



# **SHALL Training Events 2012** York, London and Birmingham event outputs Calculating and Demonstrating Value of NHS Libraries and Information Services (LIS)

'Measuring the return on NHS Library Services as assets'

# Event output contents – an overview

- This slide pack contains all of the outputs from the pre-event questionnaire and from the exercises and discussions at the York (29/2/12), London (6/3/12) and Birmingham (21/3/12) training events
- Outputs (in the form of Wordles) from the pre-event questionnaire can be found in slides 4-9
- □ Outputs from the LIS Value Stories exercise can be found in slides 11-25
- Outputs from the Sense Check your LIS exercise can be found in slides 27-29
- Outputs from the Mapping Techniques to Services exercise can be found in slides 31-42
- Outputs from the Café Conversations and Powerful Value Statements exercise can be found in slides 45-62
- Outputs from the 'what did we learn?' discussions can be found in slides 64-65

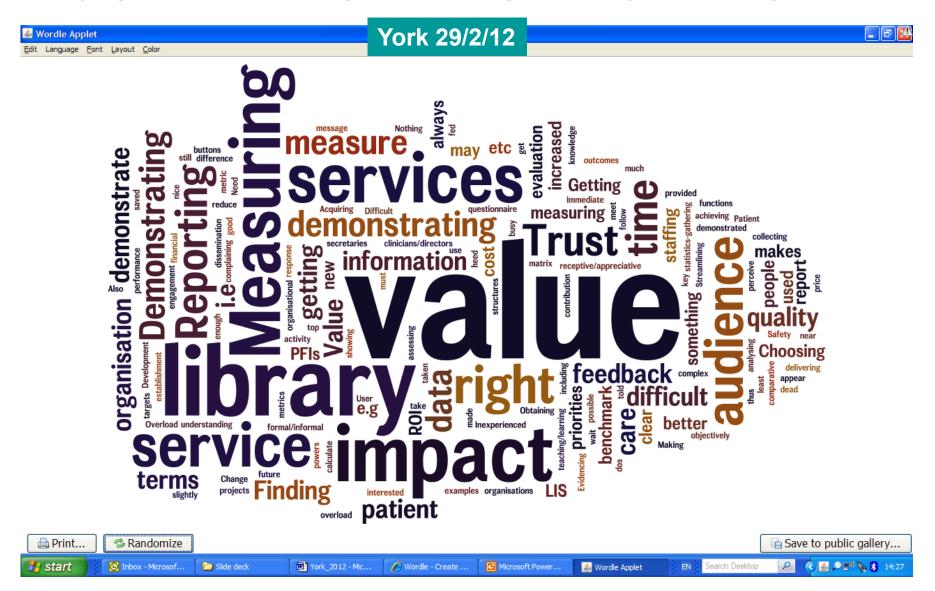
We hope you will find the consolidated outputs from the three events helpful. You will be able to compare and contrast the outputs from the event you attended with others and can use the information to share the outputs and learning with your team, colleagues and stakeholders. With best wishes, Sandra Ward and Ian Wooler.

The results of the pre-training event survey

The challenges you face when demonstrating value in the NHS and the competencies that enable you to meet the challenges



## What are the 3 top <u>challenges</u> you face when demonstrating value (i.e. applying metrics, measuring and reporting value) in your NHS organisation?

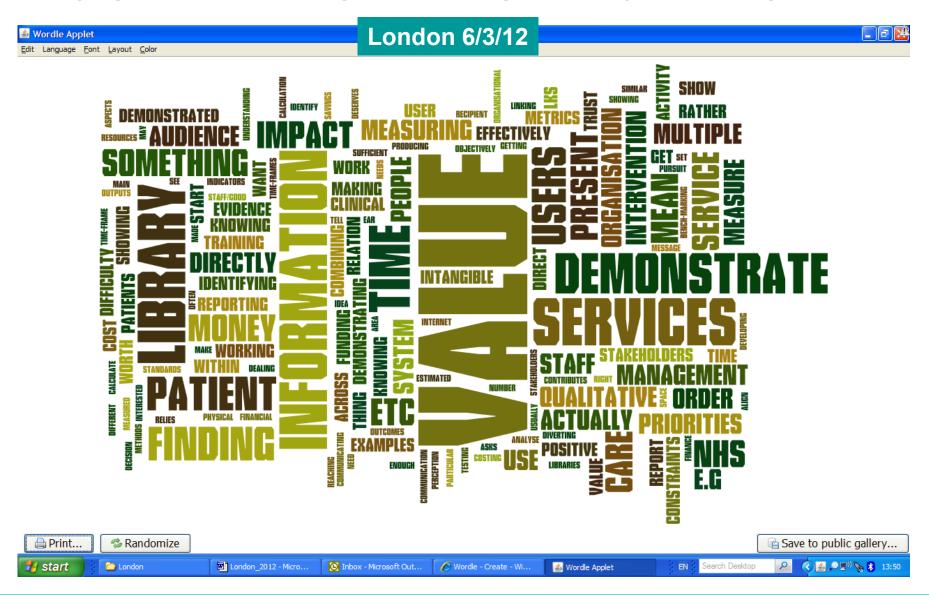


© Beaworthy Consulting & IDW Ltd 2012

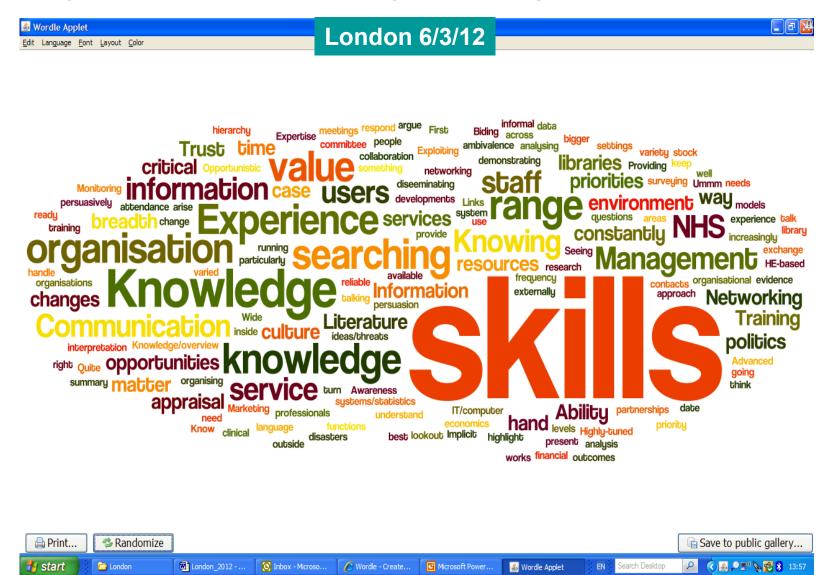
## What are the 3 top <u>competencies</u> (i.e. skills, experience and knowledge) that enable you to demonstrate value in your NHS organisation?



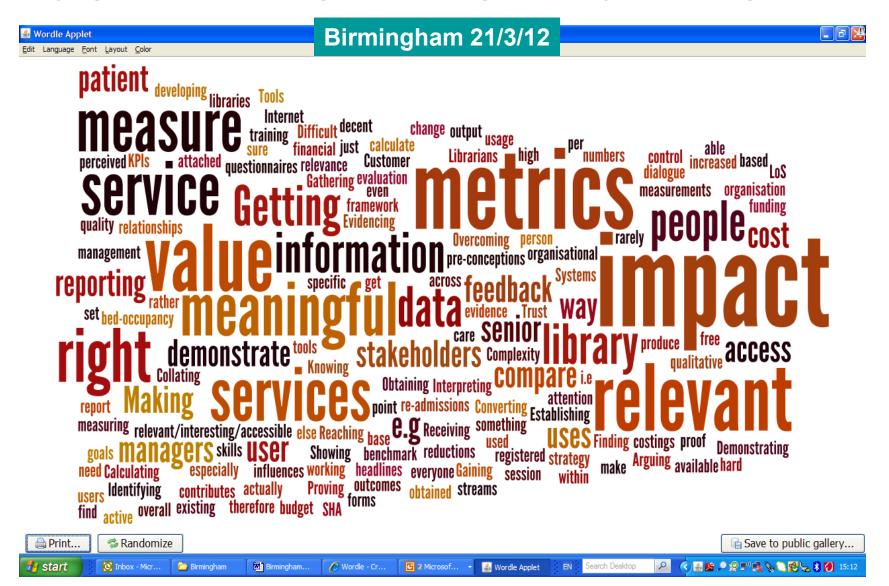
## What are the 3 top <u>challenges</u> you face when demonstrating value (i.e. applying metrics, measuring and reporting value) in your NHS organisation?



