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KnowledgeShare: A web-based tool to connect people with evidence and to connect people with people

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Abstract

KnowledgeShare, a web-based application, was produced to manage core services (evidence searching, teaching, current awareness), to increase access to evidence, and to aid collaborative working. The system enables library and knowledge service (LKS) staff to collaborate on and deliver personalised, targeted updates to members about healthcare topics in their field. Through KnowledgeShare, members can connect with one another based on shared professional interests. KnowledgeShare has been implemented at Brighton and Sussex NHS Library and Knowledge Service and extended to other LKS teams in the South East of England. The system has enabled the creation of an extended network of LKS teams who can standardise quality, spread the workload of current awareness provision and share evidence reviews.

Key words: knowledge bases; health information management; diffusion of innovation; information dissemination; social networking.

Introduction

This paper describes the development of a web-based system to manage and provide core library and knowledge services to health care staff in the UK. The system, called KnowledgeShare, was created at Brighton and Sussex University Hospitals NHS Trust and has recently made the transition from an off-line database to an online application. The aims of KnowledgeShare are wide ranging and include improved collaboration between LKS teams, increased accessibility of services to LKS members and the facilitation of staff networking. The need for such a system is explained and the various areas of functionality are described. KnowledgeShare is currently being extended to LKS teams across the South East coast of England and the paper concludes with an overview of its impact and implementation.

Background

Aside from providing books, journals and information resources, library and knowledge services in the NHS provide three core services. They offer evidence reviews to inform research and patient care; they teach staff to find and evaluate evidence; and they help colleagues to stay up-to-date in their field. Application of the right evidence, at the right time, helps to ensure that clinical and managerial colleagues can continue to improve the health services they provide(1).

In delivering these core services to colleagues, LKS teams need to adapt to changing expectations and a rapidly changing environment. As technology advances, health care colleagues benefit from easier access to information (although not necessarily the best information) and become more familiar with online tools and resources(2). To remain relevant, LKS must focus on providing added value, which they can do through increased summarisation and analysis of evidence search results and by capitalising on local knowledge and understanding of their members' individual needs(3). The rise of social media and Web 2.0 mean that colleagues expect to be able to access and interact with sources of information, including their library and knowledge service, more easily than ever before(4).

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At the same time, as financial constraints increase throughout health care, library and knowledge services must also learn to provide services more efficiently(3). Increased collaboration enables LKS teams to work together to do more with less, and there is a growing requirement to have evidence of activity and impact available to justify costs(5). Many of these requirements – personalisation, accessibility, simplified administration and reporting, collaboration across LKS teams – are solved in the case of book and journal provision through the use of library management systems. However, there are no commonly used systems to enhance the provision of searching, teaching and evidence updates.

Building a system for personalised, targeted current awareness

The KnowledgeShare system began as an off-line database focused on providing evidence updates in a more targeted and personalised format than had previously been possible. LKS teams have traditionally produced bulletins on broad topics, for example cancer or mental health, which have been sent to all members with an interest in the same topic. Whether you are a colorectal cancer surgeon working in a hospital environment or a hospice nurse working in the community you would receive the same impersonal update. KnowledgeShare aimed to avoid this by asking members their specific professional interests and matching resources to members based on those interests. Through this automated, categorised approach we were able to provide regular, short, individually addressed email updates to thousands of members, each one unique to the specific interests of that member. Information about a national cancer strategy would go to both the colorectal surgeon and the hospice nurse but each of them would receive notification of additional publications specific to their own settings.

Our evidence updates included publications from three broad groups. Firstly, we focused on research evidence from high-impact study designs. Secondly, we included a range of publications on governance topics such as patient safety, staff education, health care finance, and so on. Finally, we localised the service through the inclusion of policies from the organisations we support and details of workshops being run locally.

Expanding KnowledgeShare Mark I

Beyond improving our evidence updates, we also needed to manage an increasing number of requests for evidence searches. Carrying out evidence searches on behalf of members is one of the most valued and high impact services that the LKS provides and the results are used by clinical and managerial staff to develop guidelines, policies, research proposals and business cases, to teach colleagues and to inform direct patient care. *KnowledgeShare* was therefore extended to allow us to log search requests and assign them to LKS staff, to record information about search strategies and results, and to store and analyse members' evaluation of the service.

Library and knowledge services are increasingly expected to provide value-added services; not simply retrieving results to satisfy a search request, but adding an element of structure and summarisation to those results. We developed KnowledgeShare to facilitate provision of results in this more structured format. Finally, administration of information skills teaching was integrated into KnowledgeShare so that attendance at skills sessions could be booked through the system, LKS staff could communicate efficiently with participants and could store and analyse evaluative data. Once this stage of the project was complete we had developed an integrated system to manage searching, teaching and evidence updates. KnowledgeShare gave LKS staff the ability to find an individual member and see their professional interests, the targeted updates they had received, the searches they had requested and the skills sessions they were attending. It also simplified the process of producing activity and evaluative reports for each of our core services. However, for all its benefits, KnowledgeShare remained an off-line system accessible only by LKS staff.

Promoting LKS collaboration via a web-based application

In 2013 we began a complete redevelopment of KnowledgeShare as a web-based application. The reasons for doing so were two-fold: firstly, other LKS teams were showing interest in the benefits of collaborating via KnowledgeShare; and secondly, we wanted to allow our members to interact more directly with the services we provide, and with each other. Providing evidence updates can be a time-consuming role for LKS teams; the more that resources are selected for quality, summarised and targeted, the more timeconsuming the service becomes. The extension of KnowledgeShare via the web allows multiple LKS teams to benefit from the work carried out in one team to select and categorise appropriate publications. Regardless of who has entered the resource information, members always receive updates from their local librarians, thus cementing the personal relationship between LKS professionals and their colleagues.

