

## Quality and Improvement Outcomes Framework for Library and Knowledge Services





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### **Objectives for the Session**

- To provide an introduction and overview of the Quality and Improvement Outcomes Framework
  - Structure of the Framework
  - Overview and scope of the Outcomes
- To provide an outline of the self-evaluation and validation process for the Baseline
  - Self-evaluation of the levels
  - Overview of evidence requirements
- To discuss support in place



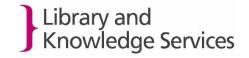
### Question

Please confirm if these objectives cover your expectations for the session





# Section 1 Strategic Context and Development of the Quality and Improvement Outcomes Framework





### Strategic Context for the Framework

Healthcare is a knowledge industry. It is not enough to have the right teams in the right place, collaborating to deliver high quality, efficient patient care. It is essential that they use the right knowledge and evidence at the right time.

(NHS Library and Knowledge Services in England Policy<sup>1</sup> p. 2)

- Knowledge for Healthcare: a Development Framework
- NHS Library and Knowledge Services in England Policy
- HEE Topol Review
- NHS Long Term Plan





Environment Continuous

Improvement Cvcle

> Plan Quality Intervention

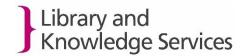
### **HEE Quality Framework**

 The Outcomes Framework will be integral to the HEE Quality Strategy<sup>6</sup> which defines quality as:

Education and training within a well-led effectively managed and supportive learning environment that provides opportunities for the current and future healthcare workforce to develop the knowledge, skills, values and behaviours to deliver the highest quality patient care. p.7

 They are also critical to the HEE Quality Framework <sup>7</sup> providing a new outcomes-based structure to support quality and improvement and evidence for quality standard 1.5:

The learning environment provides suitable educational facilities for both learners and educators, including space, IT facilities and access to quality assured library and knowledge service. p.9





Act

Study

Plan

Do

### **Development of the Outcomes Framework**

HEE's Knowledge for Healthcare provided a commitment to:

...refresh the Library Quality Assurance Framework to ensure it continues to drive service improvement and is aligned with wider education and service monitoring processes. p.48

- Quality Improvement approach to development
- Informed by current thinking and robust research on impact evaluation
- Development builds on the learning from both the LQAF process and the 2018 pilot of the draft NHS Library and Knowledge Services Quality Improvement Standards.





### Development – who was involved

- HEE Knowledge for Healthcare Board
- Quality and Impact Working Group
- Quality Task and Finish Group
- HEE Regional LKS Leads
- HEE Quality and Improvement Project Group
- Sharon Markless and Alison Brettle
- HEE National Quality team





### What we learned from the Pilot

### What we did:

- Evidence Collection
- Feedback
- Assessment
- Retrospect



Overall the pilots welcomed the new standards and the focus on service improvement

### **Changes Made:**

- Ensured no duplication and repetition across the outcomes
- Levels of development defined
- Scope for each outcome included
- Evidence expressed as outcome rather than process







### Launching the Outcomes Framework

- Working with HEE Communications Team
- Designed and published on HEE website
- Social Media, HEE Life
- Launch date in June
- Briefing to Chief Executives from Patrick Mitchell



### Question

Has everyone seen a copy of the preliminary outcomes?



# Section 2 Introduction and Overview of the Quality and Improvement Outcomes Framework



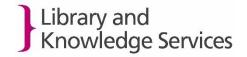


### The Outcomes Framework

This new framework signals a step change to help library and knowledge staff both to improve service delivery for patients and to better articulate the positive outcomes of their work. Therefore, I am delighted to commend this new Quality and Improvement Outcomes Framework to you. It sets the standards and ambition for quality and improvement in the delivery of these vital services."

Patrick Mitchell, Director of Innovation and Transformation HEE







### **Purpose of the Outcomes Framework**

The focus of the Outcomes Framework is on an outcomes-based approach to library and knowledge service improvement.

The Outcomes Framework has a dual role and has been designed and developed to:

- drive progress in library and knowledge service improvement leading to increased satisfaction for users of the services
- provide a tool for NHS organisations to ensure a quality, high performing service that is continually developing and improving to meet the changing evidence and knowledge needs of organisations and individuals.





