

Are you sitting comfortably?

Ever since human beings developed language they have been telling each other stories and ever since the inventions of papyrus and, later, the printing press they have been using books to do so.

Over the years books have seen off competitors such as microfiche and despite the demands of social media, laptops and smartphones it's starting to look increasingly likely that they'll see off e-books as well. **Karen Hithersay** and **Sinead English** from Lancashire Teaching Hospitals have been encouraging people to read in unusual places with their Extreme Reading challenge (p.2) as well as (with **Sarah Woodhall, Amy Belch, Louisa Halton, Jane Corrigan and Ann Green**) launching a summer reading challenge to help people relax and unwind and increase awareness of the library (p.4). Meanwhile at Morecambe Bay Foundation Trust a Mystery Read project added an element of surprise to proceedings; it wasn't all Morse or Agatha Christie but readers were pleasantly surprised to discover new authors and books they wouldn't otherwise have read – **Kerry Booth** explains all on page six. And spreading Sweet Words was **Helen Kiely** from Warrington and Halton NHS Foundation Trust – find out more on page 15.

Telling the story of the NHS (or at least helping to) is **Adrienne Myers** from Liverpool Medical Institute who talks about the resources available at LMI which we can use to tell the story of 70 years of the NHS as it marks its anniversary in July (p.11). However, nobody is better at telling stories than the makers of Hey Duggee and PG Wodehouse – **John Gale** brings them both together teaching knowledge management on page 16.

Public libraries have been encouraging reading and helping people educate themselves since the nineteenth century. On page eight **Jane Roberts**, from Pennine Acute Hospitals, and **Caroline Timothy**, from Warrington and Halton Hospitals, describe how we can work more closely with them to teach people the best ways of finding health information and understanding it when they get it. Public libraries have been offering the same service to all kinds of people and on page 19 **Rebecca Cumberworth** from Leeds Public Health Resource Centre tackles intersectionality and diagnostic overshadowing.

Elsewhere **Matt Holland** shows us how we can use LibGuides to build our library websites (p.12) and **Janet Reed** nails her colours to the mast, proud to be a librarian – or is it an Information Specialist (p.13). And

last, but by no means least, **Eva Thackeray** deserves a huge vote of thanks for making the stories we tell about our work through the pages of LIHNNK Up much more accessible by compiling an index to it (p.18).

As we move through Spring into Summer, wherever you are and whatever you're up to keep coming up with stories for LIHNNK Up – and don't forget to enjoy a good book!



Extreme READING

Late last year we talked about running a photo competition for Trust staff and students to see what people are reading.

After speaking to different people in the Trust, we heard about a challenge in schools where teachers and children are encouraged to take photos of themselves reading books in obscure places. After much discussion, and checking of Twitter hashtags, we decided on a challenge called #extremereading. Our instructions to people were:

- Send us photos of yourself reading in an exotic or exciting location.
- The best photo will win a prize!
- Include your name, department, where you took the photo and what book you were reading.

■ You can submit your photo via social media @LancsHospLib or send us an e-mail to library.rph@lthtr.nhs.uk

■ Submissions close at midnight on 1st December 2018.

■ By submitting the photo you agree to us using them for promotional purposes.

■ This competition is open to LTHTR staff and students only

In the lead up to the launch, we have been taking pictures of ourselves reading in exotic and extreme locations and plan to



use them in the early promotion to give people an idea of what they could do. #extremereading will be launched in March, and will run until midnight on 1st December 2018. When all the entries are in we will decide on the top four then run a poll for library users to decide the winner who will get the kudos of being the most extreme reader and a prize (yet to be decided)! We will market the campaign via social media, in the library and in the staff canteen using a consistently branded approach to encourage participation. We hope that lots of people will take part in the competition and that it will reach a wide audience. We haven't run a competition like this before so we are aiming to make a big impact in the Trust. We will keep you posted on how the competition is going and how much uptake and engagement there has been.

Karen Hithersay

AND

Sinead English

LIBRARY ASSISTANTS AT LANCASHIRE

TEACHING HOSPITALS

NHS FOUNDATION TRUST



Our challenge for you!

Now to step it up a notch, we challenge YOU to get involved with extreme reading! We are asking all LIHNN libraries to take a team #extremereading photo. We want you to get as creative as possible (nothing dangerous please) and snap a photo of your team reading. We want funky outfits, random objects and most definitely some interesting poses!

Please send all photos to gil.young@nhs.net and the winner will be voted for at the LIHNN Christmas Study Day 2018.

Happy snapping!

Our summer reading journey

@ Lancashire Teaching Hospitals

We have been running a Summer Reading Challenge, between May and September, for several years now. In the past we have taken part in the Six Book challenge – the Reading Agency's national reading challenge – but this year we wanted a change.

