

*Developing people
for health and
healthcare*

Knowledge for healthcare: a development framework



for NHS library and knowledge services in England
2015 - 2020

**} Library and
Knowledge Services**

NHS
Health Education England

Preface to the Framework

“Information will increasingly become the currency of healthcare in the future, and our ability to access, understand and interpret it at individual and population level will be a key determinant in the future success of our healthcare system.” (Framework 15, p.98)

Health Education England leads on developing a flexible NHS workforce, open to innovation and change. It is through education, and sharing knowledge, research evidence and best practice, that we inspire and inform innovation and improvements in patient care and safety, experience and outcomes. To achieve these ambitions, individuals must be supported to broaden as well as deepen their knowledge.

Our healthcare knowledge services will nurture a common culture of bringing the right knowledge to bear on decisions. Today and in the future, these services need to be flexible and active, and offer responsive, problem-based, ‘just-in-time’ and ‘just-for-me’ services.

Health Education England will build on the exemplary record of cooperation between healthcare library and knowledge services in England and on best practice internationally. We will foster greater partnership working between NHS bodies, as well as collaboration between library and knowledge services, moving towards one coherent service that delivers locally and nationally for patients, learners and the healthcare workforce.



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 decision-making and innovation.



Professor Ian Cumming,
OBE, Chief Executive

Contents

01. Introducing the strategic framework.....	p4
02. The pivotal role of healthcare library and knowledge services.....	p5
03. Our vision.....	p9
04. Partnerships are central to success.....	p10
05. Shaping our approach.....	p12
06. Our strategic approach.....	p17
07. Transforming the service.....	p19
7.A Proactive customer-focused services.....	p21
7.B Quick and easy access to relevant evidence.....	p30
7.C Effective leadership, and planning and development of the knowledge service workforce.....	p36
7.D Optimising investment in knowledge services.....	p41
7.E Delivering the vision: Metrics for success.....	p47
08. Improving quality and demonstrating impact.....	p48
09. Delivering the vision: what changes will you see.....	p50
10. Acknowledgements.....	p52
11. Sources.....	p53
12. Glossary.....	p56



1. Introducing the framework

As stewards of the country's investment in healthcare library and knowledge services on behalf of the National Health Service, Health Education England is delighted to have instigated the creation of this development framework.

Our framework has been produced to:

- Articulate an ambitious vision through which the outputs and expertise of healthcare library and knowledge staff will underpin improvements in patient care and safety, experience and outcomes through informed decision-making, and the spread of innovation.
- Invite stakeholders to work with us to transform and optimise healthcare library and knowledge services, harness new technologies, and champion service development and re-configuration, thereby extending their reach and maximising value for money.
- Guide investment and procurement decisions, the development of new information products, partnership working and service modernisation.
- Drive the redesign of roles for healthcare library staff, to improve efficiency and enable the adoption of new models of service.

It provides the basis for more detailed conversations with our partners about the challenges and opportunities ahead. It is a framework upon which Health Education England, in dialogue with our stakeholders and partners, will build an action plan – with a focus on customer care and value for money for taxpayers, achieved through better coordination, collaboration and cooperation, including through pooling resources and expertise.

We invite stakeholders to work with us to achieve shared goals.

1.1 The changing landscape of the health service in England

Framework 15 (Health Education England, 2014) is built on our understanding of the global drivers of change in healthcare, an assessment of their likely impact on health needs and the implications for the healthcare workforce. These same drivers impact on our expectations for the service delivery model of healthcare knowledge services.

- The population of England will continue to grow and older people will make up an increasing proportion of that population
- The population will have an increasing number of people with long term conditions, possibly compounded by environmental changes
- At the same time improving technologies and treatments contribute to a rising expectation of care by the population, coupled with increasing knowledge and self-care about their conditions
- The NHS workforce is 1.4 million with another 1.6 million in social care. The workforce will need to be flexible, well-educated and able to adjust to change
- There are likely to be new roles and ways of working, driven by technological changes, demographic changes and changing expectations.

2. The pivotal role of healthcare library and knowledge services

Healthcare library and knowledge services underpin all aspects of the NHS - supplying the evidence base to the service to make decisions on treatment options, patient care and safety, commissioning and policy, and to support lifelong learning, undertake research and drive innovation.

Health information for patients, carers, and the general public is also high on the agenda.

The purpose of healthcare library and knowledge services is to:

Provide knowledge and evidence to enable excellent healthcare and health improvement.

Use the expertise of their staff to ensure that NHS bodies, staff, learners, patients and the public have the right knowledge and evidence, when and where they need it.

For Health Education England as the system leader of NHS library and knowledge services, working in partnership with stakeholders, these services have a key role to play in realising the ambitions outlined in Framework 15 and in Health Education England's Mandate (Department of Health, 2014), especially in relation to:

- The importance of information – healthcare knowledge services will enable healthcare staff, and the wider health community, to access, understand and interpret information at individual and population level
- Evidence-based practice - "To continually drive up the standards of healthcare, clinical decision making must be supported by the best available evidence and good practice." (Mandate, p. 29)
- Patient expectations – knowledge services will help healthcare staff

"to meet the demands of fully informed and engaged patients and support and advise patients and carers who are not informed or active" (Framework 15, p. 69)

- The future workforce – healthcare library and knowledge services will help to equip healthcare staff with the skills to respond to and adopt evidence and innovation to enable whole person care.



2.1 Celebrating the success of healthcare library and knowledge services in England

NHS clinicians and managers will recognise that healthcare library and knowledge services have changed for the better in recent years and there are significant successes to share:

- Driving quality improvements through the use of a nationally agreed set of standards (NHS England Library Quality Assurance Framework (LQAF) England) (Health Education England Library and Knowledge Services, 2014a)
- Making a national set of online databases and electronic journals available 24/7 to all NHS staff and learners in England (the 'national core content' collection)
- Embedding knowledge professionals in teams:
 - clinical, outreach and commissioning librarians underpin best practice and patient care by providing the best available evidence, at the bedside and in the workplace
 - librarians working with Trust Boards and executive teams answer complex strategic and policy questions to inform decision making, risk management and governance
- Enhancing physical library spaces to provide modern, flexible learning environments
- Launching a national **Impact Toolkit** (Health Education England Library and Knowledge Services, 2014b) for healthcare library and knowledge services
- Identifying and spreading library and knowledge service innovation, through the national **Sally Hernando Awards**
- Implementing practical approaches to better manage organisational knowledge, bring people together with knowledge and people with people
- Collaborative working to:
 - develop and deliver development programmes for library and knowledge services staff,
 - create reciprocal document supply schemes in different areas of the country,
 - produce current awareness and alerting services.

The positive impact of NHS library and knowledge services is illustrated by the case studies that appear throughout this document



2.2 NHS - funded library and knowledge services in England – 2013-2014

Activity

215 library services* delivered via
325 staffed physical learning spaces

480,000 registered library service members
298,000 registered users of NHS-funded
electronic resources

2.2m items loaned/supplied
1.2m enquiries handled
153,000 staff trained
31,000 expert searches
plus activity involved in acquiring,
organising, and disseminating information,
and providing specialist support

*There has been a 15% reduction in the number of library services in
the past 5 years

Library and knowledge staff

1,036 whole time equivalent staff working at
local level**

Of which 594 whole time equivalents (57%)
have first or second degree level information
qualifications

14.8 whole time equivalent staff working at
Local Education and Training Board level***

** There has been a 3% reduction in staff numbers over the last year

*** There has been a 35% reduction in posts at this level over the last 3 years

Finance

£50.9m total investment:

59% is spent on staff at local Trust and LETB
level

35% is spent on knowledge resources - books
and journals (increasingly electronic) and
databases at local, LETB and national level

Main sources of funding:

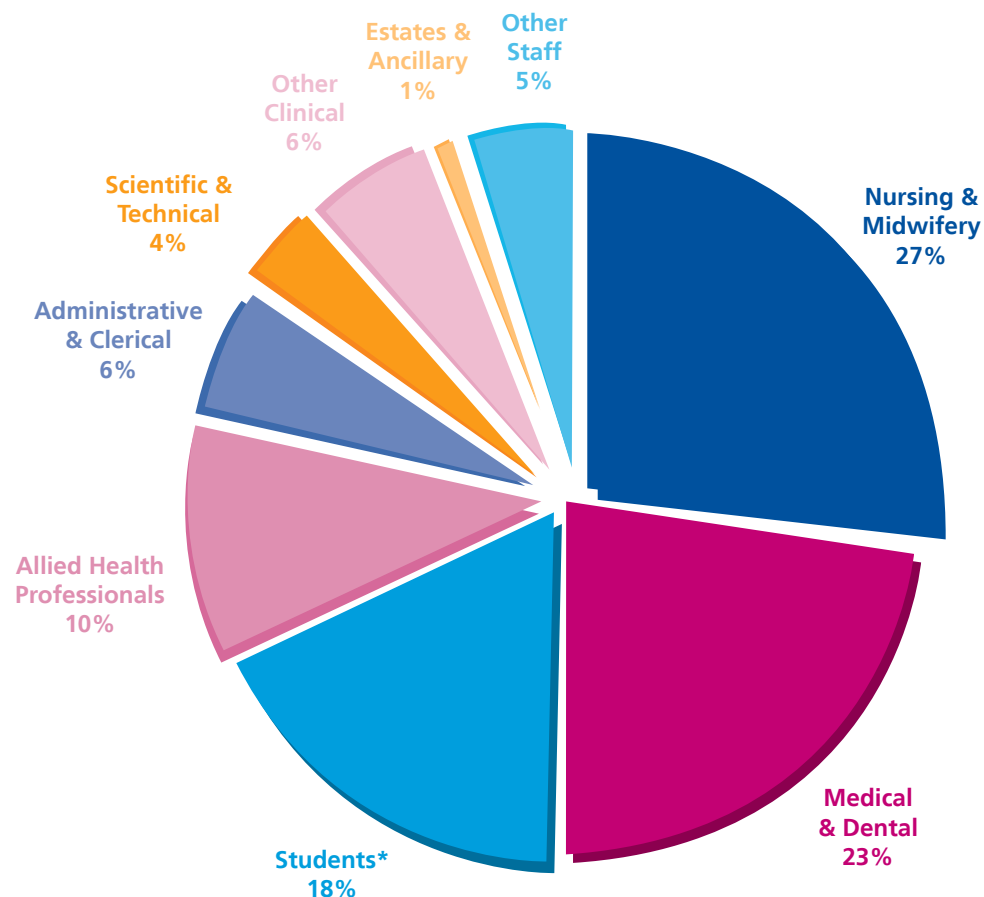
42% from education and training tariff via
Learning and Development Agreements
29% from NHS employers at local
organisation level
15% from other LETB funding (out of tariff)

See section 6.4 for more details



2.3 Key facts

Users of NHS-funded library and knowledge services in 2013-14



Source: Annual statistical returns submitted by NHS Library Services

* Students: defined in accordance with the Electronic Staff Record.
Medical Students are included in this category rather than under Medical and Dental

Key services provided by healthcare library and knowledge services

- Information consultancy
- Information skills training
- Document delivery
- Current awareness and alerts
- Digital and print collection management
- Advice on knowledge management

Impact on patient care

Collated data from use of the **Impact Toolkit** shows how information and support provided by library and knowledge services have:

Informed and/or led to changes in:

- Diagnosis
- Choice of tests
- Choice of treatment
- Length of stay
- Advice given to patients/carers
- Quality of experience for patients/family
- Guideline/pathway development

Helped to avoid:

- Unnecessary admissions
- Patient mortality
- Healthcare acquired infections
- Unnecessary interventions
- Unnecessary tests
- Unnecessary referrals
- Wasted time

3. Our vision

Our aim in publishing this framework is to articulate the direction of travel for healthcare library and knowledge services, to inform priorities and inform decision-making.

We are committed to an ambitious vision:

Our vision

NHS bodies, their staff, learners, patients and the public use the right knowledge and evidence, at the right time, in the right place, enabling high quality decision-making, learning, research and innovation to achieve excellent healthcare and health improvement.

There is often a large gap between evidence-based treatment guidelines and current practice (Nolte and McKee, 2008). Therefore, there is much to do to achieve this vision.



4. Partnerships are central to success

To ensure a consistent, equitable, funded core service offer to learners and staff, and offer coordinated information to patients and the public, we will build and foster effective partnerships nationally and locally. We are committed to learning from and partnering with other NHS bodies and external organisations alike. We will strengthen working relationships across the library community. A coherent approach is needed to deliver our vision and optimise investment in products and services in the best interests of staff, learners, patients and the public.

This framework provides the basis for those detailed conversations about joint working to address shared opportunities and challenges and we look forward to early engagement with a number of key players, including:

- NHS England – to address and support the information needs of commissioners and policy makers
- Public Health England – to ensure that the whole public health workforce, whether working at a national or local authority level, has access to quality resources and services and that public health information is available to the public and patients
- Department of Health – to develop options for a sustainable funding model for local healthcare library and knowledge services and support Health Education England in its implementation
- NICE - building on strong working relationships to develop a shared agenda - exploring opportunities for greater central procurement of resources and to engage with publishers and suppliers, working to promote evidence-based practice
- NHS Improving Quality – to ensure healthcare knowledge services engage with this important agenda
- Professional and regulatory bodies (including the Royal Colleges, Care Quality Commission, Monitor, NHS Litigation Authority, General Medical Council and Nursing and Midwifery Council) – to endorse the significance of evidence-based practice and embed knowledge into practice



4.1 Partnerships to support public and patient information

Patient satisfaction is linked to the quality of information. Healthcare library and knowledge services will work in partnerships with key stakeholders to enrich the information offered to patients and carers, to enable people to better manage their health and wellbeing and make fully informed decisions about their treatment and care. The importance of the public, patients and carers having the right knowledge and evidence, when and where they need it, is a significant element of our vision.