### The six Outcomes

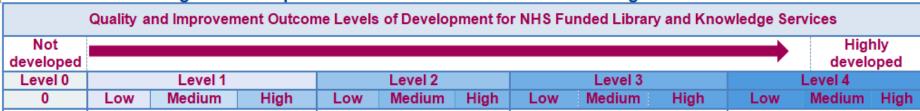
- 1. All NHS organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of *Knowledge for Healthcare*.
- 2. All NHS decision making is underpinned by high quality evidence and knowledge mobilised by skilled library and knowledge specialists.
- 3. Library and knowledge specialists identify the knowledge and evidence needs of the workforce in order to deliver effective and proactive services.
- 4. All NHS organisations receive library and knowledge services provided by teams with the right skill mix to deliver on organisational and *Knowledge for Healthcare* priorities.
- 5. Library and knowledge specialists improve the quality of library and knowledge services using evidence from research, innovation and good practice.
- 6. Library and knowledge specialists demonstrate that their services make a positive impact on healthcare.





### The Structure of the Outcomes Framework

OUTCOME 1: All NHS organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of Knowledge for Healthcare.



OUTCOME 1: All NHS organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of *Knowledge for Healthcare*.

Scope	Key Questions to ask	Why is this outcome important?
This covers the strategic development of the library	<ul> <li>How are library and knowledge enecialists</li> </ul>	People should be cared for by competent and

Outcome-based Evidence Examples for Outcome 1

Library and knowledge service strategy and annual plans showing.

The visible outcomes of stakeholder engagement.





### Health Education England

**OUTCOME 1: All NHS** organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of *Knowledge for Healthcare*.

	Quality a	nd Improvem	ent Outcome	Levels	of Develop	ment for NH	IS Fund	ed Library a	nd Knowled	lge Sen	/ices	
Not developed	developed									<b>→</b>	Hig devel	
Level 0		Level 1			Level 2	2		Level 3			Level 4	
0	Low	Medium	High	Low	Medium	High	Low	Medium	High	Low	Medium	High
	AND An addresse Healthcan goals and organisat AND An plan addresse AND Ser consulted and know allows for allows for allows for allows for and know allows for allows for and know allows for and know allows for all allows for all allows for allows for allows for allows for all	member prome of the library le service.  approved strates Knowledge is re priorities, all priorities of the ion.  annual (imple) resses organis ge for Healtho di over delivery viedge service eparately iden viedge service and resources	tegy for igned to the he mentation) sational and eare priorities. ers are of the library tiffied library budget a range of s for users.	regula and kr and th manage AND / evalua knowle planne AND / service and m prioriti AND/o service introde prioriti	Existing actives have been diffed to suffee.  OR New actives are identified to supplies.	by library ecialists* on's senior for brary and has been wities and port the vities and fied and fort the	improve knowle plan are AND A are assorganis priorities critical service  AND E progress are conseniors  AND Li special achievi relation Knowle priorities	valuation, an as against the atinually revie stakeholders ibrary and kn ists make pro ing impact ou in to organisat edge for Heal	library and entation sources deliver all business-nowledge alysis and expriorities ewed with owledge ogress in troomes in ional and theare	at Boa the exp and kn special critical organic AND I knowle are pro to the require organic Knowle Health	sation.  Library and edge specipactive; ad changing ements of sational and edge for care priorit	romote ibrary siness- d alists apting ad ties.

<sup>\*</sup> Includes all members of the library and knowledge team regardless of job title, role or banding





OUTCOME 2: All NHS decision making is underpinned by high quality evidence and knowledge mobilised by skilled library and knowledge specialists.

CAMIOU IIDI	ary and knowledge spec	unoto.		
	Quality and Improvement Ou	come Levels of Developmen	it for NHS Funded Library and Kno	owledge Services
Not developed				Highly developed
Level 0	Level 1	Level 2	Level 3	Level 4
0	Low Medium High	Low Medium High	Low Medium High	Low Medium High
	Evidence search services provided by library and knowledge specialists support:	Library and knowledge specialists:  • work with one or more teams across the organisation to identify and plan for their evidence and knowledge mobilisation requirements.  AND  • use or enable methods of mobilising evidence and organisational knowledge to underpin service delivery.	Library and knowledge specialists:  • routinely review and evaluate with senior stakeholders their service delivery and plans to underpin services in mobilising evidence and organisational knowledge.  AND  • work with senior stakeholders and the Board to identify evidence and knowledge mobilisation requirements and develop action plans.  AND  • adopt innovation in mobilising internally generated knowledge.  AND  A minority* of the Board and organisational decisions are informed by the services of library and knowledge specialists.	The Board and the organisations use library and knowledge specialists in mobilising evidence and organisational knowledge.  AND Senior stakeholders and the Board routinely implement the agreed requirements for evidence and knowledge mobilisation.  AND The Board and organisational decisions are routinely informed by the services of library and knowledge specialists.  AND Library and knowledge specialists develop innovative practice in mobilising evidence and organisational knowledge.

