

Library Quality Assurance Framework (LQAF) 2018

SAT and validation process

1. Rationale

The new quality process for NHS Library Services is scheduled to be piloted in 2018. Following a process in 2017 whereby five core criteria were assessed for LQAF, a proposal to repeat this process in 2018 was proposed and agreed by Library and Knowledge Service Leads in November 2017.

Some services may, in agreement with their local LKS Lead, choose to pilot the new Library Quality Processes during 2018. Participation in the pilot process would exempt the participating service from LQAF and they would retain their 2017 validated compliance rating.

This document contains guidance for participating in 2018 LQAF only. Guidance for the new process will be developed in due course.

2. 2018 LQAF SAT & validation process

The LQAF process for 2018 identifies three types of criteria:

a) Core Criteria

There are 5 core criteria for which we are asking all services to score themselves, provide evidence for this, and provide a narrative in the SAT explaining their compliance and the relevance of evidence submitted.

b) Criteria where compliance level is unchanged from 2017

For these criteria LKS should score themselves on the SAT with the same validated compliance level as 2017 and type "No change from 2017" in the Evidence supporting compliance" column

c) Criteria where compliance level has changed from 2017

For services where compliance levels have changed from the level reported in 2017 (either an increase or decrease), LKS should score themselves, provide a narrative explaining what has changed, and if an increase in compliance is being reported provide evidence of this.

1.2d	The library/knowledge service produces a formally documented annual review that highlights service developments, outlines customer activity and highlights future actions.	No change from 2017		Full compliance	2	AN Other
1.2e	Library/knowledge service development/improvement is informed by relevant evidence.	No change from 2017		Full compliance	2	AN Other
Operational Management						
1.3a	The operational procedures specific to the library/knowledge service have been developed in consultation with library/knowledge staff, are documented and have a review process in place.	No change from 2017		Partial Compliance	1	AN Other
1.3b	There are communication processes in place to support team working.	No change from 2017		Full compliance	2	AN Other
1.3c	The positive impact of library/knowledge services can be demonstrated. (replacement for LQAF 2014 p.36-37)	Core impact questionnaire sent to trainees 3 months after each skills session and to literature search recipients after 2 months.	Interviews and Case Studies	Full compliance	2	AN Other

Possible appearance of completed SAT (Note your LKS Lead may ask for evidence to be submitted in a different way)

3. 2018 Core Criteria

As with 2017, the core criteria for 2018 have been selected largely based on their relevance to the Knowledge for Healthcare programme. It is recognised that some evidence may be relevant to more than one criterion and consequently may be submitted or see referenced as evidence more than once.

The main change for 2018 is the replacement of 1.1c with 1.1a.

	Criteria
1.1a	There is a designated board member accountable for the library/knowledge service with a clear two-way communication process with the library/knowledge service manager
1.3c	The positive impact of LKS can be demonstrated.
5.3h	LKS support clinical and management decision making.
5.3l	LKS are developed to support information provision for patients and/or the public To note this cannot be declared “Not applicable” in 2017
5.4a	Members of the LKS team are actively involved in the creation, capture, sharing, utilisation, or reuse of knowledge in the organisations served. To note this cannot be declared “Not applicable” in 2017

The evidence and guidance relating to these criteria [is available online](#).

4. Timetable, submission and validation

Timetables for LQAF submission during 2018 will be determined by your regional LKS Leads.

Once completed the SAT should be submitted to the LKS Lead together with the required evidence. As there are local processes in place to facilitate this, LKS Leads will communicate local submission arrangements.

LKS Leads will then arrange for verification of the evidence for the 5 core criteria, using peer review processes where these are appropriate.

Final verified compliance levels will be communicated back to LKS in the usual form of percentage compliance.

5. Piloting new library quality processes

During 2018 further details of the new Library Quality Process should be made available. Should you wish to be considered as a pilot site for the new process please contact your HEE LKS Lead.

Dominic Gilroy
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