Leadership will be required to drive forward a universal offer that ensures a joined-up approach to informing patient choice and to engagement to promote health and well-being. This will involve working with a number of national and local organisations including:

NHS and third sector organisations – these include NHS Choices, Public Health England, Health Watch, Patient Information Forum and health charities such as Macmillan, British Heart Foundation and MIND.

Local authorities - public health teams, social care, Health and Wellbeing Boards and public libraries are all part of local authorities with significant responsibilities for delivering health information to patients and the public.

Case study – NHS and public library collaboration to provide information for patients and carers

Doncaster and Bassetlaw Hospitals NHS Foundation Trust has worked with Doncaster Public Libraries & Information Service to develop a Health & Wellbeing Information Service. This has included the development of a Health Information Training Programme for all public library staff and the promotion of a Health Information Enquiry Service available to in-patients and out-patients at the hospital and to all residents, patients and carers.

4.2 Library and knowledge services partnerships

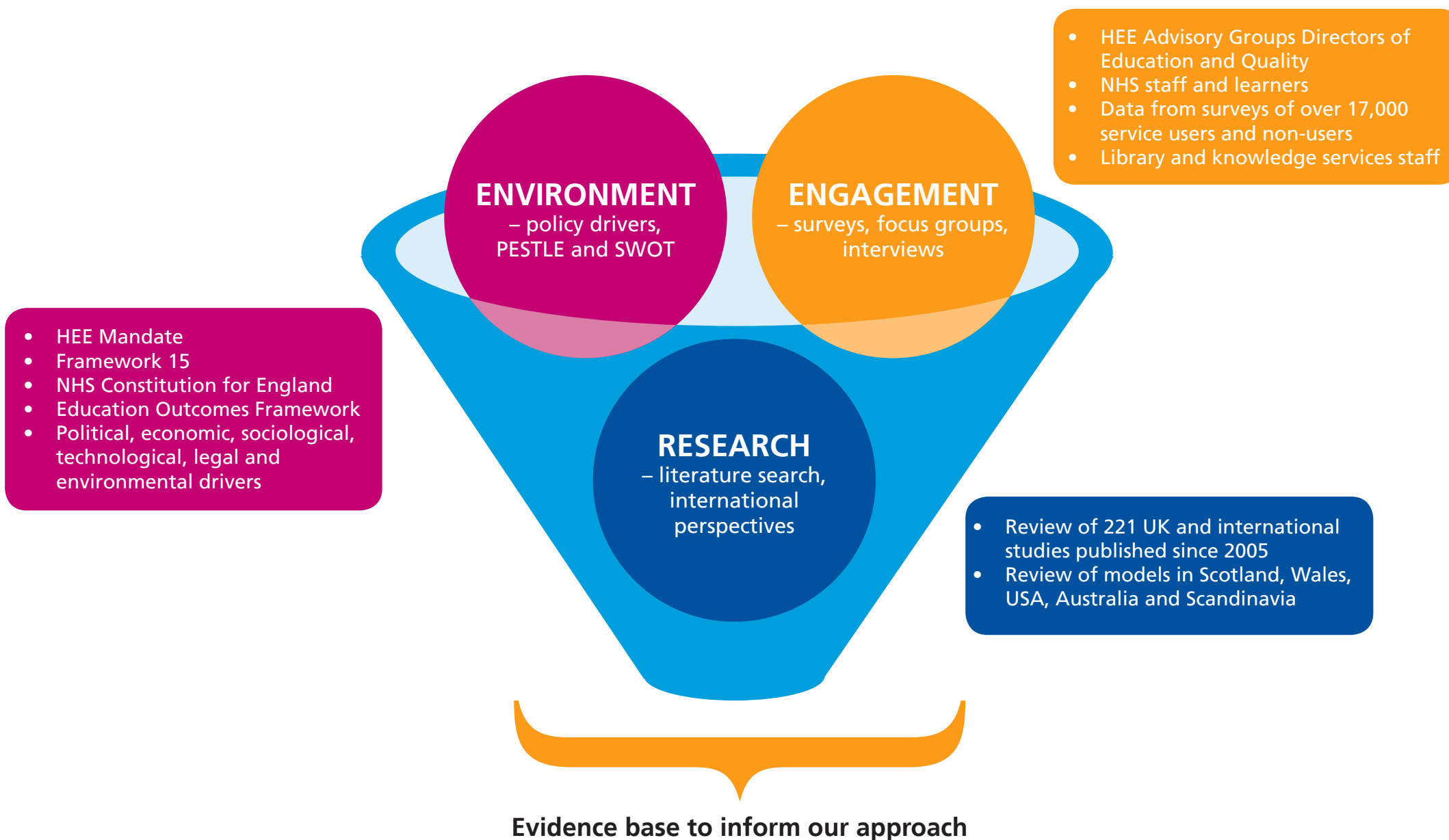
Healthcare library and knowledge services are strongly committed to collaborative working. More impetus will be given to coordinating robust partnerships within and across different sectors. Key partnerships include:

- Higher education institution libraries – to take forward a range of initiatives including collaboration on procurement of e-resources and shared learning on the implementation of new technologies
- Independent health libraries – to ensure two-way communication and joint working with Royal Colleges, professional bodies and health charities
- Chartered Institute of Library and Information Professionals and academic departments of information and library science – to agree a shared agenda in the training, development and redesign of the future and current NHS healthcare knowledge services workforce

Case study – NHS and higher education collaboration to increase access to research journals

The Finch e-journals pilot is an UK-wide National Health Service-Health Education collaborative project flowing from the recommendations of the Finch report (Working Group on Expanding Access to Published Research Findings, 2012). For one year (until 31 March 2015), nine publishers are making academic-licensed content available to NHS staff, giving access to an additional 2,500 journals. If this project proves successful, our ambition is to identify and attract new sources of NHS funding to sustain access to these research journals.

5. Shaping our approach



5.1 What did NHS staff and learners tell us?

Librarians and knowledge specialists routinely engage with both users and non-users of their services principally through staff surveys, gathering a rich body of evidence about information needs and preferences and the impact of evidence on healthcare. Drawing on responses from over 17,000 NHS staff and nearly 2000 students submitted since 2011, we learned that they primarily use library and knowledge services for patient care, education, research and audit. A comprehensive literature review, which drew on 221 UK and international studies published since 2005, verified these findings.

Users value

- personalised customer service
- expertise and assistance to save time, money and improve patient care
- 24 hour and seamless access to both print and full-text electronic resources
- literature searches and synthesised, pre-packaged information
- speedy supply of documents
- training to find and evaluate the evidence
- physical space in which to study
- information provision at the point of need by outreach and clinical librarians
- access to resources via mobile wireless devices
- experiential learning

Many staff

- are unaware of healthcare library and knowledge services and the benefits for patient care
- are unaware that library and knowledge staff can source documents that are not readily available
- experience information overload and lack time to search for information
- rely on colleagues and professional networks for information
- are frustrated by technical barriers and issues which they experience
- perceive that library and knowledge services are only for use by those studying
- make use of general internet search engines to seek to retrieve specialised information

5.2 NHS staff and learners said...

Nowadays medicine is evidence based and the library service helps me to keep up to date

Trust network is too slow to support e-learning

Why should there be a difference in journal access for those clinicians who are actively involved in research and those clinicians that are academics working clinically that have access through Higher Education?

It would be nice to have a podcast summary of the latest evidence

The service is one of the Trust's best assets

Healthcare scientists are a new staff grouping across the NHS and more services for these groups as new roles and training schemes emerge would be helpful

In an evidence based practice environment assistance to find the relevant information from experienced knowledgeable library staff is essential

There always seems to be problems logging into Athens... and accessing the article is quite confusing

The cost efficiency of having these essential services offered by experts in their field is significant

Libraries need to make more resources available electronically to users of mobile devices



Access to library service via smart phone will increase usage

What I need is electronic access to journals

I think the biggest problem is that colleagues in Primary Care are unaware that the Library is a resource for answering key clinical questions that might help with day to day practice

5.3 What did HEE Advisory Groups and Directors of Education and Quality tell us?

Library and Knowledge Service Leads attended several Health Education England Advisory Group meetings, and met with Directors of Education and Quality, to seek their input on our plans to develop a strategic framework. They told us that:

- Finding and applying knowledge is an important aspect of learning and continuing professional development
- Healthcare library and knowledge staff are positioned to play a larger role in enabling inter-professional learning, assisting with the virtual learning environment and developing blended training programmes
- It is imperative that we engage with higher education institutions, Royal Colleges, regulatory bodies and other professional organisations to avoid duplication
- Awareness of healthcare library and knowledge services is not as widespread as it could be across all professions and sectors
- There are perceived barriers that exist around access to knowledge resources
- Independent and community staff need to be able to access online resources on a variety of platforms, including via mobile devices

5.4 What did library and knowledge staff say?

The views of healthcare library and knowledge staff across the NHS were gathered through both survey and focus groups. Opinions were gathered on both current delivery, considering challenges to be addressed and opportunities as well as future service delivery. The key identified requirements were:

Leadership

- Effective leadership at national level
- Equity across geographies
- All NHS organisations have access to healthcare library and knowledge services

Transforming the service

- Embedding roles within clinical, commissioning and management teams
- Enhanced roles including knowledge management and technology enhanced learning
- Equity of access to expertise, services and resources
- Extend the reach of services
- National purchasing of resources
- Ensure single, reliable and evolving search facility
- The use of mobile and point of care tools will grow
- Improved IT infrastructure is essential
- Integration of healthcare library and knowledge services into clinical systems

Funding

- Commitment to appropriate levels of investment
- Sustainable funding model

Workforce

- National standards for staffing levels
- Ensuring healthcare library and knowledge services staff have the right skills
- Enhanced career opportunities
- Succession planning

Partnership

- Value and build on existing partnerships between NHS library and knowledge services
- Enhance resource sharing agreements
- More flexible licensing agreements

Quality and impact

- Align the NHS Library Quality Assurance Framework with wider quality processes
- Focus on the impact of healthcare library and knowledge services on patient care, management decisions, commissioning and research

5.5 The implications of our findings

On the basis of all the evidence gathered and lessons learned, the implications for the future of knowledge services are:

- Access to all services has to be as easy and convenient as possible.
- Services will be digital by default and delivery to mobile devices will be standard practice.
- Services need to be highly visible, pushing quality assured information tailored to specific user needs.
- The clinical and outreach models are expanded to become standard practice.
- Information skills training programmes, augmented by e-learning delivery, should continue to be developed.
- There needs to be a greater focus on synthesising evidence.
- There must be greater emphasis on partnership working.
- There is potential to better align healthcare library and knowledge services with technology enhanced learning initiatives.
- The healthcare library and knowledge workforce requires enhanced skills, including synthesising information, knowledge management, marketing, website design and usability testing.
- More sharing and integration of back-office functions is essential to underpin these changes.

6. Our strategic approach

Recognising the scale of modernisation required to achieve our vision, we identified principles and values on which to base decisions, and design criteria for transforming healthcare library and knowledge services.



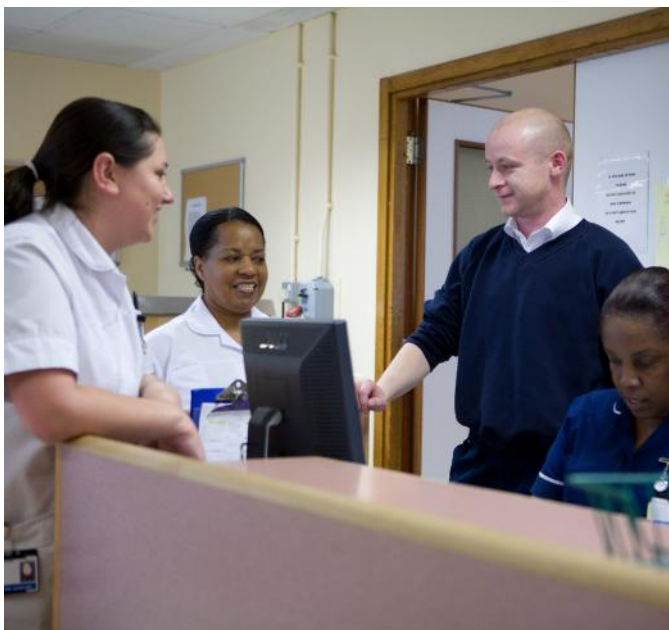
Guiding principles and values

Collaboration	Do once and share working across boundaries
Collective purchasing	Central procurement at scale
Core service	Core service offer, products, tools and expertise
Digital by default	Digital and mobile by default
Effective and efficient	Applying the principles of lean thinking
Equity	Equity of access and opportunity
Federation	Pooling budgets, staff, resources across boundaries
Innovation	Flexibility, new models of service, best practice
Quality	Benefits to patients improving lives, outcomes, Impact
Streamlined	Streamline structure, management, systems, process
Technology	Harnessing technology to streamline back-office functions
Workforce development	Planning, role redesign, specialisation, career pathways

6.1 Our strategic approach - design criteria

Criteria for the redesign of library and knowledge services

Economy of scale	Function can generate economies of scale, offering value for money if delivered at a large scale.
Local knowledge	Function requires in depth knowledge of needs of the local health economy and/or strong organisational relationships.
Nationwide functions	Function will benefit from a geographical focus or nationwide leadership to achieve national delivery, and/ or building on the foundation of established regional service/s.
Opportunity for standardisation	Function can be delivered using a standardised approach across a wide geography/ number of customers.
Specialist skills	Function requires specialist skills that are scarce and may not be widely available at a local level, or equitably across the country.



