

Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services: Handbook for baseline self-evaluation, 2019



Foreword and Introduction

Healthcare library and knowledge services are a powerhouse for education, lifelong learning research and evidence-based practice.

Health Education England's ambition is to extend this role so that healthcare library and knowledge services become business critical instruments of informed decision-making and innovation. Enhancing the quality and demonstrating the value of library and knowledge services is essential in delivering this ambition and the vision of *Knowledge for Healthcare*.

The *Quality and Improvement Outcomes Framework* has been developed in response to *Knowledge for Healthcare* and the 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. p. 48

The result of this commitment is the development of an outcomes-based approach for assuring quality and a framework to underpin service improvement, innovation and to demonstrate the impact of library and knowledge services.

The *Quality and Improvement Outcomes Framework* is also integral to the wider Health Education England *Quality Strategy and Framework* as part of assuring a quality learning environment.

This handbook has been developed as supporting documentation for NHS organisations and library and knowledge specialist teams who use the *Quality and Improvement Outcomes Framework*. The handbook provides an overview of the Outcomes Framework and the process for self-evaluation and validation. It also acts as guidance on how to use the framework to evaluate current practice and identify areas for development and service improvement.

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Part 1: Introduction

Strategic Context

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*¹ p.2)

Healthcare library and knowledge specialists (i.e. all members of the library and knowledge services team regardless of job title, role or banding) act as knowledge brokers. They use their expertise to mobilise evidence obtained from research, staff “know-how” and external innovation and good practice to aid the workforce in making effective and informed decisions.

Health Education England’s (HEE) published *Knowledge for Healthcare: a Development framework for NHS Library and Knowledge Services*² in England in December 2014. This set out a clear vision:

NHS bodies, their staff, learners, patients and the public use the right knowledge and evidence, at the right time, in the right place enabling high-quality decision making, learning, research and innovation, to achieve excellent healthcare and health improvement. p.9

The NHS Library and Knowledge Services in England Policy outlines HEE’s commitment to ensuring the use in the health services of evidence obtained from research. It is also committed to enabling the NHS workforce to freely access library and knowledge services to achieve excellent healthcare and has the ambition that the role of library and knowledge specialists becomes business critical to the NHS.

The importance of knowledge, evidence and digital technologies to the NHS is reinforced by both the *NHS Long Term Plan*³ and the Health Education England *Topol Review*.⁴

Effective knowledge management is essential to enable the spread and adoption of innovation, with lessons from early adoption shared widely (OD6): an innovation culture is dependent on a learning culture. ... p.68

¹ Health Education England (2016) NHS Library Services in England: Policy.

<https://www.hee.nhs.uk/sites/default/files/documents/NHS%20Library%20and%20Knowledge%20Services%20in%20England%20Policy.pdf>

² Health Education England (2014) Knowledge for Healthcare: a development framework for NHS library and knowledge services.

https://www.hee.nhs.uk/sites/default/files/documents/Knowledge_for_healthcare_a_development_framework_2014.pdf

³ NHS England (2019) The NHS Long Term Plan. <https://www.longtermplan.nhs.uk/publication/nhs-long-term-plan/>

⁴ Health Education England (2019) The Topol Review: Preparing the healthcare workforce to deliver the digital future. <https://topol.hee.nhs.uk/>

Developing the *Quality and Improvement Outcomes Framework*

From 2010 to 2018 the *Library Quality Assurance Framework* (LQAF) raised standards across healthcare library and knowledge services. 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

The subsequent review has moved quality assessment away from process, standards and compliancy that drove the LQAF. This change in emphasis will ensure a concentration on improvement, development and delivery of service outcomes. The development of the *Quality and Improvement Outcomes* (the *Outcomes Framework*) was informed by the HEE *Knowledge for Healthcare Evaluation Framework*⁵ and builds on the learning from both the LQAF process and the 2018 pilot of the draft *NHS Library and Knowledge Services Quality Improvement Standards*.

The Outcomes will be integral to the *HEE Quality Strategy*⁶ 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*⁷ 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. p.9

⁵ Health Education England Library and Knowledge Service Leads (2017) Knowledge for Healthcare Evaluation Framework. <https://kfh.libraryservices.nhs.uk/ef-intro/>

⁶ Health Education England (2016) HEE Quality Strategy 2016-20. <https://healtheducationengland.sharepoint.com/:b/g/Comms/Digital/EVpQCfWbiTdFkwMGPeIfKScBeeVR8dAaOEBFTYbuCXOwhQ?e=oH9A7H>

⁷ Health Education England (2019) HEE Quality Framework 2019-20. https://healtheducationengland.sharepoint.com/:b/g/Comms/Digital/EXmEo9yM_wjNrV4715sujKwBzTUm_N3XoZvtHMyk_rNpDg

Purpose of the *Outcomes Framework*

HEE is responsible for ensuring that there are high quality learning environments for all healthcare learners in England. Key to this are library and knowledge services, supporting both individual and organisational learning and development needs. HEE also seeks assurance that the funding provided to organisations through the *Learning Development Agreement* is used to deliver library and knowledge services that are fulfilling the requirements of *Knowledge for Healthcare*, in line with the *NHS Library and Knowledge Services in England Policy*.

The library and knowledge service's NHS host organisation, and those who commission such services, are required to ensure that the service is helping them meet their obligations under the *Health and Social Care Act 2012*⁸ to ensure "...the use in the health service of evidence obtained from research..." (Section 1E) so that the NHS workforce is enabled to deliver high quality patient care.

The focus of the six outcomes is on 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 better health outcomes
- provide a tool for NHS organisations to ensure that library and knowledge specialists are providing a quality, high performing service that is continually developing and improving to meet the changing evidence and knowledge needs of organisations and individuals.

The *Outcomes Framework* is underpinned by four important features:

- A self-evaluation process that focuses on the quality improvements made in your library and knowledge service delivered to the organisation or organisations served.
- A whole team approach that plans and gathers information and evidence to support quality improvements made to the library and knowledge service.
- External and national validation of the self-evaluation to ensure consistency in the self-evaluations and provide an avenue for sharing good practices between library and knowledge services.
- The process results in a written report and service improvement action plan that can be used to demonstrate the library and knowledge service's performance and indicate areas for further improvement.

⁸ Health and Social Care Act 2012 c.7 <http://www.legislation.gov.uk/ukpga/2012/7/section/6/enacted>

Guiding principles and values

Knowledge for Healthcare's principles and values and design criteria underpin the six outcomes and inform service improvement.

Guiding Principles and values (<i>Knowledge for Healthcare p. 17</i>)	
Collaboration	Do once and share working across boundaries
Collective purchasing	Central procurement at scale
Core service	Core service offer, products, tools and expertise
Digital by default	Digital and mobile by default
Effective and efficient	Applying the principles of lean thinking
Equity	Equity of access and opportunity
Federation	Pooling budgets, staff, resources across boundaries
Innovation	Flexibility, new models of service, best practice
Quality	Benefits to patients improving lives, outcomes, Impact
Streamlined	Streamline structure, management, systems, process
Technology	Harnessing technology to streamline back-office functions
Workforce development	Planning, role redesign, specialisation, career pathways

Criteria for the redesign of library and knowledge services (<i>Knowledge for Healthcare p. 18</i>)	
Economy of scale	Function can generate economies of scale, offering value for money if delivered at a large scale
Local knowledge	Function requires in depth knowledge of needs of the local health economy and/ or strong organisational relationships
Nationwide functions	Function will benefit from a geographical focus or nationwide leadership to achieve national delivery, and/or building on the foundation of established regional service/s
Opportunity for standardisation	Function can be delivered using a standardised approach across a wide geography/ number of customers
Specialist skills	Function requires specialist skills that are scarce and may not be widely available at a local level, or equitably across the country

Overview of the six quality and improvement outcomes

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.

Overview of the *Outcomes Framework* for the baseline self-evaluation

The new *Outcomes Framework* offers a different focus to the former *Library Quality Assurance Framework*. Quality improvement techniques, when applied consistently and systematically, enable library and knowledge services to develop and improve, ensuring evidence is used by the right people, at the right time to deliver high-quality efficient healthcare. Consequently, the *Outcomes Framework* underpins a wider organisational focus on quality improvement to deliver higher-quality healthcare.

The *Outcomes Framework* provides a tool to aid in the self-evaluation of the strengths of the library and knowledge service and highlights areas for development. It offers a structure for prioritising development and it is assumed that the library and knowledge service will pass through the levels in sequence as the service becomes more developed.

