

**Knowledge for HealthCare Working Group:** Service Transformation Group

**Task and Finish Group Name:** Current Awareness Services

**Document Title:** Report and recommendations

**Date:** 31 March 2016

## INTRODUCTION

This report summarises the 2015-16 activity and findings of the Current Awareness Task and Finish Group, and presents recommendations for 2016-17.

### Group purpose and membership

The group was established to contribute to the implementation of Knowledge for Healthcare by:

- Ensuring, where possible, that current awareness services are done once and shared, removing duplication of effort through collaboration
- Setting standards for current awareness services that will ensure consistency and continuous improvement in service quality
- Extending the reach of services to the whole country

Group membership comprises eight NHS library staff from different parts of the country with experience of delivering different types of current awareness services, together with representatives from NICE and PHE. See Appendix 1.

### Definition of current awareness services

One of the first tasks for the group was to identify exactly what is meant by current awareness. For the scoping exercise, we sought to capture *all* types of activity which LKS provide to services users to help them keep informed and up-to-date, including Table of Contents (TOC) alerts, HDAS alerts, blogs, tweets and ad hoc notifications.

The group has subsequently decided against an exclusive definition of CAS, but agreed that for most impact, efforts to improve impact and quality via coordination should focus on the production of bulletins or alerts which involve the time and skill of information professionals in selection, presentation and distribution.

### Metric for success

The group decided that the Knowledge for Healthcare metric relating to current awareness (to achieve an “increase in production and use of nationally-produced horizon scanning bulletins: 25% increase in Year 1...”) was too narrowly focussed. The Metrics Task & Finish Group recently agreed that the metric is flawed because it combines production and use.

It is recommended that for 2016-17, the focus should be on increasing collaboration, with quality/reach incorporated in subsequent years. The suggested new metric is:

*By March 2017, 80% of NHS LKS will be involved in collaboration/sharing with other CAS producers.*

### CURRENT LEVELS AND TYPES OF CURRENT AWARENESS

The main undertaking for the group in year one was to map existing levels and types of CAS provision, in order to make informed recommendations to the Service Transformation Working Group on how to increase reach, quality and impact and reduce duplication.

Every NHS LKS in England was contacted, with a 67% response rate. There were only three responses from London and a 18% response rate for the West Midlands and 25% from Yorkshire and Humber respectively.

#### Levels and types of CAS delivery

Only three services reported not doing any type of CAS. Services often use a variety of methods, but as per Table 1, the most popular activity is the production of bulletins, with 84 library services producing a combined total of 647 bulletins, typically with a fortnightly or monthly publication cycle. As per table 2, the number of services producing bulletins in each area varies.

Table 1: Methods

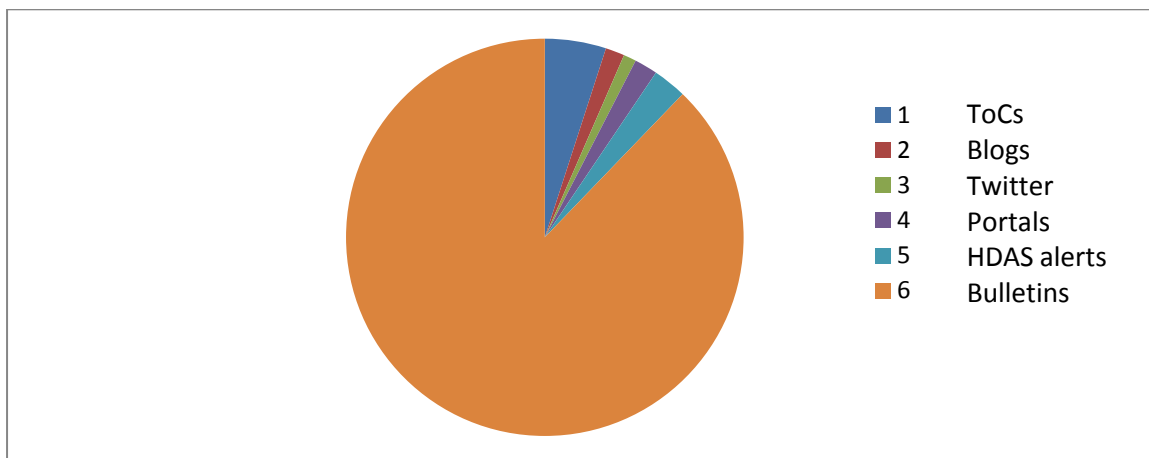


Table 2: Heat map of the number of LKS producing one or more bulletins

Region	Number of LKS producing one or more bulletins
East Midlands	8
East of England	10
London	3
North East	7
North West	26
South East	10
South West	5
Thames Valley & Wessex	6
West Midlands	3
Yorkshire and Humber	6
<b>Grand Total</b>	<b>84</b>

### Bulletin subject coverage

We found an extremely wide range of topics covered by LKS teams across the country, including bulletins aimed at very specific clinical groups and broader topics such as commissioning or public health. The content was varied and included journal articles, policy documents, news and expert commentary, and combinations of these. There was a lot of duplication of coverage; for example twenty-three of the teams that responded were producing bulletins on health management.

