



Ensuring the effective use of evidence and knowledge to sustain healthcare delivery: the knowledge mobilisation self-assessment tool

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Abstract:

The health service in England is a knowledge business. It relies upon good quality evidence and effective use of organisational knowledge to make informed decisions which impact upon the quality of care and healthcare outcomes for patients. A key theme of the Health Education England Knowledge for Healthcare strategy for NHS knowledge and library services is mobilising evidence and knowledge. This aims for “Healthcare organisations, services and systems to effectively mobilise evidence, learning, knowledge and know-how to enable evidence-based policy and practice”. To enable senior healthcare leaders to identify opportunities to maximise the benefits of evidence and knowledge as business assets, a Knowledge Mobilisation Self-Assessment Tool has been developed. The paper provides a definition of knowledge mobilisation, considers why it is important within healthcare and outlines the vital role of knowledge specialists and librarians to enable healthcare staff to apply and use evidence, build their know-how, continue to learn and drive innovation. Development and function of the Knowledge Mobilisation Self-Assessment Tool is outlined, including how the results can inform creation of a bespoke action plan for organisational teams to develop their use of evidence and knowledge to meet their organisational objectives. The plan may include simple tools and techniques from the NHS Knowledge Mobilisation Framework such as the learning during technique of the After Action Review. The paper concludes by highlighting benefits such as assisting the transfer of knowledge into practice enabling learning health systems, providing assurance that an organisation is committed to using evidence and knowledge to inform decision making, stimulation of knowledge sharing and improving engagement

between the organisation and the knowledge and library service to build structure and capacity for sustainable healthcare delivery based on effective use of evidence and knowledge.

Keywords: Knowledge Mobilisation, Knowledge for Healthcare, NHS, Mobilising Evidence and Knowledge, Knowledge Specialists.

Introduction

The health service in England is a knowledge business. It relies upon good quality evidence and effective use of organisational knowledge to make informed decisions which impact upon the quality of care and healthcare outcomes for patients. Within legislation there is a duty of care upon policy makers, commissioners, and providers of health services to use evidence from research in their decision making (Health and Social Care Act, 2012). Health librarians and knowledge specialists have a critical role using their expertise ensuring that the health service, clinical and non-clinical staff, use evidence and knowledge as an asset.

In January 2021, Health Education England (HEE) published the refreshed Knowledge for Healthcare strategy for National Health Service (NHS) Library and Knowledge Services in England (HEE, 2021) with the strategic ambition:

“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.”

One of the key themes of this strategy is the focus upon mobilising evidence and knowledge. This work aims for:

“Healthcare organisations, services and systems to effectively mobilise evidence, learning, knowledge and know-how to enable evidence-based policy and practice”

To implement successful change, introduce technological innovation, improve quality of care, and transform services and workforce, the NHS needs to get better at managing information, evidence, and knowledge. These are valuable assets, yet rarely considered at executive board level. Using data and research evidence, sharing know-how and implementing best practice are all business critical.

The knowledge mobilisation self-assessment tool has been developed by Health Education England (HEE, 2021a) to enable senior healthcare leaders to identify opportunities to maximise the benefits of evidence and knowledge as business assets.

Why Knowledge Mobilisation?

Many terms are used interchangeably to describe knowledge mobilisation:

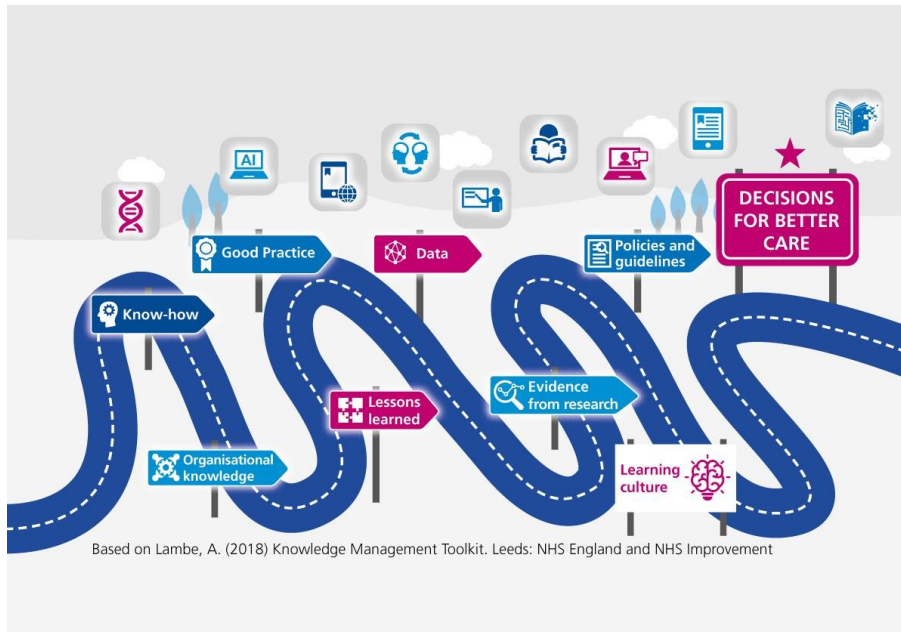
Knowledge management; knowledge sharing; shared learning; learning lessons; connecting people; sharing ‘know-how’; knowledge transfer; spread and adoption; knowledge translation and even evidence-based medicine are just a few terms that are in regular use.

The working definition that we have adopted encompasses all of these terms:

KNOWLEDGE: That which is explicit or documented – research, data-sets, guidelines and that which is tacit, the know-how and values held by individuals and within organisations based upon wisdom and experience .

MOBILISATION: Organising and preparing for action - considering how knowledge is to be used to achieve a particular purpose.

Knowledge Mobilisation is about connecting and encouraging people to share explicit and tacit knowledge AND to USE this knowledge to inform their decision making (Day, A. 2021)



Within the easy-read version of Knowledge for Healthcare (HEE, 2021b) this is simply described as “Getting the right information from different places and sharing it” and this “right information” can be from reports, research , the internet and from the things people know but haven’t written down. People can then use this knowledge to help inform their decisions and actions.

Figure 1: Knowledge and evidence mobilisation

Knowledge Mobilisation is also concerned with enabling the use of evidence. Evidence comes in many forms and varying degrees of quality and volume depending on the topic. It is often research published in peer-reviewed journals, or as reports. Evidence based practice emphasises the importance of understanding and applying the evidence taking into consideration other factors including expert knowledge and values. Decisions must take account of the best available evidence and individual and organisational knowledge. Enabling evidence-based practice must consider the capture and mobilisation of knowledge as well as evidence. Knowledge specialists enable decision makers to take account of this full continuum.

The role of knowledge specialists

Knowledge specialists and librarians not only make knowledge resources available and provide training to find and interpret high quality health information, but they act as

knowledge brokers. In this role they pull together intelligence from published evidence, data, examples of good practice and use techniques to discover tacit knowledge – valuable know-how that can so easily be overlooked. They mobilise this knowledge, synthesising and summarising what they have found so it can be used immediately by the healthcare worker, saving their time, informing their clinical and non-clinical decisions, and making a difference to people’s lives.

A further specific outcome within the Knowledge for Healthcare strategy is:

“To enable healthcare staff to apply and use evidence, build their know-how, continue to learn and drive innovation.”

Knowledge specialists use their expertise to enable healthcare staff to achieve this. However, a useful first step is to work with healthcare teams within an organisation to identify how well they are already using evidence and organisational knowledge.

What is the Knowledge Mobilisation Self-Assessment Tool?

Launched in 2021, the digital self-assessment tool encourages senior leaders within healthcare organisations to consider how well they are using external evidence and organisational knowledge and assess opportunities to make better use of information, evidence, and knowledge as an asset.

The tool invites senior healthcare leaders to assess what is working well and what more could be done, to consider initiatives which will make a positive impact upon their bottom-line and to prioritise these initiatives and co-create an action plan to help meet key organisational objectives.

