

# Thinking about writing for the National Elf Service?

## The Commissioning Elf

May 2015



Minervation

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# 1. Introduction

## a. Who is this document for?



This paper is for anyone who shares our commitment to delivering quality-filtered updates of emerging evidence that focus on the needs of health and social care professionals. And also anyone who likes elves!

We are looking for subject specialists, commissioners, policy makers, managers, local government representatives, primary care health professionals, health economists, researchers, students and information scientists to write blogs for the National Elf Service. Specifically the **Commissioning Elf**, a website aimed at helping commissioners, managers, health and social care professionals, researchers and students keep up to

date with the latest reliable research, policy and guidance relating to commissioning.

If you want to use your research and writing skills to make a real difference to patient care – read on.

## b. What you will bring

There are a few essentials that you will need to write for the **Commissioning Elf**:

- **Commissioning knowledge:** you don't need to be a Professor, but you do need to know about Commissioning or a specific topic within the field
- **Critical appraisal skills:** you need to be comfortable reading, appraising and summarising reports, policy documents and/or research papers
- **Writing skills:** you need to be able to write in clear, simple and engaging language

## c. Why start a National Elf Service?

We've been working in evidence-based healthcare since the mid-1990s and have been involved in dozens of major web projects that aim to bring the best current knowledge to those who need it most.

It is our belief that health and social care professionals (doctors, nurses, specialists, social workers, trainees etc.) need to keep up to date with the latest research, policy and guidance in their specialty. This information is essential in order to make accurate decisions about health and social care.

There is good evidence that people are still not getting the information they need. The huge volume of high quality published research means that there is simply too much new information to keep track of<sup>1</sup>. Furthermore, a huge volume of irrelevant publications obscures the really good quality and clinically relevant material<sup>2</sup>.

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<sup>1</sup> Heneghan C. How many randomized trials are published each year? 17th March 2010  
<http://blogs.trusttheevidence.net/car1-heneghan/how-many-randomized-trials-are-published-each-year>  
<sup>2</sup> Ioannidis JPA (2005) Why Most Published Research Findings Are False. PLoS Med 2(8): e124.  
doi:10.1371/journal.pmed.0020124  
<http://www.plosmedicine.org/article/info:doi/10.1371/journal.pmed.0020124>

However, studies show that if health professionals can get access to the right evidence at the right time, they make better decisions and fewer mistakes<sup>3</sup>.

Currently on the Internet, users can subscribe to a bewildering array of newsletters, websites and bibliographic databases such as PubMed. Unfortunately, these only make the problem worse.

Although existing blogs provide frequent updates, they are often too specific and too driven by the agenda of the blogger to serve as a means of updating serious knowledge.

Feeds from databases, journals and organisations exacerbate the problem because there are too many and they are too unfocused. Our studies show that even in the most important journals, over 80% of publications are irrelevant to clinical practice. The situation is even worse for databases: here, a typical saved search in the area of diabetes (for example) yields approximately two relevant items for every 100 hits retrieved.

Social media promises a great deal as a simple and accessible vehicle, but the quality of debate on sites like Twitter is frequently very poor and it takes a significant amount of time to build up the necessary connections to use Twitter to keep up to date.

Our National Elf Service solution is to marry the accessibility and immediacy of blogs and social media with a strict focus on clinical relevance and quality, to create a range of expert health blogs that are user-friendly, engaging and fun!

This approach will save people time and bring them information they would be most unlikely to find by:

- Offering a range of specialty topics to choose from
- Encouraging users to make better use of the evidence because they are aware that they can get at it easily
- Facilitating intelligent debate around the evidence
- Providing a searchable archive

*"Minervation was created to improve the quality of health information. They combine a genuine commitment to methodological rigour with a practical knowledge of how to make it relevant to people's needs."*

- Prof. Guy Goodwin, Head of Department of Psychiatry, University of Oxford

A variety of delivery methods will increase take up:

- Website
- Email newsletter
- Social media
- Mobile apps

This will help people by:

- Keeping the evidence in the foreground of their knowledge
- Ensuring they don't miss any important new publications in their field
- Alerting them to important changes in practice