## What are the 3 top <u>competencies</u> (i.e. skills, experience and knowledge) that enable you to demonstrate value in your NHS organisation?



## What are the 3 top <u>challenges</u> you face when demonstrating value (i.e. applying metrics, measuring and reporting value) in your NHS organisation?



## What are the 3 top <u>competencies</u> (i.e. skills, experience and knowledge) that enable you to demonstrate value in your NHS organisation?



Exercise 1 'Build' conversations to share LIS value stories

Linking story lines to the 'challenges' and 'competencies' results

# York Story 1 – Meeting the CEO delivers opportunities

#### **Essence of story:**

- Chief Executive coming to our team meeting as part of his back-to-the-floor mission
- Going away with some more ideas about how the library could support the business
- We were contacted shortly after this visit by one director and also the communications manager
- · Have become more involved in their work as a result

#### Post course progress:

- Trying to establish whether we did the literature search for a tissue viability leaflet about dressings that has saved £250k – or can use it as an example to show how using evidence can have a massive benefit
- Investigating the top Athens users getting in touch with those we don't recognise we want possibly as champions?

Helen Swales (nee Thompson), Library Services Manager Library & Information Services, Leeds Community Healthcare NHS Trust, Suites 2, 3 & 8 Armley Park Court, Stanningley Road, Leeds LS12 2AE Email: <u>helen.swales@nhsleeds.nhs.uk</u> Tel: 0113 295 3087/Fax: 0113 295 3086 www.leedslibraries.nhs.uk

# York Story 2 – Evidence base for PILs

#### **Essence of story:**

- Staff must request a literature search to provide the underpinning evidence for each Patient Information Leaflet (PIL) produced
- Patients are provided with information leaflets that are fit for purpose and contain information based on the latest clinical evidence and from a reliable and trustworthy source
- The evidence (references) are included in a Certificate which is produced for each PIL– this shows how the PIL was produced and lists the underpinning research evidence
- A protocol for the literature searching process was presented as part of our Accreditation for the Information Standard
- · Awareness of the importance of evidence based care is increased across the Trust

#### **Challenges and Competencies:**

• The library was pro-active in becoming involved in this project

#### Post course progress:

 Created a brief benefits plan for library services to trainee doctors and presented this to the Medical Education Committee, asking for their help with improving library services specific to trainee doctors. Useful actions agreed

> **Debra Thornton**, Knowledge and Library Services Manager Education Centre Library, Blackpool Teaching Hospitals NHS Foundation Trust, Blackpool, FY3 8NR Tel: 01253 655596 e-mail: <u>debra.thornton@bfwhospitals.nhs.uk</u>

# York Story 3 – Carol's Story – Value of Library coaching

#### **Essence of story:**

- The Trust's 'Nursing Strategy' encourages nursing staff to embark on 'masters' degrees
- Although nursing staff may be good clinically, for some, academic work is an anxious experience; pressure on them increases especially when ward workloads prevent attendance at university workshops
- Many of them have to do the 'Evidence Based Practice Module' as part of their degree which includes having to do a literature search
- As a consequence, trade is created for Library Service one to one training on using the clinical databases
- The Learning Resources Librarian spent quite a lot of time with one nurse who was struggling and encouraged her to submit her work. The nurse was very grateful and commented that trust staff didn't appreciate the value of the Library Service to the organisation. She would email the Chief Executive to tell him

#### Post course progress:

 Nurse emailed the Chief Executive. HR reported that the Chief Executive gave the Library Service a 'plug' in his talk to new trust starters at the Corporate Trust Induction

> Janet Gee, Library Services Manager Rodney Cove-Smith Library Academic Centre The James Cook University Hospital, Middlesborough TS4 3BW Tel: 01642 854820, email:Janet.Gee@stees.nhs.uk

# York Story 4 – Keith's story - from gym to qualified nurse

#### **Essence of story:**

- 1998: Track suited young man in the gym; no specific qualifications but working as a Technical Instructor in a gym in a high secure hospital
- 2003: Enters nurse training at tentative 2<sup>nd</sup> attempt; lots of support from people in already established relationships (library and others) enabled better use of resources that lead to high marks in assignments and more confidence in classroom teaching; and then a qualified nurse role back in the same organization
- 2010: highest user of e resources in Trust; his story used as a case study for annual report; reported that he uses NHSE regularly to provide information to patients e.g. medication side effects and topics discussed at the care team meetings

#### **Challenges and Competencies:**

- Training skills
- Building effective relationships
- Knowledge of where to find staff
- Relationships over years

**Cath McCafferty**, Knowledge & Library Service Manager Mersey Care NHS Trust . Tel: 0151 473 2781 at Maghull; 0151 471 7705 at Rathbone; 07815 055815 mobile Email: <u>Cath.McCafferty@merseycare.nhs.uk</u>

# York Story 5 – iPads – a return on investment

#### **Essence of story:**

- 4 iPads acquired for benefit of library and outreach users; can be borrowed for 1 week by hospital staff so they can experiment with their use e.g. on a ward
- Popularity is encouraging non-regular library users to join and learn about other library resources
- Library staff use the iPads on outreach visits, demonstrating facilities available
- As iPads are returned borrowers are sent a survey (too early to analyse) but feedback is positive – for the wards and home

#### **Challenges and Competencies:**

- New skills for Library staff through setting up iPads, learning the technology themselves
- Explaining the technology and its use to users
- Opportunity to add value to library and to broaden user perceptions of what the library can offer
- · Raised the profile of the Library especially on outreach visits

Donna Schofield, University Hospital of South Manchester, NHS Foundation Trust Email: Donna.Schofield@UHSM.NHS.UK

# York Story 6 – Library profile raised by "doing the job"

#### **Essence of story:**

- Health Visitor/Practice Educator wins award for 'The positive contribution of black and minority ethnic professionals to the NHS – through role models. The report and a DVD toolkit is being circulated within NHS and Health Economics organisations
- Award winner received 'invaluable and unconditional support' from the Library; information specialist's name acknowledged in the report; library service profile further raised in the local and national launch at the RCN
- Support provided: literature search on a topic for which limited research was available; obtaining hard to track material; sounding board for discussing the evidence/emerging themes from the project; polishing and tabulating data; complex aspects of PowerPoint presentation for the launch
- Library gained profile through the formal acknowledgement during the launch; interest from stakeholders supports the SLA between the library and the Wakefield District PCT; other PCT staff have contacted the library service for research assistance. Library recognized for research, IT services, presentation of complex data, contribution to staff and service development

#### **Challenges and Competencies:**

Library has gained project management experience

Diane Llewellyn, Senior Librarian Mid Yorkshire NHS Hospitals Trust Email: <u>Dianne.llewellyn@midyorks.nhs.uk</u>

# London Story 1 – Should we pay?

#### **Essence of story:**

- Urgent request from PCT: is there any evidence that vitamin C perfusion (very high doses) is
  effective for people with HIV/AIDS? Information needed for meeting following week where funding
  request to be considered. Reference interview established that discussion is politically sensitive
- Turned round search in a couple of hours: no evidence to support the request
- Results received with rapture: cost-saving for PCT, and helped them handle politically difficult meeting

#### **Challenges and Competencies:**

- Knowledge of literature
- Expert searching
- Political radar
- · Information analysis and summary
- Being there when opportunities arise (it was chance I picked up the search request, colleague being on leave, and search requester was also filling in, as colleague tasked with preparing report for meeting had gone AWOL)

Tom Roper - Primary Care Librarian West Sussex Knowledge & Libraries Mobile: 07786 981123 E-mail: Tom.Roper@nhs.net http://www.westsussexknowledge.nhs.uk/

# London Story 2 – Impact on patient care survey

#### **Essence of story:**

- 6 health libraries in South East London worked together in order to create a survey for Library users in order to show how Libraries impact positively on patient care
- A prize of a Kindle was offered to encourage participation
- 727 responses were received so each Library had examples of the impact of their services on patient care which they could then use to show how the Library contributes to individual patient care, care pathways and changes in practice.
- A report can be viewed at: <u>http://www.londonlinks.nhs.uk/groups/lhl-area-groups/sel-minutes/SELLIBsurvey2.pdf</u>

#### **Challenges and Competencies:**

- Links to other professionals
- Seeing the bigger picture
- Having case studies and examples to hand
- Marketing Skills
- Ability to argue your case



**Charlie Leppington** - Head of Library and Knowledge Services South London Healthcare NHS Trust Library, Education Centre Princess Royal University Hospital, Orpington, BR6 8ND Email: <u>c.leppington@nhs.net</u>

Tel: 01689 864305/6, Website: http://fec.slh.nhs.uk/library

# London Story 3 – Health Evidence Resources

#### **Essence of story:**

- Intranet single point of access to health resources
- Easy access to information identified as a problem, acknowledged by clinical governance
- Libraries invited to contribute to working group

#### **Challenges and Competences:**

- · Persuading Comms and IT
- Working across multiple libraries and sectors
- Updating access arrangements
- Expertise in knowledge source awareness
- Networking to enable partnerships
- Ability to argue case

Michael Larkin - Manager, Bloomsbury Healthcare Library, michael.larkin@uclh.nhs.uk

# Birmingham Story 1 – Getting noticed

#### **Essence of story**:

- Survey showed large number were unaware of service
- · User base needs to increase
- Their views of the value of the services
- Does the expense of the service match the value placed by the users?

