

Credible information crucial for NHS managers, says senior academic

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Radical restructuring of the NHS is breaking up the information networks health service managers rely on and there is a danger repositories of knowledge will be lost, according to a leading healthcare management expert from Kingston University's Business School.

Professor Christine Edwards said executives across the NHS – from nursing and clinical bosses to those who headed up personnel and finance departments – were being asked to take crucial decisions about its future. To do so effectively they needed to be armed with good quality data.

"Managers in NHS trusts are at the centre of one of the largest restructuring exercises ever undertaken in the health service. Having good quality <u>information</u> or evidence will be a vital factor in their ability to drive this change forward," Professor Edwards said. "As Primary Care Trusts are abolished, teams and departments reorganised and new service providers brought in, existing banks of knowledge are being dismantled. This could have a detrimental effect on the future supply of both the tacit and formal information managers rely on unless ways are found to capture this intelligence."

While the concept of evidence-based practice was well established in medicine, very little was known about how health service managers used data to inform decisions, Professor Edwards said. To begin to address this gap, she and a team of experts from Kingston University, St Georges, University of London, Essex University and University College



London undertook research to identify which factors assisted or prevented NHS managers from making better use of information. They interviewed managers from six healthcare trusts to learn more about how information was used in decision-making in major innovation projects. They also surveyed 2,000 managers and 150 librarians from a further 59 trusts across England to see how they decided they needed information, where they looked for it and how they evaluated and used it.

The study, funded by the National Institute for Health Research Health Services and Delivery Research Programme, found managers accessed large amounts of material but were highly selective in what they used as a basis for decision-making. Most used a combination of different sources, including online and print publications along with advice and recommendations from people and networks, as well as information picked up at conferences and training courses. There was also a heavy reliance on internal trust data.

Managers reported finding what they wanted was not always easy - time, information overload and lack of relevant material were often cited as barriers. However, the research highlighted those who had studied management and at postgraduate level found it easier to navigate their way to what they needed. They were also were more likely to use libraries and academic sources as well as those from outside the trust for which they worked. Use of NHS libraries and the services they offered varied considerably and those surveyed said many could be better tailored to meet managers' needs.

"Good information and good decisions about the future of any organisation go hand in hand," Professor Edwards said. "A range of different types of information, including how staff and patients feel, how GPs and others are going to react and how something works in practice must be part of the equation." Bridging the gap between knowing and doing was difficult and managers wanted to be confident



about what worked, she said. Observations of successful innovations in other trusts were widely used to help managers decide whether something was suitable for their own organisation, but implementation in different contexts could be very challenging, she added.

"Decision-making in trusts is complex and often involves different groups of people. This means information can be contested," Professor Edwards said. "Managers have to satisfy many stakeholders – local and national government, commissioners, patients, clinicians, professional bodies and frontline staff – all of whom may have different views on what should be done and what constitutes 'good' evidence for doing it."

To avoid reservoirs of knowledge being lost in the current reorganisation and to ensure the best use was made of the wealth of material available, NHS managers needed training in search skills, a sound grounding in management and methods for evaluating the ever expanding supply of information available, Professor Edwards concluded.

Provided by Kingston University, London

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