

KNOWLEDGE MANAGEMENT STRATEGY

1. BACKGROUND

- 1.1. Better knowledge management is central to the Government's drive to improve public services. The modernisation agenda and changing public expectations present challenges that can only be met through effective management of information.
- 1.2. SHAs, PCTs and Trusts operate in an increasingly complex environment which requires robust systems to be put in place to support the delivery of what is required today as well as planning effectively for the future. This incorporates the following requirements:-
 - i. data is timely, accurately recorded and reported;
 - ii. decision makers are able to consistently specify high quality outputs that they require from information analysts;
 - iii. analysis is correctly undertaken and presented;
 - iv. interpretations drawn from any analyses are based on dependable methodologies and therefore consistent and correct;
 - v. information is used to inform decision making and evidence change
- 1.3. As well as requiring improved processes, this new environment also necessitates a step change in working practices and culture regarding the effective use of data, information, and knowledge in NHS organisations. Staff at all levels need to understand their information needs, and have these needs met, to enable evidence based decisions to be made. It is critical, therefore, that information management is seen as an integral part of an organisation's approach to both performance improvement and service improvement.
- 1.4. Currently across South East Coast there is significant variation in the skills that analytical staff have, even where individuals are undertaking the same level of job or role. There is evidence to suggest that, in some cases, analysts are not working as smartly as they could, and are spending a lot of time undertaking repetitive tasks that could be automated. In part, this is due to the low level of investment and training opportunities that have been available and easily accessible for this group of staff. In addition, until recently there have been no mechanisms available to support networking opportunities and sharing of skills and tools. Even where analysts do have a high level of skill, this is often not utilised effectively by senior management through lack of understanding of the nature of their work and potentially inability to specify high quality outputs.

- 1.5. Across South East Coast, for some time now NHS organisations have struggled to recruit analytical staff. Many organisations have a number of vacancies for analyst posts; some of these vacancies have existed for a considerable time. When successful appointments are made, more often than not this involves acquiring an analyst from a neighbouring organisation, hence creating a problem elsewhere in the system. This group of staff did not fare well under the Agenda for Change system and this will hamper the ability of the NHS to recruit and retain analysts. Finally, there is no clear career structure for analytical staff with few roles existing higher than AfC grade 7. The result of this is that analysts wishing to climb the career ladder are required to take up different types of management roles which rarely utilise their very specialist skills.
- 1.6. In terms of the utilisation of information to support decision making, there are relatively few managers and clinicians who are able to adequately interpret information, draw the correct conclusions and therefore make informed decisions. There are few instances where standardly available data and information is utilised in an effective way. Often, there is a lack of knowledge relating to the information and guidance that is available both locally and nationally. A common theme from emerging from South East Coast commissioners is the need to strengthen knowledge management expertise. This is a key priority to be addressed by this strategy over the coming year.
- 1.7. Finally, there is wide variation in the quality of data within NHS organisations and evidence of differences in coding and classification. The National Audit Office, Audit Commission and Information for Health and Social Care (to name a few) have published a range of documents which describe the data quality issues facing the NHS and make a range of recommendations for the improvement of data quality. Organisations that put data quality at the heart of their performance management systems are most likely to be actively managing data in all aspects of their day-to-day business, in a way that is proportionate to the cost of collection, and turning the data into reliable information.
- 1.8. South East Coast SHA has a vital role to play in:
 - Developing Managers to be better ‘customers’
 - Encouraging the optimum utilisation of information to support decision making, both, within and outside of the SHA;
 - Supporting the development of analytical and interpretation skills across the patch;
 - Signposting providers and commissioners to available information, toolkits and best practice guides;
 - Developing a career framework for analytical staff and a recruitment strategy;
 - Facilitating the sharing of skills and good practice;
 - Supporting the improvement of data quality
- 1.9. This document describes the strategy adopted by South East Coast SHA to put information at the heart of decision making and identifies key activities to take place over the next two years.