#### **Challenges and Competencies:**

- Getting users involved and engaged
- How do we get non-users interested?
- Selling/marketing 'what's in it for me?'
- Maintaining momentum
- Using 'people' skills of the team
- How to approach individuals and GPs? Both users and non-users
- Showing value

Anon

# Birmingham Story 2 – Advocate the value of LIS to national and regional strategic stakeholders

#### **Essence of story:**

- · Need to advocate the value of LIS at strategic levels during turbulent times
- Ensure that the voice of LIS is heard during and after the NHS reorganisation
- Ensure the continued investment in and role of LIS in the delivery of patient care

#### **Challenges and Competencies:**

- Knowing where to report evidence of impact in the organisation, owing to the current NHS transition
- Reaching the ears of those that have strategic influence



# Birmingham Story 3 – How not to make changes

#### **Essence of story:**

- The introduction of charges created problems when one vocal consultant disagreed with proposals & created a lot of "noise" with the consultant body, causing a lot of bad publicity
- Don't rely on a small group of stakeholders as they may not be representative of the whole
- Using email as an expedient form of communication is not appropriate for all staff groups and the damage can be compounded when a wide audience is cc'd to a message

#### **Challenges and Competencies:**

- · Communication & presentation skills
- Networking & publicity
- How to initiate change

**Gwen Giles**, MLib BA Dip Lib MCLIP, Faculty Knowledge Manager, Heart of England NHS Foundation Trust, Good Hope Hospital, Rectory Road, Sutton Coldfield, B75 7RR. Tel: 0121 424 7830. email: <u>gwen.giles@heartofengland,nhs.uk</u>

# Birmingham Story 4 – When noone cares...

#### **Essence of story:**

- For Library Quality Assurance Framework (LQAF) wrote an annual report
- Worked with local recommendations for format
- Approved by Line Manager
- Approved by Steering Committee
- Not escalated beyond internal, as the Library report was not of interest
- The Library Service had undergone lots of new service and library developments, received certificate of innovation for Sally Hernando prize & extremely successful year for obtaining external funding
- Very time consuming and demoralising

#### **Challenges and Competencies:**

- Challenges What to measure, making information relevant/interesting/accessible to management, knowing where to report evidence of impact, proving need/relevance of library service, finding metrics that are meaningful to senior managers, getting the right people to demonstrate it
- Competencies Communication, quality of processes, networking and publicity, statistical analysis, report writing skills, knowledge of the organisation



Susan Smith, Senior Librarian, JET Library, Leighton Hospital, Middlewich Road, Crewe, Cheshire, CW1 4QL. Tel: (01270) 612538 Internal Ext: 3172. email: susan.smith@chester.ac.uk

# Birmingham Story 5 – It's your Knowledge Centre

#### **Essence of story:**

- CAS (Current Awareness Service) but not called that
- Directly linked to organisational structure
- "Owned" by the Clinical Centres

#### **Challenges and Competencies:**

- Knowledge
- Influencing change
- Ability to co-operate and network



**Dave Little**, Library Services Manager Shrewsbury & Telford Health Libraries, Royal Shrewsbury Hospital, Myttton Oak Road, Shrewsbury SY3 8XQ Tel 01743 492507 email: David.Little@sath.nhs.uk

# Birmingham Story 6 – Timely document misses the mark

#### **Essence of story:**

- We locate new research about the effect of hospital mergers upon patient care (both Foundation Trusts we serve are in the process of being granted permission to merge)
- We create a blog post and send details of the research to the Comms department of one Trust and to the CEO of the other Trust
- · Comms department pleased but no further feedback. CEO has seen research already
- Also offered CEO contact with a merger specialist that we happen to know and CEO thanked us for the contact and may follow up this contact information

#### **Challenges and Competencies:**

- Challenges reaching the right people; reporting in the right way; getting feedback
- Competencies Co-operate and network outside the organisation/NHS; knowledge of the organisation; report writing skills; experience in using knowledge; designing services that assist in the creation of knowledge; communication and presentation skills

Alison Day, Acting Principal Librarian East Dorset NHS Library Service, Poole Hospital Library | St Ann's Library | Royal Bournemouth Hospital Library, Tel: 01202 442102 / 704270; For the latest Library news view our blog http://eastdorsetnhslibrary.wordpress.com/ email: alison.day@poole.nhs.uk

## **Exercise 2**

Sense checking your LIS against the building blocks that need to be in place to calculate and demonstrate value 'Traffic light' your LIS

### Sense check from York – 29/2/12

Key Steps	Building Block Statements	Assessment as at (date)
1	Clarity of business purpose/objective/value proposition of LIS and alignment of LIS with your organisation's vision, strategy, core objectives and KPI's	7 15 2
2	Agreement on the level or levels that you are/will be valuing LIS	<b>3 10 11</b>
3	Owner/stakeholder established for LIS - who will share responsibility for success	4 13 7
4	A baseline established for LIS - your starting/current position	1 10 2
5	A future position/desired state identified for LIS - what success looks like	<b>5 1</b> 7 <b>3</b>
6	Level of understanding of your organisation's existing methods and approaches to value, metrics, KPI's etc	<b>4 1 9</b>
7	Regular assessment of progress, improvement and the value add of LIS against the baseline using tangible and intangible measures	1 18 5
8	Communicating successes, progress and learning with impact using existing business management channels and performance governance frameworks	2 18 4
9	Access to meaningful external LIS benchmarks, good practice and latest LIS thinking to evidence the value of LIS to your organisation	8 14 1

In place and fit to support LIS 'Calculating and demonstrating value'

- In place but with room for improvement to support LIS 'Value'
- Not in place and introduction would benefit LIS 'Value'

### Sense check from London – 06/3/12

Key Steps	Building Block Statements	Assessment as at (date)
1	Clarity of business purpose/objective/value proposition of LIS and alignment of LIS with your organisation's vision, strategy, core objectives and KPIs	7 17 1
2	Agreement on the level or levels that you are/will be valuing LIS	<b>9 6 1</b>
3	Owner/stakeholder established for LIS - who will share responsibility for success	7 17 1
4	A baseline established for LIS - your starting/current position	8 10 6
5	A future position/desired state identified for LIS - what success looks like	0 15 10
6	Level of understanding of your organisation's existing methods and approaches to value, metrics, KPI's etc	2 12 11
7	Regular assessment of progress, improvement and the value add of LIS against the baseline using tangible and intangible measures	3 17 4
8	Communicating successes, progress and learning with impact using existing business management channels and performance governance frameworks	1 20 4
9	Access to meaningful external LIS benchmarks, good practice and latest LIS thinking to evidence the value of LIS to your organisation	9 13 3

In place and fit to support LIS 'Calculating and demonstrating value'

- In place but with room for improvement to support LIS 'Value'
- Not in place and introduction would benefit LIS 'Value'