7. Transforming the service

We used driver diagrams as a strategic planning tool to:

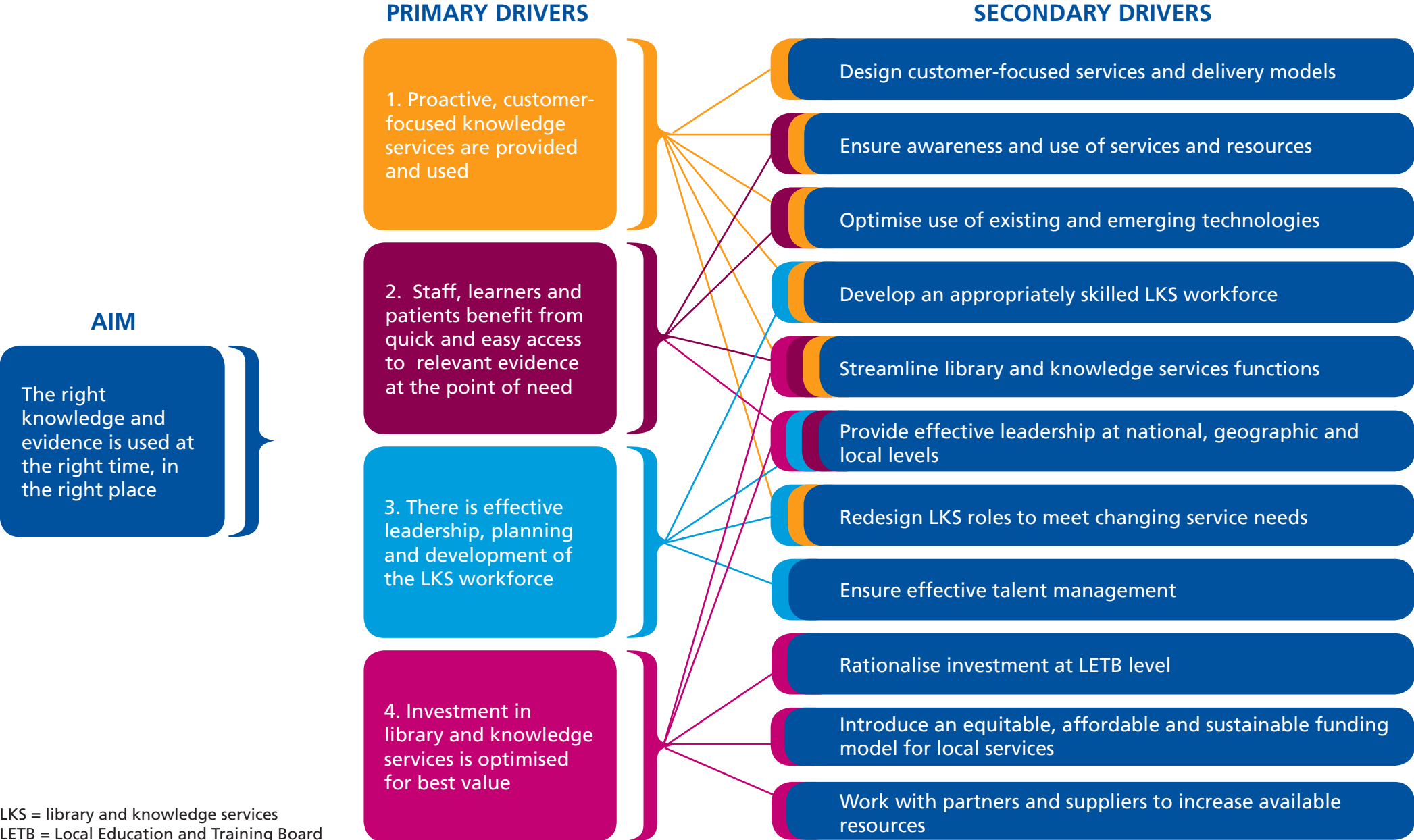
- explore the factors that need to be addressed in order to achieve our overall goal
- show how the factors are connected
- act as a communication tool
- provide the basis for a measurement framework

Four strategic themes had emerged from our analysis of all the research undertaken and feedback received, and we determined these to be the primary drivers for change:

1. Transforming the service – proactive customer-focussed services
2. Transforming the service – quick and easy access
3. Effective leadership, planning and development of the healthcare library and knowledge services workforce
4. Optimising funding for best value

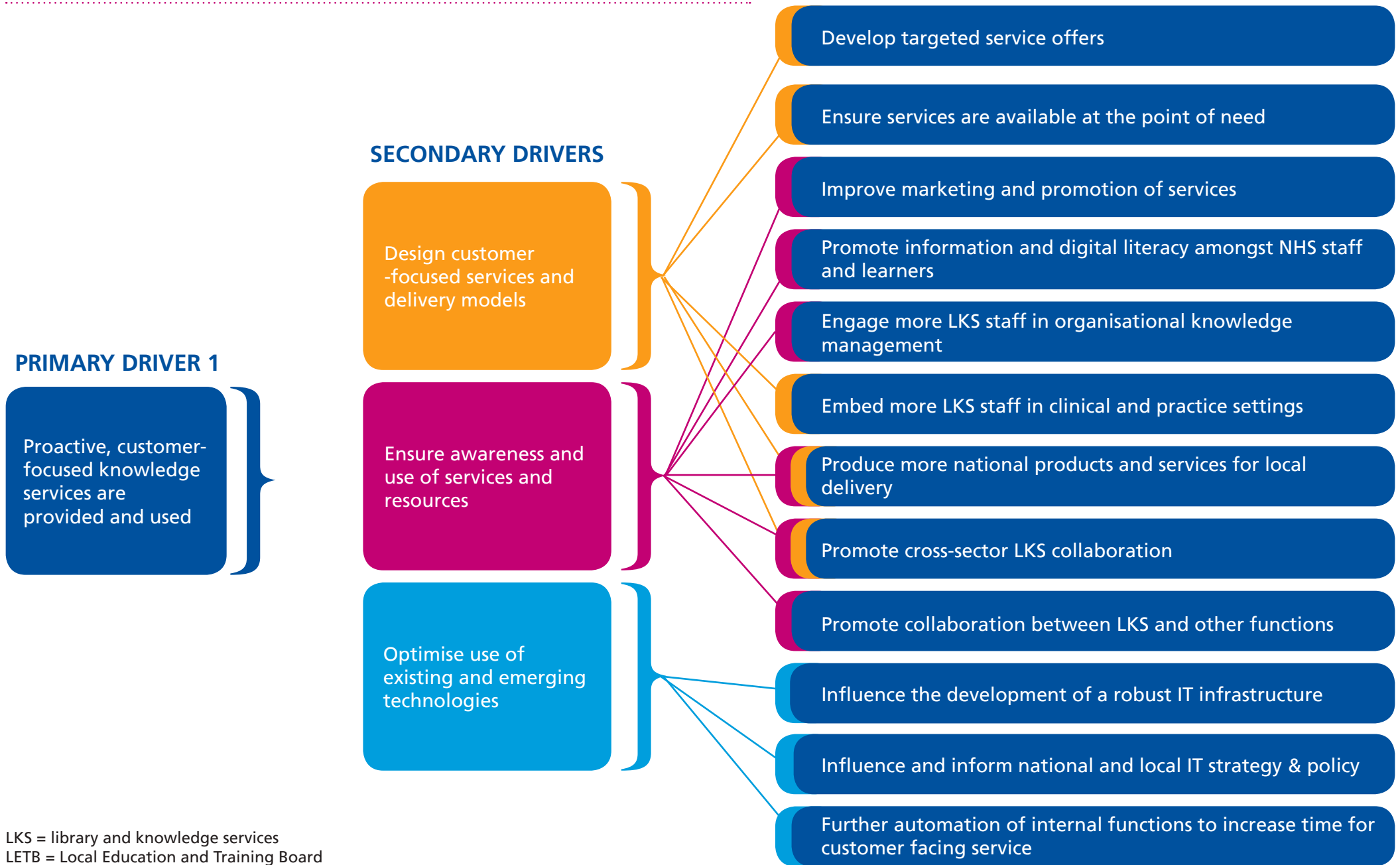


7.1 Transforming the service



LKS = library and knowledge services
 LETB = Local Education and Training Board

7.A Proactive customer-focused services



LKS = library and knowledge services
 LETB = Local Education and Training Board

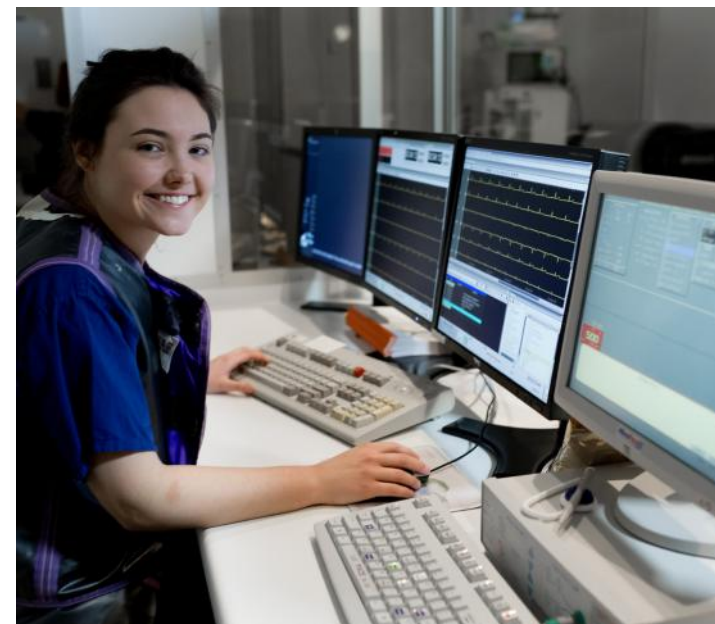
7.A.1 Design customer focused services: targeted service offers

We will undertake a national review of NHS library and knowledge services, making recommendations for the reconfiguration and redesign of services to deliver the right knowledge and evidence, at the right time, in the right place, enabling high quality decision making, learning, research and innovation to achieve excellent healthcare and health improvement.

Much of the development work to achieve a single coherent service that is proactive, and customer-focused is already underway. Our focus is on improving, extending, spreading and embedding approaches that have been tried and tested over recent years. We have identified that a series of interventions are required to deliver customer focused knowledge services.

Our ambition is for healthcare knowledge services to become business critical instruments of informed decision-making and innovation, widening their scope to drive the translation of knowledge into action across the system.

NHS staff tell us that they value targeted services including horizon scanning, current awareness and automated alerts and briefings that present synthesised evidence.



Case study – KnowledgeShare

NHS staff from all professions and sectors across Brighton and Mid Sussex wanted to receive regular, personalised updates about new high-level evidence and policy documents so as to remain informed about the latest developments in their field.

Outcome

The KnowledgeShare system was developed, allowing knowledge services staff to capture the professional interests of thousands of individual staff at a granular level. It also enables NHS colleagues to connect with one another based on shared interests.

Impact

Updates provided through the system have informed service-wide decision making, patient education conferences, research bids and the development of national guidance. It puts our staff in touch with the evidence and with each other.

7.A.2 Promoting evidence into practice

At the centre of successful knowledge management is the right organisational culture – one in which knowledge is valued, and knowledge sharing is embedded within day to day working practice. This is not simply a matter of capturing and sharing local successes with pride, but also of acquiring an appetite and developing capacity to learn from and invest in the adoption of the best practice demonstrated by other services and organisations.

Goals	Key activities
Connecting people to people	Helping colleagues share ideas, question and learn; supporting networks and communities of practice
Connecting people to the evidence base	Providing access to knowledge derived from research; literature searching and synthesis; providing tailored information products; signposting to services and knowledge
Connecting people to best practice	Providing access to knowledge derived from experience; investigative searching; capturing and spreading best practice; sharing knowledge through communities of practice; using social media; signposting high quality patient information
Helping people keep up to date	Horizon scanning; alerting services; policy briefings
Sharing learning	Facilitating e-groups and learning sets; implementing techniques to learn from experience (including knowledge harvesting and After Action Reviews)
Connecting people to corporate knowledge	Mapping knowledge assets; collating and enabling shared access to directories, policies, guidance and protocols
Collegiate working	Contributing local information to national electronic resources; facilitating distributed authorship

7.A.3 Organisational knowledge management

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. Knowledge management is a vehicle for organisational development and service improvement. It involves deliberate efforts to:

- Turn information into knowledge, making it explicit, usable and available to answer the right question at the right time in support of planning, policy and guideline development, project work and patient care.
- Bridge the gap between research, policy and practice in order to improve outcomes.

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 – knowledge retention and transfer toolkit

Surrey and Sussex Healthcare NHS Trust realised that when staff left the organisation, knowledge about the priorities, contacts, context and documents relevant to their posts often went with them, making it difficult for their successors to pick up their work in a timely manner.

Outcome

The Head of Library Services created a knowledge retention and transfer toolkit comprising a number of tools and techniques that leavers and their managers can use together.

Impact

The toolkit has been used by a number of departments as people have left the organisation or transferred posts, and its use is now an integral part of the Trust's Leaver's Policy.

