Connected communities for supporting informatics professionals

Discovery document C: Summary of key findings

Report commissioned by the Digital Readiness programme

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Appendix 1 – Informatics networks and communities identified.

List populated from online survey (total of 185 participants).

Academic Health Science Networks (AHSNs)

Association for Learning Technology

Association of Professional Healthcare Analysts (AphA)

Association of Simulated Practice in Health care (ASPiH)

BCS - The Chartered Institute for IT

BCS Nursing specialist group

BCS Primary Health Care Specialist Group

BMA IT Subcommittee

British Association of Social Workers

Cerner community

Chartered Institute of Personnel and Development (CIPD)

Chartered Institute of Library and Information Professionals (CILIP)

Chartered Society of Physiotherapy (CSP)

College of Healthcare Information Management Executives (CHIME)

Community Practitioners and Health Visitors Association (CPHVA)

Cyber Associates Network

Data Administrator Support - Trainee Doctors Data

Data Management Association of the UK (DAMA-UK)

Digital and informatics physiotherapy group (DIPG) (hosted by Chartered Society of Physiotherapy)

Digital Health & Care Alliance

Digital Health networks (CCIO/CIO/CNIO Networks)

Digital Midwives Network

Digital Nurse networks

Digital Outpatients Community of Interest

DXC Lorenzo National User Group

European Association for Health Information and Libraries (EAHIL)

Faculty of Clinical Informatics (FCI)

Federation for Informatics Professionals (FEDIP)

FNF Digital/Northwest CNIO

FutureNHS

Government Digital Service (GDS) Digital, Data and Technology communities

Health Data Research UK (HDRUK)

Health Education England - Yorkshire and Humber Health Libraries Network

Healthcare Information and Management Systems Society (HIMSS)

Informatics Skills Development Networks (ISDNs)

Institute of Health Records and Information Management (IHRIM)

Institute of Health Visiting

Institute of Healthcare Management

Institute of Leadership & Management

Institute of Medical Physics and Engineering (IPEM)

Institution of Engineering & Technology

INTEROPen

Joint GP IT Committee

Knowledge for Healthcare

Local networks and forums (place, profession or topic based)

London CIO Council

Market Research Society

Merseyside & Cheshire Cyber Security Group

National PROMs Network (Patient Reported Outcomes)

NHS Digital Academy

NHS Digital Academy alumni

NHS Graduate Management Training Scheme (GMTS)

NHS Wales Library & Knowledge Service (main network)

NHS-R community

Northern, Yorkshire and Humberside NHS Directors of Informatics Forum (NYHDIF)

Nursing and Midwifery Council (NMC)

One HealthTech

Professional Records Standards Board (PRSB)

Project Management Institute

Public Health networks

Regional / national Library Manager networks within Health Education England

Regional Directors networks (NHS England & NHS Improvement, Health Education England)

Royal College of GPs Health Informatics Group

Royal College of Nursing eHealth Forum

Scrum Alliance

Shuri Network

SNOMED International Expert Reference Groups

Society for innovation, technology, and modernisation (Socitm)

Tech4CV

Tertiary education networks e.g. JISC

Topol Fellowship

WARP groups (Warning Advice Reporting Point)

Yorkshire cybersecurity cluster

Appendix 2 – Themes from individuals who are not currently part of a network or community.

Responses gathered from online survey when asked - *"If you are not currently a member of a network, please could you tell us why?"* Twenty responses gathered in total.

Unclear on relevant networks and how to access them	Not previously considered
Lack of support from organisation	Not had time to join
Not viewed as value for money (associated subscription fees)	Networks do not meet needs
No reason given	No longer wished to be a member

Table 1. Participant reasons (themed) for not currently being a member of an informatics network or community (total 185 survey participants).

Appendix 3 – Organisation type.

Responses gathered from online survey when asked – *"What type of organisation do you work in?"*

Rank Value	Organisation Type	Count	Percentage %
1	Acute provider	70	37.8%
2	Arm's Length Body	36	19.5%
3	Mental Health provider	14	7.6%
4	University/ Research	11	5.9%
5	Tertiary/ Specialist care	10	5.1%
6	Clinical Commissioning Group or Commissioning Support Unit	5	2.7%
7	Primary care provider	4	2.2%
8	Third sector/ Charities	4	2.2%
9	Community provider	3	1.6%
10	Local government	3	1.6%
11	Social care	1	0.5%
12	Ambulance service provider	0	0.0%
13	Student	0	0.0%
Total		**161**	

Table 2. Organisation types of online survey participants (total 185 participants). Acute provider was most frequently selected. T*otal of 24 responses for 'Other' received and were removed for the purposes of this summary.*

Appendix 4 – Knowledge to be access and shared.