### Sense check from Birmingham – 21/3/12

Key Steps	Building Block Statements	Assessment as at (date)
1	Clarity of business purpose/objective/value proposition of LIS and alignment of LIS with your organisation's vision, strategy, core objectives and KPIs	<b>5 8 7</b>
2	Agreement on the level or levels that you are/will be valuing LIS	• 10 10
3	Owner/stakeholder established for LIS - who will share responsibility for success	6 5 9
4	A baseline established for LIS - your starting/current position	3 13 4
5	A future position/desired state identified for LIS - what success looks like	3 10 7
6	Level of understanding of your organisation's existing methods and approaches to value, metrics, KPI's etc	2 10 8
7	Regular assessment of progress, improvement and the value add of LIS against the baseline using tangible and intangible measures	2 18 -
8	Communicating successes, progress and learning with impact using existing business management channels and performance governance frameworks	• 15 5
9	Access to meaningful external LIS benchmarks, good practice and latest LIS thinking to evidence the value of LIS to your organisation	

In place and fit to support LIS 'Calculating and demonstrating value'

- In place but with room for improvement to support LIS 'Value'
- Not in place and introduction would benefit LIS 'Value'

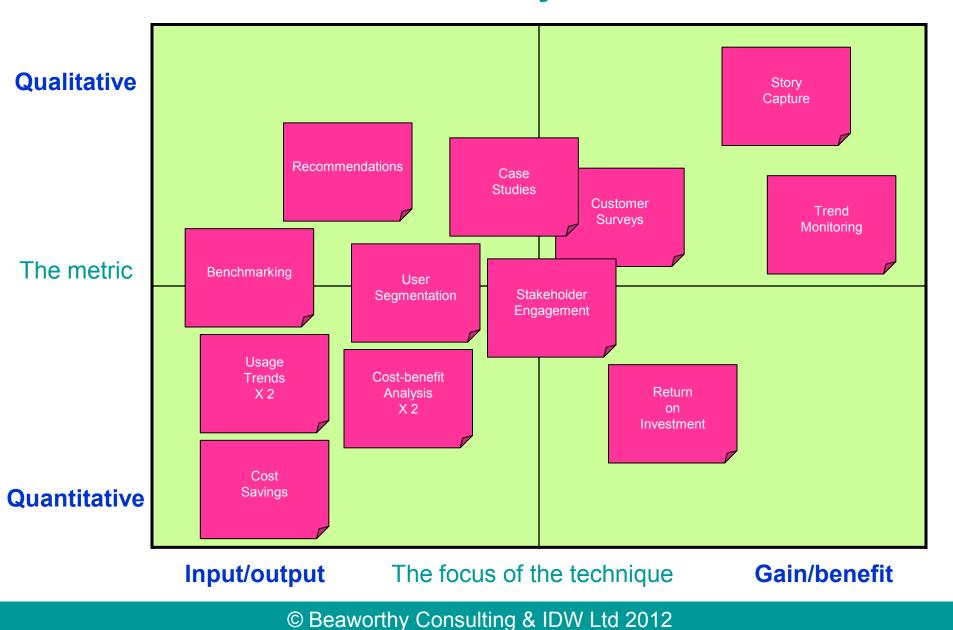
## **Exercise 3**

Applying your experience, stories and learning from today thus far to value and assess an NHS LIS service or product Exploring what will work in the NHS

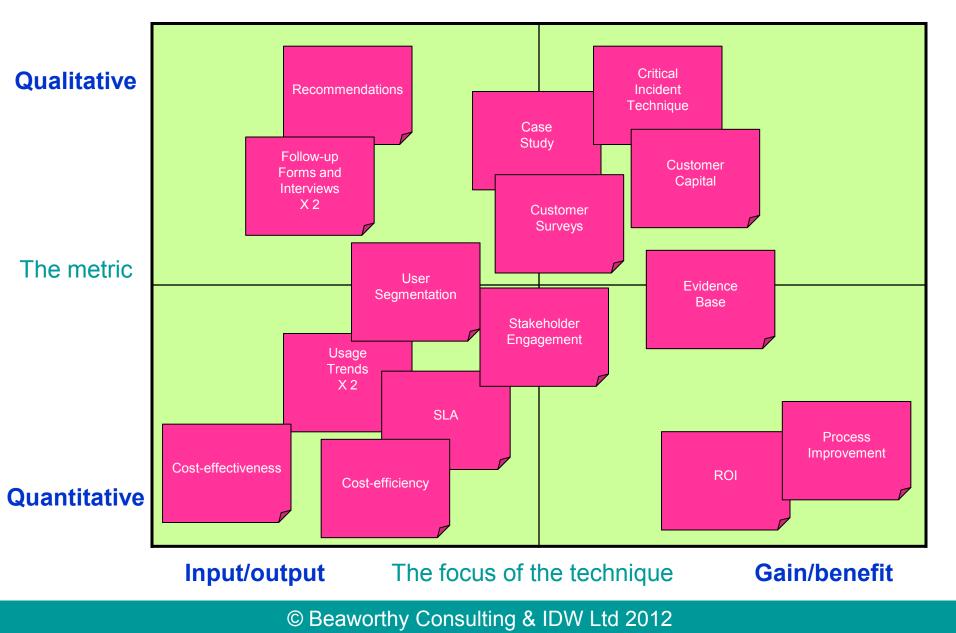
© Beaworthy Consulting & IDW Ltd 2012

context

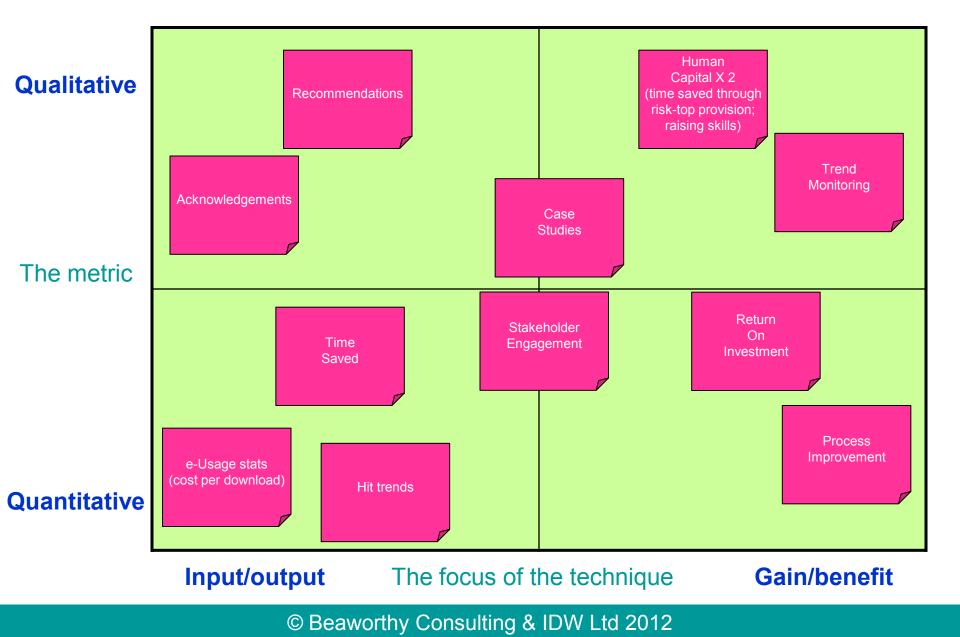
### e-Resources/e-Library – York 29/2/12



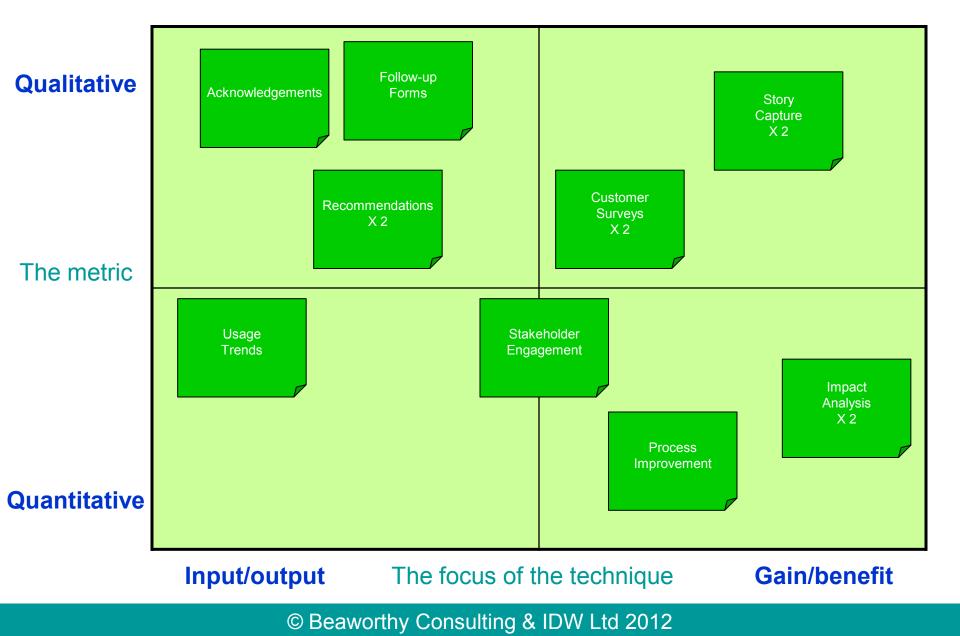
### e-Resources/e-Library – London 6/3/12