## d. Existing elves

Eleven elf blogs have been created so far:

- Child health [www.thechildelf.net](http://www.thechildelf.net)
- Commissioning [www.thecommissioningelf.net](http://www.thecommissioningelf.net)

<sup>3</sup> Badenoch D, De Brún C. Where's the evidence for evidence? Review of abstracts of studies of clinicians' information seeking behaviour. The International Society for Evidence-Based Health Care Newsletter 4, July 2011. <https://docs.google.com/file/d/0B7TUcz2K9LnzYmE1MmVhMDgtZWE3NS00M2QwLTk0YWItZTQ1OGVkZjkwNDY4/edit>

- Dental health: [www.thedentalelf.net](http://www.thedentalelf.net)
- Diabetes: [www.thediabeteself.net](http://www.thediabeteself.net)
- Learning disabilities: [www.welblog.net](http://www.welblog.net)
- Mental health: [www.thementalelf.net](http://www.thementalelf.net)
- Musculoskeletal: [www.themusculoskeletaelf.net](http://www.themusculoskeletaelf.net)
- Healthy lifestyle: [www.thelifestyleelf.net](http://www.thelifestyleelf.net)
- Education [www.educationelf.net](http://www.educationelf.net)
- Social care [www.thesocialcareelf.net](http://www.thesocialcareelf.net)
- Stroke [www.thestrokeelf.net](http://www.thestrokeelf.net)

The response to the existing sites has been extremely positive and we are therefore looking to expand into other areas and build up our teams of bloggers in existing topics.

Our model is to have one Chief Blogger (Editor) and a team of bloggers for each elf, so the workload can be shared.

## e. How do the blogs work?

We have used the free open source Wordpress system to launch the existing sites. Each of them is a separate site at present, but these will be brought together into a single database during late 2014 and early 2015.

Each elf topic publishes 1-5 blogs per week; highlighting new evidence identified from a range of trusted sources (filtered database feeds, journals, professional societies, public sector organisations, leading charities etc).

We carefully select evidence for inclusion and favour secondary publication material (e.g. evidence synopses, guidelines, systematic reviews) and high quality primary research (e.g. randomised controlled trials). However, we also recognise that the quality of research in some areas is not yet up to the gold standard, so we include other types of study when we consider them to represent the best available evidence in a specific field.

A complete list of the sources we scan for the Commissioning Elf can be found in the appendix.

*"I have worked with Minervation on a number of national and international projects, in which they have brought immense expertise and professionalism into the important task of disseminating evidence-based information to patients, families, primary care, specialist care, prison staff and policy makers. They produce creative technical solutions to scientific and practical needs and are always a pleasure to work with."*  
- Prof. Rachel Jenkins, Director of WHO Collaborating Centre and Head of Section of Mental Health Policy, Institute of Psychiatry

## f. Design and branding

The aim of the National Elf Service brand is to present a friendly, approachable, upbeat and memorable service that stands out from the crowd in the congested health information market and on social media.

Each Elf should be recognisable and reproducible in a variety of online and paper-based formats, as



well as being designed with character animation in mind.

Each Elf will sport an accessory that relates to the topic area, e.g. the Lifestyle Elf carries an apple.

## g. Future plans

We will soon turn our individual Elf websites into an evidence network using Wordpress, which will feature a central database of all content; categorised and tagged to enable easy generation of bespoke feeds for different customers (e.g. a feed on depression and exercise).

We will also be adding website registration, personalisation and other features for paid subscribers, which will enable users to track which blogs they have read and what they have learnt from the evidence. Subscribers will soon get access to interactive online journal clubs and links to online continuing professional development.

We will use gamification techniques to encourage members to gain points and build their profile by participating in online activities, e.g. reading blogs, commenting on blogs, participating in an online members discussion, tweeting about blogs, joining an online journal club, writing blogs etc.