The self-evaluation and validation do not provide an overall score. Therefore, one service cannot be compared with others either nationally or regionally. This is intentional as the focus should be on individual service development and improvement.

The framework has six “dimensions” or outcomes. In this way the service could be a level 2 in outcome one but a level 3 in outcome four. The result of using the framework is not what level the service is but rather the list of areas for development to improve the quality of the service.

The structure of the *Outcomes Framework*

For each of the outcomes there are five levels which show progress from “not developed” to “highly developed”. Each level provides the opportunity to self-evaluate as being low, medium or high performing within the level.

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 and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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

For each level there are a variable number of specific “indicators”. In many cases the indicators show a natural progression from the previous level. The indicators are linked by a Boolean AND/OR. Where there is an AND you should include evidence for all the indicators. The OR means you can choose which of the two indicators to evidence.

Also provided is a note on scope of the outcome, key questions to ask when evaluating the development level, details of why the outcome is important and most importantly examples of outcomes-based evidence types. While the LQAF largely focused on having processes in place to deliver services, the new framework is based on providing evidence of the effect or result of delivering a service or carrying out an activity for the service user.

At the end of each outcome there is a table which provides some indicators of the value of the outcome in decision making for library and knowledge specialists and the organisation and how it will help with service improvement.

Part 2: The Baseline Self-Evaluation Process

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 assists library and knowledge specialists to:

- Recognise strengths in their 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 the library and knowledge service to their user base.

For the baseline self-evaluation, each organisation will be asked to provide a narrative commenting on how the library and knowledge specialists deliver against each outcome. They will provide evidence to support the narrative and the self-evaluated level for each outcome. Close examination of the service will demonstrate the strengths of the service, show good practice, but also identify areas where the service can improve and change.

Planning and preparation for the baseline self-evaluation

To ensure a successful completion of the self-evaluation it is crucial that the process is planned and evidence gathering is seen as part of the everyday work of the library and knowledge team and not something that is just done because HEE requests it. Quality is not solely a management responsibility or activity. All staff within the library and knowledge service are responsible for the quality of the services they provide and are best able to evaluate where improvement may be required.

Evaluation team – who should be involved?

Conducting a self-evaluation has an important value especially for the library and knowledge specialists involved. An effective self-evaluation requires the involvement of the full team who are clear about the process of gathering and selecting good evidence that demonstrates impact. These activities can also support staff development by encouraging a wider understanding of the service enabling staff to clearly see the priorities of the service and areas for improvement but equally what is working well.

Timescales

Timescales for reporting the self-evaluation will be confirmed by the HEE Library and Knowledge Service Leads, shared with NHS organisations and promoted via <https://kfh.libraryservices.nhs.uk/> and regional newsletters and email lists.

Toolkit to aid self-evaluation

A Toolkit to support library and knowledge specialists undertaking self-evaluation will be available online at <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/> and comprises:

- A digital version of this document
- Quality and improvement self-evaluation and evidence report template
- Printable glossary of terms used in this document
- Summary of quality and improvement self-evaluated levels
- Improvement planning worksheet
- Improvement action plan template
- Recorded webinars providing an overview of each of the six outcomes
- Resources to support quality and improvement in the [Learning Zone](#)

The principles of self-evaluation

Self-evaluation is based on answering three questions:

- How well are we doing?
- How do we know?
- What are we going to do now?

How well are we doing? Evaluating current practice

Library and knowledge specialists need to evaluate the impact (how they make a difference or change) of their work with NHS organisations, individuals, teams and groups to know that the services delivered are:

- appropriate and based on workforce need;

- of high quality and in line with good practice;
- in need of review and improvement;
- improved by change, innovation and adaptation.

How do we know? Gathering evidence

Evidence helps to support self-evaluation processes by demonstrating proof of activity and impact. It can help in establishing how well the library and knowledge specialists are meeting users' needs. All services will be asked to provide key evidence of the most recent:

- library and knowledge service strategy
- annual implementation/ business/ action plan for the strategy
- library and knowledge service annual report/review.

Evidence should be a by-product of everyday activity and part of a planned and systematic approach to the evaluation of services and activity. It should not be created solely to support self-evaluation against the *Outcomes Framework*. Evaluation should be made about the library and knowledge service's performance based on the evidence available.

Range of evidence

Evidence can be quantitative or qualitative. Quantitative evidence reports what can be measured, for example numbers of mediated literature searches. Qualitative evidence will draw out the value which users may put on services, and this is often unstructured in format, for example feedback from users. Library and knowledge specialists have a long history of collecting statistical information on how they provide services. Statistical, quantitative and qualitative evidence help shape the evidence base for an evaluation of services.

Note: library and knowledge specialists should focus on listing and organising evidence to report on an outcome, not just responding to the key question or 'things to think about'.

Sources of evidence

Examples of sources of evidence are suggested in each of the outcomes (see [Part 4](#)), and some more general examples are included below. These sources of evidence are complementary and may provide more than one view on the same outcome. One example of evidence may be applicable to multiple outcomes.

Evidence may include:

- existing evidence on the quality and impact of the service's own self-evaluation processes;
- data collected to monitor performance against national priorities and performance indicators, supplemented by local targets and priorities as set out in local plans and any other relevant documentation;
- a range of management information including individual and project outcomes; budgetary and resource provision; library and knowledge service staffing levels; information systems.
- outcomes of consulting users, non-users and library and knowledge specialists:
- results of observing activities such as the use of:
 - the services provided
 - the range of resources and services available
 - the library environment
- measurable outcomes from analysing quantitative evidence from sources such as performance indicators, annual statistical returns, surveys and the library management system
- reviews of library and knowledge specialist involvement in internal and external partnerships
- evaluation of externally-funded programmes
- selected photographs of library and knowledge specialist activities.

Demonstrating impact: are we making a difference, the “so what” question

It is crucial that health library and knowledge specialists can demonstrate how the services they provide, or are planning to provide, will make a difference to the organisations, teams, groups and individuals that they serve. Measuring and demonstrating impact provides a valuable opportunity to step back and consider the value of the service to organisations and their workforce. After all, if we cannot demonstrate impact, then why should our services be funded?

The self-evaluation process can also assist staff when considering difficult decisions such as ‘Should we really be doing this work with this partner?’ or ‘Will this work really make a difference?’ Quantitative data and good quality impact information should complement each other as they have different roles and purposes; the quantitative data can reassure stakeholders, but this, presented alongside the qualitative evidence, can present a broader picture and demonstrate value and impact effectively.

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

As library and knowledge specialists progress through the process of self-evaluation, strengths in provision and areas for improvement will be identified. Strengths in provision need to be celebrated, maintained and continuously reviewed. Areas for improvement require analysis and discussion before plans for action can be developed and implemented. The improvement plan should feed the continuous cycle of review and action.

An effective improvement plan will have:

- A small number of priorities which focus on improvement for users.
- Clearly identified responsibilities for implementation linked to individuals and/or teams from the library and knowledge service.
- Clear timelines with milestones and deadlines.
- Measures of success which include performance data and senior stakeholders' views.

Self-evaluation is a continuous process which can be used throughout improvement planning. Library and knowledge specialists should use it to check their starting point and identify what they need to do. They should then monitor improvement progress and do a further evaluation to check the impact of the action taken.

How to self-evaluate using the *Outcomes Framework*

Evaluating current practice

The library and knowledge specialists should aim to:

- Conduct an initial self-evaluation of each quality and improvement outcome
- Identify strengths and areas for improvement
- Identify preliminary evidence of impact
- Ask the “So what?” question
- List the possible evidence base

This will enable participants to gain a good understanding of:

- the self-evaluation process

- using the *Outcomes Framework*
- strengths and areas for improvement
- sources of evidence to demonstrate value and impact.

This can be used to inform the evidence gathering process and highlight gaps in the evidence that could be filled.

How to identify the level for an outcome

Library and knowledge specialists should consider each quality and improvement outcome by looking at the scope of the outcome and the key questions to ask. This will help them to understand what the outcome covers and provide some pointers to start the self-evaluation. Begin with level 0 and look at each indicator, noting whether it is joined to the next indicator by AND/OR, asking:

1. Do we do some or all of this? or
2. Does some or all of this exist?
3. Do we have existing evidence that can be supplied to demonstrate this indicator? If so, what is the evidence?
4. Do we have strengths that we can show in this outcome?