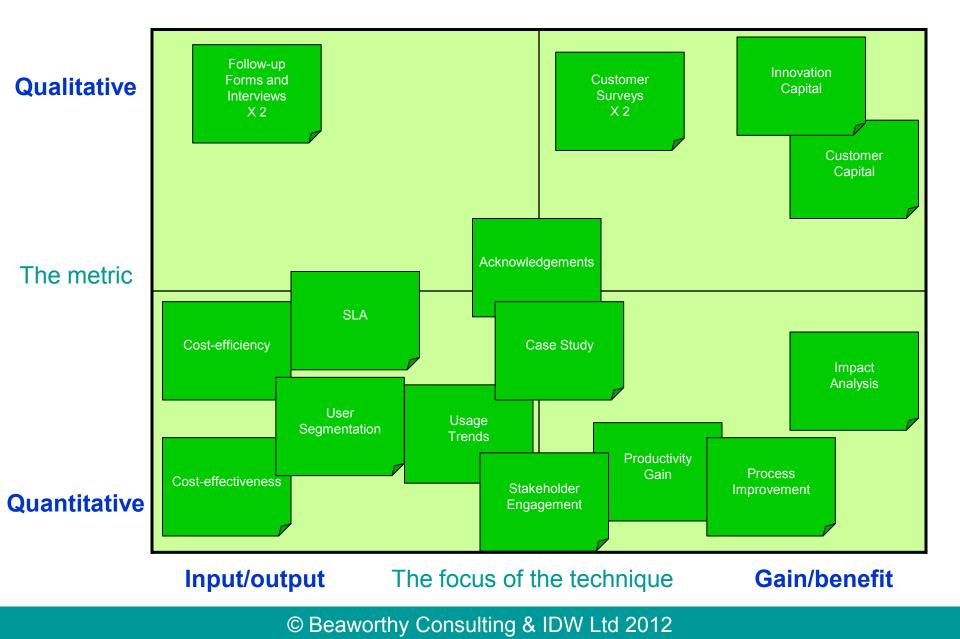
### e-Resources/e-Library – Birmingham 21/3/12



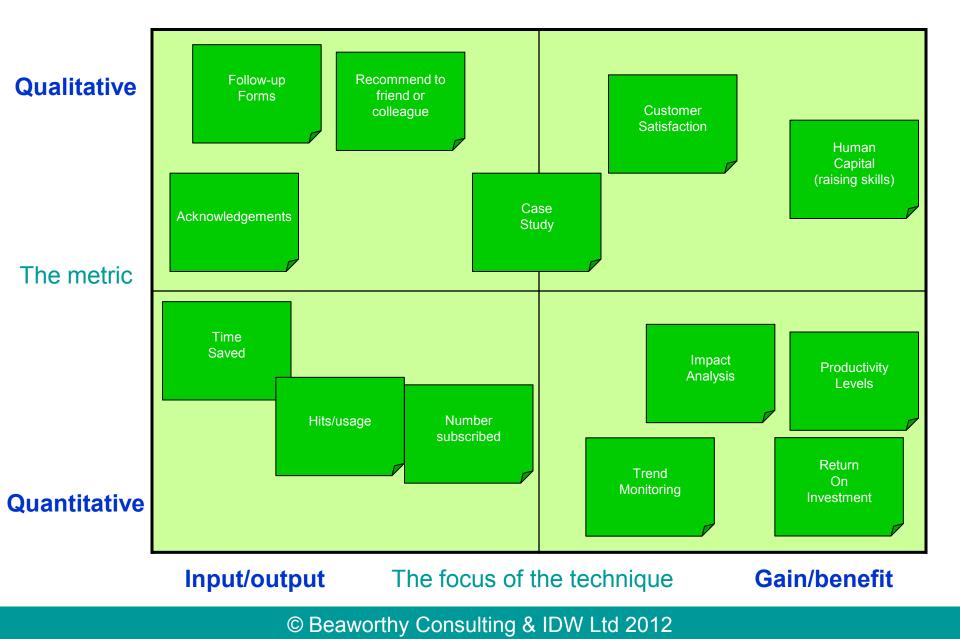
### Current Awareness Services – York 29/2/12



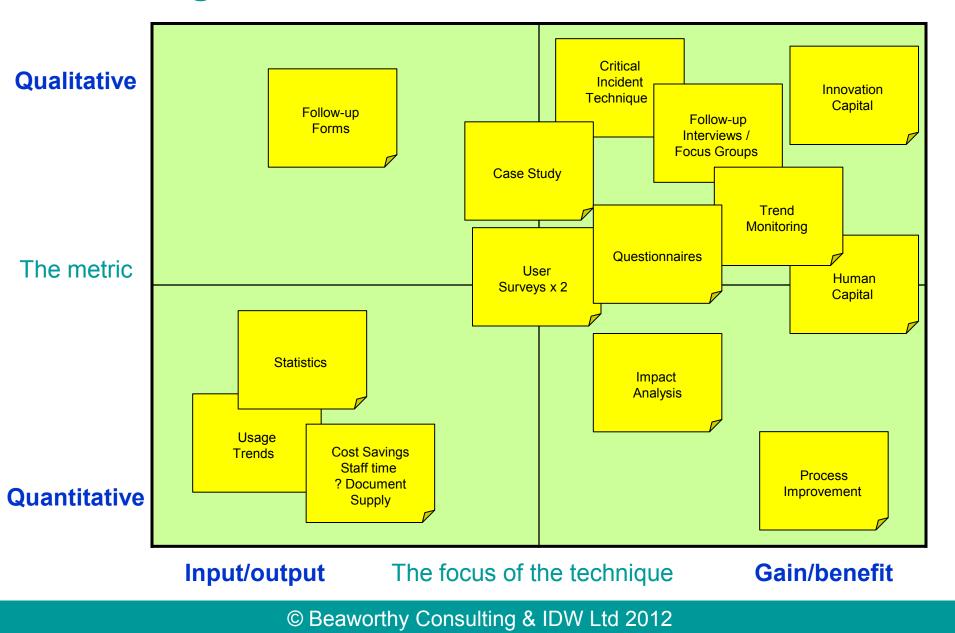
### Current Awareness Services – London 6/3/12



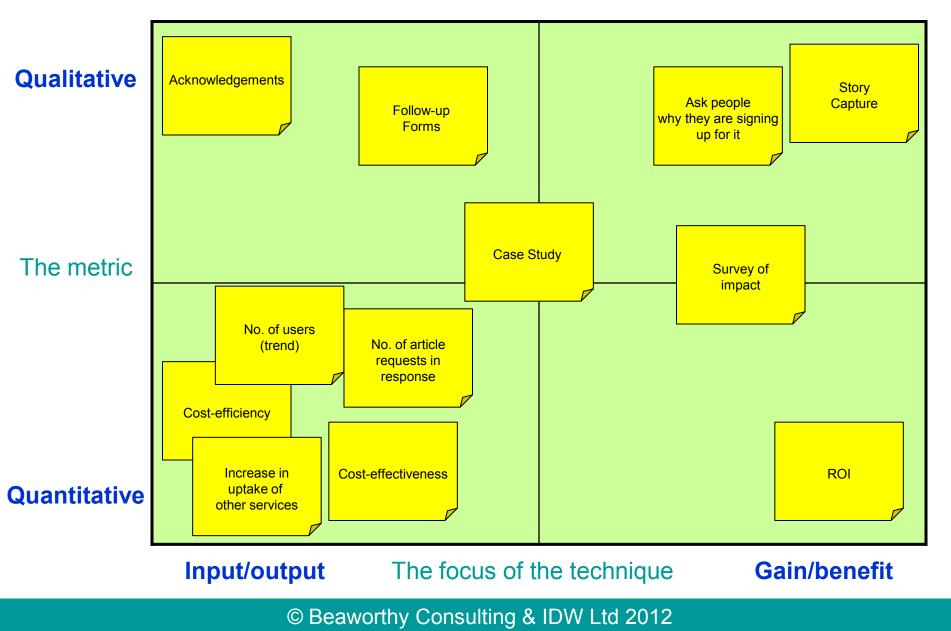
### Current Awareness Services – Birmingham 21/3/12