7.A.4 Mobilising knowledge

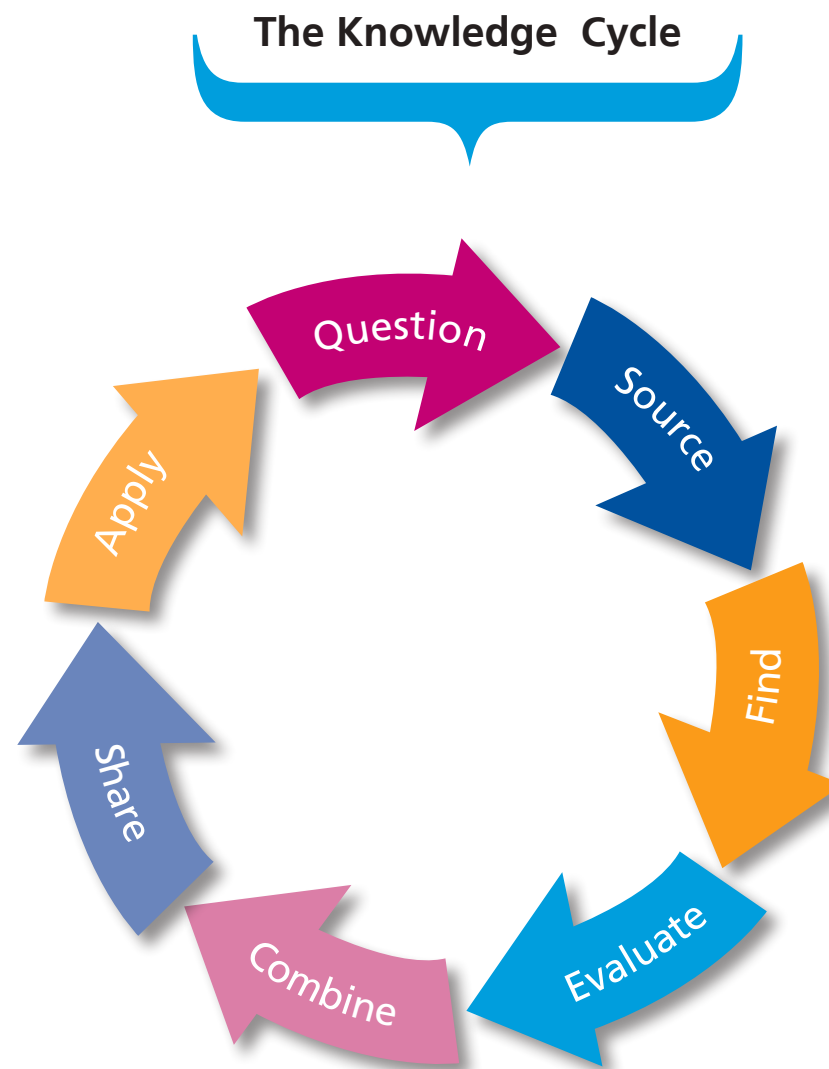
Increasingly, library and knowledge staff will have a greater role as knowledge brokers, sharing their expertise in all aspects of the knowledge cycle to support NHS staff to find and evaluate the information they need:

- Define the question.
- Identify knowledge sources.
- Discovery: find the knowledge.
- Evaluate the information.
- Combine knowledge from various sources.
- Generate and add new knowledge.
- Share knowledge with others; reflect.
- Apply and embed knowledge into action.

There is much to do to develop and improve knowledge management at every level – nationally and locally.

The NHS invests in a range of knowledge management tools such as the NHS Atlas of Variation. Healthcare library and knowledge services play a critical role in signposting staff, both commissioners and clinicians, to raise awareness of these tools. There is also a need to take an overview, and to identify gaps. Knowledge staff are ideally positioned to do this.

We are committed to working with partners to produce knowledge solutions that can be embodied within decision-making tools (for clinicians and patients), and embedded into practice, so that staff adopt best evidence, doing the right things right first time.



Graphic from and based on:
<http://www.infoliteracy.scot.nhs.uk/home.aspx>

7.A.5 Deliver customer focused services at the point of need

“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 p. 11)

Increasingly the NHS will see knowledge specialists embedded within clinical, commissioning and management teams. Delivery of high quality evidence in the workplace at the point of need, by professionally qualified knowledge staff, demonstrates significant benefits. NHS staff and learners want to receive a personalised service.

Case study – neonatal arterial thrombosis

A neonatal intensive care registrar at the University Hospitals Leicester needed urgent information about neonatal arterial thrombosis that would help the baby's parents understand the risks associated with therapies as there was a risk to their baby's arm.

Outcome

An urgent and detailed search was carried out by library and knowledge staff at University Hospitals Leicester.

Impact

The baby's parents had the information they needed to consent to the treatment which saved the baby's arm.

Case study – anticoagulation monitoring services

The medicines management project team at the Coastal West Sussex Clinical Commissioning Group asked West Sussex Knowledge and Libraries to conduct in-depth research to inform commissioning of anticoagulation monitoring services in Sussex.

Outcome

The results of their comprehensive review informed the decision to improve the current service rather than outsource provision. The medicines management team gained national recognition for their contribution to shaping NICE guidance.

Impact

Commissioners identified the best way to improve quality and save money, and the reputation of the team was enhanced.



7.A.6 Case study – point-of-need information for clinicians

The work of the University Hospitals Coventry and Warwickshire NHS Trust's CEBIS (Clinical Evidence-Based Information System) exemplifies the beneficial impact of proactive customer-focused knowledge services on therapeutic decisions and patient outcomes, patient experience and safety and cost savings.

Query	Findings	Outcome	Impact
Does the use of local anaesthesia in vitreoretinal surgery compromise the patient?	There was no evidence of compromise to surgical outcome or patient safety	Change from 80% GA to 80% LA procedures	<ul style="list-style-type: none"> • Change in service delivery • Cost saving estimated at £140,000 p.a.
Is it safe for patients with intraocular gas tamponades to travel by air following vitreoretinal surgery?	Evidence showed that it was not safe for patients to undertake any activities at high altitude or to receive nitrous oxide anaesthesia	Patients now leave theatre with a warning wristband. The wristband is provided on the purchase of intraocular gas internationally, the team achieved a national award for evidence in practice	<ul style="list-style-type: none"> • Prevention of risk • Prevention of morbidity • Change in care pathway • Knowledge base
Managing challenging viral retinitis and fungal endophthalmitis	Rapid review alongside virologist, microbiologist, GU medicine and geriatricians to give these patients the most appropriate treatment	Significantly shortened hospital stays and very favourable clinical outcomes	<ul style="list-style-type: none"> • Hospital length of stay shortened (£6,356 per patient saving) • Waiting time to treatment reduced • Change in choice of therapy

7.A.7 Case study – evidence for procurement decisions

Library and knowledge staff at University Hospitals Morecambe Bay work with non-clinical teams to identify products and equipment that work well and provide value for money.

The Clinical Librarian was invited to contribute to the Trust Supplies Group, convened to consider the research around the clinical efficacy and safety of clinical items available for use and make recommendations based on clinical and cost effectiveness.

Outcome

During the past two years the Clinical Librarian has delivered nine critically appraised evidence summaries to underpin procurement decisions where change to a product may impact upon clinical efficacy.

Impact

The Trust Supplies Group succeeded in meeting their target of £100,000 savings in year.



7.A.8 Ensure awareness and use of services and resources

We will implement a marketing strategy for the provision and awareness of services and resources, raising awareness of knowledge services, demonstrating how these are fully aligned to organisational priorities. It is clear that social media will play a key part in marketing knowledge services.

Clear and consistent signposting is needed to help the healthcare workforce and learners locate information resources, whilst information skills training will remain a key element of the offer from NHS knowledge services.

Promoting awareness of the library service offer

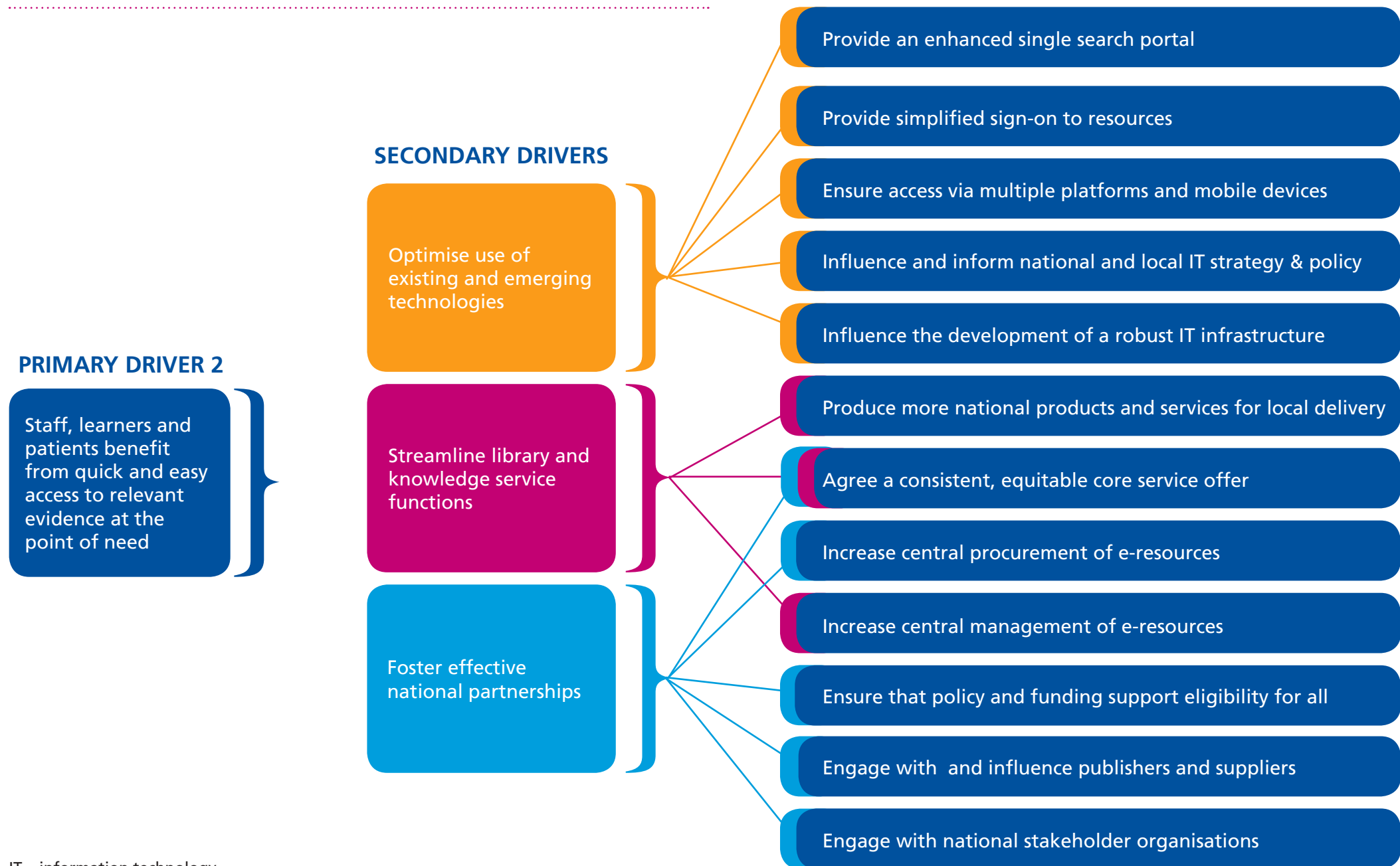
Cornwall Health Library Service has found an effective way to promote awareness of the service and its impact is by illustrating how the searches that their staff have done over the last three years relate directly to helping each of its stakeholder organisations meet their priorities, objectives and targets.

