Selecting & Summarising

turning search results into polished summaries

A special workshop for

with Tim Buckley Owen
Our goals for today

Tell a good story
Summarise effectively
Read strategically
Select, reject, prioritise
Manipulate our search results
POWER and KISS

What is your personal goal for today?
Selecting & Summarising

What we plan to do today

The value we need to add

POWER and KISS
The value we need to add...

Select & reject with confidence
Extract & summarise the key information
Present your answer compellingly

Reach a decision
Make a recommendation
Take action

Value-Added Search Results

Tim Buckley Owen
information skills training
www.buckleyowen.com
Two key principles...

Plan

Review

Organise

Edit

Write

POWER

Keep It Simple Stupid!

KISS
Today’s time management challenge…

**VITAL**
- Identify the most important search results
- Be able to change our mind if necessary
- Find the best source material for our summary
- Draft, check and deliver it

**URGENT**
- Get it all done by 4:30 today
So let’s start our journey…

Plan
Organise
Write
Edit
Review

and…
The task...

Turn these raw search results into a report entitled...

How can we help professional teams and families to manage risk for vulnerable people, without being completely risk averse but while also respecting those people’s right to personal freedom and dignity?
Start by looking through the search results...

Do any of the documents look particularly useful?
Do any themes emerge?
Can you reject any documents straight away?
Above all...
Is it easy or hard to navigate around this list?
Can you think of ways of making it easier?

Research in Practice for Adults: Balancing personalisation with safeguarding

How do you run a risk enablement panel?
Available online from: http://www.interactive.rgba.org.uk/balancing-personalisation-with-
safeguarding-topics/how-do-you-run-a-risk-enablement-panel/ [accessed 03/10/2013]
Gives brief examples of how this can work, mostly in local councils but cites one mental health trust.

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Social Care Institute for Excellence
Social Care TV: Personal Budgets: Risk Enablement and Mental Health

"This film showcases the work of Stockport Council and Pennine Care NHS Trust. As part of their risk enablement strategy for personal budgets and mental health they established a risk enablement panel as a last resort for discussing final support plans for people considered to be at risk. However, in the three years since the panel was established, they have only used it twice. Stockport has also committed to a culture change where staff and service users are able to openly discuss positive risk taking and concerns about risk. This has resulted in people with mental health problems (even those with more complex needs who use a budget managed by a third party) being able to use their personal budgets more creatively. They are experiencing positive outcomes such as improved confidence and self-determination and greater levels of activity. They also have more opportunities to take up volunteering and training for employment."

***

Real World Group/Sainsbury Centre for Mental Health [no date]
The impact of leadership factors in implementing change in complex health and social care environments: NHS Plan clinical priority for mental health crisis resolution teams
Available online at: http://www.netcap.ac.uk/.Productions/project/SOC_FR_06-1261-
022_V01.pdf [accessed 01/02/2013]

[From case study of a Low Admissions Team]:
The supportive and open relationships in the team are very important from a positive risk taking perspective. The team discuss collectively particular cases and jointly decide on a plan of care. The interviewees felt very strongly that the supportive environment helped them in managing high-risk situations. (p.138)
Selecting and Summarising

Making your search results manipulable

From a linear list to a flexible dataset
Manipulation: the tools for the job...

Will my chosen tool allow me to...

Work with references taken from any source I choose?

Describe those documents using whatever headings I want?

Sort and resort them using multiple criteria determined by me?
How you might want to describe and sort your results...

- Author?
- Title?
- Citation?
- Date?
- Category?
- Usefulness?
- Abstract & Notes?
Populating your matrix...

Copy across only the details you need - ignore records of lesser interest.

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<table>
<thead>
<tr>
<th>Priority</th>
<th>Category</th>
<th>Title</th>
<th>Author</th>
<th>Citation</th>
<th>Date</th>
<th>Abstract &amp; Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Updated review of research on risk and adult social care in England</td>
<td>Joseph Rowntree Foundation</td>
<td></td>
<td>2012</td>
<td></td>
</tr>
</tbody>
</table>


Addresses gaps identified in the earlier review, with new studies on the experiences of people with mental health problems or learning disabilities.

This is a limited update of an earlier extensive review of research into the incidence and management of risk in adult social care in England. Recent research in the areas covered by this review appears to focus predominantly on the operation and effectiveness of new measures and procedures intended to identify and reduce risk, and also on new challenges in the prevention and management of risk raised by the implementation of personal budgets in social care.