Responses gathered from online survey when asked – *"What sorts of knowledge do you most want to access/ share/ discuss?"*

Key
Rank value 1
Rank value 2
Rank value 3

Role type category	Almost anything with almost anyone	Discussions with a specific group of people (e.g. people of a similar grade or profession)	About a specific technology	About a specific care setting, user need or condition	About supporting under-represented groups and improving diversity in the profession	About a specific geography, place, or organisation	Other
Leadership	30 (25.6%)	25 (21.4%)	14 (12.0%)	16 (13.7%)	18 (15.4%)	13 (11.1%)	1 (0.9%)
Senior management	31 (22.6%)	28 (20.4%)	25 (18.2%)	20 (14.6%)	14 (10.2%)	11 (8.0%)	8 (5.8%)
General management	34 (24.8%)	24 (17.5%)	29 (21.2%)	22 (16.1%)	16 (11.7%)	12 (8.8%)	0 (0.0%)
Junior professional	2 (40.0%)	0 (0.0%)	1 (20.0%)	0 (0.0%)	1 (20.0%)	1 (20.0%)	0 (0.0%)
Administrative	3 (25.0%)	4 (33.3%)	1 (8.3%)	1 (16.7%)	2 (16.7%)	0 (0.0%)	1 (8.3%)
Other	3 (30.0%)	1 (10.0%)	1 (10.0%)	2 (20.0%)	2 (20.0%)	1 (10.0%)	0 (0.0%)
Total (N=418)	103	82	71	61	53	38	10
Percentage %	24.6%	19.6%	17.0%	14.6%	12.7%	9.1%	2.4%

Table 3. Types of knowledge participants most want to share using a network by role type category. *"Almost anything with almost anyone"* was the most frequently selected category from five of the six role type categories - expect administrative – where *"Discussions with a specific group of people (e.g. people of a similar grade or profession)"* was most frequently selected.

Appendix 5 – List of role type categories.

To capture role type, online survey participants were asked – "*Which of the following most closely matches your current role?*" To support the analysis of some findings, role types were grouped into appropriate categories and are outlined below.

Role type category	Role types included in category
Leadership	Chief Clinical Information Officer (CCIO)
	Chief Information Officer (CIO)
	Chief Nursing Information Officer (CNIO)
	Chief Executive Officer (CEO)
	Director
Senior management	Principle practitioner/ Head of function
	Senior manager
	Senior practitioner
General management	Manager
	Practitioner
Junior professional	Entry level
	Junior practitioner
Administrative	Administrative/ Support
Other	Not currently working
	Retired

Table 4. Breakdown of role type categories and associated roles.

Appendix 6 - Frequency of network/ community engagement (by role type).

Responses gathered from online survey when asked – *"On average, how often do you engage with your main network?"*

Role type category	Frequency of engagement					
	Daily	Weekly	Every two weeks	Monthly	Less than once a month	N/A (not a member of any network)
Leadership	13 (27.1%)	17 (35.4%)	3 (6.3%)	6 (12.5%)	9 (18.8%)	0 (0.0%)
Senior management	14 (23.7%)	22 (37.3%)	5 (8.5%)	7 (11.9%)	8 (13.6%)	3 (5.1%)
General management	14 (20.3%)	17 (24.6%)	4 (5.8%)	17 (24.6)	10 (14.5%)	7 (10.1%)
Junior professional	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)
Administrative	0 (0.0%)	1 (14.3%)	1 (14.3%)	1 (14.3%)	1 (14.3%)	3 (42.9%)
Other	1 (25.0%)	1 (25.0%)	0 (0.0%)	1 (25.0%)	0 (0.0%)	1 (25.0%)

Table 5. Participant frequency of engaging with network/ community. *Most frequent engagement per role type category highlighted in grey.*

Appendix 7 - Network/ community satisfaction (by role type).