<sup>\*</sup> between 15% and 49% of decisions





**OUTCOME** 3: Library and knowledge specialists identify the knowledge and evidence needs of the workforce in order to deliver effective and proactive services.

Not developed											Highly developed
Level 0	Level 1			Level 2			Level 3			Level	4
0	Low Medium	High	Low	Medium	High	Low	Medium	High	Low	Medium	High
	A library and known service offer is de to the organisation served.  AND The needs of library and knowled service users are identified.  AND Changes to services and resonate considered in response to user requests.  AND Feedback for service users is collected.  AND The promotiservices takes place.	elivered n(s)  of edge  ources	speciali wider us develop targeted AND A exists w by user AND Pr individu	and knowled sts understa ser base and profiles of I groups. marketing pl hich is information profiles. ovision is mails or groups abilities or s.	nd the	customi knowled on the o non-use AND Lik services refined a improve AND Us is adopt are appl	oment and sation of libralge services outcomes of er consultation or are continuand evaluated effectivenes effectivenes effectivenes in the ements in the	is based user and on. owledge ally ed to ss. napping results ve	individua evidence balance demand AND Lib specialis advance	d against co s. orary and kn sts innovate es in technol al and perso	nalised edge service is mpeting owledge and apply ogy to deliver





OUTCOME 4: All NHS organisations receive library and knowledge services provided by teams with the right skill mix to deliver on organisational and *Knowledge for Healthcare* priorities

Not developed										Highly	develope
Level 0	Level 1			Level 2			Level	3		Level 4	
0	Low Medium	High	Low	Medium	High	Low	Medium	High	Low	Medium	High
A qualified library and knowledge specialist actively leads the service.  AND A qualified library and knowledge specialist actively manages the staff.  AND Library and knowledge specialist skills and capacity are considered in service planning.  AND All library and knowledge specialists undertake continual professional development.		capacity knowled have be AND St taken to identifie	hs and esses in skill y of the libradge services een identified eps have been respond to d skills and y issues.	ry and s team d. een the	knowled reviewe impleme and nati AND Im knowled staffing	dge specialists d against the	o library and changes in a planned	speciali  have delive requesting AND have	Library and knowledge specialists:  • have the capacity to deliver and develop required services.  AND • have the skills to del and develop the required.		
		have be the libra staffing can be AND Co profess is under reflecte	nporary issues identified ary and known skills mix waresolved. continual ional developtaken and dupon by libowledge spe	d with wledge hich	AND/OI partners service AND Th professi library a	R Technologie ships are expl	es and/or ored to support m continual ment informs e service	AND Li	brary and kr e redesigne ng to the sei	d	





■ OUTCOME 5: Library and knowledge specialists improve the quality of library and knowledge services using evidence from research, innovation and good practice.

eviden	vidence from research, innovation and good practice.						
	Quality and Improvement O	outcome Levels of Development fo	r NHS Funded Library and Knowl	edge Services			
Not develope	ed			Highly developed			
Level (	0 Level 1	Level 2	Level 3	Level 4			
0	Low Medium High	Low Medium High	Low Medium High	Low Medium High			
	Library and knowledge specialists:  • keep up to date with good practice and appropriate evidence relevant to their practice.  AND  • discuss good practice, appropriate evidence and share their professional knowledge with their team or work colleagues.  AND Changes to everyday library and knowledge practice are informed by appropriate evidence and professional knowledge.	Library and knowledge specialists:  • implement an ongoing cycle of measuring and evaluating their activities and the services they deliver.  AND  • routinely review good practice, innovation and external research to identify improvements and developments to introduce locally.  AND  • put the outcomes of service evaluations and the results of reviewing the evidence in to practice.  AND  • share descriptive accounts of resolving service issues with the wider library and knowledge community.	Library and knowledge specialists:  • deliver an evidence-based library and knowledge service.  AND  • publish case studies or descriptive accounts of changes made in their professional literature.  OR  • reflect on and share the implications for the profession and/ or results of their service evaluations.  OR  • collaborate on library and knowledge research projects.  AND  • use data to analyse the relative costs and benefits of individual library and knowledge services.	Library and knowledge specialists:  • are supported by the organisation to lead formal research in to library and knowledge practices.  AND • contribute the outcomes of their formal research to the library and knowledge evidence base (e.g. peerreviewed journals).			





### **OUTCOME** 6: Library and knowledge specialists demonstrate that their services make a positive impact on healthcare.