1.10. Vision and objectives

1.11. The vision for South East Coast is to ensure that :

- The SHA has access to consistently high quality, timely, robust information and analysis to support effective and proactive performance management, risk management, programme delivery and understands the information needs of the NHS organisations within South East Coast;
- South East Coast commissioners have the knowledge management competencies to support World Class Commissioning and are well equipped to base decisions on sound knowledge and evidence;
- All health organisations within South East Coast have highly skilled individuals in post to accurately record, analyse, present and interpret information;
- Organisations within South East Coast are regularly provided with a wide range of benchmarking information and toolkits to support service improvement;
- A clear career structure for analysts is in place and highly skilled analysts are successfully recruited, developed and retained within the service;
- Good practice and knowledge is actively shared between organisations;
- Information recorded and reported by organisations within South East Coast adheres to all national standards and definitions and is consistently reported. Where national definitions are not available, the SHA will endeavour to both provide local guidance for organisations within South East Coast and also influence developments nationally with regards to definitions and standards;
- Fit for purpose, timely information is available to all commissioners and providers within South East Coast to enable evidence based discussions to be had and decisions taken;
- Information is proactively used by clinicians and managers to reduce health inequalities, improve the quality and safety of care that patients receive and improve the patient experience;
- NHS organisations within South East Coast have a good reputation nationally regarding the utilisation of information and knowledge and development of innovative models, tools and products;
- Achieved consistency in the development and quality of information within South East Coast and analysis in line with best practice and thinking within the NHS and relevant external agencies

2. KEY THEMES, OBJECTIVES AND DELIVERY MECHANISMS

- 2.1. The key themes that will be focussed on over the next 12-24 months to support the vision described above are: -
- Development of the intelligent 'consumer'
 - Skills and resource development
 - Networking, sharing of good practice and signposting
 - Analyst recruitment and career structure
 - Development of tools, products, indicators and models
 - Data quality
- 2.2. **Skills, intelligence and resource development**
- 2.3. This stream of work will focus on developing information analysis and interpretation skills for analysts and information users. In addition, it will encourage the use of technologies and ways of working to improve efficiency.
- 2.4. Training programme for analysts
An in-house training programme is already under development and modules already developed have been incorporated into the South East Coast Academy programme. Work will continue to develop further technical modules over the coming year. Training will initially be provided by analysts at the SHA; however this pool will be widened to include expert analysts across South East Coast. Agreement has already been gained from SEPHO to allow non-public health analysts to attend SEPHO training modules and opportunities for a similar arrangement with other bodies will be investigated. Options will be investigated with commercial companies to provide very specialist training e.g. advanced VBA.
- 2.5. Training programme for information users – developing the intelligent consumer
A modular programme will be developed focussed at people at a range of levels which provide both theoretical and practical information on how to utilise and interpret information and also specify high quality analytical outputs. The audience for this programme will include junior and middle managers, aspirant Directors, Directors, Chief Executives and clinicians from a wide range of disciplines. Opportunities with organisations such as the Institute for Innovation and Improvement will be investigated to supplement this local programme with national and international experts.
- 2.6. Analyst apprenticeship scheme
This proposal will be further developed to enable the first intake of apprentices to be in late summer of 2008. Links will be maintained with the National Management Training Scheme being piloted in the north of England and pressure maintained for the implementation of a national scheme as soon as possible.
- 2.7. On-line training modules and products
To supplement formal training, a range of e-learning modules and guides will be developed to enable distance learning.