You can read more about our approach to digital innovation and our plans for the National Elf Service here: <http://www.thementalelf.net/populations-and-settings/service-user-involvement/digital-innovation-works-best-when-users-are-involved-at-every-stage/>

## 2. Current team

### a. Minervation staff

André Tomlin  
Managing Director, Minervation  
Chief Blogger for The Mental Elf

Douglas Badenoch  
Director, Minervation  
Chief Blogger for The Diabetes Elf and The Lifestyle Elf

### b. Chief bloggers

Sarah Carr  
Sarah Carr Associates  
The Social Care Elf

**Caroline De Brún**  
**Independent Consultant**  
**The Commissioning Elf**

Madeleine Greal  
University of Strathclyde  
The Stroke Elf

Jennifer Hanratty  
Queens University, Belfast  
The Child Elf

Tracey Howe  
Glasgow Caledonian University

The Musculoskeletal Elf

John Northfield  
Independent Learning Disabilities Consultant  
The Learning Disabilities Elf

Derek Richards  
Director, Centre for Evidence-Based Dentistry  
The Dental Elf

## c. Business development

Barry Holloway  
Digital Strategy & Online Marketing  
Fennario Consulting Ltd

Jonathan Black  
Richard Hardy  
Board Members  
Minervation Ltd

# 3. Skills and values

## a. Ethos

We are applying the Minervation ethos to this project as we do to all digital innovation:

- We always conduct ourselves with honesty and integrity
- We believe in inclusive and open-minded working
- We are passionate lifelong learners
- We strive to take a fresh and original approach to new and existing work

Our aim is to bring together a group of like-minded people to work on this project. We started this process in 2011 by contacting our existing network of associates and colleagues, many of whom have given their time for free to help get new Elf websites off the ground.

We have built on this core team significantly since then by asking PhD Students, Post-docs, Researchers and other Health and Social Care Professionals to get involved in the Mental Elf, which now has a team of over 70 published bloggers from the UK, Ireland, USA, Canada, Australia, New Zealand and a number of other countries.

Our aim is to now apply this same process to the Commissioning Elf by putting together a diverse team of like-minded people to contribute to the website.

## b. Subject knowledge

As an elf blogger, you will require a detailed knowledge of a specific subject area that will be tackled by the blog.

We expect each blogger to specify a number of subject areas of interest, so that we can retrieve relevant research for you to blog about.

For example:

- A Commissioning health specialist might state their interests as:
  - Service Commissioning – service, outcomes, and practice-based
  - Health economics
  - Procurement

- Financial management
- Partnership working
- Resource allocation
- Needs and impact assessment
- Service design
- Competition
- Payment mechanisms

## c. Searching

Literature searching skills are not required for bloggers, as we will find appropriate evidence for you to write about. If you wish, you can also suggest studies for inclusion.

## d. Appraising

Bloggers will need to assess the reliability and applicability of research papers to decide whether or not they should be included in the blog and how they should be summarised.

We recommend using the CASP appraisal checklists for this purpose: <http://www.casp-uk.net>

**It is vital that bloggers feel confident and comfortable in criticising the research they are writing about. It is not sufficient to simply reproduce the conclusions written by the authors of the study. Your job is to highlight weaknesses in the study methodology and reporting and provide an evidence-based summary of the research with a commentary on the strengths and weaknesses, as well as some information about how the research findings could impact on practice.**

## e. Writing/blogging

The main task for each blogger is to write clear, readable and engaging blogs on a regular basis. The frequency of your blogs is something that we can agree in advance, but most contributors write a blog every 6-8 weeks.

Our aim is to put together teams of >20 bloggers for each elf, who will be led by the Chief Blogger and supported by an Information Scientist.

**Reading, appraising, interpreting and summarising research studies are therefore the main skills needed to be involved in this project.**

The blogs should be written for a junior health, social care, or local government professional audience in clear, jargon-free English. Health and social care professionals and local government teams working with them, are the primary audience for the website, so we expect appropriate language and statistical information to be included in the blogs.