Where there is an AND you will need to be able to include evidence for all the indicators. The OR means you can choose which of the two indicators to evidence. Continue through the levels until you reach the one where you cannot answer yes to the first three questions. This will mean you have reached the current level for your service. The strength of your evidence will help you to determine whether you should assess your service as low, medium, or high.

Example for outcome one:

You decide you can provide high-quality evidence for all the indicators in levels 1 and 2 but only have high-quality evidence for one indicator in level 3. This shows you are likely to be a low level three and suggests further development is required.

The library and knowledge specialists should then ask the following questions (See [Improvement Planning](#) for further information):

- How can we improve in this outcome?
- What do we need to do to make this change happen?
- What do we predict will happen?
- How will we evaluate that an improvement has taken place?
- Ask "So what?" - If we do as planned, so what?

Gathering the evidence

Following the evaluation of current practice the library and knowledge specialists should then gather a range of existing evidence (see [Part 4](#) for the individual outcomes for suggested outcomes-based evidence) to support and confirm the level of development. For the baseline evaluation HEE would prefer that you only use the evidence that you already have (i.e. do not create fresh evidence) as this will enable a more realistic self-evaluation and highlight areas for improvement.

All organisations will supply the following key evidence:

- the organisation's library and knowledge services strategy,
- the library and knowledge service implementation plan for 2019/20
- The library and knowledge service annual report for 2019/20
- copies of Service Level Agreements for library and knowledge service provision to NHS organisations with a Learning and Development Agreement.

The evidence will, in the majority of cases, cover the previous 12 months (April to March) and be the most current evidence available. For further guidance on range and type of evidence see [How do we know? Gathering evidence](#)

See [What are the validators looking for?](#) for information on what constitutes quality evidence.

Evaluate evidence and decide level of development

When the evidence gathering stage is completed, (this may however be an ongoing process if the self-evaluation process is truly embedded in library and knowledge service planning) the drafting of the self-evaluation report should take place, using the *Quality and Improvement Self-Evaluation and Evidence Report* template to draw everything together. The report narrative aims to document current levels of development; recognise key strengths and identify where improvements can be made. The library and knowledge specialists should review the initial self-evaluation and consider, in the light of all the evidence and taking into account the level indicators, at what level they can evidence their performance.

It is important to engage any members of the library and knowledge team who have not been involved in the evaluation process as the information is refined and reconsidered.

Sharing good practice and key strengths

One of the key benefits of, and an important potential outcome, from the *Outcomes Framework* is the sharing of good practice about what works well in healthcare library and knowledge services. While undertaking the self-evaluation process we ask library and knowledge specialists to extract examples of good practice in their services. This will allow good practice to be captured and selected by the validators for wider sharing.

Improvement planning

Once the narrative for the self-evaluation report has been completed and the evidence has been embedded in the report then it is time to consider what improvements could be made to the library and knowledge service.

The *Improvement Planning Worksheet* (see [Appendix 2](#)), available in the [Toolkit](#), can be used to develop improvement ideas and rank them in order of priority:

- Start with the list of opportunities for improvement identified during the self-evaluation, and then group them according to themes, or similarities in likely action steps.
- For each opportunity, consider alternative strategies for the improvement outcome that is being sought, i.e. the general approaches you could use to create the improvement.
- Once the alternative strategies have been written onto the worksheet, score them using the criteria on the worksheet: impact, cost, time, and difficulty.
- Use this to set the priorities for your action plan.
- Review the results and make sure they make practical sense, e.g. a low-scoring but very important strategy might still be retained if a way can be seen to achieve it.
- Make a final choice of which improvements you wish to make and the improvement implementation strategies you plan to undertake and then develop action plans with enough detail to begin implementation.

The Improvement Action Plan Template, (see [Appendix 3](#)), available as part of the [Toolkit](#), will be a useful resource here.

Part 3: What happen next? Validated self-evaluation process

Validation

Once the self-evaluations are completed, they will be returned to HEE for a comparative view. The HEE Library and Knowledge Services Leads will validate the self-evaluation reports as part of the HEE *Quality Framework* assessment. The purpose this is to support, extend and challenge the library and knowledge specialists' own self-evaluation, to affirm, or otherwise, their evaluation of strengths and areas for improvement, thereby strengthening outcomes for service users and other stakeholders.

The validation process will:

- build and support the capacity of library and knowledge specialists to evaluate their services and improve the quality of provision;
- support and provide evidence for HEE's quality systems;
- support, promote and develop good practice in NHS library and knowledge services;
- provide information to HEE and the NHS on the quality of provision in library and knowledge services; and
- offer a national and consistent validation of self-evaluation processes.

As part of this process the HEE Library and Knowledge Service Leads will consider your self-evaluation report, review and consider your evidence, and ensure the level you have allocated is an accurate reflection of service delivery. The HEE Quality and Impact Group will carry out a consistency check of the levels awarded and the feedback provided. This will ensure that the validation process is seen as a national approach which is applied in the same way across all HEE regions and types of library and knowledge services. The validators will also act as an aggregator of levels across the regions and nationally and identify good practice that can be shared with both healthcare library and knowledge staff and colleagues in the wider library and knowledge profession.

What are the validators looking for in the submissions?

Your "pen portrait" will provide us with the background to your service. The validation will be based solely on the narrative and evidence provided. The validators will not be using any prior knowledge they have of your service. The validators will review the narrative statement and the evidence to decide which level of development is appropriate for your service. This will ensure a consistent approach is taken across England. Submitters will not be requested to clarify their returns or provide additional evidence.

Narrative statements

Remember the validators will not necessarily know your service so you should not assume they do. The statement you provide should:

- **be objective and honest** – remember this is your baseline and the aim is to show improvement and progress in future years
- **be tailored** to each outcome
- **be concise** and **clearly address all the indicators** for the level
- **explain** why you have self-evaluated at the level you have
- **explain** the relevance of the evidence that has been included
- **signpost and cross reference to the evidence** that you have provided
- **cross reference to other outcomes** where necessary
- **be easy to read** – Double-check that you haven't included any acronyms for organisation or department names.

Evidence

The validators want to see evidence that identifies service improvement that:

- **is relevant** and supports the narrative statement. We will be asking “So what?” after each piece of evidence. Even if this evidence is true, does it do much to support the narrative? Does it merely sound like evidence, but upon closer inspection it does not support the claimed level at all?
- **is enough** to make the case and consists of selective key evidence. **Think quality, not quantity.** An excessive amount of evidence provided “just in case” will not guarantee a validated level.
- **confirms or possibly exceeds the level** of development claimed with evidence for all the indicators.
- **has not been created** solely for the baseline evaluation. It should be a by-product of everyday activity and part of a planned and systematic approach to the evaluation of your services and activity. If you do not have the evidence, then that is an area for development.
- **is recent** i.e. within the period covered by the submission unless we indicate otherwise
- **if statistical in nature** makes sense and is clearly labelled (i.e. includes the total number of items/people etc. not just a percentage). We will be interested in your analysis of the data rather than just seeing numbers without any discussion of the implications etc.
- **includes reflective analysis**: what is the outcome of this activity or of providing this service? What worked? What could be improved?

Remember evidence may be relevant to more than one outcome and you can refer to other evidence you have provided by cross-referencing it using the evidence number(s).

Choice of levels

The *Outcomes Framework* is focused on service development and improvement so we expect services will be at different levels within the six outcomes. We also anticipate that for the baseline evaluation, few will be validated as a high performing level 4.

We will review the narrative statement and the evidence and if we cannot make the connection between them then we are likely to validate at a lower level than your self-evaluated level. We will be looking for any gaps in the narrative and the evidence that will suggest a claimed level is not appropriate.

If evidence does not exist for a higher level this will suggest further development is required.

The validated current level will act as the baseline against which future development will be measured.

Validated levels and feedback report

The validators will supply you with:

- a copy of the validated levels
- feedback on your self-evaluated submission covering
 - the self-evaluated level
 - quality of the narrative statement
 - evidence provided
- general comments on the submission
- recommended areas for improvement over the next 12 months
- a radar (or spider) chart that plots the self-evaluated and validated levels against the six outcomes providing a visual representation of the levels.

It is important to share the results of the self-evaluation and validation process with all library and knowledge staff and stakeholders. It is an opportunity to celebrate and recognise the levels of development received and also to share the next steps and improvement plan resulting from the process.

Following completion of the self-evaluation process, we encourage you to:


- Implement your improvement plan.
- Track the improvements you make.
- Share good practice ideas with others.
- Start gathering evidence for the next self-evaluation.