Responses gathered from online survey when asked – *"How well do you feel your current networks meet your needs?"*

Role type category	Level of satisfaction				
	Very satisfied	**Satisfied**	**Neutral**	**Dissatisfied**	**Very Dissatisfied**
Leadership	4 (8.3%)	28 (58.3%)	11 (22.9%)	4 (8.3%)	1 (2.1%)
Senior management	5 (8.8%)	26 (45.6%)	22 (38.6%)	3 (5.3%)	1 (1.8%)
General management	4 (6.0%)	30 (44.8%)	29 (43.3%)	4 (6.0%)	0 (0.0%)
Junior professional	0 (0.0%)	0 (0.0%)	1 (50.0%)	1 (50.0%)	0 (0.0%)
Administrative	0 (0.0%)	3 (42.9%)	3 (42.9%)	1 (14.3%)	0 (0.0%)
Other	1 (25.0%)	0 (0.0%)	2 (50.0%)	0 (0.0%)	1 (25.0%)

Table 6. Participant satisfaction with current networks and communities. *Highest levels of satisfaction per role type category highlighted in grey.*

Appendix 8 – Network features most valued (by role type).

Gathered from online survey – *"What are the most important features you want from a network? Please rank each item"*.

Key	5	7.25	9.5
	Minimum value	Median	Maximum value

	Leadership	Senior management	General management	Junior professional	Administrative	Other
Online events and webinars - Learning from the experience of experts	7.58	7.81	8.00	9.50	7.71	6.50
In-person events, conferences, and meetings (excepting current COVID-19 restrictions)	7.54	6.41	7.12	9.00	7.43	8.50
Online discussion forums - Learning from the experience of colleagues / sharing with colleagues	7.91	7.46	7.69	7.00	7.43	7.25
Direct question and answer sessions with peers and national leaders	7.25	6.75	6.86	6.50	7.00	7.75
Focused knowledge sharing on a topic/ technology/ geography/ care setting/ profession I have a particular interest or expertise in	7.98	7.82	7.61	8.50	8.57	7.50
Knowledge from data or research (e.g. peer reviewed journals/ syntheses/ blueprints/ data on product usability/ product cost)	6.90	7.02	7.52	8.00	6.29	6.00
Professionalism – products, information, and advice to help me develop myself	6.63	7.23	7.68	5.50	7.67	7.25
Professionalism – products, information, and advice to help me develop my team/ others	6.98	7.38	7.49	5.00	6.71	7.50
Better relationships with policy makers – I want to influence policy/ central spend and hear more frequently about policy plans	7.71	7.39	7.13	6.50	6.43	6.75
Fun, camaraderie, and personal support	7.21	6.07	6.69	6.50	7.29	7.00

Table 7. Heatmap summarising difference in network features valued by role type categories.

Appendix 9 – Commonly identified informatics networks/ communities.

Responses gathered from online survey when asked – *"Which network/ communities or professional bodies do you belong to? Please select all that apply."* Full list of networks and communities identified can be found in Appendix 1.

Rank value	Network name	Count (N=516)	Percentage %
1	Digital Health networks (CCIO/ CIO/ CNIO networks)	71	13.8
2	FutureNHS	46	8.9
3	Faculty of Clinical Informatics (FCI)	34	6.6
4	Local networks and forums (place, profession or topic based)	34	6.6
5	BCS - The Chartered Institute for IT	33	6.4
6	Chartered Institute of Library and Information Professionals (CILIP)	26	5.0
7	Informatics Skills Development Networks (ISDNs)	23	4.5
8	Nursing and Midwifery Council (NMC)	21	4.1
9	Academic Health Science Networks (AHSNs)	15	2.9
10	Digital Nurse networks	13	2.5
11	Federation for Informatics Professionals (FEDIP)	12	2.3
12	Government Digital Service (GDS) Digital, Data and Technology communities	11	2.1
13	INTEROPen	11	2.1
14	Professional Records Standards Board (PRSB)	11	2.1
15	Shuri Network	11	2.1
16	Digital Midwives network	9	1.7
17	Association of Professional Healthcare Analysts (AphA)	8	1.6
18	Healthcare Information and Management Systems Society (HIMSS)	8	1.6
19	Royal College of Nursing eHealth Forum	8	1.6
20	London CIO Council	7	1.4

Table 8. The twenty most common responses by participants when identifying networks, communities, and professional bodies they were part of (N = 516 responses). *Total 43 responses of 'Other' removed – details included in full list of networks/ communities identified in Appendix 1. Total 19 responses of 'I am currently not a member of an informatics network' removed.*

Appendix 10 – How networks/ communities support the informatics workforce.