Gaps identified in the earlier review have been addressed, particularly by new studies involving people with mental health problems or learning disabilities. There is also new research on how users' views and experiences can inform research on how users' expectations and needs should be included in new social care models.
Populating your matrix…

Organise

SPOTLIGHT
BREAK THE STORY. BREAK THE SILENCE.

This is a limited update of an earlier edition of the guide to the management of risk in adult social care. The guide is intended to assist local authorities, managers, and social workers in the identification, analysis, and implementation of personal budgets in social care. Recent research in the areas covered by this guide has highlighted the importance of risk management and effectiveness of new measures and procedures. It is hoped that this update will provide practical advice on how users' care identities in the earlier review have been addressed, particularly with regard to people with mental health problems or learning disabilities. The guide also includes a range of different groups of service users, such as older people, and offers insights into how users' care identities have been changed by new research.
TRY THIS...

Take a look at Report Planner 1 in the NHS Practical folder.

This document shows the structure we’re aiming for (irrespective of the application we use).

It has already been populated with selected details of all the documents in the Search Results file.

If you’re using a reference management package, you may have been able to automate at least some of the process – otherwise you may have to do much of the work manually.

Even so, you won’t be wasting your time. (Remember the Spotlight spreadsheet.)
Selecting & Summarising

Selecting, rejecting, prioritising

Must know
Should know
Could know
Classifying your documents…

- Geographic coverage?
- Document status?
- MeSH?
- Medical discipline?
- Sub-topics?

Must know
Should know
Could know
Sorting your data...

1. Click on the Table Tools/Layout tab.
2. ...then click on the Sort icon.
3. Make sure the Header Row button is on.
4. Choose how you want to sort.
5. If you want to sort by Date, make sure your date formats are consistent.
6. Click on OK.
NOW TRY THIS...

Go back to **Report Planner 1** in the **NHS Practicals** folder and try assigning priorities to each record.

You can sort and re-sort the records as often as you like as you go along.

If you have time, you could also try categorising them; you can use the categories that we’ve suggested or devise your own – but do make sure you’ve prioritised all the documents first.

If you find the task too tricky or time-consuming, you’ll find a file called **Report Planner 2** in the **NHS Practicals** folder.

In this file, the records have already had priorities and categories assigned to them.

But you may disagree with our choices – so do try your own version first!
Selecting & Summarising

Deciding what to say

Strategic reading
Summarising documents effectively
Telling your story

Tim Buckley Owen
Rupert Bear – excellently signposted...

Verse couplets (50-word informative abstract)

Full text - 171 words

Rupert finds a flower

Triumphantly the dove’s cries ring
But from its beak it drops something.

Rupert’s very surprised to find
It’s left some sort of flower behind.

He’s just about to sniff it when
The dove comes winging back again.

"Hello!" cries Rupert but the bird
Nips flies away at his first word.

Before he can sniff the flower, though, Rupert hears a flapping of wings and looks up to find that the dove has come back again. As it flies towards him he waves and holds up the flower to show the bird that he has found it. At this the dove flaps its wings in alarm, turns, and flies away high over the treetops. "I wonder why it has suddenly become so timid?" thinks Rupert. "I was only going to offer to return its flower."
MAN BITES DOG SHOCK

Dogs more likely to be victims than aggressors say scientists

Geneva, Thursday

MILLIONS of years of evolutionary theory have been turned on their head following new findings that dogs are now more likely to be the bitten than the biters.

Researchers at the Institute of Humano-Canine Relations presented their shock findings to a packed meeting of statisticians and dog lovers yesterday.

Sex drive

Answering questions from delegates to the Ministry of Unlikely Statistics conference in Geneva, Professor Jack Russell denied that increased testosterone levels in postmen was behind the change.

“It’s more likely to be the effect of selective breeding among some popular types of dog,” he said. “Dogs with caring,
Successful enquiry answering takes an analytical rather than a rule-of-thumb approach to the challenge. Instead of learning large numbers of information source by rote, the trick lies in imagining what the final answer will look like and most likely sources and then wished. The cost of doing something like this is minuscule, but the customer relations value is immense.

**Conclusions or Recommendations or Findings**
* Remember that you don’t necessarily have to supply everything you have found.
* Seize every opportunity to add value; compose your oral answer.