Part 4: How developed is our library and knowledge service? The Quality and Improvement Outcomes Framework

The pages that follow provide the six outcomes with words included in the Glossary underlined in black font e.g. outcomes and:

- The five levels which show progress from “not developed” to “highly developed”. Each level also provides the opportunity to self-evaluate as being low, medium or high performing within the level.
- details of the indicators within the levels
- scope: what does the outcome cover?
- key questions to ask when self-evaluating
- examples of outcome-based evidence
- suggested answers to three questions:
 - How does this outcome help in decision making for the organisation?
 - How does this outcome help in decision making for library and knowledge specialists?
 - How does this outcome help in library and knowledge service improvement?

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 and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p>A <u>Board</u> member promotes the role and value of the library and knowledge service.</p> <p>AND An approved strategy addresses <u>Knowledge for Healthcare</u> priorities, <u>aligned</u> to the goals and priorities of the organisation.</p> <p>AND An annual (implementation) plan addresses organisational and <u>Knowledge for Healthcare</u> priorities.</p> <p>AND <u>Senior stakeholders</u> are consulted over delivery of the library and knowledge service.</p> <p>AND A separately identified library and knowledge service budget allows for provision of a range of services and resources for users.</p>			<p>The <u>implementation plan</u> is regularly <u>reviewed</u> by <u>library and knowledge specialists</u>* and the organisation's senior manager(s).</p> <p>AND A <u>framework for evaluation</u> of the library and knowledge service has been planned.</p> <p>AND Existing activities and services have been reviewed and modified to support the priorities.</p> <p>AND/OR New activities and services are identified and introduced to support the priorities.</p>			<p>Strengths and areas for improvement in the library and knowledge <u>implementation plan</u> are identified.</p> <p>AND Appropriate resources are assigned by the organisation to fully deliver all priorities enabling a <u>business-critical</u> library and knowledge service.</p> <p>AND <u>Evaluation, analysis</u> and progress against the priorities are continually reviewed with senior stakeholders.</p> <p>AND Library and knowledge specialists make progress in achieving <u>impact outcomes</u> in relation to organisational and <u>Knowledge for Healthcare</u> priorities.</p>			<p><u>Champions</u>, including at Board level, promote the expertise of library and knowledge specialists as <u>business-critical</u> to the organisation.</p> <p>AND Library and knowledge specialists are proactive; adapting to the changing requirements of organisational and <u>Knowledge for Healthcare</u> priorities.</p>		

* Includes all members of the library and knowledge team regardless of their job title, role or banding.

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?
<p>This covers the strategic development of the library and knowledge service where its staff proactively deliver the priorities of both the organisation and <i>Knowledge for Healthcare</i>.</p> <p>The outcome includes how <u>library and knowledge specialists</u>:</p> <ul style="list-style-type: none"> • create strategic plans with deliverable and <u>evaluated</u> outcomes • engage and consult with <u>senior stakeholders</u> to identify, <u>review</u> and <u>evaluate</u> library and knowledge <u>service developments</u> • routinely use <u>performance monitoring</u> and <u>evaluation</u> processes <p>The outcome will show the extent to which the organisation:</p> <ul style="list-style-type: none"> • recognises the <u>business-critical</u> role of library and knowledge specialists and • commits to providing appropriate <u>resourcing</u> and enables the workforce to freely access the service. 	<ul style="list-style-type: none"> • How are library and knowledge specialists empowered and supported to improve services and realise the vision? • Are library and knowledge specialists being recognised at <u>Board</u> level as having a business-critical role in achieving the priorities of the organisation? • What new services or innovative projects/developments have recently been introduced? • How are library and knowledge specialists demonstrating the strategic <u>impact</u> and contribution they are making to delivery of organisational and <u>Knowledge for Healthcare</u> priorities. • Is there an <u>ongoing and systematic process</u> in place for engaging senior stakeholders in the development and evaluation of the service? 	<p>People should be cared for by competent and capable staff, receptive to <u>innovation</u> and able to use evidence from research. All NHS bodies and their staff should be able to access the expertise and resources offered by healthcare librarians and knowledge specialists. (HEE NHS Policy for libraries)</p> <p>The Secretary of State for Health has a duty, under the <i>Health and Social Care Act 2012</i>, to ensure “...the use in the health service of evidence obtained from research...”</p> <p>In delivering these requirements it is essential that NHS organisations are served by library and knowledge specialists who are proactively delivering a service to meet the vision and priorities of the organisation and <i>Knowledge for Healthcare</i>.</p>

Outcome-based Evidence Examples for Outcome 1

<ul style="list-style-type: none"> • Library and knowledge service strategy and annual plans showing resourcing (with budgets and costings), monitoring, review and achievements. • <u>Service level agreements</u>, <u>memoranda of understanding</u> and contract monitoring with stakeholder organisations. • Identified annual priorities and <u>outcomes</u>. • Annual activities, <u>evaluation</u> and <u>outcomes</u>. • <u>Stakeholder endorsements</u> – feedback/stories from senior stakeholders working with the <u>library and knowledge specialists</u> to support strategic delivery and direction. 	<ul style="list-style-type: none"> • The visible <u>outcomes</u> of stakeholder engagement. • Library and knowledge service <u>annual service reports</u>. • Evidence of achievement against service’s <u>evaluation framework outcomes</u>. • <u>Board</u> member leadership for the library and knowledge service and their ongoing activities. • Activities of senior <u>champions</u> of the library and knowledge service. • Link to outcome 2 demonstrating the Board use of evidence and knowledge and the critical role of library and knowledge specialists.
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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*.

How will it help in decision making for the organisation?	How will it help in decision making for the library and knowledge service?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> Clearly maps to and recognises organisational priorities and enables the <u>library and knowledge specialists</u> to adapt and respond to changing evidence needs. Enables informed decisions on which electronic resources are to be purchased. 	<ul style="list-style-type: none"> Helps library and knowledge specialists to <u>evaluate</u> the extent to which they are investigating and supporting the evidence <u>needs</u> of the organisation and the extent to which they are embedded in <u>organisational decision making</u>. Illustrates when changes need to be made to the services to keep it <u>aligned</u> to organisational and <i>Knowledge for Healthcare</i> priorities. Provides evidence for the library and knowledge specialists to support business cases if further investment is required. Allows the organisation to monitor the performance of its LKS over time. 	<ul style="list-style-type: none"> Helps library and knowledge specialists to evaluate the extent to which they are investigating and supporting the evidence needs of the organisation and the extent to which they are embedded in organisational decision making. Illustrates when changes need to be made to the services to keep it <u>aligned</u> to organisational and Knowledge for Healthcare priorities. Provides evidence for the library and knowledge specialists to support business cases if further investment is required.

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

Quality and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p>Evidence search services provided by <u>library and knowledge specialists</u> support:</p> <ul style="list-style-type: none"> <u>clinical decision making</u>. <p>AND</p> <ul style="list-style-type: none"> non-clinical <u>management decision making</u>. <p>AND Plans are in place to identify <u>evidence and knowledge mobilisation</u> requirements with one or more teams across the organisation.</p> <p>OR Library and knowledge specialists recognise opportunities to implement a tool and/or technique to capture and share <u>evidence and organisational knowledge</u>.</p>			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> work with one or more teams across the organisation to identify and plan for their <u>evidence and knowledge mobilisation</u> requirements. <p>AND</p> <ul style="list-style-type: none"> use or enable methods of <u>mobilising evidence and organisational knowledge</u> to underpin service delivery. 			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> routinely <u>review and evaluate</u> with <u>senior stakeholders</u> their service delivery and plans to underpin services in mobilising evidence and organisational knowledge. <p>AND</p> <ul style="list-style-type: none"> work with senior stakeholders and the <u>Board</u> to identify evidence and knowledge mobilisation requirements and develop action plans. <p>AND</p> <ul style="list-style-type: none"> adopt <u>innovation</u> in mobilising <u>internally generated knowledge</u>. <p>AND A <u>minority</u>* of the Board and organisational decisions are informed by the services of library and knowledge specialists.</p>			<p>The Board and the organisations use library and knowledge specialists in mobilising evidence and organisational knowledge.</p> <p>AND Senior stakeholders and the Board routinely implement the agreed requirements for evidence and knowledge mobilisation.</p> <p>AND The Board and organisational decisions are <u>routinely informed</u> by the services of library and knowledge specialists.</p> <p>AND Library and knowledge specialists develop innovative practice in mobilising evidence and organisational knowledge.</p>		