Not developed				Highly developed
Level 0	Level 1	Level 2	Level 3	Level 4
0	Low Medium High	Low Medium High	Low Medium High	Low Medium High
	Plans are in place to gather impact data relating to the differences made by library and knowledge specialists and services to the organisations, groups, or individuals served.  OR Current collection of impact data is impromptu.  AND Evidence of impact mainly shows the difference made to an individual or at a personal level.  OR There are a limited number of user responses.	Quantitative and qualitative impact data are systematically collected for at least one activity or service provided by the library and knowledge specialists.  AND Basic analysis of impact data takes place.  AND Evidence of impact is used for promotion of the library and knowledge service.	Qualitative and quantitative impact data are systematically collected and evaluated across a range of library and knowledge activities and services.  AND Evidence of impact is used for internal reporting and promotion and service improvement on a regular basis.  AND Stakeholder endorsement is obtained and used in impact stories for local promotion.	People within the organisation(s served recognise the impacts made by library and knowledge specialists.  AND Senior stakeholders recognise the value of library and knowledge specialists.  AND Evidence of impact demonstrates the difference made to a range of organisation priorities.  AND Quantitative data and impact stories are contributed to the national impact evidence base.



### Question

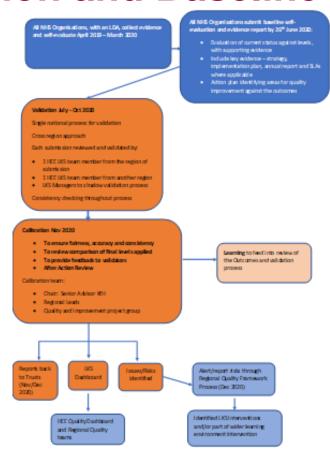
Having seen the outcomes, do they make sense to you?



# Section 3 Using the Quality and Improvement Outcomes Framework: Overview of Self-evaluation and service improvement planning



### **Self-Evaluation and Baseline Process**







### **Self-Evaluation**

All NHS Organisations, with an LDA, collect evidence and self-evaluate April 2019 – March 2020

All NHS Organisations submit baseline selfevaluation and evidence report by 26<sup>th</sup> June 2020:

- Evaluation of current status against levels,
   with supporting evidence
- Include key evidence strategy, implementation plan, annual report and SLAs where applicable
- Action plan identifying areas for quality improvement against the outcomes





### What is self-evaluation?

Self-evaluation is a continuous process of improvement in which library and knowledge specialists critically examine the services they provide against the quality outcomes to evaluate how well they are delivering the services and identify improvements that can be made.

Self-evaluation enables NHS organisations to:

- recognise strengths in their library and knowledge service provision
- identify areas for improvement and draw up plans for action
- share good practice
- report to stakeholders on the quality of service provision
- demonstrate the relevance, value and impact of their library and knowledge service to their user base.



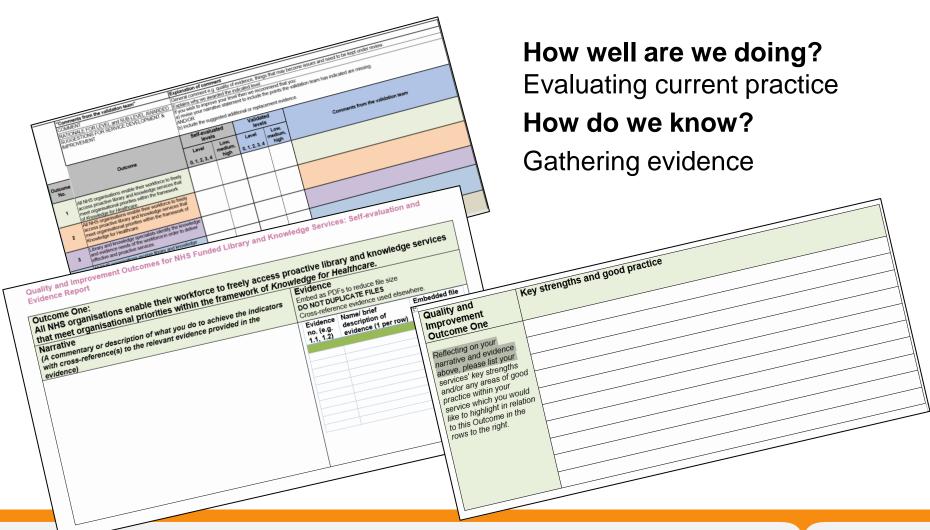
### Question

Thinking about how you are going to prepare for the self-evaluation, who might you want to involve?