The tool consists of a maturity matrix comprising of four sections containing a selection of key criteria exploring leadership, behaviours, capabilities and working practices, and knowledge services. It aligns to the International Standard ISO 30401:2018 Knowledge management systems (ISO, 2018) with a focus particularly upon leadership and commitment, the required behaviours of acquiring and applying new knowledge and the focus upon developing an appropriate knowledge management culture.



Figure 2: Diagram showing sections of the Knowledge Mobilisation Self-Assessment Tool. Alongside each criterion, is an indicator statement and a progression scale from 1 to 12 from which a healthcare team can select the most appropriate statement that best describes the current situation for their team. These range from having nothing in place yet, through to 'in early stages' or on to 'pockets of good practice' or 'business as usual'.

For example, within the Behaviours Section there is a criterion about the team approach to innovation. It is then possible to select the statement that best describes the current situation for the entire team from the following:

1 – 3 Nothing in place: There is no process in place to scan and consider innovation (use the innovation example)

4 – 5 In early stages: Teams consider innovations they are aware of

6 – 9 Pockets of good practice: Some teams seek, assess, and adopt innovations

10 – 12 Business as usual: There is an established process to identify, review and adopt innovations

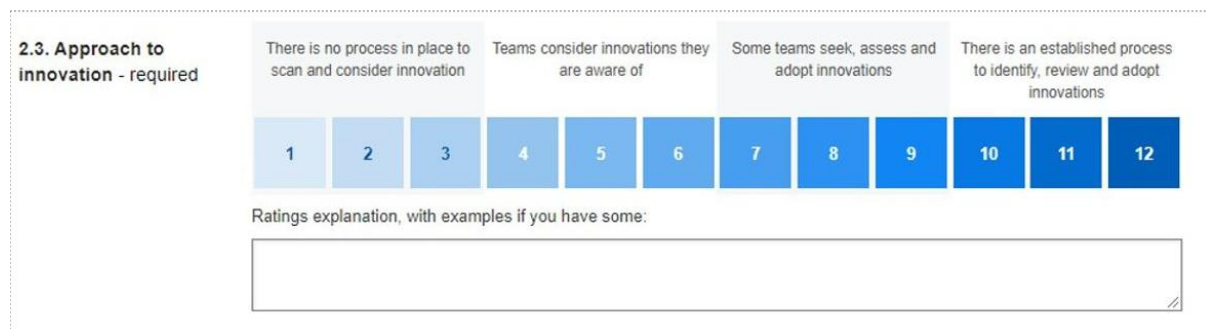


Figure 3: Diagram showing one of the criteria and associated maturity statements from the knowledge mobilisation self-assessment tool

In a group-facilitated session, with the team working together to complete the tool, there may then be a discussion about the selected statements and the facilitator may ask for examples to support the chosen statement and challenge the team to consider if this is the same for everyone in the team, or across the organisation if this is being completed by an Executive Board. If being completed by individual team members, they have the option to give a rationale for their rating and the scores are aggregated to provide a team mean-average score.

Identifying opportunities from the tool

Once the self-assessment is completed the knowledge specialist can use the results to populate a list of interventions, highlighting a range of tailored services and activities that will help the healthcare team to improve the way they currently use knowledge as an asset to meet their organisational objectives.

Knowledge specialists are presented with a range of pre-populated options from which to choose including the tools and techniques from the NHS Knowledge Mobilisation Framework.

For example, for the approach to innovation criterion knowledge specialists could choose to recommend from the following options:

- Set-up a local innovations forum
- Request an alert to keep up to date with innovations in a particular topic
- Ask for help in using a model to transfer knowledge effectively so innovation can be spread and adopted
- Ask a colleague from the Knowledge and Library Service how you can share the outputs from your latest project or piece of work so learning can be spread
- Use a fishbowl conversation technique to debate hot topics or share ideas and knowledge from a range of perspectives

Or they can highlight other interventions specific to the service or the organisation with which they are working. These options are then presented back to the healthcare team to discuss and prioritise, and work can begin on co-delivering the actions alongside the knowledge and library services team.