We have been running a Summer Reading Challenge, between May and September, for several years now. In the past we have taken part in the Six Book challenge – the Reading Agency's national reading challenge – but this year we wanted a change.

During the reading challenge we encourage staff and students to read 5 books from the Library's leisure & well-being collection and to write reviews about them in their reading diary. In previous years we only used paper reading diaries but this year we added a new online feature which gave people the chance to write and submit reviews online. We encouraged readers who visited the library in the summer to sign up for the challenge but we also wanted to reach those who don't normally visit us, so each week we set up 'pop-up' libraries in the staff canteens where people could sign up to the challenge and swap their books. As people read the books they earned prizes like pens and bookmarks and if they read all five books we entered them into a prize draw for Amazon vouchers.

The main aims of the Reading Challenge were:

- to improve the well-being of staff and students at the Trust by helping them relax and unwind
- to increase fiction/well-being book issues
- to increase awareness of the Library
- to appeal to a wider range of staff who might not normally use us, e.g. clerical staff.

What did we do?

First we looked at the feedback from people who took part in last year's Reading Challenge. Using this we decided to reduce the number of books to be read to five and slightly increased the length of time allowed.

In previous years we used the Reading Agency's material – reading diaries, bookmarks, posters – to promote our challenge, however this year we decided, mainly because of lack of money, to design our own Challenge. This allowed us to be creative and personalise the challenge using feedback from previous participants. We agreed to call the challenge "Summer Reading Journey: escape with a good book," and linked it to a summer-holiday theme.

To create the campaign we used Canva. We made a trifold brochure based on a boarding pass, posters and leaflets using bright colours and social-media images. On the boarding pass, we asked people to review the five books that they had read. We duplicated this on a webpage which the E-resources Librarian created specifically for the challenge, this allowed people to complete the reviews online or use the paper version. People were able to join at both library sites, online and at pop-up stands set up weekly in the main staff cafeteria. We offered various incentives ranging from pens to Amazon gift vouchers, which were donated by partners in the Trust. We also offered donated hardback copies of "The Invitation" by Lucy Foley to the first ten people to complete the challenge.

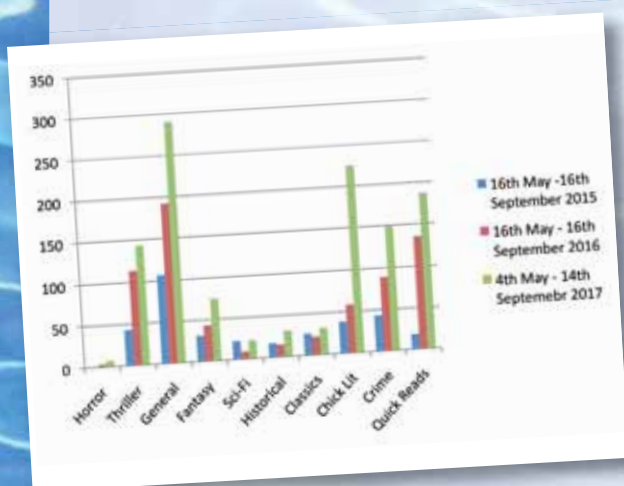


We kept record sheets at both sites to keep track of participants' progress. A month before the end of the challenge we sent out an e-mail reminder to encourage more people to complete the Challenge. We measured whether we met our objectives by sending out a survey at the end of the challenge to everybody who joined up. We found out how much impact the project had and will use the data to inform next year's reading challenge.

What went well?

The Summer Reading Challenge was a resounding success on many levels. Firstly it gave the cross-site team an opportunity to work together on marketing. Staff were able to promote the challenge at different sites from where they normally worked which helped them appreciate the differences that the two libraries have.

The 71% increase in fiction issues from the previous year showed what a good idea it was to have a presence in areas like staff restaurants. It also demonstrated that people are still keen on reading for pleasure and welcome us encouraging them to do so.



This chart shows the book issues for the specific genres over the last 3 years. We had a 71% increase in fiction issues compared with the year before.

By having a stand in Charters we were able to reach staff who do not normally use the library. We had our stand at the same time every Wednesday and a group of office workers based behind Charters became regular customers. When the Challenge ended they wanted to keep borrowing fiction books from the library but told us they didn't have the time to come across in person. We asked if they would like the library to come to them with a box of fiction that was issued to their office. They thought this was a good idea and we are still taking books to them every few months. This 'Pop-Up' library idea works well and we have also introduced it into clinical areas.

What could have gone better?

From the feedback people gave us we found that there were some amendments that we would need to make to the design of the leaflet. People said it was too small and that they needed more room to write their reviews. They also said that the colour of the inside of the booklet made it difficult to see where to write. Next time we are going to change the size, and the colour, of the leaflet.