- 2.8. Encouraging the utilisation of modern technologies
The SHA intends to raise awareness of a range of technologies to support modern ways of working. This includes the utilisation of web technology for the sharing of information, development of virtual forums and discussion boards (which reduce the need for meetings) and available tools to undertake e.g. electronic surveys.
- 2.9. **Networking, sharing of good practice and signposting**
- 2.10. This stream of work will focus on enhancing communications, networking and sharing opportunities across South East Coast. A major priority within this stream will be developing effective mechanisms to signpost good practice, evidence and available products and information.
- 2.11. Analyst network meetings
Bi-monthly regional meetings have taken place over the past year and will continue to meet on this basis. Distribution lists and membership is currently being reviewed to ensure that analysts from all disciplines are aware of this opportunity. In addition to regional meetings, less frequent SHA wide meeting will be arranged and key national speakers invited to present.
- 2.12. Development of a skills matrix
A self assessment questionnaire has already been distributed and provided a good indication of the range of analytical skills that exist across South East Coast. This information will be developed into a skills matrix with the intention of enabling skills to be shared across South East Coast. The mechanism for sharing this will be the Knowledge Management website.
- 2.13. Knowledge Matters
A bi-monthly newsletter will continue to be produced which contains a mix of news and educational articles aimed at analysts and information users.
- 2.14. Establishment of discussion forums
A range of forums have been set up on the Knowledge Management website to promote virtual discussion and sharing of local issues/solutions focussed on particular areas. The focus over the next 6 months will be to encourage participation in these forums and sharing of local knowledge.
- 2.15. Pro-active development of collaborative relationships
Work will continue to development proactive relationships with national and regional organisations to ensure that South East Coast has an up to date knowledge of the information, evidence and products that are available. In addition, this will provide a good opportunity to promote the innovative work that is underway within South East Coast. Key partners would be the South East Public Health Observatory, Health Informatics Services, Government Office of the South East, Healthcare Commission, National Audit Office, Information Centre for Health and Social Care, Institute for Innovation and Improvement and the Department of Health.
- 2.16. Information to support commissioning guides and workshops
Over the coming year, a range of commissioning guides will be produced which describe the information requirements in each stage of the

commissioning cycle and signpost locally and nationally available information (indicating which is considered to be optimal), evidence, research and toolkits. These guides will be available on the web-site with links to relevant documents and websites. As well as a generic guide, pathway specific guides will also be produced. In addition, a range of workshops will be set up to demonstrate how different toolkits can be used to inform commissioning decisions. Key partners to support this work will include the South East Public Health Observatory and Government Office of the South East.

2.17. Influencing national policy and developments

The SHA will continue to proactively influence national policy and ensure that the issues and priorities within South East Coast are raised with relevant national bodies. Attendance at key national meetings will continue including the Performance Information Reference Group, National Data Quality Group, National SUS User Group and Better Care, Better Value indicators steering board.

2.18. Analyst recruitment and career structure

2.19. This work stream focuses on the development of an effective strategy for the recruitment and retention within the next 12-24 months. Key actions required to support this are as follows: -

2.20. Assessment of vacancies and skills deficits across South East Coast

An audit will be undertaken before the end of February to understand the number of vacancies for analytical roles in each organisation. This information will be used to evidence that a workforce supply problem does exist within the South East and used with the Information Centre for Health and Social Care and NHS Employers to prioritise this area for national action.

2.21. Alternative sources of recruitment

A range of alternatives will be investigated for actively recruiting analysts. The Career Transition Partnership has already been identified as a potential source of future analysts (the SHA has recently recruited an analyst via this mechanism) and a range of other alternatives exist including pharmaceutical companies and the Government Office of statistics.

2.22. Development of relationships with local Universities, schools and colleges

Pro-active links will be made with each of these organisations and plans developed to encourage analytical careers within the NHS. This stream of work will build on and draw together schemes already in existence across different geographies within South East Coast. Creative ideas about how to encourage analytical careers will be developed e.g. real life analyst biographies, 'the day in the life of an analyst'.

2.23. Development of a career structure for analysts

The SHA will work with the Information Centre for Health and Social Care and NHS Employers to develop and formalise a career structure for analysts which extends beyond grade 7 posts. In addition, the SHA will strongly encourage a re-assessment of the national Agenda for Change evaluation process for analytical staff.