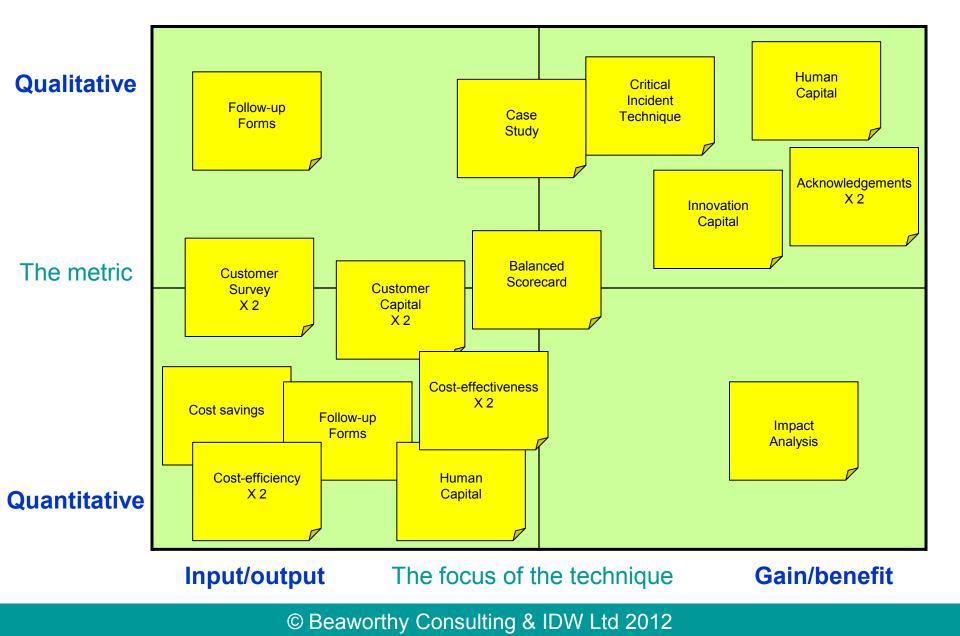
### Alerting Services – York 29/2/12



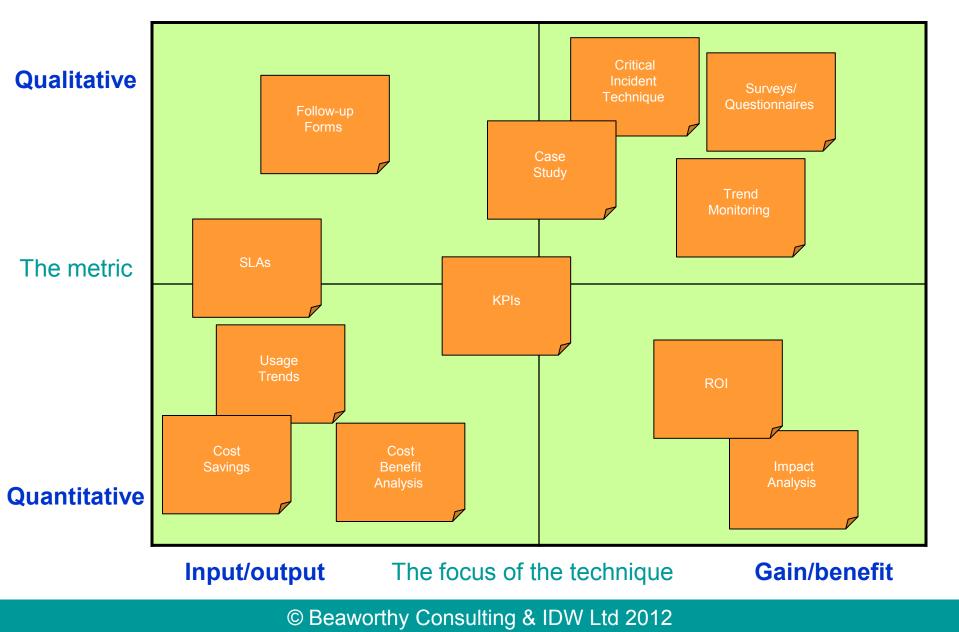
### Alerting Services – London 6/3/12



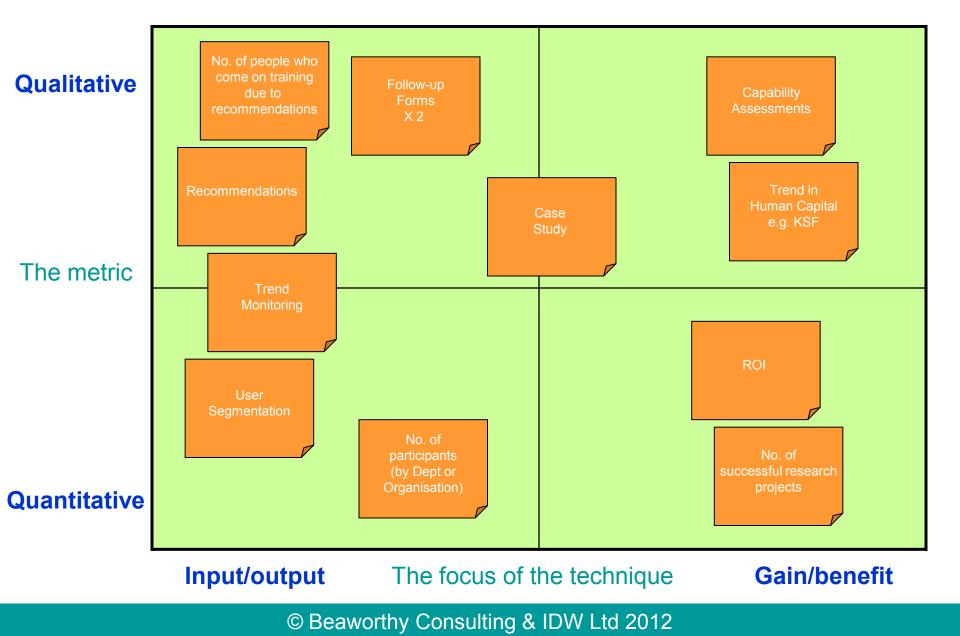
#### Alerting Services – Birmingham 21/3/12



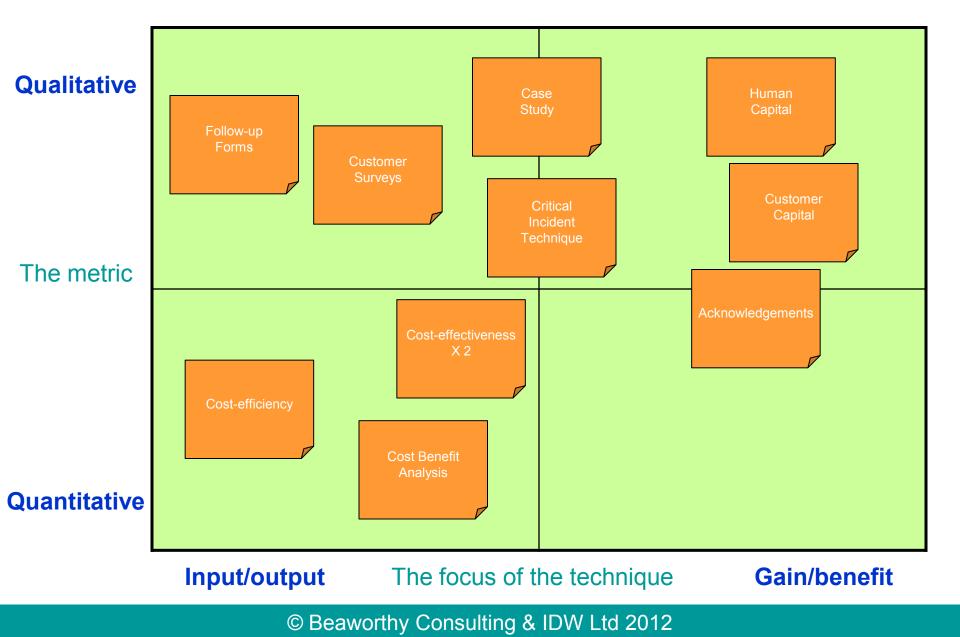
### Training in Information skills – York 29/2/12