The NHS Knowledge Mobilisation Framework

Among the suggested interventions within the self-assessment tool are the thirteen tools and techniques from the NHS Knowledge Mobilisation Framework (HEE, 2018). These straightforward techniques can be easily applied by healthcare staff to capture, share and re-use knowledge and know-how, ensuring that learning takes place before during and after activities.

Knowledge Mobilisation Framework

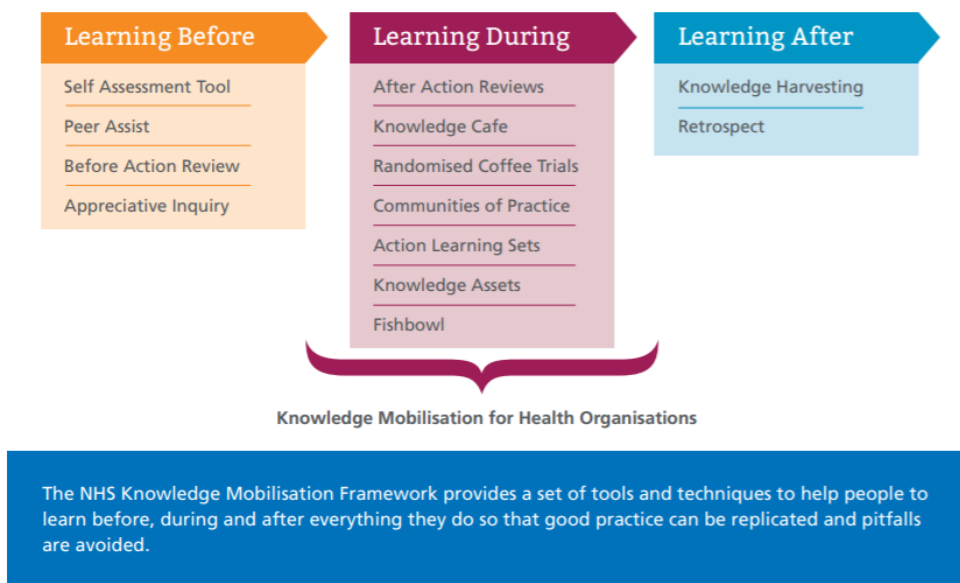


Figure 4: The NHS Knowledge Mobilisation Framework

The tools are presented in a suite of open access E-Learning modules and are available as a set of quick reference postcards. Ranging from simple 15-minute techniques to longer facilitated sessions the techniques lead to the discovery of lessons learned which can be used by healthcare teams to continually improve their work based upon learning from others.

For example, the After Action Review is a learning during technique that can take place at any stage of a piece of work to capture learning to inform and make improvements to a piece of work as it is developing. The technique can take as little as 15 minutes and asks all those involved in the work to pause and reflect by considering four simple questions:

1. What was supposed to happen?
2. What actually happened?
3. Why was there a difference?
4. What can we learn from this?

The aim of the session is to capture lessons learned and share these back with the team to make immediate changes or improvements to the work and share with other teams so they too can improve their work. The most powerful aspect of the After Action Review technique is the focus on learning:

Following an introduction to this technique at a Primary Care Improvers Conference GP Trainer, Appraiser and Coach Dr Farzana Hussain commented:

“I would recommend everyone to learn about this. It has changed my staff meetings and significant-event analyses, the non-judgemental approach supporting a no-blame culture – not bad for four simple questions I learnt in under 20 minutes” (Day, A and Goswami, L. 2020)

Background to development

The tool is based upon the concept of a knowledge management maturity matrix used within British Petroleum (BP) (Collison and Parcell, 2004). This was adapted for the NHS by Library and Knowledge Manager, Rachel Cooke (Cooke, 2015).