### Time spent on CAS

The amount of time spent on CAS ranges from 30 minutes to 37.5 hours a week. The mean was 8 hours per week.

### Current levels of collaboration

We estimate that about a quarter of services are currently collaborating on providing CAS. Current collaboration ranges from small clusters of LKS teams (two or three teams) sharing and receiving bulletins locally to participation in larger schemes such as Admire, CASH and KnowledgeShare.

Some teams had reservations about collaboration, such as the potential reduction in timeliness, topicality and local tailoring of information when re-using other people's bulletins. However, the vast majority felt that these concerns could be overcome and were positive about the benefits of greater collaboration.

The ADMIRE scheme is open to services based in the North West region and covers leadership and management information. A group of editors monitor a number of sources, evaluate an item for inclusion and then collate this information using a WordPress repository. Members of the scheme can then re-use the information to produce localised current awareness.

CASH and KnowledgeShare are based on commercial Content Management Systems (CMS) which require funding to maintain the infrastructure. The services also require administrative support to act as a point of contact for contributors, setting up access and to ensuring the quality of content.

Further investigation into the strengths of all the collaborative schemes to learn best practice would be worthwhile.

See appendix 2 for further information about the larger collaborative schemes.

### **Evaluation of CAS**

The scoping exercise revealed that very little formal evaluation work had been undertaken by individual services however many talked about the positive ad hoc feedback that their current awareness elicits. Some services were uncertain about the extent to which the CAS they produce is meeting needs or making a difference to customers.

### **Conclusions**

It is recommended that for 2016-17, the focus should be on increasing collaboration, with quality/reach incorporated in subsequent years. The suggested new metric is:

<i>By March 2017, 80% of NHS LKS will be involved in collaboration/sharing with other CAS producers</i>
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We can achieve this by gradually widening the scope of existing large collaborative schemes, by raising awareness of all the bulletins and good practice which currently exists, and encouraging use of formats and tools which allow local repurposing of content.

We also need to develop some quality guidelines and support for evaluation of CAS.

The Group's recommendations for 2016-17 are outlined below. Members of the existing group are keen to continue to be involved.

## RECOMMENATIONS FOR 2016-17

1. Develop quality guidelines for CAS, to cover:
  - Intellectual Property Rights – acknowledging authors and sources, using creative commons licences
  - Copyright – appropriate use of abstracts and hyperlinks
  - Summarisation
  - Selection of sources and the AACODS checklist for evaluation and critical appraisal of grey literature
  - Use of disclaimers
  - Basic good practice – thinking about audience and purpose, indicating date/frequency of publication
  - Outline what a good current awareness service should look like in terms of content, frequency and customer reach
2. Update the LQAF criterion and statistics guidance relating to CAS.
3. Increase the use of the existing large collaborative schemes listed in the appendix.
4. Develop a platform to facilitate sharing, collaboration and good practice. This would include information about how to join the collaborative schemes; case studies; tips and tricks to save time using new technologies; help with evaluation. We propose that the most cost-effective and expedient way to create a platform for sharing is by rebranding and further developing the existing CASH portal.

## **Appendix One: Membership of the Task and Finish Group**

Anh Tran  
Ben Skinner  
Bernie Hayes  
Carrie Thompson  
Cheryl Dagnall  
David Brunt  
Heather Gardner  
Helen Bingham  
Jocelyn Matthews  
Margaret Theaker  
Mark Bryant  
Roxanne Hart

## Appendix Two: Large collaborative schemes

### Current Awareness Service for Health (CASH)

#### *What is CASH?*

CASH is a web-based service which aims to keep health professionals up-to-date with new developments for the benefit of patient care and improved decision making. It is a collaborative service provided by librarians who monitor and capture content from across 3 broad sectors - Primary Care, Secondary Care and Mental Health.

The content is added to the central database and is made available to search or be streamed as a Newsfeed, using RSS technology.

Other library services are able to utilise the CASH infrastructure to help meet the needs of their own library users via the creation of personalised and locally tailored alerting services. Through its collaborative approach, CASH is therefore able to help other NHS library services to work more efficiently and effectively.

#### *Management and costs*

The CASH Steering Group is responsible for the design, development and maintenance of CASH (Current Awareness Service for Health) website.

CASH is freely available to both end-users and contributors. The platform has been funded until 2019 by the Nottinghamshire and Derbyshire Clinical Commissioning Groups.