## f. Blog format and length

Most blogs will use the same template structure:

- Background
  - A brief introduction to the subject area
  - Setting the scene
  - Presenting background statistics, where relevant
  - Citing other related research
  - Introducing the new evidence that is the focus of the blog
- Key themes
  - A brief summary of the key themes of the research, drawing out the areas which are of most interest to commissioners



- Results
  - A succinct presentation of the research results
  - Statistical results can be included
- Conclusions
  - A summary of the research conclusions
  - Can include a quote from the study if appropriate
- Commentary
  - This is where we present our critical appraisal of the evidence
  - This should include the weaknesses of the study
  - It should not simply be a repetition of the limitations highlighted by the researchers themselves in their paper
- Summary
  - The final section is where we relate the evidence to practice and discuss why it is of relevance to commissioners:
    - Should this new evidence have an impact on practice?
    - What changes should be made as a result of these new findings?
    - What new research avenues does this evidence open up?
- Links
  - Starting with the reference for the actual piece of new evidence we are highlighting
  - Related research that can be applied in conjunction with this piece

Blogs should generally not exceed 1,000 words (excluding the links and references presented at the end).

## 4. The practicalities

### a. Wordpress



We'll train you in using Wordpress so that you are self sufficient in writing, indexing and formatting your blogs. This will include:

- Writing and formatting blogs
- Categorising and tagging blogs
- Adding images
- Uploading documents and adding links
- Responding to comments and feedback

If using Wordpress is really not your thing – fear not! We can add your blog to the website for you. Simply send us your text in Word and we can turn it into an online post.

### b. Credit

You will be identified by name, with a brief biography on the elf website and you will be credited for every blog you write.

### c. Reproducing blogs

You are permitted to post blogs you write for the National Elf Service on other websites, for example your academic research department site. Our contributors from the University of Liverpool Addiction Group have done just this: <http://livuniaddictiongroup.blogspot.co.uk/>

If you do reproduce your blogs in this way, we ask that you clearly credit them and provide a link back to the National Elf Service blog.

## d. Review

Your blogs will be submitted for publication and then reviewed by your Chief Blogger, who will ask you to make any necessary changes before the Chief Blogger schedules your blog for publication.

## e. Basecamp

We use a simple online project management system to plan and manage the National Elf Service workload. You will register with this system so you can see papers that are assigned to you and communicate with other members of the team.

## f. Social media

All blogs will be automatically sent out to a variety of social media channels using the Mailchimp Social plug-in for Wordpress. As a minimum, each blog will be expected to feature Twitter and Facebook accounts, but some may also have LinkedIn or Google+ groups or other social media accounts that are specific to the subject area.

Chief Bloggers will spend time cultivating a following on social media by establishing links with key influencers and promoting the National Elf Service brand to health and social care professionals.

Individual Bloggers will be encouraged to have a Twitter account so that they can participate in the discussions that take place following the publication of a blog.

## g. Email account

A dedicated email address will be set up for each blog (e.g. [feedback@theCommissioningelf.net](mailto:feedback@theCommissioningelf.net)) and this will be used as the main contact point for all blog questions and related accounts. The email address will be forwarded to the Chief Blogger and also to a member of Minervation staff, so that all enquiries can be dealt with between them.

## h. Artwork

Each Elf will be designed with a variety of different views, e.g. front-facing, in profile, pointing etc. These will be used on the blog and across the various media channels and publicity materials.

We will also make use of stock artwork libraries such as Shutterstock ([www.shutterstock.com](http://www.shutterstock.com)) to source appropriate images for inclusion on the blog. It is important that each blog has a number of pictures that are eye-catching, aesthetically pleasing and relevant to the subject of the piece. All bloggers will be given Shutterstock logins to source artwork for their blogs.



## i. Email newsletter

A monthly email newsletter will be sent out from each blog. A sample newsletter can be seen at: <http://us2.campaign-archive2.com/?u=89a101ff4b67d13029846ac93&id=eab0048623>

Each newsletter will be generated from the blogs that have been published in the last month. A short introduction will be created for each newsletter and they will be sent out to subscribers using Mailchimp ([www.mailchimp.com](http://www.mailchimp.com)).

## 5. Relationship with Minervation

### a. Partnership

We are seeking to establish strong long-term partnerships with individuals and organisations who share our vision for health information.