#### Training in Information skills – London 6/3/12



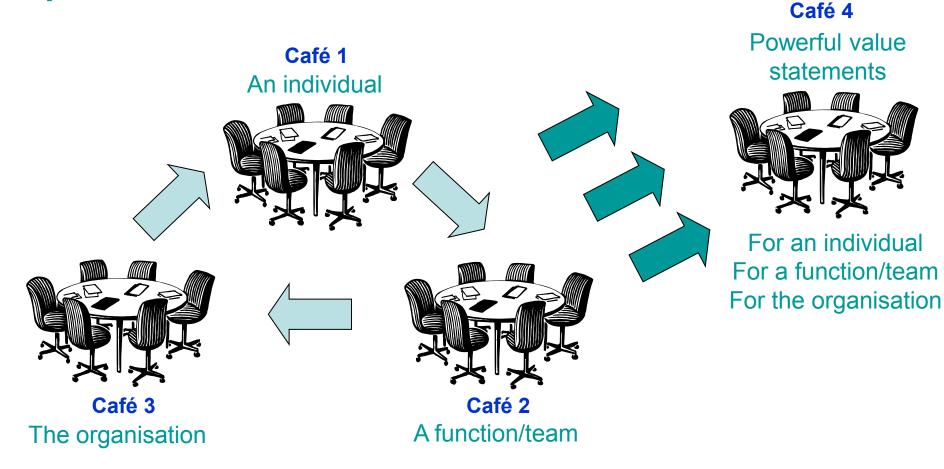
#### Training in Information skills – Birmingham 21/3/12



## Exercise 4 The ingredients to create powerful value statements for key stakeholders

Café conversations to explore key aspects of a benefits plan

# Café conversations to create powerful value statements



Café conversations informed by the selected measurement techniques, key aspects of the benefits plan, your own experience, and the information gathered via NHS costing techniques and impact tool kits

## Café 1 – an individual – York 29/2/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness an individual wants to gain from the service	<ul> <li>Professional Knowledge (keeping it up-to-date)</li> <li>Saving time (saves them having to search for recent developments)</li> <li>Adds value to the information (by filtering and tailoring of the information)</li> <li>Kept informed of national initiatives/views</li> <li>Aids clinical/professional practice, CPD</li> <li>Personal satisfaction from gaining new knowledge</li> <li>Assurance that information is complete and comprehensive (because it has been provided by information professionals</li> <li>Improved work/life balance (many professionals do CPD in their own time – having concise regular updates may reduce the time needed on CPD)</li> <li>Improved employability/job prospects</li> </ul>
Which individual goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li>Improved patient care; Improved patient safety</li> <li>Improved clinical effectiveness</li> <li>Improved time effectiveness; Improved cost effectiveness</li> <li>Reduced risk</li> <li>Aids research &amp; innovation</li> <li>Contributes to professional competence and KSF competencies</li> <li>Improves teaching and mentoring skills</li> <li>More effective team member</li> <li>Enables change/innovation</li> <li>Raises the credibility of the team</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Measure delivery (e.g. number of alerts, or frequency of alerts)</li> <li>Customer satisfaction feedback (e.g. tagline in email "contact the library if you this find this information useful/not useful")</li> <li>Satisfaction survey</li> <li>Impact survey</li> <li>Enable "read receipts" on emails to ensure items are being read</li> <li>Collect some narratives from individuals highlighting how this information was used</li> <li>On interlibrary loan/document request forms ask if request initiated by information provided by an alert</li> </ul>

## Café 1 – an individual – London 6/3/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness an individual wants to gain from the service	<ul> <li>Easy and quick to keep professional knowledge up to date</li> <li>No need to set up lots of RSS feeds for themselves → bringing a lot of resources together for them</li> <li>Lack of skills, lack of time, collation, lack of knowledge of resources</li> <li>Personalised, targeted for their needs, authoritative sources, filtering (RSS aggregators don't do this)</li> <li>Widening knowledge beyond your specialism</li> <li>Can help avoid IT restrictions e.g. Restrictions on Google reader etc.</li> <li>Raise awareness of other Library resources</li> </ul>
Which individual goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li>KSF appraisals – tell their manager they've found out x, y and z</li> <li>Items to read for portfolio; Career development</li> <li>CPD accreditation/revalidation/Professional bodies</li> <li>To be on cutting edge, using latest techniques</li> <li>Opinion leading – not wanting to be the person who hasn't heard of something</li> <li>Service, department development</li> <li>To be an innovative organisation</li> <li>Bringing evidence to the front line</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Signed up for alerting services within a day</li> <li>People will be asked after six months if they are happy with the service</li> <li>Let people know how frequently it will be provided, regularity</li> <li>Every time we see something that's important to you, we'll send it</li> <li>Endeavour to ensure that the information isn't any older than(added to an authoritative source within a period of)</li> <li>Deliver on smart phones etc.</li> </ul>

### Café 1 – an individual – Birmingham 21/3/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness an individual wants to gain from the service	<ul> <li>Time saving/aide memoire</li> <li>Increasing knowledge of wider NHS</li> <li>Helps individual keep abreast in their field</li> <li>Better informed → improved chance of career progression</li> <li>Ready made service</li> <li>Support professional CPD</li> <li>Job satisfaction</li> <li>Saves embarrassment – saves face</li> </ul>
Which individual goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li>KSF requirements</li> <li>Increases intelligence of the workforce – Human capital</li> <li>Appraisal targets → objectives etc.</li> <li>Credibility of individual – Career advancement</li> <li>Professional indemnity/risk reduction</li> <li>Awareness of research</li> <li>Helps us to be evidence based</li> <li>Service improvement</li> <li>Self assessment to internal standards</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Timing</li> <li>Quality Assurance</li> <li>Flexibility/customisable</li> <li>Focused</li> <li>Resources used</li> <li>Relevant content</li> <li>Survey – is it meeting people's needs</li> </ul>

## Café 2 – a function/team – York 29/2/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness a function/team wants to gain from the service	<ul> <li>Latest evidence, quick and easy format, cheap/free, impact on patient care, feed into guideline development</li> <li>Team development/training sessions</li> <li>Personal development</li> <li>Accessibility</li> <li>What's new? Currency information</li> <li>Team link</li> <li>Viability of the business unit</li> <li>Topic definition</li> <li>Tailorable? Speaker requirements</li> </ul>
Which function/team goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li>Safety</li> <li>Accreditation standards</li> <li>Awareness of changes in standards</li> <li>NHSLA CQUINS CQC QIPP &amp; cost savings/improvements</li> <li>Group communication and consistent messages</li> <li>Team discussion- leads to evidence based practice</li> <li>Creating a culture of awareness to support transition/skill mix</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>'Releasing time to care-well'</li> <li>Able to change practice – for the better</li> <li>Knowledge would lead to higher expertise, reputation /recruitment and retention increased</li> <li>Inspire research and attract funding</li> <li>Supports working practice and managerial aspects</li> <li>From knowledge to practice</li> </ul>

### Café 2 – a function/team – London 6/3/12

News/alerting/current awareness services	
The advantage, profit, improvement, usefulness a function/team wants to gain from the service	<ul> <li>Keeping up to date – Saving time in keeping up to date – proactive rather than reactive</li> <li>Cost/effectiveness, Cost/saving e.g. length of stay, prescribing decisions</li> <li>Contribution to team discussions, team building</li> <li>Raising basic level of knowledge → CPD</li> <li>Risk reduction</li> <li>Cascade to other teams</li> <li>Process improvement, knowledge management</li> <li>Research</li> </ul>
Which function/team goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li>Risk reduction (less litigation)</li> <li>Team building</li> <li>Contribution to patient care – evidence based patient care</li> <li>Shorter lengths of stay</li> <li>Use innovative methods of transformation</li> <li>Team CPD</li> <li>QIPP; Meeting national targets</li> <li>Contribute to research agenda</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Needs assessment – what, why, when, frequency, detail?</li> <li>Review of existing services to inform change</li> <li>Range of subject resources included (articles, DH docs etc.)</li> <li>Frequency – standards</li> <li>Team may have educational targets/competency levels for improvement or competitiveness</li> <li>Maintain quality and standards</li> </ul>