* between 15% and 49% of decisions

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

Scope	Key Questions to ask	Why is this outcome important?
<p>This outcome covers the role of <u>library and knowledge specialists</u> in facilitating the <u>mobilisation of evidence and internally generated knowledge</u> to underpin decision making, <u>innovation</u> and change.</p> <p>It shows how the <u>Board</u> and organisations use the expertise of library and knowledge specialists, to work with teams, senior stakeholders and the Board, to implement <u>evaluated</u> and <u>effective</u> approaches to <u>evidence and knowledge mobilisation</u>.</p> <p>It also measures the extent to which the organisation recognises the <u>business-critical</u> role library and knowledge specialists have in facilitating the mobilisation of evidence and internally generated knowledge.</p>	<ul style="list-style-type: none"> • How embedded in the organisation(s) are the library and knowledge specialists? • Does the Board consider the expertise of library and knowledge specialists in mobilising evidence and organisational knowledge to be business-critical? • Can it be shown that a range of decisions (management, clinical, patient) are made based on library and knowledge specialist input? 	<p>Healthcare is a knowledge-based industry. It is essential that the workforce use the right knowledge and evidence at the right time to support decision making and <u>best practice</u>. (HEE policy)</p> <p>The Topol Review recommends “NHS Boards should take responsibility for <u>effective</u> knowledge management to enable staff to learn from experience (both successes and failures) and accelerate the adoption of proven <u>innovations</u>. (OD5) <i>Topol Review</i> p.16</p> <p>Healthcare library and knowledge specialists use their expertise to mobilise evidence obtained from research, organisational knowledge, staff ‘know-how’ and from external innovation and <u>good practice</u> to underpin decision making in line with the legal duty of the service.</p> <p>Sharing the 'know-how' of staff, using research evidence and implementing good practice are all business-critical.</p>

Outcome-based Evidence Examples for Outcome 2

<ul style="list-style-type: none"> • Evidence and knowledge mobilisation plans, achievements/<u>outcomes</u> and <u>evaluation</u> of these in supporting decision making. • <u>User endorsements</u> regarding achievements and benefits – senior stakeholder/team/<u>Board</u> narratives and endorsements – <u>feedback/social cards/stories</u> from the teams with whom the library and knowledge specialists have worked to support knowledge mobilisation. • <u>Quality improvement methods</u> being used to underpin this outcome. 	<ul style="list-style-type: none"> • Link to evidence for outcome 6. • Details and evaluation of innovation that the library and knowledge specialists have implemented in relation to evidence and knowledge mobilisation. • Levels of activity and analysis carried out by the library and knowledge specialists to support clinical and management/organisation decision making.
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OUTCOME 2: All NHS decision making is underpinned by high quality evidence and knowledge mobilised by skilled library and knowledge specialists.

How will it help in decision making for the organisation?	How will it help in decision making for library and knowledge specialists?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> • Helps <u>library and knowledge specialists</u> to assess the level to which it they provide and promote access to the evidence and knowledge base across the organisation. • Ensures best available evidence is used to inform organisational and service redesign. • Assists the organisation to <u>evaluate</u> the level to which they are exploiting the abilities of library and knowledge specialists in ensuring organisational decision-making is <u>evidence based</u>. 	<ul style="list-style-type: none"> • Helps to determine the extent to which evidence provided by library and knowledge specialists is used across the organisation. • Enables opportunities to embed <u>organisational knowledge</u> and evidence which militates against silo working. • Supports the delivery of quality patient care and patient safety. • May enable <u>cost benefit analyses</u> to be carried out. • Could be used as evidence for Care Quality Commission inspections. 	<ul style="list-style-type: none"> • The outcome has the potential to improve the level to which library and knowledge specialists can disseminate evidence and knowledge within the organisation.

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

Quality and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p>A library and knowledge <u>service offer</u> is delivered to the organisation(s) served.</p> <p>AND The <u>needs</u> of library and knowledge service users are identified.</p> <p>AND Changes to services and resources are considered in response to user requests.</p> <p>AND <u>Feedback</u> from service users is collected.</p> <p>AND The promotion of services takes place.</p>			<p><u>Library and knowledge specialists</u> understand the wider <u>user base</u> and develop profiles of targeted groups.</p> <p>AND A <u>marketing plan</u> exists which is informed by <u>user profiles</u>.</p> <p>AND Provision is made for individuals or groups with <u>differing abilities or aptitudes</u>.</p>			<p>Development and <u>customisation</u> of library and knowledge services is based on the <u>outcomes</u> of <u>user and non-user consultation</u>.</p> <p>AND Library and knowledge services are continually refined and <u>evaluated</u> to improve <u>effectiveness</u>.</p> <p>AND <u>User journey mapping</u> is adopted, and the results are applied to achieve improvements in the service offer.</p>			<p>The expectation of users for an <u>individual and personalised evidence and knowledge service</u> is balanced against competing demands.</p> <p>AND Library and knowledge specialists innovate and apply advances in technology to deliver individual and personalised services.</p>		

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

Scope	Key Questions to ask	Why is this outcome important?
<p>This outcome highlights how <u>library and knowledge specialists</u> deliver <u>proactive stakeholder and user focused</u> library and knowledge services.</p> <p>The outcome covers how library and knowledge specialists:</p> <ul style="list-style-type: none"> • <u>analyse the “market”</u> for their services for existing and <u>potential users</u> • <u>engage and consult with stakeholders</u> • promote and market <u>targeted service offers</u> to existing and potential users • work <u>collaboratively</u> to extend the <u>reach and spread</u> of their services • enable users to access high quality evidence at the point of need and in an <u>appropriate format</u>. 	<ul style="list-style-type: none"> • How well do the library and knowledge specialists identify and meet the requirements of the healthcare workforce’s broad range of evidence and knowledge needs? • How well do the library and knowledge services provided meet the differing <u>needs</u> of all users? • In what ways do the library and knowledge specialists support individuals and organisations to locate and use <u>evidence and organisational knowledge effectively</u>? • In what ways does the library environment promote and support learning? • How are <u>literacy initiatives</u> supported within the organisation? 	<p>Library and knowledge specialist need to be proactive in responding to changes in workforce <u>needs</u> and related strategies.</p> <p><u>Patient outcomes</u> and <u>organisational decision making</u> depends on the quality of evidence supplied. The stakeholder workforce needs access to the right knowledge and evidence to deliver high-quality, safe healthcare.</p> <p>A successful library and knowledge service should have a high percentage of use by its stakeholder workforce. The stakeholder workforce experience and satisfaction depend on the quality of knowledge, expertise, <u>customer service</u> and professionalism of all library and knowledge specialists</p> <p>The stakeholder workforce wishes to access evidence in appropriate formats and services at different times and in different locations. The stakeholder workforce needs consistent and equitable access to library and knowledge services.</p>

Outcome-based Evidence Examples for Outcome 3

<ul style="list-style-type: none"> • Evidence of service improvements showing the development of a proactive, <u>effective</u> library and knowledge service. • Evidence that changes in practice are driven by <u>user experience</u> and <u>user journey mapping</u> to show how a proactive, effective library and knowledge service is developing. • Evidence that initiatives taken contribute to this outcome. • <u>Quality Improvement methods</u> being used to underpin this outcome e.g. user experience and user journey mapping • Library and knowledge services marketing and <u>publicity plans</u>. • Evidence of <u>reviewing the outcomes</u> of marketing and publicity plans. 	<ul style="list-style-type: none"> • <u>Feedback/stories</u> from stakeholders to show where have delivered <u>service improvement</u> for them. • Stakeholder engagement and mapping, <u>analysis</u> of surveys such as <u>impact</u> and <u>user satisfaction</u>. • Development of targeted service offers. • Details and <u>evaluation</u> of <u>innovation</u> that the <u>library and knowledge specialists</u> have implemented in relation to <u>proactive</u> service delivery. • Levels and analysis of activity carried out by the library and knowledge specialists. • <u>Key performance indicators</u> and <u>metrics</u> (e.g. reach).
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OUTCOME 3: Library and knowledge specialists identify the knowledge and evidence needs of the workforce in order to deliver effective and proactive services.

How will it help in decision making for the organisation?	How will it help in decision making for library and knowledge specialists?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> • Helps <u>library and knowledge specialists</u> to assess the level to which it they provide and promote access to the evidence and knowledge base across the organisation. • Enables informed decisions on which electronic resources are to be purchased. 	<ul style="list-style-type: none"> • Helps to determine the extent to which evidence provided by library and knowledge specialists is used across the organisation. • Enables opportunities to embed <u>organisational knowledge</u> and evidence which militates against silo working. • Supports the delivery of quality patient care and patient safety. • May enable cost benefit analyses to be carried out. • Could be used as evidence for Care Quality Commission inspections. 	<ul style="list-style-type: none"> • The outcome has the potential to improve the level to which library and knowledge specialists can disseminate evidence and knowledge within the organisation.