We have been involved in many national and international projects that have tried and sometimes failed to deliver accessible, usable and reliable health updates to the professionals who need them to inform their decision-making. We have learnt that above all else, these products need to be:

- Based on the best available evidence
- Relevant to practice
- Simple to use
- Interesting and engaging
- Focused and not overwhelming

Building relationships around this vision with a group of talented and driven people will remain one of our main challenges for the coming years.

### b. Remuneration

Chief Bloggers will be paid for the work they do. This role is likely to take about half a day per week, so a flat rate will be agreed for this time in advance.

Bloggers who regularly contribute to an Elf website will be rewarded with free membership of the National Elf Service when the subscription service is launched, which equates to a saving of £10 per month. Bloggers will also benefit from a range of training and professional development opportunities that come with working on a project of this nature.

## 6. Are you interested?

We would love to hear from you if you think you have what it takes to join the National Elf Service Commissioning Elf team as a Chief Blogger (Editor) or a contributing Blogger.

Please contact Caroline to discuss next steps:

Caroline De Brún  
[feedback@thecommissioningelf.net](mailto:feedback@thecommissioningelf.net)



# Appendix: List of Commissioning sources

## a. Websites

- Agency for Healthcare Research and Quality  
<http://www.ahrq.gov/research/findings/index.html>
- Audit Commission  
<http://www.audit-commission.gov.uk/>
- CIVITAS  
<http://www.civitasonline.org.uk/>
- Commissioning Zone  
<https://www.networks.nhs.uk/nhs-networks/commissioning-zone>
- Commonwealth Fund  
<http://www.commonwealthfund.org/>
- Health Foundation  
<http://www.health.org.uk/>
- Joseph Rowntree Foundation  
<http://www.jrf.org.uk/>
- King's Fund  
<http://www.kingsfund.org.uk/>
- National Audit Office  
<http://www.nao.org.uk/>
- NESTA  
<http://www.nesta.org.uk/>
- NHS Confederation  
<http://www.nhsconfed.org/>
- NHS Networks  
<http://www.networks.nhs.uk/>
- NHS Providers  
<http://www.nhsproviders.org/home/>
- NHS Right Care  
<http://www.rightcare.nhs.uk/>
- Nuffield Trust for Research and Policy Studies in Health Services  
<http://www.nuffieldtrust.org.uk/>
- Policy Exchange  
<http://www.policyexchange.org.uk/>
- Primary Care Foundation  
<http://www.primarycarefoundation.co.uk/>
- Quebec Population Health Research Network (QPHRN)  
<http://www.santepop.qc.ca/en/index.html>
- RAND publications  
<http://www.rand.org/>
- Reform  
<http://www.reform.co.uk/>
- University of Birmingham Health Services Management Centre  
<http://www.birmingham.ac.uk/schools/social-policy/departments/health-services-management-centre/index.aspx>
- University of British Columbia Centre for Health Care Management  
<http://read.chcm.ubc.ca/>

## b. Journals

- BMC Family Practice  
<http://www.biomedcentral.com/bmcfampract>

- BMC Health Services Research  
<http://www.biomedcentral.com/bmchealthservres/>
- BMC Public Health  
<http://www.biomedcentral.com/bmcpublichealth>
- BMJ Open  
<http://bmjopen.bmj.com/>
- British Medical Journal  
<http://www.bmj.com/theBMJ>
- Cost Effectiveness and Resource Allocation  
<http://www.resource-allocation.com/>
- Health and Quality of Life Outcomes  
<http://www.hqlo.com/rss>
- Health Research Policy and Systems  
<http://www.health-policy-systems.com/rss/>
- Implementation Science  
<http://www.implementationscience.com/rss/>
- JRSM Short Reports  
<http://shr.sagepub.com/rss/current.xml>
- Milbank Quarterly  
[http://onlinelibrary.wiley.com/rss/journal/10.1111/\(ISSN\)1468-0009](http://onlinelibrary.wiley.com/rss/journal/10.1111/(ISSN)1468-0009)
- New England Journal of Medicine Health Policy and Reform  
<http://www.nejm.org/health-policy-and-reform>