2.24. Development of tools, products, indicators and models

2.25. A significant amount of activity will be undertaken to further develop tools, products and models to support commissioners and clinicians within both primary and secondary care. Work will continue on the development of clinical metrics and this will be linked to the national clinical metrics work being led by Professor Sir Bruce Keogh, Medical Director of the NHS.

2.26. Provision of a range of toolkits to support managers and clinicians in primary and secondary care

Further development will take place over the coming year to develop a range of toolkits to support managers and clinicians improve efficiency, safety and quality of care. The SHA will support organisations localise these products as and when required. Tools will be freely available to download from the Knowledge Management website.

2.27. Production of comparative data which identifies performance over time for the areas of quality, safety, experience, performance and efficiency

The current set of comparative data will continue to be produced on a regular basis and also expanded to cover additional areas of service. The purchase of HES on-line will enable the SHA to provide a greater range of national benchmarks. Again, this will be available to download from the website. A particular focus will be on the further expansion and development of quality, safety and patient experience metrics.

2.28. Development of new indicators

Work is already underway as part of the Clinical Metrics Development Programme (supported by the Information Centre for Health and Social Care) to develop innovative metrics to describe the pathways of stroke, dementia and COPD. This work will continue over the coming year and new clinical metrics and analysis developed for priority clinical areas. Professor Sir Bruce Keogh is keen to work with South East Coast SHA on this important area.

2.29. Safer, Smarter Nursing Metrics

Work will continue with senior nurses within South East Coast to develop a dashboard to track progress against a number of metrics relating to quality, safety and experience.

2.30. Identification of required data sets and agreement on processes to put in place (nationally when required)

The SHA will support commissioners in the identification of required information sets to support each element of the commissioning cycle and where necessary request the acceleration of IT developments to support the provision of critical information.

2.31. Development of innovative models and solutions

The SHA will continue to work with organisations within and outside South East Coast try to develop innovative solutions to information challenges and new models to support improved healthcare. An example of this is the work currently underway with Brunel University to test out a discrete event simulation model on the 18 week pathway of one category of patients.

2.32. Data quality

2.33. This work stream focuses on firstly ensuring that the SHA has robust processes in place to undertake its role and secondly sets up some key stages in improving data quality in organisations across South East Coast.

2.34. Documentation and review of processes

The SHA will develop and document robust processes (which are regularly reviewed) to support:

- Robust and timely information is available to support performance management, risk management and programme delivery;
- Effective information/data transference to support planning and monitoring processes
- effective communication and audit trails of decision making processes to support the Healthcare Commission Annual Health check and other national assessments and monitoring

2.35. National Data Standards and Definitions

The SHA will develop a range of approaches to reinforce national definitions and make recommendations relating to how to measure compliance against these standards. As part of this, the SHA will provide a service to organisations within South East Coast to clarify data definitions, develop local guidance where required and escalate issues to the Information Centre and Department of Health as required.

2.36. Data quality strategy

A strategy is in development which covers this area in greater detail. The strategy will be completed by the end of February and include details on the SHA strategy to improve SUS locally to ensure that it is fit for purpose i.e. to ensure that is definitive source of activity information to support payment by results.

2.37. Data quality reports

A set of reports and dashboards to monitor data quality are in development and will be available by the end of March.

2.38. Assurance of Implementation

2.39. The activities described above will be incorporated into the team and personal objectives of the SHA Knowledge Management Team. A quarterly progress report will be presented to the SHA Executive Team and Information for Commissioning Steering Board highlighting progress against objectives described in this strategy.

2.40. Project plans will be developed for each stream of work. These will be regularly reviewed and issues flagged with the Director of Commissioning and Delivery as required.

3. IMPLICATIONS

3.1. Successful implementation of this strategy will result in the following benefits: -

- South East Coast commissioners have the knowledge management competencies to support World Class Commissioning and are well equipped to base decisions on sound knowledge and evidence;
- All health organisations within South East Coast have highly skilled individuals in post to accurately record, analyse, present and interpret information;
- Organisations within South East Coast have access to a wide range of benchmarking information and toolkits to support service improvement;
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