**Headings**
With information presented electronically, the number of ways you can enhance the answer is limited only by your imagination. Electronic delivery of answers to customers is likely to happen more frequently.

**Contents**
1. What do you really want? 1
   How to make sure you really understand
   Avoiding misunderstandings 2
   Asking the right questions 5
   Agreeing the task 8
2. Not too much, now 10
   Too much information 10

**Preface or Introduction**
Every time I’ve come to revise this book I’ve begun by saying “There’s never been a better time to be in the library and information profession. It’s still true, but demonstrating how you can add as an information professional...
Lack of trust currently seems to be so widespread across both civil society and the economy that it is almost endemic. In some areas, this is only to be expected and its victims have only themselves to blame.

According to research carried out last November for the Office of the Information Commissioner (the regulator of data protection in the UK) only 16% of people were confident that internet sites would respect their personal information.

Over half were worried that their personal details might be passed on to unknown organizations, and a fifth had little confidence in retailers or telecoms companies.

<table>
<thead>
<tr>
<th>Official statistics are generally accurate</th>
<th>40%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Official statistics are not usually accurate</td>
<td>20%</td>
</tr>
<tr>
<td>Not sure if official statistics are accurate or not</td>
<td>40%</td>
</tr>
<tr>
<td>Figures are produced without political interference</td>
<td>10%</td>
</tr>
<tr>
<td>Government uses official statistics honestly</td>
<td>0%</td>
</tr>
</tbody>
</table>

We can afford to be pretty relaxed if civil society chooses to be suspicious about the use of commercial data. But when it is also suspicious of data collected on its behalf by the Office for National Statistics, that is cause for serious concern.

In fact, the ONS does seem to get a fairly clean bill of health as far as perception and trust are concerned. Its last survey of public confidence [7], showed 37% of respondents agreeing that its figures were generally accurate, with 31% disagreeing and 32% unsure.

However, when it came to the perception of political interference in official statistics, the picture was radically different. Only 17% of respondents believed that official figures were produced without political interference, and just 14% thought that...
Lack of trust currently seems to be so widespread across both civil society and the economy that it is almost endemic. In some areas, this is only to be expected and its victims have only themselves to blame.

According to research carried out last November for the Office of the Information Commissioner (the regulator of data protection in the UK) only 16% of people were confident that internet sites would respect their personal information.

Over half were worried that their personal details might be passed on to unknown organizations, and a fifth had little confidence in retailers or telecoms companies.

We can afford to be pretty relaxed if civil society chooses to be suspicious about the use of commercial data. But when it is also suspicious of data collected on its behalf for purposes of good governance, that is cause for serious concern.

In fact, the Office for National Statistics does seem to get a fairly clean bill of health as far as perception and trust are concerned. Its last survey of public confidence showed 37% of respondents agreeing that ONS figures were generally accurate, with 31% disagreeing and 32% unsure.

However, when it came to the perception of political interference in official statistics, the picture was radically different. Only 17% of respondents believed that official figures were produced without political interference, and just 14% believed that the Government used official figures honestly. As before, the reality is largely irrelevant and the perception is everything.

Last November the Chancellor of the Exchequer, Gordon Brown, announced that the ONS would be made fully independent of Government, to remove any suspicion over official figures.

But again, even this may be insufficient. A perception of interference, reinforced by years of political spinning of figures on crime, health and the economy, is enough to damage that essential trust between a government and its citizens, without which society cannot function.
Read from print – not from a screen

Paris
in the
the Spring
### NOW TRY THIS...

Navigate through the executive summary of the report *The Impact of Leadership Factors in Implementing Change in Complex Health and Social Care Environments*.

You’ll probably find this pretty hard to do in the 5 minutes or so we’re going to allow. But don’t worry – once you understand some of the principles of strategic reading it’s easier than you think.

Just one tip: You don’t need to scan the text from beginning to end – or even in the right order.
EXECUTIVE SUMMARY

In summarising the findings of this national, longitudinal study of the relationship between quality of leadership in Mental Health Crisis Resolution Teams (CRTs) and both staff attitudes and well-being, and organisational performance, we would like to address three principal questions:

- What did we set out to achieve?
- What did we find?
- What are the implications?

What did we set out to achieve?