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.

Quality and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p>A <u>qualified library and knowledge specialist actively leads</u> the service.</p> <p>AND A qualified library and knowledge specialist <u>actively manages</u> the staff.</p> <p>AND Library and knowledge specialist skills and capacity are considered in service planning.</p> <p>AND All library and knowledge specialists undertake <u>continual professional development</u>.</p>			<p>Strengths and weaknesses in skills and capacity of the library and knowledge services team have been identified.</p> <p>AND Steps have been taken to respond to the identified skills and capacity issues.</p> <p>OR Temporary issues may have been identified with the library and knowledge staffing/skills mix which can be resolved.</p> <p>AND Continual professional development is undertaken and reflected upon by library and knowledge specialists.</p>			<p>The capacity and skills of library and knowledge specialists are regularly <u>reviewed</u> against the <u>implementation plan</u>, organisational and national priorities.</p> <p>AND Improvements to library and knowledge skills and changes in staffing capacity have a planned implementation date and rationale.</p> <p>AND/OR Technologies and/or <u>partnerships</u> are explored to support service needs.</p> <p>AND The learning from continual professional development informs library and knowledge <u>service improvement</u> and development.</p>			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> • have the capacity to deliver and develop the required services. <p>AND</p> <ul style="list-style-type: none"> • have the skills to deliver and develop the required services. <p>AND Library and knowledge roles are redesigned according to the service's needs.</p>		

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.

Scope	Key Questions to ask	Why is this outcome important?
<p>This covers the requirements for:</p> <ul style="list-style-type: none"> • suitably qualified <u>library and knowledge specialists</u> • with the relevant <u>skill mix</u> and • optimum numbers <p>to deliver an evolving service, <u>working in partnership</u> with colleagues from other library and knowledge services where appropriate.</p> <p>It considers the library and knowledge specialist:</p> <ul style="list-style-type: none"> • qualifications • skill mix • opportunities for regular <u>continual professional development</u>. <p>The <u>library and knowledge service manager</u> has a duty to ensure that the recruitment, induction and employment <u>review</u> and development processes are in place and <u>effective</u>.</p> <p>The manager should forward plan and review capacity and skill mix to meet changing needs and any demands for the subsequent redesign of existing roles.</p>	<p>For the library and knowledge service:</p> <ul style="list-style-type: none"> • Are staffing levels enough and appropriate for delivery of service priorities? • Do staff have the right skill mix? • Have roles been reviewed and redesigned? • How do staff recruitment, induction and training support wider organisational objectives? • How planned and systematic is embedded e.g. clinical and outreach librarian work? • How are staff updated on new knowledge and evidence services and resources? <p>Do you have enough library and knowledge specialist capacity to deliver on change and <u>innovation</u>?</p>	<p>The NHS workforce faces increasingly complex challenges in accessing timely, accurate and tailored evidence, and to effectively manage <u>organisational knowledge</u>.</p> <p>All NHS organisations should be served by library and knowledge specialists with the skill mix to deliver against organisational and <u>Knowledge for Healthcare priorities</u>.</p> <p>To build this capacity Topol recommends increasing “...the numbers of <u>knowledge specialist posts</u>, with dedicated, accredited time to keep their skills up to date....(AIR5/DM4). Topol Review p.57</p> <p>There are opportunities to embed more library and knowledge specialists in clinical and practical settings to create more clinical and outreach librarian posts. They can then act as <u>knowledge brokers</u> and take an overview of knowledge and evidence <u>needs</u> and identify gaps in provision or skills development.</p>

Outcome-based Evidence Examples for Outcome 4

<ul style="list-style-type: none"> • <u>Outcomes</u> of library and knowledge <u>staffing and skills audits</u>. • Examples of <u>role review</u> and <u>redesign</u>. • <u>Impact</u> of embedded/clinical/outreach librarian roles. • Outcomes of a recent <u>development/ training needs assessment</u>. • Appraisal and personal development planning - (examples showcased in the CILIP Health Professional Knowledge and Skills Base). • Significance of qualifications held by staff in post. 	<ul style="list-style-type: none"> • Continual professional development programmes for staff. • Impact of continual professional development on service delivery. • Examples where <u>sharing and reflection on continual professional development and the learning</u> is put into practice. • Outcomes of <u>partnership</u> working to increase capacity to deliver the service.
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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.

How will it help in decision making for the organisation?	How will it help in decision making for the library and knowledge specialists?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> Helps to assess how well the skills of <u>library and knowledge specialists</u>, working alone or in <u>partnership</u>, deliver a modern and fit for purpose service as defined by <i>Knowledge for Healthcare</i> and local need. Helps staff identify what services they can provide in house and which ones may need to be provided through <u>collaboration</u> with other library and knowledge specialists. 	<ul style="list-style-type: none"> Helps the organisation to identify and address its requirements in terms of library and knowledge specialist staff numbers and requisite skills. Helps identify opportunities for expansion of the service e.g. provision through <u>service level agreements</u> to other organisations. Delivers high quality library and knowledge services with greater access to services and resources through its collaborative working. 	<ul style="list-style-type: none"> The outcome has the potential to identify organisational requirements in terms of library and knowledge specialists and to initiate an exploration of how these <u>needs</u> maybe better met. Helps identify, in conjunction with stakeholders, where there are opportunities to improve the service.

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

Quality and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p><u>Library and knowledge specialists:</u></p> <ul style="list-style-type: none"> keep up to date with <u>good practice</u> and appropriate evidence relevant to their practice. <p>AND</p> <ul style="list-style-type: none"> discuss good practice, appropriate evidence and share their <u>professional knowledge</u> with their team or work colleagues. <p>AND Changes to everyday library and knowledge practice are informed by appropriate evidence and professional knowledge.</p>			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> implement an <u>ongoing cycle of measuring and evaluating</u> their activities and the services they deliver. <p>AND</p> <ul style="list-style-type: none"> routinely <u>review</u> good practice, <u>innovation</u> and <u>external research</u> to identify improvements and developments to introduce locally. <p>AND</p> <ul style="list-style-type: none"> put the <u>outcomes of service evaluations</u> and the results of reviewing the evidence in to practice. <p>AND share descriptive accounts of resolving service issues with the wider library and knowledge community</p>			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> deliver an evidence-based library and knowledge service. <p>AND</p> <ul style="list-style-type: none"> publish <u>case studies</u> or descriptive accounts of changes made in their professional literature. <p>OR</p> <ul style="list-style-type: none"> reflect on and share the implications for the profession and/ or results of their service evaluations. <p>OR</p> <ul style="list-style-type: none"> collaborate on library and knowledge research projects. <p>AND use data to <u>analyse</u> the relative costs and benefits of individual library and knowledge services</p>			<p>Library and knowledge specialists:</p> <ul style="list-style-type: none"> are supported by the organisation to lead <u>formal research</u> in to library and knowledge practices. <p>AND</p> <ul style="list-style-type: none"> contribute the outcomes of their formal research to the <u>library and knowledge evidence base</u> (e.g. peer-reviewed journals). 		