Only a few people used the online form to fill out their reviews -this was something new we trialled this year. Next time we are going to try to promote this more - especially with office staff - to see if this has more of an effect. Most people who completed the survey heard

about the challenge through the libraries rather than through social media or the library website. This could be due to the fact that not many staff can access social media at work or may not have time to access a computer.

We promoted the reading journey weekly in our canteens which helped us to attract new users. At first people were suspicious that we were trying to 'sell' something but soon got used to us being there each week! We found that this worked well to begin with but tailed off towards the end of the Challenge -a few users came to swap books each week but towards the end we weren't attracting new people to sign up. This could be due to the Challenge running during the school holidays so fewer staff were around. And we couldn't continue promoting the challenge on our Chorley site for the whole time it was running due to the canteen closing.

What did we learn for next year?

We advertised the Summer Reading Challenge in several places this year. Apart from the usual advertising in both libraries we also advertised on social media, in staff toilets and we also had stands in the Trust canteens. From the survey responses we received it was no surprise that the libraries were the main places that people heard about the challenge. However it was nice that we captured people in the canteen at Preston and also via the toilet-door posters! Next year we would like to expand the toilet-door posters to include those in staff areas on the wards - we would have a captive audience!

It was disappointing that more people didn't use the online form. This was possibly because we didn't promote it enough so next year we will take the iPad/laptop with us to the canteen to show people, rather than just talking about it.

We will take the feedback about the design of the book review form and amend this to include more space to write the reviews and also include a space for the book title. We also included a QR code which linked to the webpage but we don't think this was used or necessary as the library webpage address was included so we won't include this next year.

By The Operational Team @ Lancashire Teaching Hospitals:

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A Reading Challenge

for an NHS Library to help promote positive wellbeing and reading for leisure

Public libraries often run reading challenges, particularly for children. Many NHS libraries have small fiction collections but people sometimes struggle to find the time to look at them and many people don't read for pleasure at all. We think they're missing out!

The solution?

Apart from making it mandatory for all NHS staff to read a book as part of their roles, health librarians can follow the example of public libraries and set a small reading challenge for the staff and students of the trust.

Some may ask why NHS libraries should run a reading challenge at all. Surely the doctors and nurses are too busy? But as NHS librarians we should be providing services for everyone in the Trust, including people in non-clinical roles so we could equally ask ourselves how relevant are we to this group of people?

The answer, if non-clinical members of staff do not use the library, or are not even aware of its existence; then not very relevant!

At UHMBT Library we decided:

- a) We wanted to do a reading challenge for the staff at University Hospitals of Morecambe Bay Trust (UHMBT)
- b) The reading challenge should be linked to the FlourishAtWork campaign (launched at UHMBT in 2016)
- c) We wanted to do something a little different...



As luck would have it I researched adult reading choices for my dissertation, and I had put together some basic ideas for adult reading challenges. As a result UHMBT Library Service's *Mystery Read* was born. The project was linked to health and wellbeing and also to encourage NHS staff and students to take some time out to read and ultimately reap the health benefits of reading.

The idea is simple. We choose books for people to read, wrap them in brown paper and give them to our readers. When we advertised the *Mystery Read* we made it clear that the books we were giving out were not going to be long, doorstops such as *War & Peace*! We chose shorter titles, usually around or fewer than 200 pages, from as wide a range of genres as possible and gave people the option of titles from our quick-reads collection.

The aim of the challenge was to read six books in (hopefully) six months. We chose the first three titles but people could then choose the next three for themselves. However, most people enjoyed the mystery element so much they asked us to choose the last three books for them as well. Many of the participants were based in non-clinical roles; although some clinical staff did participate and 52 people took part altogether!

As a result, as many of the *Mystery Read* participants have stated, readers end up with a book they "would not normally have read." Some people have said the challenge has helped them with stress and they are now reading for leisure. This was great to hear as it means that people were willing to try new titles and were not only reading them, but enjoying them as well. Many were returning to the world of reading for leisure after an absence.

Overall people really liked taking part in the *Mystery Read*. Most found the

"Thank you so much...have really enjoyed reading new authors that I wouldn't normally have chosen myself."

"Yes and thank you so much – I didn't read all of them but those I did – I never would have picked – but I truly enjoyed them and it has changed my reading habits, and enriched my stressful life!"

"I just wanted to say that I really enjoyed doing the mystery read.....
If ever you do another onesign me up!!
Thank you very much"

"Thank you so so much for the mystery read challenge. I have really enjoyed reading new authors who I wouldn't normally choose, in fact I enjoyed one book so much I've gone on to purchase 3 other books from the same author!
Looking forward to a new event in the summer!"