The need for information literacy skills to complement clinical skills

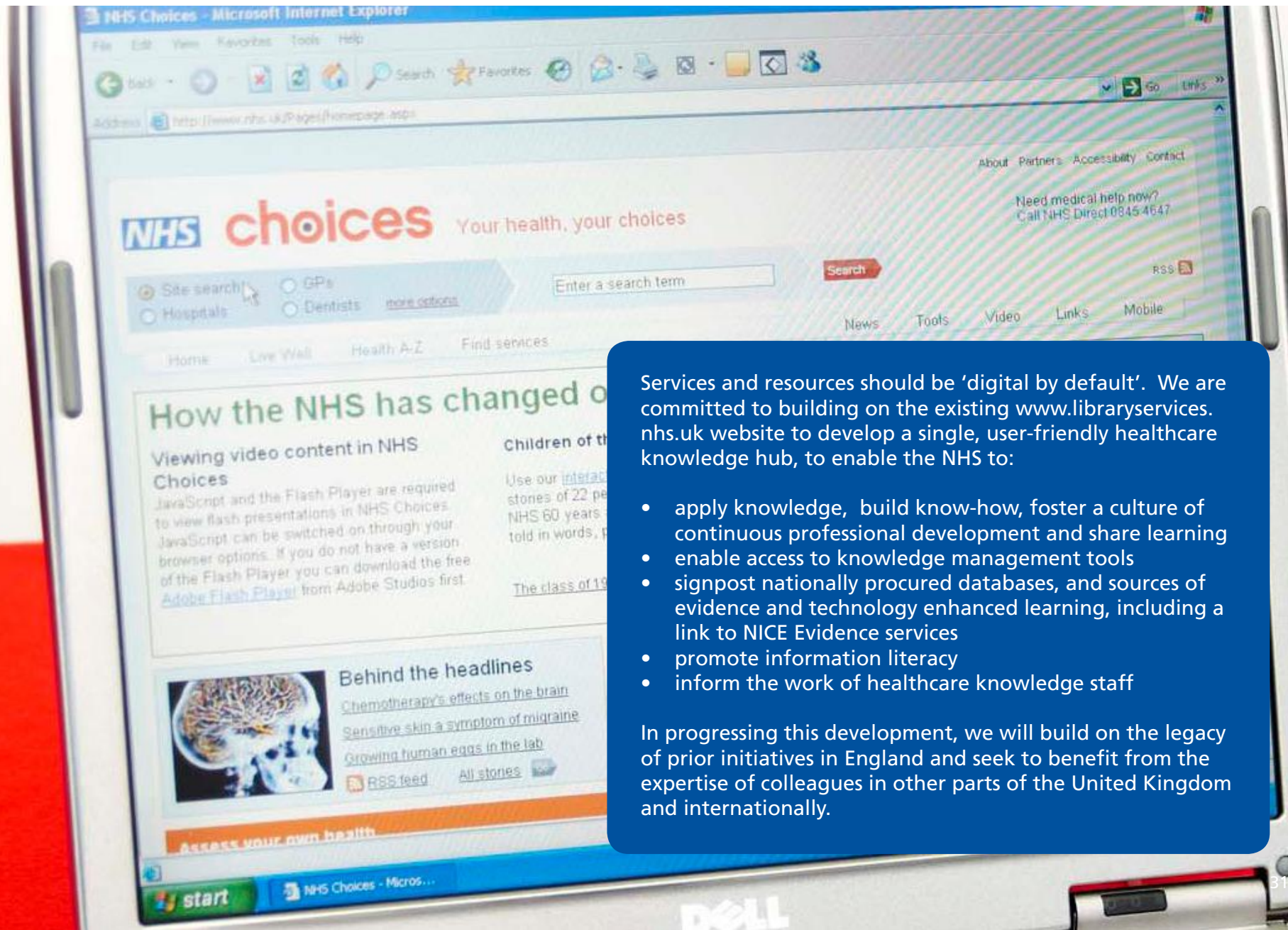
The Royal College of Nursing identifies a “need for information literacy competencies to complement the clinical competence framework, helping nurses, midwives, healthcare assistants and nursing students develop their skills in using information and knowledge and apply this to their practice.” (Royal College of Nursing, 2011 p.3)



7.B Quick and easy access to relevant evidence



7.B.1 A knowledge hub for healthcare



Services and resources should be 'digital by default'. We are committed to building on the existing www.libraryservices.nhs.uk website to develop a single, user-friendly healthcare knowledge hub, to enable the NHS to:

- apply knowledge, build know-how, foster a culture of continuous professional development and share learning
- enable access to knowledge management tools
- signpost nationally procured databases, and sources of evidence and technology enhanced learning, including a link to NICE Evidence services
- promote information literacy
- inform the work of healthcare knowledge staff

In progressing this development, we will build on the legacy of prior initiatives in England and seek to benefit from the expertise of colleagues in other parts of the United Kingdom and internationally.

7.B.2 Optimising use of new technologies; reflecting trends in academic publishing

Utilising the opportunities afforded by technology emerged as a consistent theme from our engagement with stakeholder groups.

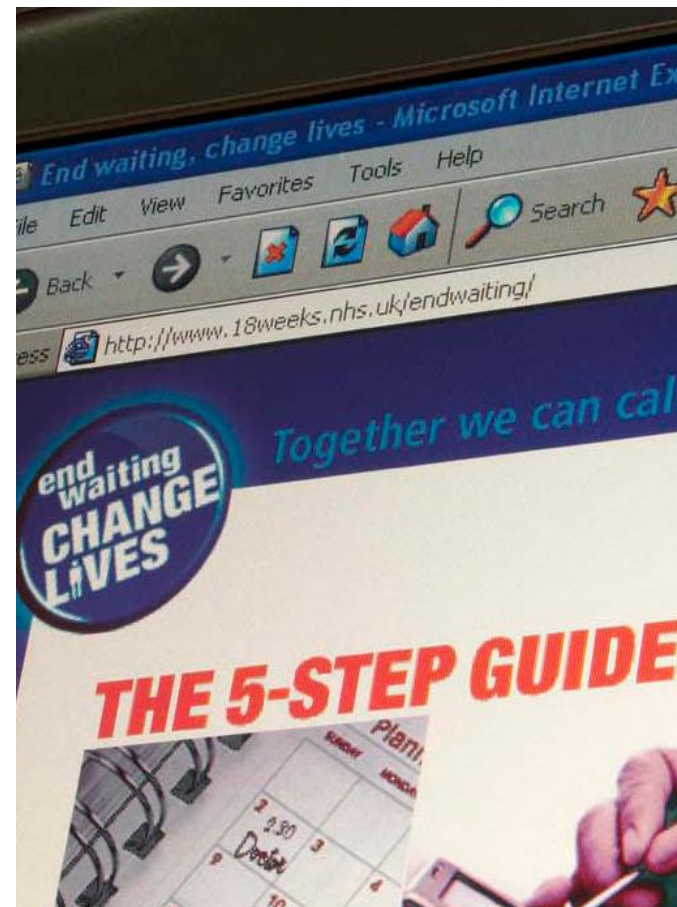
Enabling timely access to the best sources of up-to-date, relevant knowledge to inform clinical decision making is highly valued, as is the need for e-resources to be available remotely, via mobile devices, on Wi-Fi, with immediate access (including access to ever-more full-text electronic resources) at the point of care and need, with seamless authentication and navigation, either via open-access or free of charge.

In summary - there is a clear desire across the NHS workforce for searching, access to full-text and sign-on to resources to be easier, for access to be available via mobile devices, and for IT systems to be robust.

We recognise the challenges and the need for strong leadership and partnership working in this area. We will work with national and local partners, including content suppliers, to influence and inform strategy, policy and investment decisions.

While we cannot be sure of the technical solutions that will best serve healthcare knowledge services to achieve our vision, we can predict that fast-paced advances in new technologies and the acceleration of their adoption will expand access to information, opportunities to personalise and embed information, provide tools for collaboration – and require knowledge services staff to continually develop their awareness and skills. (Varnum, 2014)

Our strategic approach will also reflect trends in publishing - in particular the gradual move away from subscription-based models towards Open Access publishing, which provides free online access to peer-reviewed research. Publishers recognise the demand for synthesised evidence and summaries of research results. The sheer increase in volume of published content, requires ever more sophisticated methods of filtering content and 'mining' data to find reliable quality evidence.



7.B.3 Management and procurement of e-resources

A national portfolio of electronic information resources, known as “national core content” has been made available to the whole healthcare workforce for over 10 years. This has yielded benefits in terms of equity of access and cost savings, on which we will build going forward.

Key steps now are:

- Scaling up the procurement of electronic resources from local to national level, to achieve better deals with publishers and suppliers.
- Exploring the feasibility of setting up an open access repository for the NHS in England, to showcase NHS-funded research activity and to meet the requirements of the government-endorsed Finch report on expanding access to published research findings. (Working Group on Expanding Access to Published Research Findings, 2012)
- Streamlining the management of these resources, by establishing a single, centralised e-resources team.

“Through participation in the national collaborative procurement of bibliographic databases and electronic journals, we have calculated that the London Health Libraries network has realised savings of around 50%, compared with the cost of purchasing the same resources at regional or local level”.

Richard Osborn
Strategic Lead for Library Services and eLearning
London



7.B.4 Streamline library and knowledge service functions

There are significant opportunities to harness technology, to streamline internal functions, in order to improve efficiency and so release time to prioritise customer-facing services.

We will oversee a review of healthcare library and knowledge service back-office functions to determine where improved automation, more consistent use of technology and centralisation of services will result in benefits to NHS staff and learners while improving performance of knowledge services.

Case study – a library network covering three Local Education and Training Board areas in the south of England

The healthcare library services in South West, Thames Valley and Wessex share a centrally hosted library management software system, and have built a single library service network, with the following benefits:

- Staff, trainees and students can search the holdings of all the healthcare libraries in the region (over 100) via a single catalogue, whilst a single library membership card enables them to use any of the services in the network, as they move between posts and placements
- Shared processes and policies have been developed, helping to ensure equitable services for staff and students, wherever they are based within the network, and saving time for individual library teams
- The Trusts within the network do not need to pay for and maintain separate software systems for managing local library functions, resulting in considerable cost savings



7.B.5 Centralised service and product development

There is a significant opportunity to rationalise, share information products, and standardise approaches across the country, ensuring that work is only done once. We are committed to reviewing existing document delivery schemes and exploring opportunities to further extend these, and have identified a number of business critical products which could be developed collaboratively for local customisation and delivery. These include:

- Marketing and promotional initiatives.
- User guides.
- Training materials.
- Current awareness and alerting services

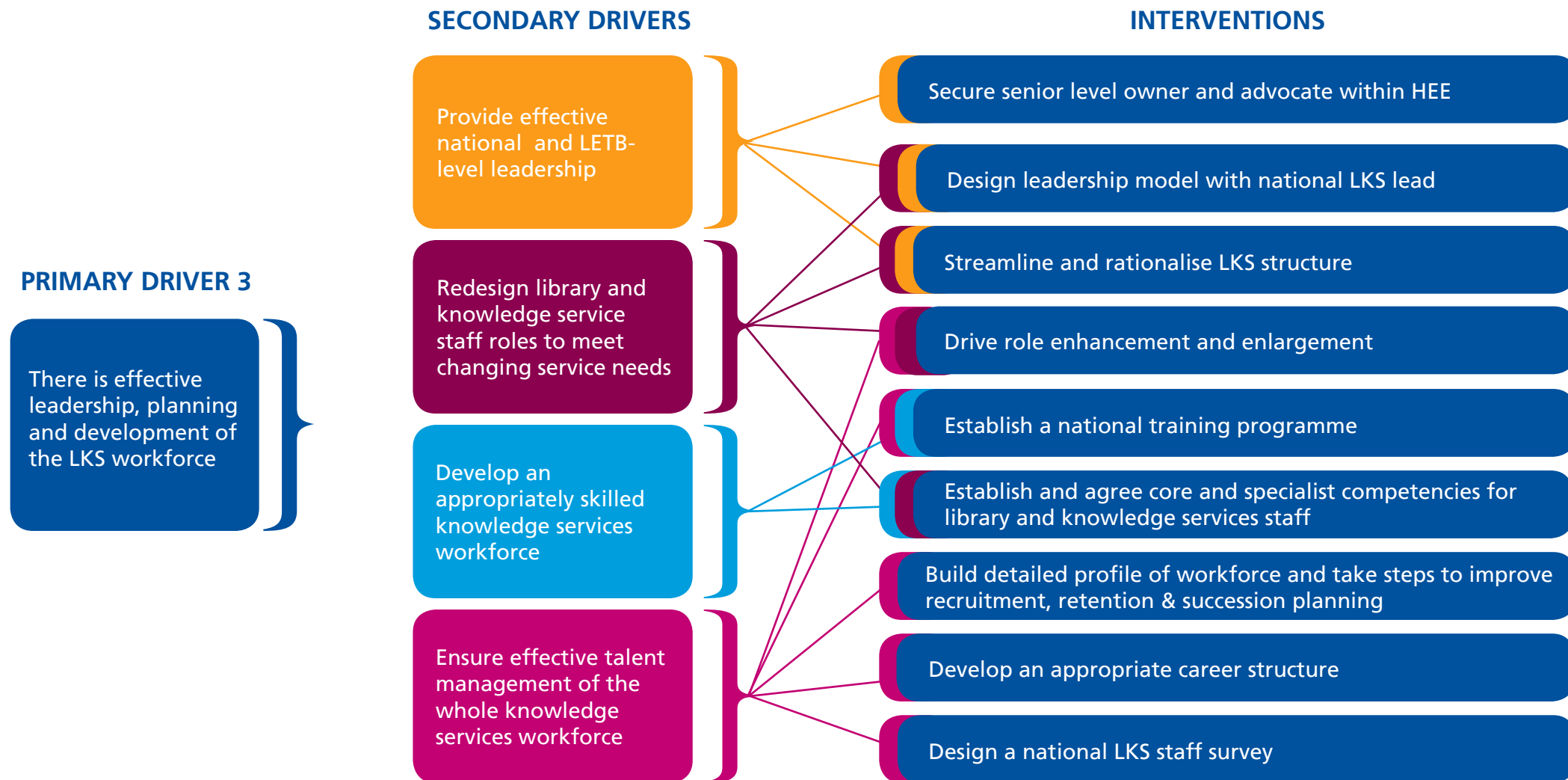
Case study – collaboration in the production of horizon-scanning bulletins in North West England

Library and knowledge staff in the North West have collaborated to create a series of over 20 horizon scanning bulletins covering clinical and management topics. Each librarian takes responsibility for a particular bulletin which is published monthly on the internet and shared with library and knowledge services across the North West, so that each can in turn distribute them to their local service users. This reduces duplication, makes the best use of staff time, ensures consistent quality, and helps keep clinical staff and managers across the area updated.

<http://www.lihnn.nhs.uk/index.php/lihnn/horizon-scanning>



7.C Effective leadership and planning and development of the knowledge service workforce



7.C.1 Effective leadership and planning and development of the knowledge service workforce

Many of the healthcare knowledge staff we will have tomorrow are part of the current workforce. The services that they provide are rightly valued by learners and staff alike. Locally, librarians and knowledge specialists often lead in adopting new technologies and media, and use their experience to teach others to access, evaluate and apply knowledge.

