviews)</p>	<p>Leavers toolkit – knowledge retention & transfer</p> <p>Knowledge Capture Tools</p> <p>Healthcare professions forums – intranet chat rooms</p> <p>Knowledge Cafe</p> <p>Library Book of Revalidation</p>

The Knowledge Café

- We are going to run this session as a knowledge café
- After this introductory talk, we will break into small groups to discuss the overall question
- We will move every 15 minutes to focus on a different tool/technique
- Purpose is to share ideas about how you might use this technique or achieve a goal
- Not to 'solve' the problem outright but to share ideas and develop a way forward for each of you

Knowledge Café (cont)

- Each table has a tool/technique to discuss
- Example case studies of how other services have carried it out – you may not need these if you have enough experience within the group
- Supplementary questions are on the table

Knowledge Retention and Transfer

- Start thinking about your knowledge transfer **as early as possible** and get dates for activities/events in diaries with colleagues early on
- Identify what you think are the key knowledge areas you are taking with you when you leave
- Ask team/colleagues what they think they would like to know from you before you go – it may be different!
- A toolbox of knowledge transfer activities
- Select activities, don't try and do them all!



Things to remember

- You may want to take a moment to ensure you're all clear on the technique being discussed
- Definitions/ templates are provided to help this
- Think not only in terms of how you can carry out the technique, but who you might need to collaborate with, or how you can promote it

The Knowledge Café Question

By using the tools and techniques from the KM toolkit, how can you strengthen your ability to optimise the use of knowledge in your organisation?

Feedback

- Takeaways: what are you going to do differently/adopt in your service?
- Developing the toolkit – what else would you like to see on there? Anything to contribute?
kmstories@libraryservices.nhs.uk



Mobilising evidence and managing organisational knowledge



A self-assessment framework

To encourage NHS organisations to make better use of knowledge as an asset

Leadership	1. Nothing in Place Yet	2. In Early Stages	3. Pockets of Good Practice	4. Business as Usual
Use of externally generated evidence →	No demonstrable use of external research evidence and best practice. 1 2 3	Makes best use of the knowledge they already have. 4 5 6	Relevant research evidence has been accessed and evaluated. 7 8 9	Decisions are underpinned by robust evidence which has been evaluated. 10 11 12
Taking a strategic view of using external evidence and organisational knowledge →	There is no strategic commitment to using external evidence or organisational knowledge. 1 2 3	There is some strategic commitment to optimising the use of evidence and organisational knowledge 4 5 6	The expectation to apply evidence and knowledge is explicit and embedded within strategic documents. 7 8 9	There is a nominated strategic lead, committed resource and established effective processes. 10 11 12
Leadership to support the use of external evidence and organisational knowledge →	There is no visible leadership or support. 1 2 3	Some leaders ensure staff are encouraged and supported 4 5 6	Some leaders set an example in accessing evidence, sharing and learning from each other. 7 8 9	There is strong leadership from the top at Board level, all leaders act as role models. 10 11 12
Approach to innovation →	There is no process in place to scan and consider innovation. 1 2 3	Teams consider innovations they are aware of. 4 5 6	Some teams seek, assess and adopt innovations. 7 8 9	There is an established process to identify, review and adopt innovations 10 11 12
Approach to keeping up to date →	Staff are focussed on the internal agenda. 1 2 3	Staff make best use of news and updating services with which they are familiar 4 5 6	Staff are proactive in requesting alerts on priority areas. 7 8 9	Proactive targeted alerts are routinely distributed to the right people at the right time. 10 11 12
Demonstrating the impact →	People are sceptical as to the benefits of knowledge sharing and reluctant to commit time. 1 2 3	Anecdotal stories demonstrate that sharing knowledge adds value. 4 5 6	Some readily acknowledge ways in which access to the evidence base and sharing knowledge add value. 7 8 9	Formal processes to gather and opportunities to showcase, the impact of knowledge sharing are in place. 10 11 12

Provenance of the tool

- Built on prior work
- Extensive literature review
- Informed by colleagues in KM task and finish group
- Draft tool created
- Draft tested and refined based on feedback from librarians, executives and senior clinicians
- Tool signed off by Patrick Mitchell and Strategic Library Leads