"I have thoroughly enjoyed the mystery reading scheme and most of loved the books sent to me.

I have completed my 6 books but since then have gone to the Kendal library and took out a couple of books. Fingers crossed this new behaviour will continue.

Thanks so much for organising such a simple and yet effective scheme."

mystery element of the challenge to be the reason for taking part, getting excited about what book they would end up with when they collected their Mystery Read and enjoying the hidden element of the prizes which were not publicised during the promotion of the reading challenge. From the people who gave us feedback, 90% would not only take part again, but would recommend the Mystery Read to friends and colleagues. However we have decided on a few alterations for 2018; including reducing the number

of books to 4 and having a 'Bookie Dip' bin to make it easier for people to choose their Mystery Read when we are closed.

With such an overall positive response, the Mystery Read will return to UHMBT Library Services in May 2018.

Kerry Booth

ASSISTANT LIBRARIAN
UNIVERSITY HOSPITALS OF
MORECAMBE BAY FOUNDATION TRUST



Building a team to help the public

How NHS and public librarians work together to keep everybody well informed

The Health Literacy Skills and Partnership Working for Public and Health Librarians event was held on Friday 26th January at Oldham Library and Lifelong Learning Centre.

CILIP's Public and Mobile Libraries Group (PMLG) and Health Libraries Group (HLG) organised and ran the event which demonstrated the best ways of finding and sharing health information. It also looked at ways librarians from different sectors could work together. Jane Roberts and Caroline Timothy went to the event and their reflections on the day are presented below. Caroline looks at the morning sessions and Jane at the afternoon discussions.

Following training sessions with my colleague Emma last year when we trained librarians in local public libraries on health information for the public, I was really interested in attending this event to see how other librarians are working with public libraries. The first talk of the day was from Deena Maggs from the King's Fund Enquiry Service. Deena discussed the resources that they use at the King's Fund to answer questions from patients and the public and the types of organisations that they might signpost enquirers to. We learnt that patients and members of the public are often worried about how to navigate the health and care system. This is something that we probably don't think about too much as we work in the NHS so feel we know a good deal about the system, but obviously it is worth bearing in mind. Deena said their library is a publicly accessible health management library – the only one in the UK. The main area they cover is grey literature which is freely available on their website.

People sometimes ask us to find information about what is happening at other Trusts. Deena suggested that for this type of enquiry you could always make a Freedom of Information request to get the data. I had not really considered this before so it was a useful piece of information to take away from the day. Deena also pointed out a number of useful sites to use, including the Full Fact website, the UK's independent fact checking charity (<https://fullfact.org/>). One aspect of this session that I particularly enjoyed was when we were asked to get into groups and given a real example of an enquiry the King's Fund service has received in the past. Deena asked us to decide which resources we would use to find

the necessary information. It was good to hear what others had to say and to come up with some resources myself and we also looked at other organisations we could point people in the direction of if they could not get all the data from the resources.

After the morning break, Rachel Gledhill, a Knowledge & Evidence Specialist from North of England, Public Health England, presented a session on Health Literacy: How to find good health information online and assess quality. During this session we gained hands-on experience of useful websites for enquiry work concerning health information. Two of the sites mentioned were NHS England's Shared Decision Making - www.england.nhs.uk/rightcare/shared-decision-making/ - and Discern Online - www.discern.org.uk/. Discern online is a questionnaire providing users with a way of assessing the quality of written information on treatment choices for a health problem.

The afternoon session began with two presentations from Dan Livesey, Library and Knowledge Service Manager at Greater Manchester Mental Health NHS Foundation Trust. Dan's first presentation discussed the work of the Knowledge for Healthcare (K4H) Patient and Public Information Task and Finish Group. The group have produced a toolkit which includes guidance and an ideas bank on how to support patient and public information provision. He also gave examples of public and health libraries working together to improve people's health literacy including building local health information networks and joint training sessions for public and health library staff.

Dan's second presentation looked at the importance of health literacy and the role libraries can play in promoting and providing access to high quality, easy to understand health information. He went on to describe the work done by the Trust's Recovery Academy which provides a range of free educational courses and resources for people with mental health and substance misuse problems, their families and carers, as well as health care professionals. The library plays an integral part in the programme providing internet access to all at the Recovery Academy and offers support to tutors with reading lists and materials. The library staff have also facilitated shared reading group sessions and helped with the production of health information leaflets which conform to NHS England's The Information Standard.