## Self-evaluation – what's involved?







### Planning Service Improvement

Self-evaluation will **highlight areas** for **improvement** 

What are we going to do now? Planning and Implementing improvements

Think about how **Quality Improvement** tools and **techniques** can be used to
underpin service improvement

organisations enable th	neir workforce to freely acc the framework of <i>Knowled</i> Actions pla			ervices that meet	
What will you do?	Who will be involved and lead on the action?	What resources do you need? (i.e. Time, money, staff)	Target completion date	Progress made	





## What if I serve multiple Trusts?

- If your library provides services under an SLA to another LDA organisation, you will be asked to contribute to that organisation's self-evaluation.
- If you are one of several libraries partnering to deliver to one LDA organisation, collaborate to pool evidence and produce one self-evaluation return for the organisation.
- If you have any questions about how this might apply to you, use the chat function or email us and we'll follow up with you after the webinar.



# Section 4 Baseline Validation and Reporting





### **Baseline Validation**

### Validation July - Oct 2020

Single national process for validation Cross region approach

Each submission reviewed and validated by:

- •1 HEE LKS team member from the region of submission
- •1 HEE LKS team member from another region
- •LKS Managers to shadow validation process Consistency checking throughout process

#### **Calibration Nov 2020**

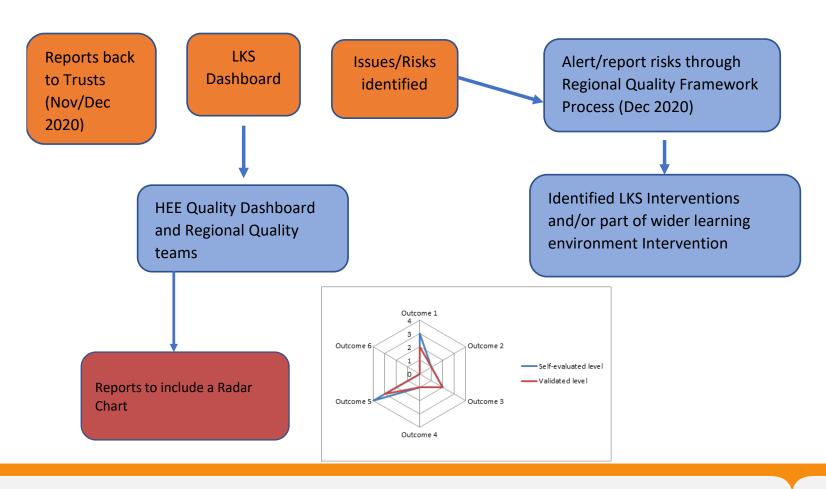
- •To ensure fairness, accuracy and consistency
- •To review comparison of final levels applied
- •To provide feedback to validators
- After Action Review

### Calibration team:

- •Chair: Senior Advisor KfH
- Regional Leads
- Quality and Improvement project group



### Validation Reporting





# Section 5 Support available during Baseline Selfevaluation





### Support for You







### **Webinars**

Date	Topic
9 <sup>th</sup> July 19	Outcome 1
Tbc	Quality Improvement Techniques
11th September 19	Outcome 2
25 <sup>th</sup> September 19	Outcome 6
8 <sup>th</sup> October 19	Outcome 3
5 <sup>th</sup> November 19	Outcome 4
25 <sup>th</sup> November 19	Outcome 5
16 <sup>th</sup> January 20	Community of Practice/FAQ clinic
4 <sup>th</sup> February 20	Evidence and Reflective Narrative





## Project Group – regional contacts

- Holly Case Wyatt, Library and Knowledge Services Development Lead, London and Kent, Surrey and Sussex <u>holly.casewyatt@hee.nhs.uk</u> (from 17 June 2019)
- Clare Edwards, Deputy Head of Library and Knowledge Services and Technology Enhanced Learning, Midlands and East <u>clare.edwards@hee.nhs.uk</u>
- Dominic Gilroy, Library and Knowledge Services Manager: Y&H, North dominic.gilroy@hee.nhs.uk
- Emma Ramstead, Library and Knowledge Services Development Lead, London and Kent, Surrey and Sussex <a href="mailto:emma.ramstead@hee.nhs.uk">emma.ramstead@hee.nhs.uk</a> (to 14 June 2019)
- Lucy Reid, Deputy Head of Library and Knowledge Services and Technology Enhanced Learning, London and Kent Surrey and Sussex <u>lucy.reid@hee.nhs.uk</u>
- Sue Robertson, Knowledge Services Development Lead, South sue.robertson@hee.nhs.uk





### Questions