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

Scope	Key Questions to ask	Why is this outcome important?
<p>This outcome shows how <u>library and knowledge specialists</u> implement <u>evidence based practice</u> in the planning, design and delivery of the activities, products and facilities (“the library and knowledge service”) they provide.</p> <p>Improvement to existing services and the development of new services may involve:</p> <ul style="list-style-type: none"> • adopting or adapting <u>innovation/good practice</u> • <u>reviewing effectiveness</u> of services • showing <u>optimised investment</u> • testing for <u>cost-effectiveness</u>. 	<ul style="list-style-type: none"> • How do library and knowledge staff keep up-to-date on the latest developments in the profession to help identify and <u>evaluate</u> ideas for service improvement? • Is this an ad-hoc, opportunistic process or embedded within the culture of the service? • Where opportunities for library and knowledge improvement/development/innovation are identified how are these progressed, monitored, and evaluated? • How are service improvements and developments shared with the wider <u>library and knowledge profession</u>? • How cost-effective are the services provided? 	<p>Library and knowledge specialists support evidence-based practice across healthcare organisations. It is therefore something which they should practice ensuring the continuing improvement of the services they provide.</p> <p>Expansion of the service into new areas can only be achieved through <u>efficiencies</u> by <u>rationalising investment</u>, reducing duplication, <u>streamlining back-office functions</u> and exploring <u>partnership</u> opportunities.</p> <p>Library and knowledge services need to evolve in a planned and structured way based on the best available evidence and <u>professional knowledge</u>. Changes should be evaluated and shared with others to prevent the duplication of errors and ensure the spread of good practice.</p>

Outcome-based Evidence Examples for Outcome 5

<ul style="list-style-type: none"> • How innovation/ good practice/ <u>new technologies</u> have been adapted or adopted within the library and knowledge service. • <u>Analysis</u> and reflection on what local statistics show. • <u>Impact outcomes/stories</u> of <u>service improvement</u> and development. • Masters/PhD dissertations on library and knowledge issues/ topics submitted by members of the library and knowledge services team. • Testing and <u>review</u> of services and other deliverables. • <u>Work flow analysis</u> including <u>analysing process costs</u> (time spent, staff and resource costs) for providing individual services. • <u>Value for money</u> and <u>benefits realisation studies</u>. 	<ul style="list-style-type: none"> • Appropriate research published in library and knowledge peer reviewed and non-peer reviewed journals. • Library and knowledge <u>service evaluations</u>. • <u>Shared learning reports</u> with reflection on the implications for the library and knowledge service. • Reflective pieces on identified good practice, innovation and research. • Good practice or innovation submissions to the national database. • <u>Quality improvement methods</u> being used to underpin this outcome. • Examples of the application of <u>LEAN thinking</u>. • Streamlining <u>back-office functions</u>. • Cost-benefit and <u>return-on-investment</u> analyses.
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OUTCOME 5: Library and knowledge specialists improve the quality of library and knowledge services using evidence from research, innovation and good practice.

How will it help in decision making for the organisation?	How will it help in decision making for the library and knowledge specialists?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> • Helps <u>library and knowledge specialists</u> to assess the extent to which its services are based on the best evidence. • Provides justification and evidence for changes to services. • Helps library and knowledge specialists to prioritise their work, determine strengths and weaknesses and <u>target</u> areas for improvement. • Assures the organisation that the LKS delivers best value for money. 	<ul style="list-style-type: none"> • Assures the organisation that library and knowledge <u>service developments</u> are <u>evidence based</u>. • Library and knowledge specialists deliver high quality aspirational services. • Library and knowledge specialists' roles are shaped, developed, and grown from existing workforce. • Library and knowledge specialists offer flexible, <u>proactive</u> services that are responsive to local needs. 	<ul style="list-style-type: none"> • The outcome has the potential support continuous development within the library and knowledge service while ensuring that developments are focused, <u>targeted</u>, and evidence based. • Library and knowledge specialists can be seen to be contributing to the profession's research evidence base. • The outcome has the potential to drive <u>efficiencies</u> and <u>partnership</u> working by tracking developments over time. • Taking a <u>LEAN approach</u> to service provision.

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

Quality and Improvement Outcome Levels of Development for NHS Funded Library and Knowledge 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
	<p>Plans are in place to gather <u>impact data</u> relating to the differences made by <u>library and knowledge specialists</u> and services to the organisations, groups, or individuals served.</p> <p>OR Current collection of impact data is impromptu.</p> <p>AND Evidence of impact mainly shows the difference made to an individual or at a personal level.</p> <p>OR There are a limited number of user responses.</p>			<p>Quantitative and <u>qualitative impact data</u> are <u>systematically collected</u> for at least one activity or service provided by the library and knowledge specialists.</p> <p>AND Basic <u>analysis</u> of impact data takes place.</p> <p>AND Evidence of impact is used for promotion of the library and knowledge service.</p>			<p><u>Quantitative</u> and qualitative impact data are systematically collected and <u>evaluated</u> across a <u>range of library and knowledge activities and services</u>.</p> <p>AND Evidence of impact is used for internal reporting and promotion and <u>service improvement</u> on a regular basis.</p> <p>AND <u>Stakeholder endorsement</u> is obtained and used in <u>impact stories</u> for local promotion.</p>			<p>People within the organisation(s) served recognise the impacts made by library and knowledge specialists.</p> <p>AND <u>Senior stakeholders</u> recognise the value of library and knowledge specialists.</p> <p>AND Evidence of impact demonstrates the difference made to a range of organisational priorities.</p> <p>AND Quantitative data and <u>impact stories</u> are contributed to the <u>national impact evidence base</u>.</p>		

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

Scope	Key Questions to ask	Why is this outcome important?
<p>This outcome covers the <u>effectiveness</u> of <u>library and knowledge specialists</u> in collecting evidence to show the <u>impact</u> of their services and how it is used to promote the service both internally and externally to stakeholders.</p> <p><u>Impact</u> is defined as: <i>“... The difference or change in an individual or group resulting from the contact with library services (3.25)”</i> British Standards Institute/International Standards Organisation 16439: 2014</p> <p>Delivery of the outcome will demonstrate the importance and <u>business-critical</u> nature of library and knowledge services to the organisation and health economy in areas including but not limited to:</p> <ul style="list-style-type: none"> • personal or professional development • <u>service development</u> or delivery • <u>collaborative</u> working • quality of patient care • informed decision making • reduced risk or improved safety • <u>financial effectiveness</u>. 	<ul style="list-style-type: none"> • How do we know if the work of the library and knowledge specialists makes a difference to the organisation’s staff and the work they do within and outside the organisation? • <u>How are library and knowledge specialists</u> ensuring that <u>impact data</u> are collected in an efficient and <u>effective</u> manner, and that appropriate opportunities to share this data with decision makers are taken? • How are impact data shared with the wider library and knowledge services community and the HEE Library and Knowledge Services Leads to ensure that it is available for use in <u>advocacy</u>, <u>good practice</u>, and for reference by other services? 	<p>The ability to demonstrate the impact of library and knowledge specialists is important for the future and continuation of a library and knowledge service.</p> <p><u>Organisational decision makers</u> need to see evidence of the difference made by library and knowledge specialists in order to make appropriate funding and investment decisions.</p> <p>Furthermore, an awareness of the differences library and knowledge specialists can make to organisations drives usage of the services they provide and creates the potential for further impact.</p> <p>At national level, using impact data for <u>advocacy</u> provides a valuable tool to promote the message of the need for library and knowledge services to ensure high quality healthcare, evidence-based-practice, and to fulfil the requirement to ensure “the use in the health service of evidence obtained from research” (<i>Health and Social Care Act 2012</i>).</p>

Outcome-based Evidence Examples for Outcome 6

<ul style="list-style-type: none"> • <u>Impact Questionnaire</u> Data evidencing the collection of quantitative data. • <u>Impact case study</u> / narrative data evidencing the collection of qualitative data. 	<ul style="list-style-type: none"> • Evidence of using <u>impact data</u> in local promotion. • Evidence of impact collection being embedded in the service. • Evidence of sharing the impact data beyond the organisation.
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OUTCOME 6: Library and knowledge specialists demonstrate that their services make a positive impact on healthcare.

How will it help in decision making for the organisation?	How will it help in decision making for the library and knowledge specialists?	How will it help in library and knowledge service improvement?
<ul style="list-style-type: none"> • Helps demonstrate the value and difference that <u>library and knowledge specialists</u> make to the organisation. • Helps library and knowledge specialists to routinely collect evidence of <u>impact</u> that can be used in promotional materials and business cases. 	<ul style="list-style-type: none"> • Helps the organisation to identify the both the value and difference that library and knowledge specialists can make and the potential for future contributions. 	<ul style="list-style-type: none"> • The outcome has the potential to enhance organisational perception of the value of library and knowledge specialists and ensure more, and where appropriate, different use is made of these vital assets.

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Appendix 1: Quality and Improvement Outcomes Framework Self-Evaluation and Evidence Report Template

Available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>



Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services: Self-evaluation and Evidence Report

+	Organisation name		HEE region	
	Library and Knowledge Service name		Completed by	
	Email address		Date completed	

Completing the template

Each outcome has its own narrative and associated evidence table. The tables will expand to accommodate text and files when you add them. Remember that one piece of evidence may be used to demonstrate more than one outcome.