The final session of the day consisted of several short presentations about 'The Health Offer in Public Libraries'. Julie Oldham from Bolton Library and Museum Services opened the session with a presentation outlining the role public libraries play in promoting health and wellbeing. This includes providing a trusted community space; assisted digital access and signposting to health information. Julie also highlighted the link between reading as a self-help and health-and-well-being tool. The rest of the presentation focused on the Reading Well scheme, a national campaign delivered by The Reading Agency in partnership with the Society of Chief Librarians and supported by a wide range of professional health bodies including Public Health England and NHS England. The scheme promotes evidence based reading to help people understand and manage their health better. Several campaigns, under the Reading Well banner, have been launched targeting specific health conditions:

- Adult common mental health conditions including anxiety, depression, panic and stress
- Dementia list for people with dementia, carers and people with memory problems
- Reading Well Shelf Help for young people, targeting 13-18 year olds
- Reading Well for long term conditions

Further projects mentioned in Julie's presentation include 'Reading Friends' a scheme designed to reduce loneliness in vulnerable older adults via social reading activities and the Engaging Libraries project. The project is a programme for public libraries across the UK and Ireland that want to pilot creative and imaginative public engagement projects on health and wellbeing, funded by The Wellcome Trust and Carnegie UK Trust. The remainder of the final session consisted of a series of presentations on various projects in the North West:

- Empathy Day- St Helen's Public Libraries: A partnership between several public libraries throughout England and Empathy Lab (a not for profit organisation founded in 2014) seeking to engage local children and their families in identifying issues of concern within their communities. A series of activities are currently being planned for Empathy Day which takes place on the 12th June 2018.
- Comics and Cosplay- Oldham Public Libraries, Victoria Varley and Kate Smyth: Oldham public library hosted a comic con event in 2017 as a way of engaging young people through the arts to explore issues around mental health. The event was supported by a local artists and comic enthusiasts in the community and attracted over 3000 visitors. There are plans to run the event again in 2018.
- The travelling happiness bar- Bolton Public Libraries: An interactive travelling exhibit designed to engage and challenge people to reflect on what they mean by wellbeing. Library staff or 'bartenders' where trained in speaking to the public on matters around health and wellbeing and actively encouraged participation in community activities such as keeping active, volunteering and art workshops.
- Reading Friends test project- Oldham Public Libraries: The project currently has 18 volunteers and 30 reading partners who attend sessions in Oldham. There are two groups who meet on a monthly basis (one for a group of residents in private housing care, the other for people with dementia and their carers) and activities are facilitated by volunteers. Monthly sessions are linked to a theme which will cover different approaches to reading. This includes activities such as cookery demonstrations, gardening, art and craft, listening to guest speakers and watching dementia-friendly film screenings.

Continued...

Building a team to help the public

...continued

Reflections and next steps

Caroline

The day gave me the opportunity to gain the perspective not only of professionals in my own field of health librarianship (the NHS), but also of those in public libraries, public health and a large organisation like the King's Fund. I did not know about the Universal Health Offer for public libraries before attending the event. The Health Offer is one of six from the Society of Chief Librarians and partners. The six offers can be found at <http://goscl.com/universal-offers/>

Since returning to work my colleague and I have contacted our local public libraries again to offer further training to library staff and this time we are hoping to train some members of the public too.



Jane

I found the day to be very useful and engaging. It gave me a better understanding of how involved our colleagues working in public libraries are in promoting and supporting health and wellbeing within their local communities. It was inspiring listening to projects-such as the Reading Friends pilot and the impact it is having on the lives of vulnerable and isolated older adults.

I will be looking at the K4H Patient and Public Information toolkit for ideas on how the library service at Pennine Acute can support the provision of high quality healthcare information to patients.

I will also explore how we can promote our wellbeing collection to staff more effectively.

All presentations are available on the CILIP PMLG website-
<https://www.cilip.org.uk/events/EventDetails.aspx?id=1050233&group=201310>



JANE ROBERTS LIBRARY & INFORMATION SPECIALIST,
PENNINE ACUTE HOSPITALS NHS TRUST

CAROLINE TIMOTHY INFORMATION SPECIALIST,
WARRINGTON & HALTON HOSPITALS
NHS FOUNDATION TRUST

Many happy returns

THE NATIONAL HEALTH SERVICE IS TURNING 70 ON 5 JULY 2018

How Liverpool Medical Institution could help you with your plans to celebrate

With the 70th anniversary of the founding of the National Health Service (NHS) rapidly approaching, I know that many of you are planning a variety of events and displays to commemorate this special date.

I would like to take this opportunity to mention the library at Liverpool Medical Institution (LMI) as it is one of the oldest medical libraries in the United Kingdom. It dates back to 1779 and holds collections of books otherwise not seen outside London.

The collections also include medical instruments and an archive holding information on some Liverpool doctors.

If you are planning a 'Then and Now' type display, or want to know more about medicine before the NHS, perhaps a visit to LMI to see how we can support you is an idea?