One of our key concerns was whether senior leaders within healthcare systems would be willing to spend time using the tool. To explore this, several short Plan-Do-Study-Act improvement cycles gathered feedback from teams using the tool. As a result, small improvements to the wording, layout, and process of using the tool were made. For example, from one of these sessions we adjusted wording to become more inclusive and added a 1 – 12 number scale to make it easier for the team to discuss and agree upon a level of maturity. Following these early tests an early adoption at Surrey and Sussex Healthcare NHS Trust led to a meaningful change in practice whereby librarians were requested to lead on a process for regularly reviewing and maintaining clinical and non-clinical policies. The process involved ensuring divisional policies are fully evidence-based, updated and easy to access. This has led to the Chief of Medicines remarking

“The library team should be our knowledge stewards in the same way as microbiology are the antibiotic stewards for the Trust”

A major refinement to the tool was made in 2021 with the launch of a digital version. This enables the librarian to configure the tool for a particular team and to run the tool either as a facilitated group session or to be completed in survey-format by individual participants. The design of the digital tool is fully accessible and simplifies the process of completion. There is the added functionality that the librarian can develop a bespoke action plan selecting from the pre-populated suggestions and then present this back to the team they are working with. Over time, as more responses are received it is anticipated that benchmarking can be undertaken to compare ratings and identify learning opportunities between teams and organisations or across time periods.

Benefits from using the tool

Developing learning health systems

Learning Health Systems focus upon the continual improvement of healthcare by generating and using knowledge to deliver care (Foley, T et al 2021). At the core of the Learning Health System is the use of data generated from practice and transformed into knowledge. Interventions from the self-assessment tool assist the transfer of knowledge back into practice enabling healthcare organisations to build learning cultures. The self-assessment tool is expected, therefore to contribute to the development of learning health systems where routine use of a range of tools and techniques can “scale-up and speed-up the process of knowledge improving practice... [highlighting that] Library and Knowledge Services in general are becoming more, rather than less, important within Learning Health Systems ” (Foley, T et al 2021 p 29)

Providing Assurance

Introduction to the tool starts with a question derived from the Information as an Asset report (CILIP/KPMG 2019) that acts as a hook to encourage senior leaders to complete the tool:

“How can you be assured that you are using external evidence and organisational knowledge effectively?”

The need for the health service in England to learn and govern faster in the digital age was a key message from the launch of this revisited and revised Hawley Report. It highlights the significant business opportunities and potential risks of not giving due consideration to the potential benefits of considering information. Within the self-assessment tool this has been expanded to include consideration of the business benefits of information, evidence and knowledge.

Use of the self-assessment demonstrates that healthcare organisations are committed to using evidence and knowledge to inform their decision making. In turn, this provides assurance to governing boards, regulators and patients, that the organisation routinely considers the use of evidence and knowledge to sustain healthcare outcomes and healthcare improvements. This will become increasingly important as the proposed updated Health and Social Care Act will place a duty upon newly forming Integrated Care Boards to ensure the use of evidence from research in their decision making.

Stimulate knowledge sharing

The tool encourages healthcare teams to pause, reflect and consider how they are using evidence and knowledge. Over time, it is expected that the results from the tool can be used to capture and share good practice taking place across an organisation or healthcare system. When several teams complete the tool, it is possible to compare results to identify where there are strengths. One team can talk to another team to learn how they have developed and adapt this local good practice and apply in their own team. This will become a means to identify areas for development and spot opportunities for one team to learn from the good practice of another in small incremental steps, breaking down silo-working.

Engaging with the knowledge and library service

Successful knowledge and library services need to successfully engage with senior stakeholders to fully understand and align library services to address current organisational priorities. The knowledge mobilisation self-assessment tool is a means to launch a dialogue

between knowledge specialists and senior leaders. It provides an opportunity to demonstrate how knowledge and library services can contribute to achieving organisational goals. By stimulating discussions about evidence and knowledge senior stakeholders begin to recognise the value of knowledge as an asset to the organisation and in turn the role of librarians to deliver this.

Conclusion

Using the knowledge mobilisation self-assessment tool provides organisations with a way of assessing how well they are using knowledge as an asset. It gives them an opportunity to engage with NHS knowledge and library services to work together to build structure and capacity for sustainable healthcare delivery. To create a culture where learning healthcare systems flourish based upon effective use of evidence and knowledge.

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