1. The development of CRTs over the past decade, and the policy initiatives to mainstream these crises services across England, presented an ideal backdrop against which to examine policy implementation and the impact of leadership on the functioning and performance of these teams.
What did we find?

Relationship between leadership and staff attitudes and well-being:

19. Leadership quality, as measured by each of the 3 scales, was significantly positively correlated with each of the 12 facets of staff attitudes to work and their well-being at work. In other words, the leadership behaviours categorised as ‘Engaging with Others’, ‘Visionary Leadership’, and ‘Leadership Capability’, had a positive effect on staff.

20. Further analysis of these relationships revealed strong predictive links between ‘Engaging with Others’ and each of the 12 facets, and between ‘Visionary Leadership’ and 6 of the facets, and ‘Leadership Capability’ and 4 of the facets. This suggests that leadership behaviours that involve ‘engagement’ have much the greatest impact on staff’s attitudes to work and their well-being at work.

Relationship between leadership and organisational performance:

21. At the level of whole teams, there was some evidence to suggest that organisational performance, defined in terms of ‘ratio’ scores (ratio of assessments to referrals), but not when defined in terms of ‘change’ scores, was positively associated with ‘Engaging with Others’.

No such relationships were found involving either ‘Visionary Leadership’, or ‘Leadership Capability’.
Overview of findings:

38. Overall, the results indicate that, while the three aspects of leadership studied were positively associated with staff attitudes and well-being, to a greater or lesser extent, only ‘engaging’ leadership behaviours were a significant predictor of organisational performance.

39. Furthermore, both the quantitative and qualitative data point to the significant effect of contextual factors on organisational performance.

What did we find?

Relationship between leadership and staff attitudes and well-being:

19. Leadership quality, as measured by each of the 3 scales, was significantly positively correlated with each of the 12 facets of staff attitudes to work and their well-being at work. In other words, the leadership behaviours categorised as ‘Engaging with Others’, ‘Visionary Leadership’ and ‘Leadership Capability’ had a positive effect on staff.
How you might tackle it...

Now let’s check the subheadings in the Implications section (starting on page ix) to see if any might help our reader reach a decision, make a recommendation or take action....

This looks like a good one because it appears to refer to actions or outcomes....

So try the first sentence or phrase of each paragraph. Most of them offer advice that your reader could act upon.

Tim Buckley Owen

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**Policy implementation and the introduction of new services**

51. Service development policies should not be too prescriptive, as with the case of the MHPIG (1999); prescriptive policies ignore the local context and, as such, enforce teams to conform to a model that may not best fit their requirements. As such, policies should describe the reasons and desired outcomes of change rather than providing very detailed instructions on how the change should be achieved.

52. Human resource considerations: when introducing a new service, policy makers should consider the best means by which to create positive attitudes amongst staff, generating a sense of purpose, ownership and commitment to work.

53. HR professionals play a key role in building leadership capacity, by being actively involved in advising and scrutinising current selection, promotion, leadership development, and appraisal processes adopted by organisations, to ensure that they not only include competencies, They should also be informed so that they can influence and ‘educate’ their colleagues as to why this is so important to the business of the quality of delivering healthcare.

54. A ‘whole systems’ approach to service provision was found to be a key element of successful inter-agency working; such an approach should be promoted as it is evident that good relationships between different agencies are crucial to improving crisis care.

55. Policy makers should reconsider the outcomes or performance targets expected of mental health services, such as admissions to hospitals, focusing instead on staff and service user satisfaction and other indicators of good quality mental health care.
What should your summary achieve…?

**Either…**
Who? What? When?
Where? Why? How?

**Or…**
Who did it?
What did they do?
What were the results?
What actions arose from them?

**Enabling your reader to…**
Reach a decision
Make a recommendation
Take action

**And helping them to decide they…**
Need to read the original
Can rely on the summary for now
Don’t need to read the original
NOW TRY THIS...

Now it’s your turn!

Using your own strategic reading techniques, write a 100-word summary of *The Impact of Leadership Factors in Implementing Change in Complex Health and Social Care Environments*.

You don’t necessarily have to draw on the same content as I’ve done; my version is just to demonstrate the principle. Instead, reach your own decision on which bits of the original you think would be most useful to your reader.