You can search our online library catalogue [here](http://lmi.heritage4.com/)

<http://lmi.heritage4.com/> to see if we have any books you would be interested in looking at.

Or perhaps you would like to arrange to call over to see the library and some of the historic, or not so old, instruments? Or would your organisation like to hold a meeting in

the 1837 Lecture Theatre or Council Room? (charges apply). I would be delighted to see you to discuss how we can help.

If you are thinking of a medical timeline, or a timeline of medical 'firsts' connected to Liverpool, then we

Liverpool is well known for its number of medical 'firsts' and pioneering medicine and surgery. We have some unusual items including a device to find something inside a person called a foreign body locating screen; coin catchers; and instructions from approximately 1844 on how to amputate a leg. We even have an original amputation kit from the time so that you can see the actual instruments depicted.

For those of you who are much more hands-on we have put together a Students' Toy Box of instruments that can be handled and examined. Obviously they aren't toys! But the medical and nursing students who have used them have such a great time, we are sticking with the name! It is obvious what some of the items are – forceps for example – but what type of forceps? That is the question. Luckily we do include details of what the items are so that you know all the answers. You could use these for a quiz, or to demonstrate how they work. The choice is yours. We do not include anything that may harm or hurt students, but we do ask that they take care when handling these items.



can certainly help you. Our book collections date to 1532; with some beautiful anatomical prints from the 18th and 19th centuries that are works of art. See how medical illustrations have developed over the centuries to turn into today's textbooks.

For more information, or to arrange to come and see us, please contact me on 0151 709 9125

or email adrienne.myers@lmi.org.uk
I look forward to hearing from you.

ADRIENNE MYERS
LIVERPOOL MEDICAL INSTITUTE

THE LAND OF GEEK

BUILDING YOUR WEBSITE WITH LIBGUIDES

This column takes you through the experience of building a website with LibGuides from Springshare

[<https://www.springshare.com/libguides>]

You will recognise LibGuides from the page layout – typically tabbed pages, usually with a Librarian’s profile. LibGuides is popular in higher education and is now gaining ground in the healthcare sector. The layout and styling are built with libraries in mind. You can add content with minimal expertise using the default presentation. However, with a little knowledge of HTML, you can change and reconfigure LibGuides’ look and feel to generate unique(ish) looking websites. So this column is the “lived experience” of one librarian’s attempt to build a website.

A little knowledge of HTML

This phrase comes up a lot in the training videos and help guides. A *little knowledge* is a bit of an understatement. To be useful you need to be able to read HTML script, identify key components of HTML tags and the basic structure of a webpage. To be able to edit the basic building blocks of LibGuides – the templates that give it the look and feel you want – you will need to be able to identify and use the keywords that shape the behaviour of LibGuides pages. For more far-reaching changes skills in Bootstrap and editing CSS scripts are essential. Just for the record my skills extended to editing templates not CSS scripts. That is a work in progress. For all this you will find w3schools a useful reference, tutorial and aide-mémoire for those pesky tag attributes you keep forgetting.

Other things you will need

The danger of messing with templates is that, well, it can get messy. LibGuides gives you basic default templates to work with so if things really go wrong you can reinstate it and start again. However, with careful version control when things go wrong, as they will, you can revert to the previous version. To do this you should have a good HTML editor to edit and store template scripts. These can be pasted into the LibGuides to be tested, and cut and pasted back into your HTML editor to be modified. You may have seen the problem coming, but to load an HTML editor onto your work computer the co-operation of IT Services is required. Failing that you can use a web-based tool like HTMLG. It’s free to use but you need to subscribe to get the good stuff. A search of Google will find others.

Even more things you might need

The list of things you need is probably endless. Money to get some professional design help is always useful. Failing that you can lash up something passable with free web tools. Two things I have needed so far are a banner top to head each page and buttons that I have coded into the template. There are lots of web tools to do this. Ones that I found and worked are Bannersnack – the freemium version leaves a watermark though – and for buttons Da Button Factory.

Where to start?

This is the issue I had with the *a little knowledge of HTML* thing. I have this but to me the templates looked pretty scary. The way I overcame this was to start not with the instructional pages and online manual but with the videos that show you how to make basic changes like adding buttons or rearranging the page layouts. If you see what they did and work through doing the same changes on your own LibGuides site you gain the knowledge and confidence to do your own thing. It helps as well in reading the Template scripts, columns and rows etc.

You will need a notebook

A lot of the work on LibGuides is done through menus. Which is fine. After a few weeks you get the hang of where things are and it seems easy. Things do get lost through. I spent a happy few hours hunting down the menu to set the text colour and background colour of tabs and text boxes. Just when I was beginning to doubt my own sanity it popped up on a little used tab. The answer is to make a note of where useful things are in a computer side notebook. Its old fashioned but it works.

