

What?

Benchmarking is a process in which current practice and care are compared to, and as appropriate, amended to attain best possible practice and care outcomes.



A benchmark acts as a 'standard' against which current and future services and practices can be compared, difficulties can be shared, and practical support and encouragement can be offered by peers.

By providing a structured form of networking, sharing and comparing best practice, staff can avoid unnecessary repetition and use resources more effectively in order to strategically plan and make a service change.

How?



Benchmarking is best undertaken in a collaborative way. The aim being to learn from best practice examples about the processes, changes and circumstances used to underpin performance.

1. Identify your problem area.

- Informally have conversations with clients, families, young people, peers or managers.
- Undertake a survey and/or circulate questionnaires.
- Review resources (Human and financial).
- Review complaints/compliments/ feedback received.
- Review activity data i.e. KPIs.

2. Identify organisations that are leaders in that area or where good practice examples have been highlighted.

- Be prepared to look locally, nationally and internationally.
- Obtain articles from clinical journals, research papers, and reputable internet sources.
- Attend conferences or receive conference reports.
- Seek expert opinion.

3. Review data comparing your service nationally across a range of metrics

For example, Child and Maternal Health Observatory

Why?

Having identified the area you may wish to improve you might wish to look to see whether colleague(s) in other areas have done something similar, rather than "reinvent the wheel". You might not know what is termed "best practice" in the area of practice you have selected. Considering the evidence, investigating the standards that apply and scoping best practice examples will help you to determine whether a potential service improvement in your chosen area can/will improve care efficiency and/or outcomes for your service users.



Want to learn more?

Benchmarking v 1.0



<https://www.youtube.com/watch?v=8mY2YrYAE-U> (5 mins)



Benchmarking... continued

Considerations when benchmarking:

- Researching and investigating will take time. You may find that best practice examples have already been identified and investigated from colleagues in other parts of the country who are often willing to share resources. This will help to reduce the time/resources required to benchmark.
- Ask other organisations to share their learning. Especially when trying to understand why ideas have not succeeded or worked as well as had been hoped.
- Compare like to like to ensure validity.

Examples:

Benchmarking Analysis							
Benchmarks	Core Feature 1	Core feature 1 score (1=weak, 10 = strong)	Core Feature 2	Core feature 2 score (1=weak, 10 = strong)	Core Feature 3	Core feature 3 score (1=weak, 10 = strong)	Overall Benchmark score
Our Organisation		6		3		9	18
Benchmark Organisation 1		4		7		6	17
Benchmark Organisation 2		10					10
Benchmark Organisation 3							6
Benchmark Organisation 4							6
Benchmark Organisation 5							9

Indicator	Period	Cambs		Region England				England	
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
Under 18s conception rate / 1,000	2019	↓	109	10.7	13.9	15.7	37.1		3.9
Smoking status at time of delivery	2020/21	→	623	10.7%	9.0%	9.6%	21.4%		1.8%
Breastfeeding initiation	2016/17	—	5,400	*	76.1%	74.5%	37.9%		96.7%
Infant mortality rate	2018 - 20	—	58	2.9	3.4	3.9	6.8		1.7
Year 6: Prevalence of obesity (including severe obesity)	2019/20	→	580	15.0%*	19.1%	21.0%	30.1%		11.1%