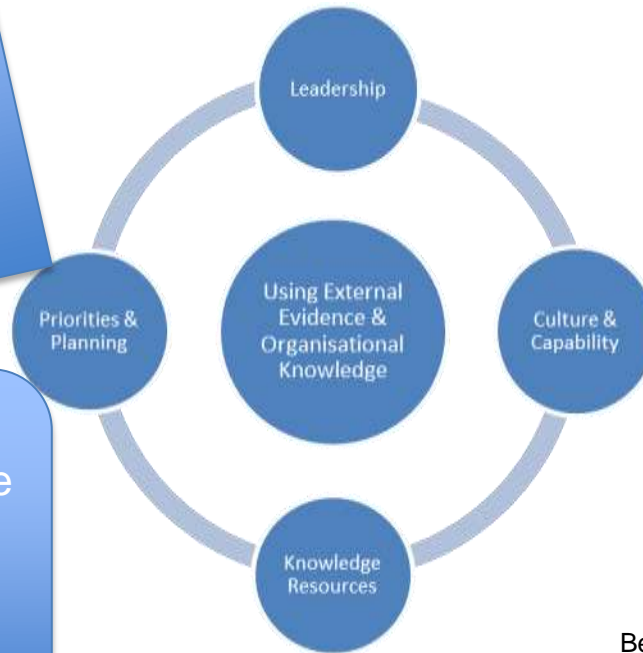
Feedback from using the tool

This has given us the opportunity to change the way we deliver care and should enable better patient outcomes.”

Nicola Shopland, Medical Division Chief Nurse, Surrey and Sussex Healthcare NHS Trust at the Medical Division Board

“Really useful as an exemplar of best practice and as a way of setting up expectations and methods to support this”

Director HR/OD Poole Hospital



“Completing the Board tool has completely change the way we will work and our use of knowledge”

“The library team should be our knowledge stewards in the same way as microbiology are the antibiotic stewards for the Trust.”

Ben Mearns Chief of Medicine, Surrey and Sussex Healthcare NHS Trust at the Medical Division Board

How to use the tool

- Ownership of the process
- Role of the Library and Knowledge Specialist as a facilitator
- Preparation for participants
- At the meeting
- Following the meeting



Activity – Priorities and planning

Read through the Tool and in pairs identify which priorities you would consider to be:

- LKS ‘business as usual’
- Extending LKS ‘business as usual’
- Identify those areas you want to know more about

Literature Searching			
Policy Briefing			
Alerting Services			
Horizon Scanning			
Local innovations forum			
Section Two: Culture and Capability			
Research enquiries			
Embedding core tools and techniques for sharing knowledge			
Knowledge sharing across communities of practice			
Tailored online resources by special interest			
Capturing and sharing lessons learned			
Information skills training to find and evaluate evidence			
Facilitating action learning sets			
Research interests database			
Knowledge retention and transfer interviews			
Knowledge cafes			
Section Three: Knowledge Resources			
Knowledge specialists aligned to decision making groups			
Knowledge specialists embedded in multi-disciplinary teams			
Production of synthesised summaries of evidence			
Institutional database of publications by employees			
Directory information			

Activity – Implementation Plan

- Have you identified the “opportunity” areas you need to find out more about?
- Who will you approach first about this in your organisation?
- Who else will you use the self-assessment tool with?
- When will you schedule facilitation of the self-assessment?
- Who else will you contact for further help?