Focused on NHS priorities, new models of service delivery call for flexible, multi-skilled knowledge specialists confident to apply their expertise within healthcare teams and at points of care and decision-making. Accordingly, investment in the continuing professional development of the existing healthcare library and knowledge workforce is essential. Now, and going forward, many more responsive, problem-based, 'just-in-time' and 'just-for-me' services are needed. The principles that we have set out shape our workforce development agenda by signalling the skills and experience that will be important.



To turn the rhetoric of our vision into reality requires the establishment of a national, strategic professional lead for healthcare library and knowledge staff to inspire and sustain the implementation of this development framework. We will initiate a review of the existing structures and shape a robust leadership model that also:

- recognises the requirement for geographically focused and more local professional leadership to head up local healthcare library and knowledge services networks, engage with local partners and crucially to ensure the strategic framework is turned into action and
- bolsters collegiate working, while streamlining decision-making structures; avoiding wasteful duplication and optimising specialist skills.

7.C.2 Healthcare knowledge services leadership - at national and LETB level

Healthcare knowledge services must be professionally led to ensure the right expertise and experience is deployed to maximum effect. Collaborative working across England is central to making the best use of the available expertise within this small specialised workforce. Together, we will drive up the quality of healthcare library and knowledge services to enhance outcomes and the experience of staff and learners by working in a collegiate style, as a single team within Health Education England.

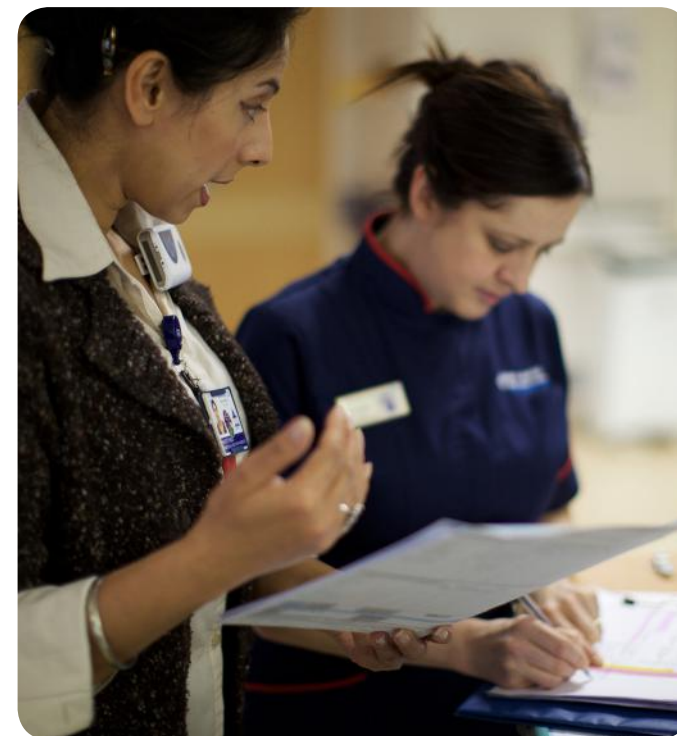
We propose a national lead supported by geographically focused professional teams with responsibility both for specific national functions and for ensuring local stakeholder engagement.

Key elements of the national professional lead role:

- Strategic thinking and action planning
- Working with strategic partners
- E-resources procurement and contract management
- Developing quality assurance systems
- Managing funding streams
- Programme and change management
- Supporting consumer health information national programmes
- Team building and people motivation
- Leading innovation

Key elements of the LETB role:

- Leading and co-ordinating local knowledge service networks (inclusive of libraries and Technology Enhanced Learning)
- Implementing a quality assurance programme to accredit healthcare knowledge services
- Delivering continuous professional development
- Providing strategic advice and professional leadership to NHS organisations and healthcare library and knowledge staff
- Local partnership working
- Project management
- Supporting local consumer health information initiatives



In addition to a programme manager to drive the work forward nationally, each of the 13 LETBs should have a senior lead responsible for knowledge services, including healthcare libraries and Technology Enhanced Learning.

7.C.3 Centralised service and product development

Managers of healthcare library and knowledge services in Trusts and other NHS bodies such as Clinical Commissioning Groups and Commissioning Support Units all require excellent leadership skills.

Local leaders will need to be identified, nurtured and developed through programmes that focus on the skills required and these in turn will feed in to a more rigorous approach to succession planning.

Key elements of a local role:

- Planning and implementing local knowledge services strategies
- Engaging with senior staff to champion the role of knowledge services within the organisation
- Leading knowledge needs analysis on which to design, deliver and monitor healthcare knowledge services
- Effective management of resources including funding, staff, and physical space
- Identifying best practice and innovation to modernise healthcare library and knowledge services delivery
- Assessing the impact the service has on patient care and the core business of the organisation

7.C.4 Changing the profile of the healthcare library and knowledge services workforce

The current workforce

1.4 million NHS staff are served by NHS library and knowledge services

= 1 qualified library and knowledge specialist for every 2,335 NHS staff

59% (594) of the 1,036 people working in NHS library and knowledge services hold first or second degrees in library and information science

58% of services provide a clinical librarian or outreach service

29% of paraprofessional staff have a vocational qualification

(data from 2013-14)

Our ambitions

- Establish a national workforce planning process:
 - Complete a workforce review, identify key issues and, recognising that this is an ageing workforce, address succession planning
 - Establish a national workforce survey plus a regular survey of development needs
 - Set national priorities for ongoing training to meet the needs of future service delivery
- Up-skill staff to apply lean thinking, streamline systems and processes, and create and share information products to deliver equitable, efficient and effective services
- Empower knowledge staff to drive and deliver our vision by fostering innovation and service development, through role enlargement, role enhancement and role substitution
- Up-skill our paraprofessional staff, expanding their roles to take further responsibility in supervisory work, customer care and oversight of back-office functions

7.C.5 Redesign healthcare library and knowledge services roles to meet changing needs

Our ambition is to align the healthcare library and knowledge workforce to NHS and organisational priorities, through service redesign and workforce development, focused on where the service can make most impact on the improvement of healthcare:

- Role enhancement and enlargement will create new roles for librarians that focus on informing decision-making and translating knowledge into action
- Product and service development will build on the learning from exemplars. By extending these and piloting new approaches, knowledge services will extend their reach
- The range of healthcare library and knowledge roles is diverse, encompassing research, management and technical skills
- Technology is moving rapidly. It presents exciting opportunities that shape ongoing training and development needs

There will be exciting opportunities for library and knowledge staff to innovate, enlarge and extend their roles. Working collaboratively within multi-disciplinary teams, and with other information providers, to aggregate information, knowledge brokers will enhance their skills and contribute their expertise to the production, management and mobilisation of knowledge in the local context.

7.C.6 Develop an appropriately skilled healthcare knowledge workforce

Investment in the continuing professional development of the existing healthcare library and knowledge workforce is essential. To make the greatest impact on health improvement we will establish both a competency framework that defines core and specialist competencies, and a national training programme to address skill gaps.

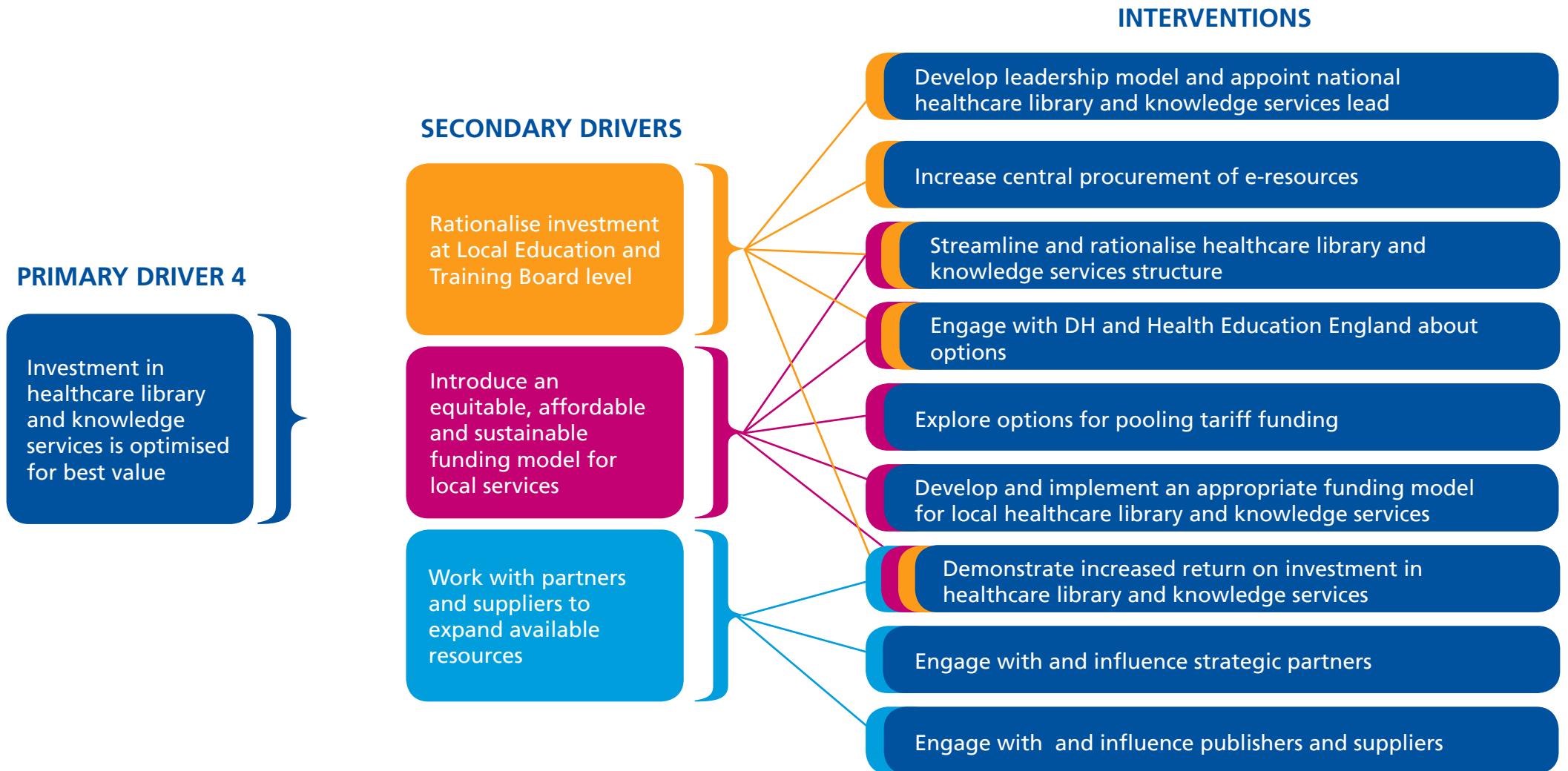
Research shows that library and knowledge staff see the following skills as essential: communications, people and project management; personal qualities of intellectual versatility and perseverance; health literacy; great customer care; specialist skills to drive evidence-based practice, enable knowledge management and support guidelines development; enhanced technical skills from robust synthesis to document management, procurement to costing, and data mining. (Sen, Villa and Chapman, 2014)

We will build a detailed profile of the healthcare library and knowledge services workforce. Steps must be taken to shape career pathways for this speciality and to improve staff recruitment and retention. Given that the relative proportion of experienced senior healthcare library and knowledge staff is falling, there is a pressing need for effective succession planning and talent management.

Alongside innovative workplace and health-economy wide initiatives, self-directed personal and professional development learning are key. Service improvement projects, skills-sharing and networking, shadowing and mentoring are as important as onsite tailored training and externally facilitated events.

As the service is modernised, greater investment will be needed to support the development of first contact healthcare knowledge service assistants (staff in bands 2-4).

7.D Optimising investment in knowledge services



7.D.1 Annual investment in NHS library and knowledge services

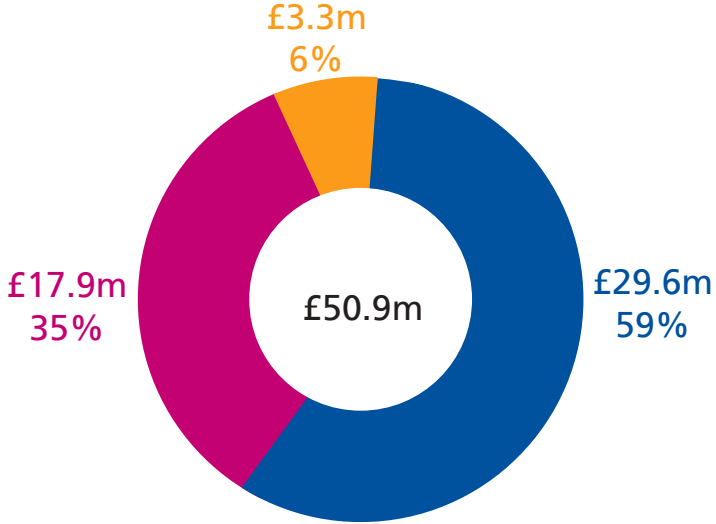
Annual spend on NHS library and knowledge services (based on 2013-14 data)

Healthcare library and knowledge services funding is historically complex, characterised by a relatively high dependency on postgraduate medical education funding, and variable levels of investment by employers.

The total annual investment in healthcare library and knowledge services is in the region of £51m. The largest element of this spend is on staff, followed by knowledge resources (databases, journals and books, increasingly in electronic format). Of this investment 89% is made by local NHS organisations, and 11% is made by Local Education and Training Boards (LETBs).