#### *Number of services and users*

13 LKS are currently contributors to the CASH Service.

#### *Evaluation*

The end-user and contributors surveys of the CASH website in 2013 showed that 83% of customers and 94% of contributors rated the service as good (33% & 29%) or excellent (50% & 65%).

When asked to state what LKS contributing to the service liked most about CASH, respondents highlighted the following aspects of the service:

- Opportunity to work collaboratively with other library services
- User-friendly and approachable service/good level of support from the CASH team
- Ease of use/accessibility
- Searchable database
- Zinepal – enables contributors to reuse the content of the database to produce locally-tailored current awareness bulletins
- Newsfeeds

## KnowledgeShare

### *What is KnowledgeShare?*

KnowledgeShare is an Athens authenticated web application that makes NHS LKS more accessible to staff and students. It allows library and knowledge services to:

- Manage requests for evidence searches and share the results of searches more widely.
- Run information skills teaching sessions and give participants the opportunity to book, download course materials and generate certificates of attendance.
- Provide regular, targeted, personalised evidence updates to staff, based on their specific professional interests. Subject-specific bulletins can also be produced.
- Facilitate networking by putting people together with those who share common interests.
- Report on searching, teaching and provision of evidence updates.

The targeted email evidence updates are individualised based on a staff member's interest in particular conditions or lifestyle factors, age groups, settings of care, interventions and management topics. Everything from liver disease to knowledge management is covered and there are thousands of combinations of interests.

The content is high-level evidence, publications on management topics, and local events. The idea is for users to stay up-to-date without being overwhelmed by information.

### *Management and costs*

KnowledgeShare is run by Brighton and Sussex NHS Library and Knowledge Services and is subscription based. Subscriptions pay for hosting, support and ongoing development. Annual prices for teams range from £800 for the smallest teams to £3500 for the largest.

### *Number of services and users*

36 LKS teams are currently using the system, representing 8 regions, with 7 more teams due to come on board over the next three months.

From April 2015 to February 2016 the number of users on KnowledgeShare rose as follows:

- 4148 to 6021 in Kent, Surrey and Sussex (45% increase)
- 134 to 940 in Thames Valley and Wessex (600% increase)
- A further 1090 users joined from other regions

### *Evaluation*

On evaluation, 99% of recipients say that what they receive is new to them and 79% say that they have accessed one or more of the resources in the last few months. Around 60% were prompted to request additional LKS support after receiving the current awareness.

“I just wanted you to know that we love KnowledgeShare; current awareness made quick and simple, fabulous!” Library Services Manager

“This should be sent to all clinical staff in my opinion. It's great.” Foundation Year 2 Doctor

“I get several alerts and this one adds a lot of value due to its breadth.” Public Health Lead

“I find this personalised service exceptionally helpful” Consultant Community Paediatrician

“Thanks... you know me better than Amazon!” Chief of Safety

Contact Ben Skinner at [ben.skinner@bsuh.nhs.uk](mailto:ben.skinner@bsuh.nhs.uk) for more information



## Appendix Three: Examples of CAS from Library and Knowledge Services

### Bulletins

**Knowledge@lerts for Commissioners** compiled by Anne Gray Knowledge Officer, Arden & GEM CSU

Also available here: <http://ccg-alert.blogspot.com/>

**Frail and Older People's Bulletin** compiled by Barbara Norrey, North East London Foundation Trust

<http://us9.campaign->

[archive2.com/?u=e3bf571b8e607c032d2e960f7&id=3b20313263&e=ae814005fa](http://archive2.com/?u=e3bf571b8e607c032d2e960f7&id=3b20313263&e=ae814005fa)

Also shared on CASH: <http://cash.libraryservices.nhs.uk/cash-service/age-group/late-life/>

### Keeping Your Finger on the Pulse

<http://cash.libraryservices.nhs.uk/cash-service/health-functions-and-management/nursing-newsfeed/>

This bulletin is produced fortnightly after extensive consultation with the Practice Development Team who requested this very brief bulletin.

### Maternity Bulletin

An example of a bulletin emailed to customers produced by Salisbury NHS Foundation Trust. (Attached)

### WSFT Health Management and Innovation Update

<http://www.wsh.nhs.uk/ServicesAtoZ/CorporateServices/EducationTraining/Library/ManagementCurrentAwareness.aspx>

An example of tailoring the content around the priorities of the organisation

### The Wessex Public Health Bulletins

<http://www.wessexphnetwork.org.uk/resources/public-health-bulletin.aspx>

Produced by NHS libraries in Thames Valley and Wessex.

### Blogs

NHFT Libraries Daily Health News <http://nhftlibrariesdailyhealthnews.blogspot.co.uk/>

End of Life Care Horizon Scanning <https://palliativecarewpctl.wordpress.com/>