To aid validation of your submission please:

- number the evidence,
- if evidence relates to more than one outcome please cross reference it rather than embedding duplicate copies of the evidence,
- for long documents please highlight relevant page number and/or section

Embedding evidence

Evidence should be embedded in to the table in the evidence column for each of the outcomes. We advise using the FILE, PRINT, PRINT TO PDF facility for Microsoft Office documents. Scanned PDFs can also be inserted. For guidance on how to embed a document please see ["Embed documents in Word 2010"](#)

Other guidance

Please contact your local HEE library and knowledge services quality lead with any queries or for further advice.

Appendix 2: Improvement Planning Worksheet

Available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>

Improvement planning worksheet

Guidance on using the improvement planning worksheet

Start with the list of opportunities for improvement identified during the self-evaluation, and then group them according to themes, or similarities in likely action steps.

For each opportunity, consider alternative strategies for the improvement outcome that is being sought, i.e. the general approaches you could use to create the improvement.

Once the alternative strategies have been written onto the worksheet, score them using the criteria on the worksheet: impact, cost, time, and difficulty.

Impact of the strategy on improving the service

If it has a high impact, i.e. it would have a significant effect on improving the service, then rate it a 6. If it has a medium impact, i.e. it goes some way to improving the service, then rate it a 3. If it has low impact, then rate it 1.

Cost/resources to implement the solution

If it is a low cost alternative, i.e. it can be implemented with no extra materials, people or equipment costs, then rate it 6; if medium cost, rate it 3; and if high cost, i.e. requires additional people, a lot of materials, and/or expensive infrastructure, rate it 1.

Time to implement the solution

If the solution can be implemented in a short time, i.e. within 1 month, rate it 3; if it will take between 2 and 5 months, rate it 2; and if it will take longer than 6 months rate it 1.

Difficulty required involved in implementing the solution

If the solution can be implemented with minimal difficulty, rate it a 3; if it has a moderate difficulty using current resources, rate it a 2; and if it will be very difficult to implement, rate it a 1.

Ranking

Total the scores for each strategy and then rank the solutions in order of the scores; the highest score should be the preferred solution. Please note: due to the score weighting, options that have a high impact with low cost will be the likely preferred solutions. Library and knowledge specialists can change the scoring and weighting as required.

Use this to set the priorities for your action plan. Review the results and make sure they make practical sense, e.g. a low-scoring but very important strategy might still be retained if a way can be seen to achieve it.

Make a final choice of improvement implementation strategies and then develop action plans with enough detail to begin implementation.

Source: State Library of Victoria (2011) *Be the Best We Can*. <http://libraries.vic.gov.au/cgi-bin/infonet/org.cgi?detail=1&id=87> Page 1 of 2

Appendix 3: Improvement Action Plan Template

Available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>

	
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Library and Knowledge Services Quality and Improvement Outcomes Framework: Improvement Action Plan

Organisation name		HEE region	
Library name		Completed by	
Email address		Date completed	

General changes impacting on the library and knowledge service
 e.g. organisational (such as special measures or mergers), staff changes (such as long term sickness or vacancies)

Appendix 4: Quality and Improvement Outcomes Framework: Self-evaluated and Validated Levels

Available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>

"Comments from the validation team"		Explanation of comment				
COMMENT		General comment e.g. quality of evidence, things that may become issues and need to be kept under review.				
RATIONALE FOR LEVEL and SUB-LEVEL AWARDED		Explains why we awarded the indicated level.				
SUGGESTIONS FOR SERVICE DEVELOPMENT & IMPROVEMENT		If you wish to improve your level then we recommend that you: a) revise your narrative statement to include the points the validation team has indicated are missing. AND/OR b) include the suggested additional or replacement evidence.				
Outcome No.	Outcome	Self-evaluated levels (select from drop down)		Validated levels (select from drop down)		Comments from the validation team
		Level 0, 1, 2, 3, 4	Low, medium, high	Level 0, 1, 2, 3, 4	Low, medium, high	
1	All NHS organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of <i>Knowledge for Healthcare</i> .					
2	All NHS organisations enable their workforce to freely access proactive library and knowledge services that meet organisational priorities within the framework of <i>Knowledge for Healthcare</i> .					
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 <i>Knowledge for Healthcare</i> 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.					

Summary of self-evaluated levels	Summary of validated levels
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Appendix 5: Links to Glossary of Terms – alphabetical and by outcome

Available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>



Quality and Improvement Outcomes Framework Glossary in Alphabetical Order

The glossary is intended to aid library and knowledge staff when they are undertaking a self-evaluation of their library and knowledge service against the *Quality and Improvement Outcomes Framework*. It should ensure that the terminology, acronyms, and phrases used are understood to encourage consistent interpretation and clarify requirements of the Outcomes Framework.

The glossary covers terms used in the *Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services: Handbook for baseline self-evaluation*. Terms included in the glossary are highlighted by underline in black font e.g. case studies within the handbook. Usually only the first instance within a section is underlined to ensure the text does not look to "busy".

This is the format used for the glossary:

Term(s)	Definition(s) for use of the term in this context	Handbook page or Outcome	Section of Handbook or Outcome(s)	References/ Tools
<i>Case study (ies)</i>	A process or record of research into the development of a particular person, group, or situation over a period of time. See also Impact Stories	Outcome 5 Outcome 6	Level 3 Evidence examples	See https://kfh.libraryservices.nhs.uk/value-and-impact-toolkit/kfh-impact-tools/impact-case-studies/

The glossary has also been formatted into a list of terms by outcome.

It is available from: <https://kfh.libraryservices.nhs.uk/quality-and-improvement-outcomes-documentation/>

Quality and Improvement Outcomes Framework Glossary by Outcome

The glossary is intended to aid library and knowledge staff when they are undertaking a self-evaluation of their library and knowledge service against the *Quality and Improvement Outcomes Framework*. It should ensure that the terminology, acronyms, and phrases used are understood to encourage consistent interpretation and clarify requirements of the Outcomes Framework.

The glossary covers terms used in the *Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services: Handbook for baseline self-evaluation*. Terms included in the glossary are highlighted by underline in black font e.g. case studies within the handbook.

Each tab provides a glossary of the terms used in the relevant outcome in the Handbook. Usually only the first instance within a section is underlined to ensure the text does not look to "busy".

This document is divided in to one tab per outcome plus one for terms that mainly appear in the main sections of the Handbook. If a word appears in multiple outcomes then the glossary entry is repeated in each outcome. Click on the hyperlink to open the relevant tab.

[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 2](#)

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

[Outcome 3](#)

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

[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.

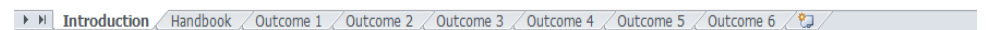
[Outcome 5](#)

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

[Outcome 6](#)

Library and knowledge specialists demonstrate that their services make a positive impact on healthcare.

[Handbook](#)



Acknowledgements

The *Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services in England* has been developed by a project group of the HEE Library and Knowledge Services Leads.

Clare Edwards (Chair)	HEE Midlands and East	Lucy Reid	HEE London and Kent Surrey and Sussex
Linda Ferguson	HEE North	Sue Robertson	HEE South
Dominic Gilroy	HEE North	Holly Case Wyatt	HEE London and Kent Surrey and Sussex
Emma Ramstead	HEE London and Kent Surrey and Sussex		

The structure of *Outcomes Framework* is adapted, with permission, from that used in *Being the Best We Can Be (2011)* developed by the State Library of Victoria and the subsequent *How Good is Our Public Library Service?* (Scottish Library & Information Council, 2017).

The project group would like to thank the members of the pilot group who completed self-evaluations to test the original outcomes and support documentation. The evaluations were then validated by the project group to further test the process and identify areas for improvement. The services who took part in the pilot were from:

- Avon and Wiltshire Mental Health Partnership NHS Trust
- Bridgewater Community Healthcare NHS Foundation Trust
- Central and North West London NHS Foundation Trust
- Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust
- East and North Hertfordshire NHS Trust
- Imperial College London University
- Library and Knowledge Services for NHS Ambulance Services in England
- Northumberland, Tyne and Wear NHS Foundation Trust
- Oxford University – Bodleian Healthcare Library
- Surrey and Sussex Healthcare NHS Trust
- Taunton and Somerset NHS Foundation Trust
- University Hospitals of Leicester NHS Trust

The project group would also like to thank:

- members of the Library Standards Review Task and Finish Group whose contributions started us on the road to developing outcomes and
- Alison Brettle (University of Salford), Alan Fricker (King's College London), Mic Heaton (University Hospitals of Derby and Burton NHS Foundation Trust) and Jenny Turner (East Sussex Healthcare NHS Trust) who challenged us and acted as the perfect sounding-board.