### Café 2 – a function/team – Birmingham 21/3/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness a function/team wants to gain from the service	<ul> <li>Saving time – if person doing themselves previously</li> <li>Keeping up to date with innovations</li> <li>Create opportunities – implement innovations from other trusts – which can result in new partnership working</li> <li>Shared knowledge in team – promote discussion and debate</li> <li>Professional development – contribute to professional validation (e.g. nursing, physician)</li> <li>Increased productivity and motivation – more competitive</li> </ul>
Which function/team goals and targets will be enabled by the service? How do these link to the organisation's drivers, objectives, and goals?	<ul> <li><u>Risk reduction</u></li> <li>Service improvement</li> <li>Professional development – Appraisal</li> <li>Clinical effectiveness (if appropriate) – guiding clinical practice e.g. new guideline</li> <li>Infection control</li> <li>Encourage culture of using evidence as part of the day</li> <li>Cost efficiency – use of departmental resources – using them more economically</li> <li>Improve policies and guidelines – linked to CQC, NHSLA and QIPP agenda</li> <li>Local drivers</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Frequency – timescales</li> <li>Increases in document supply or downloads – Impact on the uptake of other Library services</li> <li>Tailoring</li> <li>Identify most relevant evidence for that team</li> <li>Involvement in choice of resources used – review</li> <li>Evaluate impact</li> </ul>

### Café 3 – the organisation – York 29/2/12

#### News/alerting/current awareness services

The advantage, profit, improvement, usefulness the organisation wants to gain from the service	<ul> <li>Support organisational change through raising awareness of innovation</li> <li>Raising the organisational profile by providing alerts to research published by employees – thus making the organisation more attractive to potential employees and supporting the research agenda</li> <li>Boosting trust profile and research activity.</li> <li>Alerting comms team to news about the trust in the HSJ</li> <li>Increased compliance with statutory guidance e.g. NICE</li> <li>Monitoring best practice – Horizon Scanning could highlight improvement/investment in services rather than focussing on existing services.</li> <li>Competition, benchmarking, equitable for the organisation</li> <li>Identifying staffing issues and clinical practice – human capital investments</li> </ul>
Which organisational targets and objectives will be enabled by the service?	<ul> <li>Evidence based care; Patient safety targets (MRSA)</li> <li>NHSLA compliance improved – NICE alerts, achieving reduced insurance and therefore direct financial benefits</li> <li>Staff engagement and innovation</li> <li>CEO support – impacts on changing the culture</li> <li>Contribution to cost effectiveness (£20bn savings) CIPs (Cost Improvement Programmes)</li> <li>Achieving FT status</li> <li>Patients satisfaction</li> <li>Staff development and training – keep up to date and achieve professional status/qualifications</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Individualised alerting service</li> <li>Right information at the right time and using the right language</li> <li>Renewal of SLAs for remote services and to fulfil SLAs</li> <li>Tailoring services to specific organisational challenges</li> <li>Making the most use of collections – stock management &amp; value for money</li> <li>Acting as a repository for papers</li> </ul>

### Café 3 – the organisation – London 6/3/12

News/alerting/current awareness services	
The advantage, profit, improvement, usefulness the organisation wants to gain from the service	<ul> <li>Work force access latest evidence – immediacy</li> <li>Current, driven to innovate, business intelligence</li> <li>Competitive edge – risk reduction</li> <li>Efficiency (cost-effective); 'do once and share'</li> <li>Professional, impartial, using reputable, authoritative sources 'best for the purpose'</li> <li>Improving patient care and experience – meeting external requirements for provision of service and culture of change – meeting expectations of what is standard</li> </ul>
Which organisational targets and objectives will be enabled by the service?	<ul> <li>Improving patient outcomes/experience</li> <li>Up to date work force – evidence based practice, CPD revalidation</li> <li>R and D support, NHSLA (alerts re. MRSA)</li> <li>Reduced financial risk</li> <li>Reducing length of stay</li> <li>Education of work force</li> <li>'A great organisation to work for'</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Resources to be from authoritative resources, properly targeted and filtered</li> <li>Evidence of how the service would impact positively and change practice</li> <li>Access to pre-published material</li> </ul>

#### Café 3 – the organisation – Birmingham 21/3/12

News/alerting/current awareness services	
The advantage, profit, improvement, usefulness the organisation wants to gain from the service	<ul> <li>Innovation improvements</li> <li>Horizon scanning /service preparedness/responsiveness of organisation</li> <li>Cost effectiveness of KM service and service efficiency</li> <li>Updating knowledge</li> </ul>
Which organisational targets and objectives will be enabled by the service?	<ul> <li>Staff retention/investment in workforce</li> <li>Creating a culture of knowledge sharing/improved best practice</li> <li>Achieving external accreditation and quality assurance targets</li> <li>Risk reduction</li> <li>Knowledgeable workforce – upwards trend</li> <li>Evidence based and current information</li> <li>QIPP</li> <li>Link into KPI</li> </ul>
Levels of service performance (targets and stretch targets) to be achieved or aimed for	<ul> <li>Measuring staff retention rates – Human Capital increases – Staff appraisal</li> <li>Process improvement</li> <li>Research output</li> <li>Organisational profile – publication/conference submissions</li> <li>Risk reduction register</li> <li>Current references on policy documents/practice guidelines</li> </ul>

# Café 4 – a powerful value statement for an individual – York 29/2/12

*" I can make a difference with timely, up to the minute comprehensive information.* 

Let the library deliver it to you...... "

•...

# Café 4 – a powerful value statement for an individual – London 6/3/12

"Do you want a quick and easy way of keeping up to date?

We select and filter information from authoritative sources to help your professional development.

Our free alerting service helps you stay ahead of your colleagues and complete your portfolio with ease.

Sign up today!"

## Café 4 – a powerful value statement for an individual – Birmingham – 21/3/12

- "Keeping up to date
- Saves time
- Enhancing your reputation
- Be a success at work
- Let the Library service take the strain
- Be in the know without the effort"

# Café 4 – a powerful value statement for a function/team – York 29/2/12

*"Our expertise supports your team to embed evidence based culture which saves time, money and lives"* 

"(*Giving you the competitive edge to survive* could be added depending on the audience)"

Evidence based practice...... cost effective delivery...... we save lives ...... multi-functional solutions ......knowledge is power ...... time is money ...... multi-functional solutions......cheaper than a conference

# Café 4 – a powerful value statement for a function/team – London 6/3/12

"Do you want to improve:

- Quality
- Competence
- Targets
- Effectiveness

And save time?

Then sign up for our tailored alerting services"

## Café 4 – a powerful value statement for a function/team – Birmingham 21/3/12

*"Reduce risk, promote innovation and collaboration, saving your time, encouraging team discussion on ways to improve patient care, using quality and timely evidence summaries"* 

# Café 4 – a powerful value statement for the organisation – York 29/2/12

"Alerting services: giving (the trust) the lead on cost-effective, quality patient care"

# Café 4 – a powerful value statement for the organisation – London 6/3/12

"Provide an authoritative, evidence based alerting service that will underpin quality and improvement in patient care, drive innovation, and maintain and develop the knowledge base of the workforce"

## Café 4 – a powerful value statement for the organisation – Birmingham 21/3/12

"An Alerting Service stimulates a well informed workforce which reduces risk and enhances organisational performance while improving the patient experience"

## **Exercise 5** What have we learnt? What action will you take?

Group post it notes and themes Action Planning Postcards

## What did we learn – discussion (1)

- □ Use the language of the organisation
- □ Standardise on our 'value' language use the glossary
- We need to share what we're doing and use our collective experience
- □ You must appeal to your working context
- Go back and look at your baseline especially when services plateau
- Embed captured stories into our activities to use as tangible indicators for the organisation
- Remember to think of the relative value of services which should we fund?
- □ If we identify something new to do, consider the impact it will have before taking the decision to do or not to do

## What did we learn – discussion (2)

- Stakeholders involve a lot more don't assume we know what they want
- □ Create willingness in champions and users to provide information on value i.e. swap information for the service
- Different messages for different stakeholders
- Need ideas on how to engage and manage champions what are the ways? What are the channels?
- How to use baselines with different stakeholders without creating lots of baselines?
- Contributing evidence to policy documents what's the value of the LIS contribution e.g. NHSLA? How can we show it?





## **SHALL Training Events 2012**

#### Calculating and Demonstrating Value of NHS Library and Information Services

s.e.ward@btinternet.com ian.wooler@idwconsultancy.com