You have 20 minutes to complete this task.
A study of leadership quality in Mental Health Crisis Resolution Teams found that engaging with others, vision and capability all affected staff attitudes and well-being, but that only engaging behaviours significantly predicted organisational performance. Contextual factors also affected performance. This implies that service development policies should not be too prescriptive. When introducing a new service, policy makers should consider how to generate a sense of purpose, ownership and commitment among staff, and Human Resources should actively build leadership capacity. A ‘whole systems’ approach to service provision is a key element of successful inter-agency working, and policy makers should reconsider the outcomes or performance targets expected of mental health services.
Summarising multiple documents...

- **Must know**
- **Should know**
- **Could know**

**Conclusions**
**Recommendations**
**Findings**
(from abstract or extract in Search Results)

- **Categories or (possibly) Titles**

- Indicate nature & status?
- Note their existence?
- Ignore altogether?
Ways to tell your story...

Thesis
Antithesis
Synthesis

Inverted pyramid

Timeline
Tell them...
Tell them...
Tell them...
NOW TRY THIS...

In your **NHS Practicals** folder, open **Report Planner 3**.

In this version, only the Must Know documents are shown, and they’ve had abstracts or extracts added as well.

(Normally you’d be able to see the Should Know and Could Know documents as well – but we’ve left them out this time to make the exercise more straightforward.)

We’ve also sub-classified the Must Know documents to suggest the order in which you could summarise them – but you can disagree and re-order them if you wish.

**Now draft your summary.** We recommend no more than one or two sentences per Must Know document, showing the crucial message that each document conveys – in other words the conclusion, recommendation or finding.

We’ll think about the Should Know and Could Know documents later; meanwhile remember: **this is only a draft**.
Selecting & Summarising

Polishing your draft

Making your disjointed text coherent and fluent
Make sure your story is...

Brief

Readable

Retrievable?

Relevant
TRY THIS...

First, read through your own summary to make sure that it’s brief, readable, relevant and (if necessary) retrievable.

No matter how good you think your first draft is, you’ll almost certainly be able to improve it yourself.

Then swap drafts with your neighbour and have a go at theirs – you’ll probably be able to find even more things to improve on than they have.
Selecting & Summarising

Adding value – what to supply

Ways to get your reports noticed and read
What to deliver to your enquirer
Ways to add value...

Main findings

In 2007, the Department of Health published best practice guidance for nurses involved in consumer welfare in mental health care, including a framework for consumer involvement, feedback and advice. The guidance included a section on the integration of consumer advice and feedback in mental health services.

In 2011, the Mental Health Act 2007 introduced new requirements for the provision of consumer advice and feedback in mental health services. The guidance was revised to reflect these changes and to include additional guidance on the integration of consumer advice and feedback.

In 2015, the Mental Health Act 2007 was amended to require trust boards to ensure that consumer advice and feedback is integrated into mental health services. The guidance was updated to reflect these changes and to include additional guidance on the integration of consumer advice and feedback.

In 2017, the Mental Health Act 2007 was amended to require trust boards to ensure that consumer advice and feedback is integrated into mental health services. The guidance was updated to reflect these changes and to include additional guidance on the integration of consumer advice and feedback.

Further results

The literature review included a number of consumer research studies that focused on the integration of consumer advice and feedback in mental health services. The studies were reviewed to identify the key factors that influence the effectiveness of consumer advice and feedback.

2007

2011

2015

2017

Ways to add value...

Main findings

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Further results

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2007

2011

2015

2017
And finally – what to supply…

How can we help professional teams and families to manage risk for vulnerable people, without being completely risk averse but while also respecting those people's right to personal freedom and dignity?
1. Remember POWER and KISS.
2. Urgent and vital are not the same thing.
3. Make your search results manipulable.
4. Must know, should know, could know.
5. Strategic reading and story structure.
6. Your first draft won’t be good enough.
7. Branding and lay-out get your work noticed and read.
<table>
<thead>
<tr>
<th>TO FINISH…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you got what you needed out of today?</td>
</tr>
<tr>
<td>Did you learn anything you didn’t expect?</td>
</tr>
<tr>
<td>Is there anything you needed that we didn’t cover?</td>
</tr>
<tr>
<td>Any final queries or comments?</td>
</tr>
<tr>
<td>Do you know what you need to do next?</td>
</tr>
</tbody>
</table>
Thank you!

Hope you’ve had a useful day.
Hope it’s been fun.
Please fill in your evaluation form.
And enjoy your information career - whatever form it takes.

Tim Buckley Owen