LibGuides help you plan

I am not one for planning, more of a hope-and-poke website builder, but you do need a basic plan of what you are aiming at. LibGuides is good in that respect. It builds in some parameters to help you structure your content. Subjects, for example, created at the top level help you to group subsequent content together that have the same subject tags. It’s good to list the subjects you plan to include as an early task and add them into the subjects list. You can always change it later. Guides can be in types, for example: course guides, subject guides, topic guides and so on. That provides another organising point for your material. The other building blocks are the excellent A-Z database list, profile pages, forms and surveys which you can build separately and incorporate into LibGuides using widgets. On top all that I added generic



buttons on each page to group content into four service areas as my contribution to planning.

Graphics and all that

LibGuides has two ways of managing graphics. The first is an Icon Manager where you can load your own files and link to from your guides and other pages. A quick search of Google should find you copyright free icons you can use for common uses, for example a padlock for *Password Required*. The other is an Images Manager. I have to admit this is an area where I need more work. Apart from the issues of copyright there are issues of scaling, positioning and resizing – that moment where you add a small image to illustrate a point and it takes over the whole screen. Maybe that will be a topic of another Land of Geek.

A work in progress ...

Links

Bootstrap <https://getbootstrap.com>

w3schools <https://www.w3schools.com>

HTMLG <https://htmlg.com>

Bannersnack <https://www.bannersnack.com>

Da Button Factory <https://dabuttonfactory.com>

Matt Holland

NWAS LKS LIBRARIAN.

NWAS LKS, SUPPORTED BY HCLU NORTH.



SO WHAT DO YOU DO FOR A LIVING?

The answer, for me, depends on who is asking.

In my current role I am an Information Specialist (NOT a librarian according to my boss). I work in a university, in the Faculty of Health and Wellbeing, as a research support person providing literature searches, user education, article retrieval, and according to some colleagues I am The Oracle Who Knows Everything (i.e.: I read the intranet notices).

I do not currently work in or for a library service, although I do work closely with my library colleagues. I have co-hosted some teaching sessions, sat on interview panels for library staff, and sat in on some meetings.

I am currently (as far as I know) the only Information Specialist in the university, but I suspect that may change in the future. I concentrate on helping my research colleagues and the postgraduate students in my faculty, while the library staff concentrate on the undergraduates.

The work is interesting, and I get to see what happens to the information I supply as I am sometimes involved in the systematic reviews as part of the project team. I have been told my name will end up on the resulting published papers. It is also a challenge to be involved with health research, knowing that the results could change policies and treatments in the NHS for the good of the patients and the staff. As a job it ticks all my boxes.

I did not start out in such an interesting position, I started life as library assistant in London many moons ago and have worked my way up to qualified librarian via the academic and health (and many other) sectors. My last NHS job was at University Hospitals of Morecambe Bay, from where I moved to the University of Central Lancashire (UCLan). My role is brand new to me and to the Faculty, and so far I am extremely busy with my NHS library contacts coming in very useful. I am also making contacts in the

Information Specialist world – the overlap is large, but I am learning it is a distinct and different world.

For various reasons throughout my career I have changed jobs and sectors according to what was available and my own personal circumstances. I have learned that change does not have to be scary and can be exhilarating and exciting. I have had jobs that I never expected to get and the experience has been surprising useful. As an experienced Law Librarian I know which are the best legal databases, and one review I am involved with used this knowledge, much to the amazement of my boss who had no idea how to do the literature searches for that review. As a Health Librarian, I am teaching my colleagues the best ways of using the various databases they need to access – including the more specialist resources such as Physiotherapy Evidence Database(PEDro).

The research world is growing and even after Brexit we will have international research funding in our department. The amount of work I have is growing, and I suspect there will be a need in the not-too-distant future for more Information Specialists in my department. As a profession, we have transferable skills and in my department, the academics realise this and are keen to use those skills. Moving from the NHS to academia is not such a big jump, and the pay is better too!

So, What do I do for a living? I am an Information Specialist embedded in a medical research team. I sit in an office at a computer. The only books I handle are the 10 or 12 reference books I have bought for myself. What am I? I am a Librarian, changing the world for the better, and proud of it.

Janet Reed

INFORMATION SPECIALIST
UNIVERSITY OF CENTRAL LANCASHIRE

A CULTURE OF CARING:

FROM SWEET WORDS TO HELPING HANDS

On the 14th February a couple of members of the Knowledge & Evidence Service at Warrington & Halton Hospitals NHS Foundation Trust stepped away from their desks for twenty minutes and dashed around visiting various hospital departments bearing 'Sweet Words'.