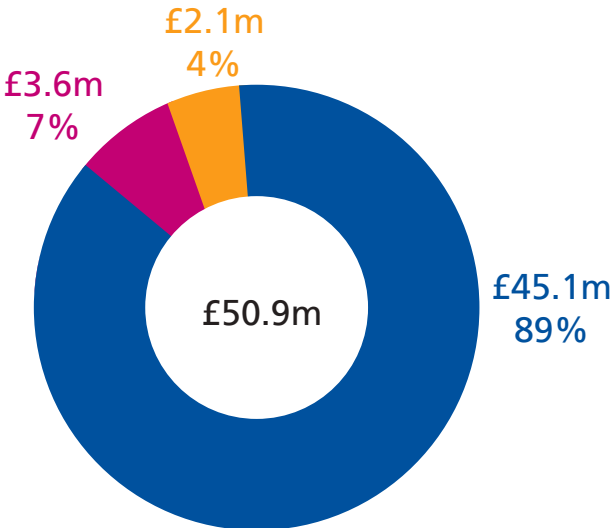
Our ambitious vision can only be realised by making our finite resources go further and make more impact, and improve quality by reducing inappropriate levels of variation.

What we spend it on



- Staff (local and LETB level)
- Knowledge resources (national, LETB area and local)
- Other (e.g. operating costs, library systems)

Who spends it



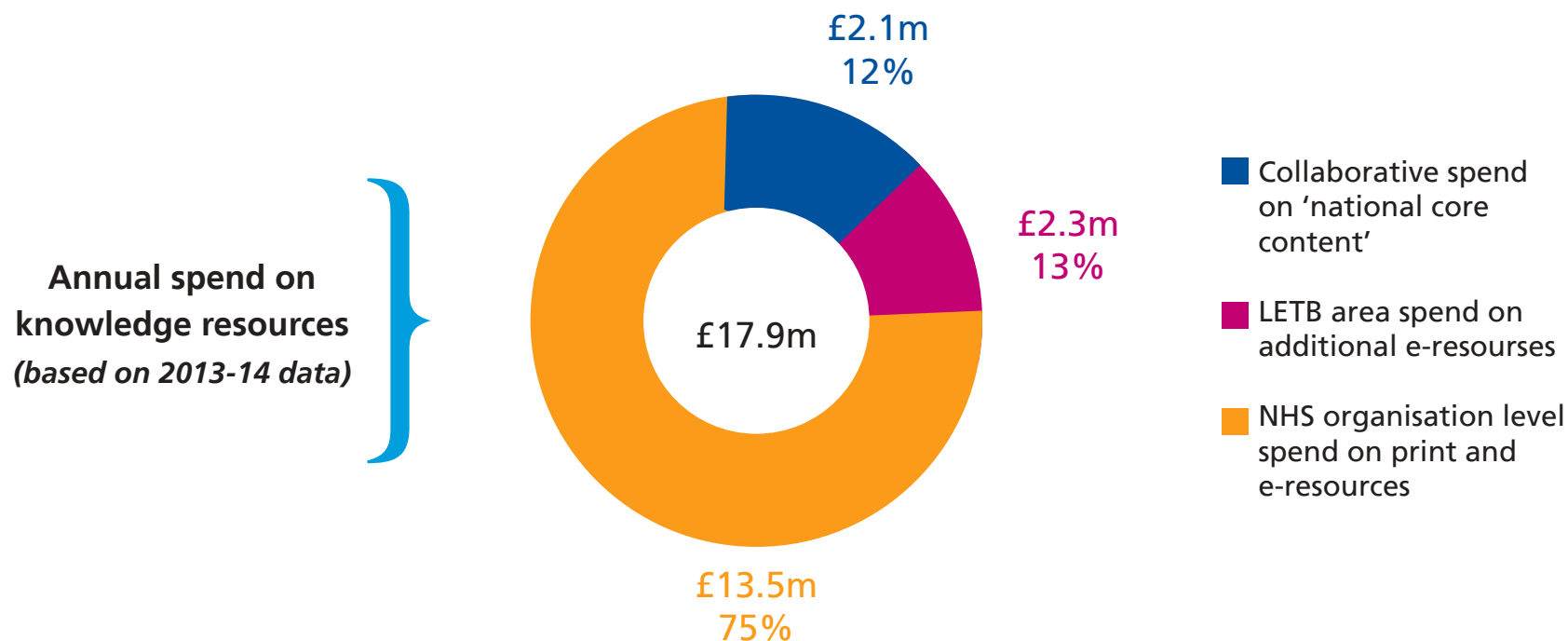
- NHS local organisation level
- LETB geographic area level
- LETB at national level (collaborative purchases)

7.D.2 The opportunity to rationalise investment

Expert knowledge support and study space must necessarily be provided locally, but to complement this local provision, we will exploit the potential for doing more just once, and sharing the outputs for the benefit of all. Leadership for 'do once and share' initiatives may rest at national, geographical or at Local Education and Training Board level.

With the establishment of Health Education England as the lead body with responsibility for NHS library and knowledge services, we will take advantage of the unique opportunity to start to pool budgets and make strategic and collaborative investment decisions, initially in relation to the 11% of total investment made currently made by Local Education and Training Boards, and with a focus on increasing collaborative procurement of electronic knowledge resources, to achieve larger discounts and improve equity of access.

This will not be without challenge, because of the large current variation in healthcare library and knowledge services budgets at Local Education and Training Board level. Equity of access and opportunity is one of our key guiding principles and only by pooling resources can we start to leverage system-wide improvement.



7.D.3 Towards equitable, affordable and sustainable local funding

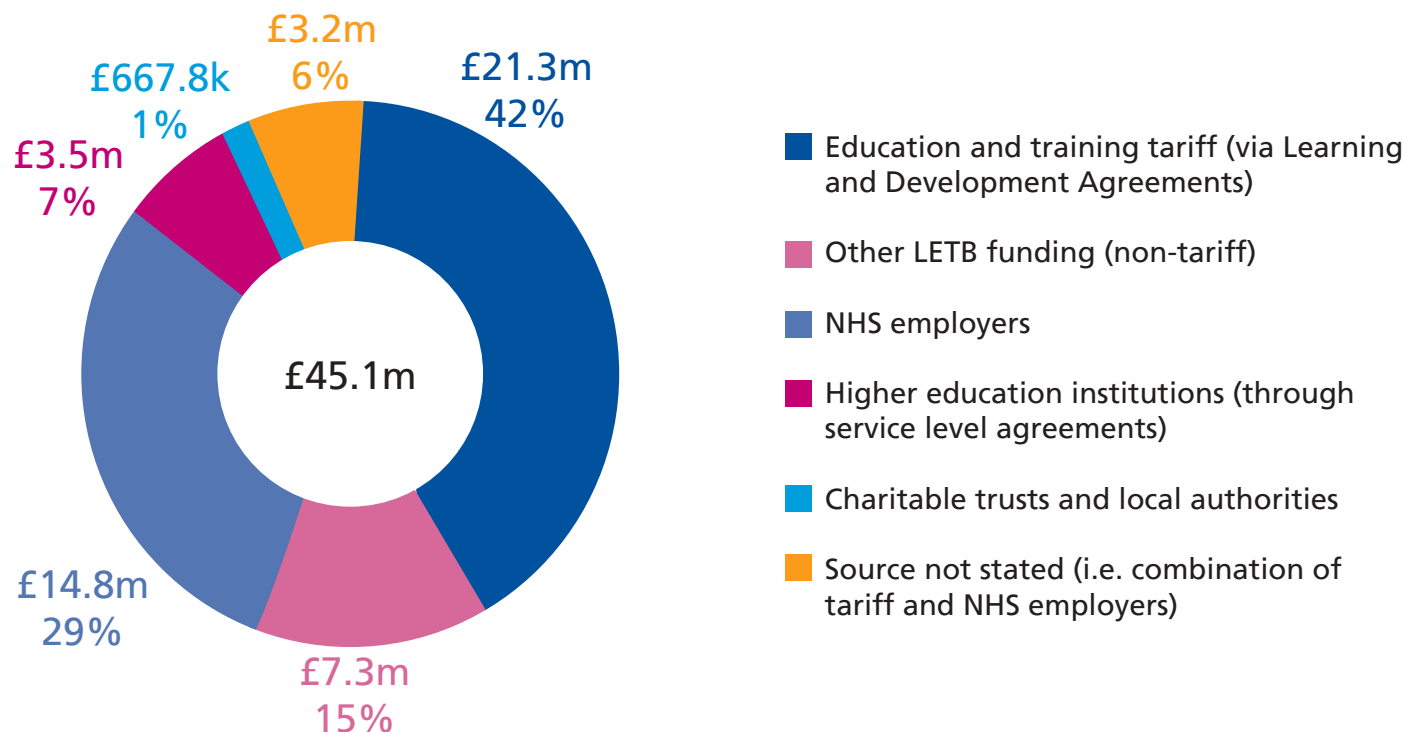
There is clear potential to further streamline services and improve efficiency at local level, by harnessing technology to streamline 'back-office' functions, and through greater collaboration between services.

Recognising the challenges of rationalising funding at local level, we will nevertheless take steps to realise our ambition to introduce an equitable, affordable and sustainable funding model for local healthcare knowledge services.

Initially this will involve:

- exploring options for pooling library and knowledge services funding to support shared services
- facilitating more collaborative purchasing and resource sharing
- contributing to national work to establish education reference costs
- working with employers to ensure they make a proportionate investment in knowledge services for their staff
- ensuring that Learning and Development Agreement quality monitoring processes are robust and reflect our strategic principles

Sources of income at local organisation level
(based on 2013-14 data)



7.D.4 Engaging with partners to improve return on investment

We will commission a study of return on investment in healthcare library and knowledge services for the NHS in England. Comparable services in several other countries have already published evidence to demonstrate how investment in library and knowledge services delivers cost savings for health care systems. (HLWIKI International, 2014)

In addition to rationalising investment and working to demonstrate value for money, we will engage with strategic partners who share a stake in ensuring that the staff of NHS bodies, learners, patients and the public have access to and use best knowledge and evidence, to explore further opportunities to optimise investment.

Worth every cent and more

An independent assessment of the return on investment of health libraries in Australia found that they return \$9 for every \$1 invested.

The results took into account time saved by medical practitioners in searching for answers, and how much it would cost healthcare staff to buy information they gain free from the library.

Health Libraries Inc. & ALIA Health Libraries Australia (2013) p. 5



7.D.5 Our ambition for optimising investment in NHS library and knowledge services

From

Healthcare library and knowledge services funding at local level is unevenly distributed and uncertain.

Highly variable levels of investment by employers in provision of healthcare library and knowledge services for their staff and learners.

Only £2 million of the total £50 million annual investment in healthcare library and knowledge services is spent collaboratively (on central procurement of e-resources).

Limited collaborative working or shared investment amongst the different national organisations with a stake in ensuring that the staff of NHS bodies, learners, patients and the public access and use knowledge and evidence.

To

An equitable, sustainable funding model for local healthcare knowledge services, which reflects that to fulfil their purpose and vision, they must be multi-disciplinary, support staff as well as learners, and service as well as education.

Recognising the value and impact of healthcare knowledge services to their core business, all employers across all sections of the NHS will make a proportionate financial contribution to the cost of ensuring that staff and learners access and use knowledge and evidence.

A much higher proportion of spend will be made strategically and collaboratively, to ensure that finite funding delivers best value and impact.

A much higher degree of strategic and collaborative investment, for instance between Health Education England and its key national partners, to leverage system wide improvement for the benefit of all.

7.E Delivering the vision: metrics for success

We have identified the following metrics for measuring success, to be achieved within three years. These metrics will be reviewed and additional meaningful measures introduced as part of action planning to implement the strategic framework.

Increase in evidence of impact

- Increase in use of the refreshed *Impact Toolkit*: used by **95%** of services

Increase in quality

- Proportion of library and knowledge services over **90%** compliant with NHS Library Quality Assurance Framework: **98%**

Increase in use

- Increase the proportion of staff in four target groups (medical and dental; nursing and midwifery; allied health; scientific and technical) using NHS-funded knowledge resources and services: by **20%**
- Across the whole NHS workforce, increase the number of staff using NHS-funded knowledge resources and services: by **10%**

Improvements in service offer

- Increase in proportion of knowledge services with clinical/outreach librarians: from 58% to **80%**
- Increase in production and use of nationally-produced horizon scanning bulletins: **25%** increase in Year 1; **10%** in Years 2 and 3

Improvements in knowledge services workforce development

- Define and publish core and specialist competencies (then set ambitious targets to increase the proportion of staff with these)

Optimised investment

- Double the amount of investment in national, collaborative procurement of e-resources



8 Improving quality and demonstrating impact

The *NHS Library Quality Assurance Framework (LQAF) England* enables robust quality assessment of healthcare library and knowledge services. It provides a clear focus for action planning across all NHS organisations, steering local quality improvement plans by setting direction for service managers.

Health Education England monitors compliance with the Framework and the reports issued provide a transparent benchmark of areas of development required to meet business and client need. We will refresh the Library Quality Assurance Framework to ensure it continues to drive service improvement and is aligned with wider education and service monitoring processes.

Data from LQAF show an overall improvement in quality across the country (2011- 2013).

As part of our commitment to quality, knowledge teams will continue to undertake and publish research in the field, thereby building the evidence base for service improvement and sharing best practice.