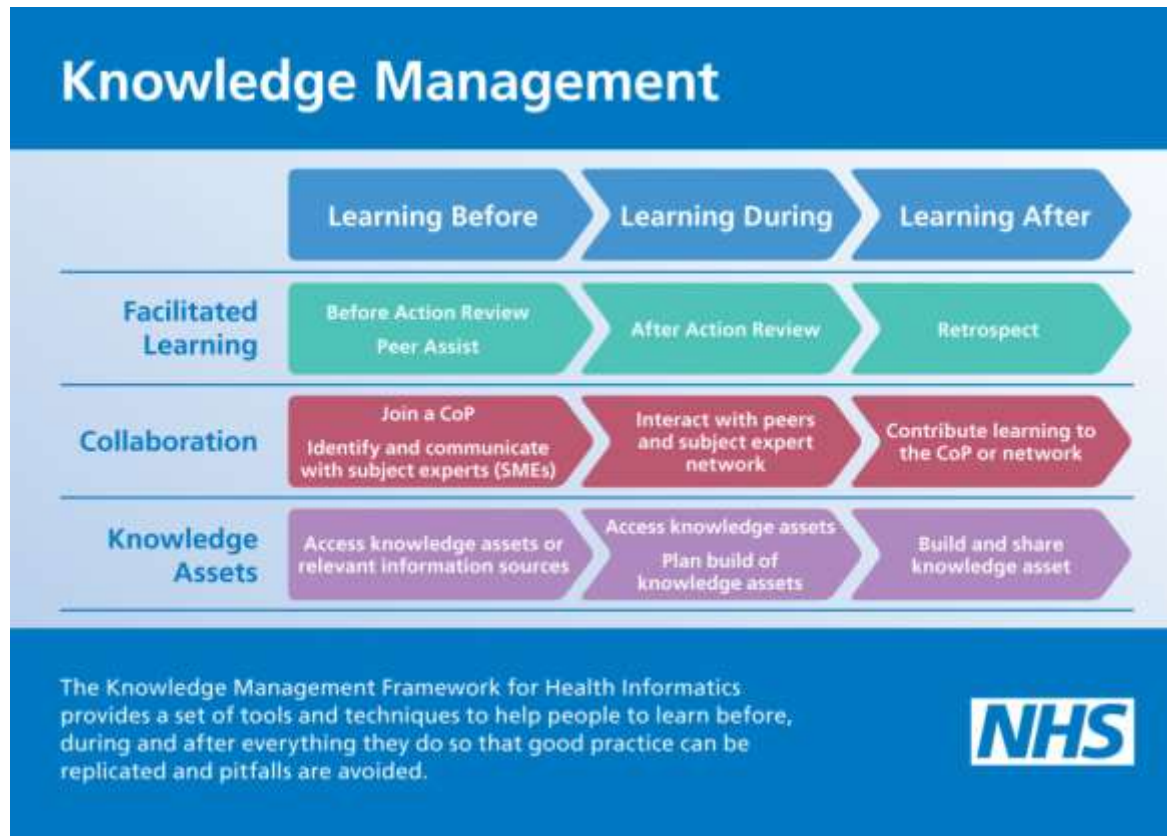
Peer Assist Technique



Mobilising the knowledge of the healthcare workforce




Promoting KM tools for all staff



Technology-enhanced learning



Search the site 

Forthcoming events

Click [Find out more](#) to display forthcoming local, regional and national events.

[Find out more](#)

Do you have an event to promote?

Let us know the details by completing and returning the [Event submission form](#)

Library innovation and good practice

Search the [database](#) for examples of new and creative projects being undertaken by library staff across Kent, Surrey and Sussex.



[Bulletin Board](#)



[Introduction to Knowledge Management](#)



[KSS staff development](#)

Communities of Practice

- The aim of the community is to support the potential of others and build capability, creating a safe space for the generation of collective knowledge.

“Communities of practice are groups of people who share a concern, a set of problems or a passion about a topic and who deepen their knowledge and expertise by interacting on an ongoing basis”

Etienne Wenger

The three elements of a community of practice

- *The domain.* ‘A community of practice has an identity defined by a shared domain of interest.’
- *The community.* ‘In pursuing their interest in their domain, members build relationships that enable them to learn from each other’
- *The practice.* ‘Members of a community of practice are practitioners.’

Etienne Wenger

Communities of Practice

- The community needs to have a sense of belonging
- The identity is important
- You need a core hosting team of at least six to start a CoP. Get support!
- Think outside the box, you don't need to stick to traditional rules!



Building a local, multi-disciplinary community of practice

- To optimise expertise and resources at local level

Understand respective contributions

Build and share knowledge and skills

Reduce duplication and reinvention

Identify opportunities to work collaboratively to support the system

- Pilot in South West



Case Study – Penine Care NHS Foundation Trust

Healthcare professions forums – intranet chat rooms

- Healthcare Professions Lead wanted input from the Knowledge Service on how to supplement the activities of the recently established Healthcare Professions networking forums
- Established chat rooms for each of the professions (e.g. allied health professions, pharmacy and nursing) as well as a general chat room for multi-professional networking.
- The chat rooms that are being used regularly provide a record and store way to manage knowledge and allow those participating in the forums to share good practice.

More information on communities of practice

Knowledge Management Toolkit – Communities of Practice

<http://kfh.libraryservices.nhs.uk/knowledge-management/km-goals-tools-and-techniques/communities-of-practice/>

E-Learning – Communities of Practice

<http://www.kssllibraries.nhs.uk/elearning/km/cp/>

NHS Scotland Quality Improvement Hub – Communities of Practice

<http://www.qihub.scot.nhs.uk/knowledge-centre/quality-improvement-tools/communities-of-practice.aspx>

Knowledge Management Postcard by NHS Digital – Collaboration

<http://kfh.libraryservices.nhs.uk/wp-content/uploads/2016/07/Collaboration.pdf>

Next Steps – Committing to Knowledge Management in the workplace



Mobilising Knowledge

1. How far are you managing knowledge for the organisation?
2. Where are the opportunities to mobilise knowledge to deliver on priorities?
3. What does your service need to provide?
4. How will you market your KM services?
5. How can you exploit new technologies to achieve the vision?



**“There are things known and there are things unknown, and
in between are the doors of perception.”**

Aldous Huxley. 1894-1963



Contact details

Dominic Gilroy	<u>dominic.gilroy1@nhs.net</u>
Joanne Naughton	<u>joanne.naughton1@nhs.net</u>
Caroline Storer	<u>caroline.storer@nhs.net</u>