Journal of the European Association for Health Information and Libraries 2014, Vol. 10 (3)

The new *KnowledgeShare* Web also allows LKS staff to generate newsletters on any topic or combination of topics by drawing from the publications contained in the system. And if members prefer to receive the full tables of contents of favourite journals as they are published, the system caters for this as well.

While LKS staff are sharing the work of providing evidence updates through the system, they can also share their evidence searches more widely. Currently, when NHS staff request an evidence search the results of that search generally benefit only them and the small number of colleagues they choose to share the results with. By creating and storing their searches on *KnowledgeShare* librarians can standardise their output, build on each others' work, and make the results of their searches significantly more accessible.

The web-based version of KnowledgeShare allows

members to interact with library services. A dashboard

shows newly published resources that match their interests, lists their recent and current search requests, and gives details of forthcoming teaching sessions run by the library. From here, members can update their professional interests, make new search requests or book to attend teaching. As well as increasing and personalising access to evidence, *KnowledgeShare* allows members to connect with one another in order to collaborate and share knowledge. The system forms a semi-managed social network based around categorised professional interests. Even those staff who are uninterested in online networking will have been added to the system by their librarians and become potentially findable (subject to privacy permissions) by health care colleagues with overlapping interests.

Impact and implementation of KnowledgeShare

Between 2004 and 2014 the number of Brighton and Sussex LKS members receiving targeted updates rose

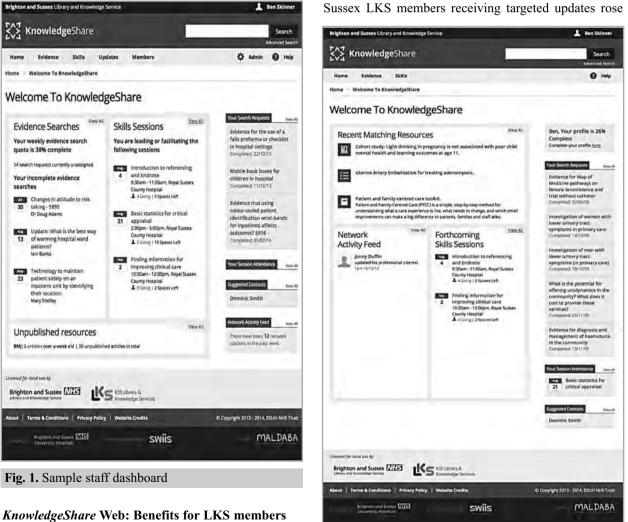


Fig. 2. Sample member dashboard



Fig. 3. Sample member profile

steadily. Feedback was overwhelmingly positive, with comments such as: *Without this update I would have missed some very pertinent guidance* and *You know me better than Amazon!* A survey showed that 75% had accessed the full text of a resource included in their

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evidence updates within the last few months. 60% said that they had been prompted to contact the LKS for additional assistance (e.g. evidence search, document supply, information skills teaching) as a result of receiving the evidence update. This is supported by our evidence search activity data, which has risen rapidly since 2004 as membership of *KnowledgeShare* has increased(6).

At the time of writing, the new web-based KnowledgeShare system has not been launched to members. When this happens in the next few months it will be possible to evaluate the impact of increased access to evidence services and the facilities for staff networking. Implementation of the new web-based KnowledgeShare system across an increasing number of library and knowledge services has taken place over the past six months. Interest in licensing KnowledgeShare was gauged via the regional LKS Managers' Group and this group was regularly updated as development progressed. The Library and Knowledge Services team for Kent, Surrey and Sussex supported and championed the project and is currently subsidising costs for teams in the region to the system. As each team licenses license KnowledgeShare we provide a day's training on the system, setting them up with an administrator and the ability to add their own members and resources. As each new LKS team joins KnowledgeShare the potential for sharing work and broadening access to evidence increases.

Conclusions

KnowledgeShare allows LKS teams to facilitate collaborative working among their members and improve the quality of evidence updates and evidence search outputs. It enables the creation of an extended network of LKS teams who can spread the workload of current awareness provision and share evidence reviews more widely than ever before. It provides a model of technology-enhanced evidence provision that is driven by LKS staff, rather than introduced from the top-down national initiative. Most importantly, via а KnowledgeShare preserves the strengths of local LKS provision while capitalising on the potential for collaboration on an ever-increasing scale.

Acknowledgements

KnowledgeShare is provided by Brighton and Sussex University Hospitals NHS Trust (www.bsuh.nhs.uk), which owns the copyright.

Consultation on development was provided by NHS Innovations South East (www.innovationssoutheast.nhs.uk) and Swiis (www.swiis.co.uk).

The web-based version of KnowledgeShare was built by Maldaba (www.maldaba.co.uk).

Journal of the European Association for Health Information and Libraries 2014, Vol. 10 (3)

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Thoughts from an EAHIL first timer



Attending EAHIL 2014 was an overwhelmingly positive experience. In addition to raising the profile of our work in rare disease, attendance also allowed me to meet and hear from a wide variety of information professionals working in many aspects of the field. The conference was a welcoming, supportive environment and I would encourage anyone involved in a project or area which might be of interest to the wider information community to consider presenting at future EAHIL events, even if it is something they don't normally do.

Thank you EAHIL and, whilst it might not be as sunny as Rome, I'm sure the 2015 event in Edinburgh will be just as successful.

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