Responses gathered from online survey when asked – *"Please share an example of how participating in a network/ community has helped you carry out your role as an informatics professional."* Key themes and categories (including examples) outlined below.

Category	Theme	Theme summary
Professional development	Supporting learning and development	• Sharing knowledge and expertise • Learning from others in similar situations • Experiencing new/ alternative ways of working • Access to topic specific materials and information
	Providing access to formal training opportunities	• Completing relevant qualifications to support role • Signposting of opportunities through networks/ communities
Peer support	Guidance from colleagues on specific topics	• Guidance from Subject Matter Experts (SMEs) • Provide and receive feedback on work from associates or wider e.g. Government Digital Service (GDS) • Reduced duplication of time/ efforts (not re-inventing the wheel)
	Building a network to connect and support	• Opportunity to meet and collaborate with others outside of usual teams/ organisation • Broadening understanding from a wider perspective (national/ international connections) • Having the ability to offer and receive advice/ support

Table 9. Summary of how networks and communities have benefited individuals in their roles.

Appendix 11 – Network tools (valued vs. available).

Responses gathered from online survey when asked – *"If you are a member of a network/s - of the tools available, which do you value the most and why?"*

Rank value	Tools most valued	Count	Percentage %
1	Discussion forums	58	29.9%
2	Learning and training resources	35	18.0%
3	Events	13	6.7%
4	Information sharing	11	5.7%
5	Virtual network - local, regional, and national	9	4.6%
6	Subject specific resources	9	4.6%
7	Emails and notifications	7	3.6%
8	Collaborative/ communication tools	6	3.1%
9	Face to face events	5	2.6%
10	Websites	5	2.6%

Table 10. The ten most commonly **valued** network tools identified by participants (N= 194* responses).

Responses gathered from online survey when asked – *"What online tools does your main network provide?"*

Rank value	Tools most provided	Count	Percentage %
1	Forums and discussions	128	14.0%
2	Email notifications of activity	119	13.0%
3	Event calendar	89	9.7%
4	Content resources, e.g. articles, case studies	85	9.3%
5	Sharing content to social media (e.g. Facebook, Twitter, LinkedIn)	69	7.5%
6	User profiles/ member directory	50	5.5%
7	Document library	49	5.4%
8	Private messages to other members	49	5.4%
9	Training, assessments, or apprenticeships	48	5.3%
10	Private, semi-private user groups	46	5.0%

Table 11. The ten most common network tools **available** identified by participants (N=914* responses).

*Participants of the online survey were able to provide more than one answer.

Appendix 12 – Network improvements and opportunities (key themes).

Responses gathered from online survey when asked – *"What changes or improvements do you think could contribute the most towards supporting you?"*

Rank value	Theme	Themes summary
1	Access to learning and training opportunities.	• Easier ways of accessing professional development, professional body membership, mentoring etc. • Opportunities available are inclusive to all members • Greater sharing of best practice, document repository, case studies/ blueprints
2	Ability to find the right people easily and support for those managing networks.	• Directory to help find and connect with the required people/ networks • Support for day-to-day running of networks • Greater connectivity/ collaboration between networks themselves (signposting; awareness; reducing duplications)
3	Greater accessibility and communication tools.	• Making networks (inc. platforms used) easy to access and navigate • Adopting communication tools/ channels that are widely used and inclusive • Effective methods of communication used based on target audience needs
4	Input to industry topics and greater recognition of networks.	• Greater engagement between networks and policy makers • Improved recognition of wider informatician profession and skills across sectors • Greater clarity on informatics roles and responsibilities
5	Further local networking opportunities.	• Develop inclusive local network opportunities • Support individualised approach to using professional networks
6	Greater membership involvement and engagement.	• Members are able to provide feedback to networks and involved in decisions-making processes • Engagement supports user driven content
7	Funding support for networks and members.	• Financial assistance with relevant professional bodies membership fees • Access to funding opportunities by networks

Table 12. Summary of network improvements/ changes identified by participants (total 187 individual themes identified).