

# 5.4 Knowledge Management

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# LQAF Requirements

- Members of the library/knowledge services team are actively involved in the creation, capture, sharing, utilisation or reuse of knowledge in the organisation(s) served
- **What is full compliance?**
- Documented evidence of the LKS team's involvement or collaboration with non-LKS colleagues in the organisation serviced in **at least two distinct activities** that create, capture, share, use or reuse knowledge

# Medical Education Website

- LKS were commissioned to develop a website for Medical Education
- Worked with members of the medical education team to discuss and provide advice on website development, structure and content
- Collaborative working – attendance at team meetings and meeting with individuals from department and those involved in education. Also liaised with communications, graphics, IT and Information Governance & Security

# How did we meet the criteria?

- **Create** – web hosting & development options, developed a new website using weebly, created content, finding solutions for secure content & online survey facilities
- **Capture** – gather and organising content from Medical Education Team members and clinicians
- **Share** – promoted at team meetings, Medical Education Committee, inductions and open days
- **use or reuse knowledge** – content is used by doctors in training.

# Evidence

## What evidence did we provide for LQAF?

- Written Agreement – provided a quote to the Director of Medical Education outlining the work we were planning to carry out
- Link to the website  
<http://www.rftmedicaleducation.com/>



# Listening into Action Project (LIA)

- Our librarian was invited onto the LIA Core Team
- Worked with staff across the trust to listen and collate views, feedback and ideas and work to implement positive change



## LIA – what is it?

LiA involves listening to staff to understand what really matters to them, what gets in their way and how we can prioritise changes.

Core team (11 members)

Annual pulse check – see how staff feel about the organisation

Listening Events – open to all staff to share ideas and suggestions



- LIA Roadshows – continue to gather ideas and feedback – various locations
- LIA teams set up to implement changes
- Pass it on events – share and celebrate achievements
- LIA newsletters – to share achievements on a regular basis and update staff



# How did we meet the criteria?

- **Create** – knowledge through sharing practice, collaborating and interacting. Literature searches provided evidence base for implement change.
- **Capture** – facilitating knowledge sharing events, collating feedback. Participated in LIA Review of Domestic Services
- **Share** – participating in core LIA group and other project groups to share feedback and learning
- **use or reuse knowledge** – information gathered has been used by project groups to implement a small number of big impact changes

# Evidence

## What evidence did we provide for LQAF?

- **Screenshot of LIA intranet page** which outlined the project and showed our librarian as a member of the core team
- **E-mail invitation** to be part of a Domestic Services Review which outlined the purpose of the meeting and the role of LIA
- **Description of what we did** “Our Librarian is a core member of the trust Listening in Action project team. She has been actively involved in the organisation and facilitation of listening events using LIA methodology across the trust. She is involved in the collation of feedback from staff which is used to inform change in the trust. Our librarian has been invited to a group to use the LIA methodology to facilitate a review of domestic services. “

# Improving access to local clinical guidelines



# Current challenges

- Large numbers of guidelines
- Hard to find
- Unclear titles
- Out of date
- Multiple copies of the same document
- Stored in a range of locations
- Access to PCs/wifi
- Guidelines often very long
- Can be difficult to assess credibility: lack of author information, publication date, review date.



# Ignaz

- An app designed to be used as a handbook for junior doctors
- Named in honour of Dr Ignaz Semmelweis, the hand-washing pioneer
- Developed by HE Y&H. Currently used by 10 Trusts.
- Once downloaded the app can be used without internet connectivity (so in ward setting)
- Can be localized. Used by Rotherham primarily to give clinicians easy access to clinical policies and procedures.

- LKS commissioned by the Director of Medical Education to work with a Senior Clinical Fellow to develop and populate the app
- Launched in Rotherham in February 2015
- Engaged with authors (consultants, nurses, pharmacists, managers) to capture new content
- Designed to be used as a quick reference resource so large guidelines are broken down into bite-sized chunks
- Categorised by specialty
- Developed mechanisms to keep the content up-to-date
- Promoted to specialty teams and as part of induction
- Ignaz Handbook [www.ignaz.nhs.uk](http://www.ignaz.nhs.uk)



# How did we meet the criteria?

- **Create:** Localisation of Ignaz to make guidelines/policies easily available; presentation of information in a quick reference format designed to be used at the point of care
- **Capture:** Liaise with clinical authors to source key departmental policies to organise and manage on a central system
- **Share:** Technology improve sharing of knowledge: not dependent on wifi
- **Use or re-use:** Enabling the use of best practice through local guidelines to assist clinical effectiveness and cost effective use of resources. Ignaz: In the 2 months following junior doctor rotation we had 54 (Aug /Sept 2015) and 22 (Feb / Mar 2016) new users, this compares to 107 (50.5%) and 47 (46.8%) new doctors starting.

# Evidence

## **What evidence did we provide for LQAF?**

- Copy of agreement with the Director of Medical Education to carry out work on Ignaz Handbook



# Local Guidelines: sharepoint

- The LKS has been approached by the Head of Information Governance to support work to improve the organisation and currency of policies on the Trust intranet.
- Member of Intranet Working Group
- Set up working group on Policies & Guidelines
- Working collaboratively with Document Ratification Group, IT, Communications, Clinical Governance Lead and Information Governance



- Intranet Working Group
  - Presentation from developers outlining features of new intranet site
  - Workshop on design of new intranet
  - Comments on metadata for documents section
- Policies & Guidelines working group
  - Initial meeting to discuss current situation, challenges, way forward and group members.
  - Further meeting scheduled to discuss the how to organise guidelines on new intranet site
  - Work to identify expired policies & guidelines



# How will we will meet the criteria?

- **Create** – input into creation of guidelines for the development of guidelines ; list of expired guidelines
- **Capture** – gather and organising content from departments; advising on intranet structure, indexing documents, naming conventions
- **Share** – New intranet site will improve access to guidelines, promote to colleagues, and provide end user assistance
- **use or reuse knowledge** – increase use of the intranet to access local guidelines.

# Exercises

1. What are you doing in your organisation to meet the LQAF KM Criteria?
2. What are the potential opportunities in your organisation of involvement in KM projects?

# Contact

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