	2011	2012	2013
East Midlands	84%	86%	90%
East of England	78%	77%	84%
Kent Surrey and Sussex	93%	95%	97%
London	81%	81%	83%
North East	79%	82%	85%
North West	86%	86%	89%
South West	91%	94%	97%
Thames Valley	87%	90%	90%
Wessex	87%	90%	94%
West Midlands	81%	90%	89%
Yorkshire and the Humber	89%	94%	95%
Mean (average) for all 10 areas	85%	88%	91%

8.1 Impact

Through this development framework for the future of healthcare knowledge services, we have demonstrated the ways in which they make a positive impact on patient care by:

- providing information to support evidence-based patient care including treatment decisions
- informing commissioning decisions
- guiding service development decisions
- supporting guideline and pathway development



Feedback also illustrates the value that students and staff place on the services provided to support education, training and continuous professional development.

Thank you for all your help this year. It has made a massive difference to my course to have access to a library that has been so supportive.

*Student Nurse,
Buckinghamshire Healthcare
NHS Trust*

Availability of the library and the resources have been pivotal to my professional development. If it had not been for the knowledge and support available, I would not be where I am today as a nurse specialist

*Nurse Specialist, Isle of Wight NHS
Trust*

I went to the library training session with little knowledge and confidence. I am now carrying out thorough literature searches and very confident doing them.

Midwife, Oxford University Hospitals NHS Trust

Our *Impact Toolkit* is a comprehensive resource and has a solid academic foundation. It provides a template for gathering qualitative and quantitative evidence to demonstrate the value of knowledge services to the NHS. Our next steps are to refresh the tool, promote widespread adoption and publish case studies in order to attract more decision-makers to make best use of these services.

9 Delivering the vision: what changes will you see?

Proactive knowledge services

- A standard core offer for all
- Personalised services.
- Widespread awareness and use of services
- Clinical and outreach librarians embedded in teams
- Information specialists leading organisational knowledge management
- Joined-up approach to promoting information for patients and carers
- Services covering larger geographies, with more streamlined 'back-office' functions

Quick and easy access to evidence

- Increasingly equitable, seamless and mobile access to high quality electronic resources
- Individually tailored current awareness and alerting services
- More quality-filtered and synthesised evidence

Knowledge services workforce

- Clear national leadership
- A national training programme to address development priorities
- Redesigned roles and enhanced skills to meet changing needs
- Improved career opportunities

Optimise funding

- One coherent service - nationally led, locally delivered
- Greater partnership working
- Concordat with national stakeholders to extend reach and return on investment
- Centralised and collaborative procurement
- Increased return on investment

Quality and impact

- Clear alignment to NHS priorities
- Case studies of impact on patient care and safety, patient experience and outcomes

9.1 How can you get involved?

We are committed to dialogue as we shape the NHS library and knowledge services of the future. Opportunities to initiate conversations will include:

- Face-to-face meetings and presentations where there will be the opportunity to discuss the strategic aims and develop programmes of work together
- Regular briefings to keep partners up-to-date with how the work is progressing
- Development of web pages where key outputs from the programme will be housed and signposted
- A regularly updated blog which will also provide a forum for discussion, comments and queries
- Articles in professional journals and newsletters to raise awareness more widely.

For further information about how to get involved please contact:

HEE.knowledgeforhealthcare@nhs.net



10. Acknowledgements

This document is sponsored by Patrick Mitchell, Director of National Programmes, Health Education England.

The development of this framework was led by David Stewart – Health Education North West (Chair of the Library Knowledge Services Leads) and Sue Lacey Bryant - Health Education England, Knowledge Services Strategy Development Associate.

The framework has been developed with input from:

- Susan Austin – Health Education North East
- Helen Bingham – Health Education Thames Valley and Health Education Wessex
- David Copsey – formerly Health Education East of England
- Clare Edwards – Health Education West Midlands
- Tricia Ellis – Health Education South West
- Linda Ferguson – Health Education North West
- Imrana Ghumra – Health Education East of England
- Louise Goswami – Health Education Kent, Surrey and Sussex
- Richard Marriott – Health Education East Midlands
- Fran Mead – Health Education Yorkshire and the Humber
- Richard Osborn – Health Education North Central and East, North West and South London
- Kim Wilshaw – formerly Health Education Yorkshire and the Humber
- Edward Young – formerly Health Education North East

Sincere thanks are extended to the many individuals who have contributed to this report whether as critical friends, through the provision of case studies, and by participation in interviews, focus groups and surveys.



11.1 Sources – References

Brette, A., et al (2010)

'Evaluating clinical librarian services: a systematic approach. *Health Information Libraries Journal*. 28(1), pp. 3-22. Available from <http://onlinelibrary.wiley.com/doi/10.1111/j.1471-1842.2010.00925.x/full> (Accessed 20 August 2014).

Department of Health (2014)

Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values. A mandate from the government to Health Education England: April 2014 to 2015. [online] London: Department of Health. Available from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/310170/DH_HEE_Mandate.pdf (Accessed 20 August 2014).

Health Education England (2014)

Framework 15: Health Education England strategic framework 2014-2029. [online] Health Education England. Available from http://hee.nhs.uk/wp-content/uploads/sites/321/2014/06/HEE_StrategicFramework15_final.pdf (Accessed 20 August 2014).

Health Education England Library and Knowledge Services (2014b)

Impact toolkit. [online] Health Education England Library and Knowledge Services. Available from http://www.libraryservices.nhs.uk/forlibrarystaff/impactassessment/impact_toolkit.html (Accessed 20 August 2014).

Health Education England Library and Knowledge Services (2014a)

NHS Library Quality Assurance Framework (LQAF) England. Version 2.3. [online] Health Education England Library and Knowledge Services. Available from http://www.libraryservices.nhs.uk/document_uploads/LQAF/LQAF_Version_2.3_May_2014_30032.pdf (Accessed 20 August 2014).

Health Libraries Inc. and ALIA Health Libraries Australia (2013)

Worth every cent and more: An independent assessment of the return on investment of health libraries in Australia. [online] Canberra: Australian Library and Information Association. [online] Available from <https://www.alia.org.au/sites/default/files/Worth-Every-Cent-and-More-FULL-REPORT.pdf> (Accessed 20 August 2014).

HLWIKI International (2014)

Health library standards, value & return on investment (ROI). [online] Available from http://hlwiki.slais.ubc.ca/index.php/Health_library_standards_value_%26_return_on_investment_%28ROI%29#Health_library_standards_26_valuation (Accessed 20 August 2014)

Nolte, E. and McKee, M. (eds.) (2008)

Caring for people with chronic conditions: A health system perspective. Maidenhead: Open University. [online] Available from http://www.euro.who.int/__data/assets/pdf_file/0006/96468/E91878.pdf (Accessed 30 August 2014)

Royal College of Nursing (2011)

Finding, using and managing information: nursing, midwifery, health and social care information literacy competences. London: RCN. [online] Available from http://www.rcn.org.uk/__data/assets/pdf_file/0007/1357019/003847.pdf (Accessed 20 August 2014)

Sen, B.A., Villa, R. and Chapman, E. (2014)

Working in the health information profession: Perspectives, experience and trends. Report to the European Association for Health Information and Libraries (EAHIL). A 25th anniversary project undertaken by the University of Sheffield. Sheffield: University of Sheffield. [online] Available from <http://eprints.whiterose.ac.uk/79006/> (Accessed 20 August 2014)

Steele, R. and Tiffin, Paul A. (2014)

Personalised evidence for personalised healthcare: integration of a clinical librarian into mental health services - a feasibility study. *Psychiatric Bulletin*. 38:29-35 Available from <http://pb.rcpsych.org/content/38/1/29.full.pdf> (Accessed 20 August 2014)

Varnum, Kenneth J. (ed.) (2014)

The top technologies every librarian needs to know: a LITA guide. London: Facet

Working Group on Expanding Access to Published Research Findings (2012) *Accessibility, sustainability, excellence: how to expand access to research publications.* [online] Available from <http://www.researchinfonet.org/finch/> (Accessed 20 August 2014)

11.2 Sources – Bibliography

CIPD (2014)

Leadership resource summary. [online]

Available from <http://www.cipd.co.uk/hr-resources/factsheets/leadership.aspx>

(Accessed 20 August 2014).

Department of Health (2013)

The Education Outcomes Framework. [online] London: Department of Health.

Available from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/175546/Education_outcomes_framework.pdf

(Accessed 20 August 2014)

Department of Health (2013)

NHS constitution for England. [online] London: Department of Health.

Available from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/170656/NHS_Constitution.pdf

(Accessed 20 August 2014)

Hill, Peter (2008)

Report of a national review of NHS health library services in England: From knowledge to health in the 21st Century. [online]

Available from http://www.libraryservices.nhs.uk/document_uploads/NHS_Evidence/national_library_review_final_report_4feb_081.pdf

(Accessed 20 August 2014)

Imison, C. and Bohmer, R. (2013)

NHS and social care workforce: meeting our needs now and in the future? (The King's Fund Perspectives) [online]

Available from http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/perspectives-nhs-social-care-workforce-jul13.pdf

(Accessed 20 August 2014)

Knock, D. (2012)

'Working towards liberation: using a collaborative approach to assess the impact of library services within the NHS.' Paper to accompany presentation given within Health & Biosciences Libraries section at WLIC Conference, Helsinki, 11 to 16 August 2012. IFLA, Helsinki, August 2012. [online]

Available from <http://conference.ifla.org/past-wlic/2012/ifla78.htm>

(Accessed 20 August 2014)

11.2 Sources – Bibliography

Kruse, K. (2013)

What is leadership? [online]

Available from <http://www.forbes.com/sites/kevinkruse/2013/04/09/what-is-leadership/>

(Accessed 20 August 2014)

Miller, C. (2014)

'Thinking smartly about our continuing professional development.' Poster presented at *CILIP Health Libraries Group Conference*, Oxford Examination Halls, Oxford, 23 to 25 July 2014. [online]

Available from <http://www.cilip.org.uk/health-libraries-group/events-conferences-and-seminars/conferences/hlg-conference-2014/hlg-1>

(Accessed 20 August 2014)

NHS Education for Scotland (2014)

Local delivery plan (LDP) 2014-15. [online] NHS Education for Scotland.

Available from http://www.nes.scot.nhs.uk/media/2579030/ldp_2014-2015_final.pdf (Accessed 20 August 2014)

NHS Executive (1997)

Health Service Guideline 97(47) *Library and information services*. [online] Wetherby: Department of Health.

Available from http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4012399.pdf

(Accessed 20 August 2014)

National Institute for Health Research (2012)

Evidence in management decisions (EMD): advancing knowledge utilization in healthcare management. Executive summary. [online] Southampton: NIHR Health Services and Delivery Research. [online]

Available from http://www.nets.nihr.ac.uk/__data/assets/pdf_file/0003/95655/New-Evidence-on-Management-and-Leadership.pdf

(Accessed 20 August 2014)

Tenopir, C. (2013).

'Building evidence of the value and impact of library and information services: methods, metrics and ROI.' *Evidence Based Library and Information Practice*, 8(2), pp. 270-274.

Available from <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/download/22182/16566>

(Accessed 20 August 2014)

Weightman, A.L., Urquhart, C., Spink, S. and Thomas, R. (2009)

'The value and impact of information provided through library services for patient care: developing guidance for best practice.' *Health Information and Libraries Journal*. 26(1) pp. 63-71

Available from <http://onlinelibrary.wiley.com/doi/10.1111/j.1471-1842.2008.00782.x/full>

(Accessed 20 August 2014)

12 Glossary

Alerting services: a service, usually provided by email, notifying staff of news or new publications relevant to their area of work.

Bibliographic database: a collection of citations (references), which may include full-text digitized articles, searchable by author, title, or keyword.

Clinical librarian: a role embedded in a clinical team, providing information as required by team members to support evidence-based practice and high quality patient care at the point of care or decision-making.

Current awareness: a service, often provided in bulletin or email form, alerting staff to new or recent publications on topics of current interest; selection of items is often tailored for particular groups or interests.

Document delivery: obtaining for library users materials outside the library's own collections; may be in print or digital form, free of charge or, more often, purchased by the requesting library.

E-resources: electronic resources, an umbrella term for materials provided and accessed digitally; includes electronic full-text journals, electronic books and electronic databases.

Expert search: a comprehensive literature search conducted by a librarian with expertise and experience in this area of work.

Horizon scanning: analysing emerging trends and developments in order to anticipate future changes which might affect current policy and practice, enabling a longer-term strategic approach to decision making, service planning and policy development.

Information consultancy: a service which includes the provision expert advice on information management and knowledge management

Information literacy: knowing why information is needed, where to find it, and how to evaluate, use and communicate it

Information skills: the ability to locate appropriate information sources and to navigate, evaluate, organise and communicate the information that they find.

Knowledge assets: knowledge relevant to an organisation's strategy and operations. Knowledge assets can be human (individuals, teams, communities), structural (strategies, policies, processes, procedures) and supporting technologies.

Knowledge harvesting: the process of capturing, eliciting and organising unwritten knowledge from individuals and teams within an organisation, to make tacit knowledge explicit, and to improve and utilise knowledge assets.

Knowledge management: the creation and management of an environment which encourages knowledge to be gathered, shared and used efficiently and effectively within an organisation to develop, improve performance and avoid errors.

Library and knowledge service: a service within an organisation/Trust offering access to a wide range of information sources, both printed and electronic, and support from specialised staff in using these effectively.

Literature search: a systematic search, using a range of indexes and bibliographic databases, for material relating to a specific query or subject, often annotated or including abstracts.

Outreach librarian/service: designed to support the work, learning and development needs of staff in their workplace.

Health Education England
www.hee.nhs.uk

HEE.knowledgeforhealthcare@nhs.net

 [@NHS_HealthEdEng](https://twitter.com/NHS_HealthEdEng)

 www.facebook.com/nhshee



Health Education England