The 'Sweet Words' were not a new idea: made up of a classic poem and a sweet tied up into a parcel, we first handed them out in 2017 around World Book Night but they were still met with delighted smiles from all the staff we visited.

We visited non-clinical areas as these are the areas that often do not get visited by other promotions and activities, handing out "sweet words" in:

- Bereavement Office
- Pharmacy
- The Charity Office
- Execs
- Ophthalmology reception & clinic
- The post room
- Transformation
- Communications
- NHS Mail promotion (IT)



Sharing sweet words with the Post Room

and catching more staff on the corridors until we ran out of supplies. Every person who we spoke to was delighted to be given something and the positivity of the activity itself helped people feel better making them feel noticed and appreciated.

So why did we do it? We do, of course, run several activities that promote reading for pleasure and that support staff wellbeing and care. Visiting little-seen departments also has the added benefit of raising the profile of the service as a whole but, aside from those benefits: we wanted to support our colleagues and give them something to brighten their day.

As everyone knows, although winter is always a bad time for hospitals, this year has been extremely hard on both staff and patients. The pressure has been relentless to find beds, to keep patients comfortable, to keep everything running- and these

pressures are still going on as we still see 'Full Capacity' alerts sent round and 'non-urgent' meetings cancelled. Earlier in the month all members of the Knowledge & Evidence Service team signed up to the trust's 'Helping Hands' scheme, in which non-



Handing out sweet words to the bereavement office staff

clinical staff were asked to donate a portion of their time helping out on the wards – from fetching drinks to patients waiting to be discharged, to handing out breakfast on busy wards – we all pitched in. It was an interesting experience, though certainly not an easy one!

Although all the work we do in our services is, ultimately, for patient care it is important I think for all of us to see and experience (as much as is possible) exactly what our clinical and other support colleagues are doing. None of us work in silos set apart from one another, we are a part of the whole organisation and in these times of high pressure, we all want to help each other and also do what we can to motivate and show appreciation to one another.

Both the Sweet Words and Helping Hands activities bring benefits to the service, of course, in terms of communicating and networking with staff in the organisation, but should we not do these kinds of things regardless as part of a compassionate, supporting workforce? I think that in itself has a value and helps us in the work we do.

Helen Kiely

KNOWLEDGE SERVICES ASSISTANT,
WARRINGTON & HALTON NHS
FOUNDATION TRUST

Teaching Knowledge Junior

Q What have Hey Duggee, our dishwasher, Jeeves and Wooster and a sewage farm got in common?

A Answer – I used them all to teach knowledge management to F1 doctors.

Knowledge Management can seem at best dull and at worst impenetrable but when you start to think about it and strip it down to its bare essentials it's about using common sense, organisation and being methodical to make life easy for yourself. For junior doctors this means reducing the time spent trying to find forms, look up telephone numbers and work out how the printers work and creating as much time as possible to look after patients.

I try and make this concept clearer by using a few examples from my home life. Anyone who has got pre-school children will probably be familiar with Hey Duggee. Quite simply it's the best children's TV programme ever made (with the BAFTAs to prove it) with plenty of jokes for the adults and lots of entertainment for the kiddies. Every episode Duggee leads the Squirrels (Norrie, Betty, Roly, Happy and Tag) through an adventure and they collect a badge. My son – who is nearly three – loves it and will often ask for a particular episode such as 'The Cardboard Box badge,' or 'The Castle badge.' This can create problems as we now have 77 episodes of Hey Duggee stored on our Humax recorder. To stop Thomas having a meltdown while we scrolled up and down the list of episodes I compiled a list, matched to the dates recorded on the Humax display – simple knowledge management, knowing where something is and how to find it. Storing knowledge in an accessible place is also important as we found


out to our cost recently when our dishwasher malfunctioned. We should have put the instructions in a safe place but had we hell. This meant lots of washing up for yours truly (and plenty of 5live football which was good) until we located a PDF of the instructions on the internet. Simple knowledge management again.

As in life perfection is rarely achieved in television but the combination of Stephen Fry, Hugh Laurie and PG Wodehouse came fairly close. We have a DVD box set of Jeeves and Wooster but

we don't watch it as often as we'd like because we can never remember which episode we've got up to. (We've seen them all but we rely on early-onset memory loss to keep them fresh if we watch them in a cycle). Insertion of a DVD is usually followed ten minutes later by 'haven't we seen this one?' which can be quite frustrating. Good knowledge management would be having a Post-It on the outside of the DVD box to keep a track of where we've got to – just like junior doctors passing on knowledge when their successor takes over in the next rotation in fact.



Management to Doctors



During the knowledge-management course I ask the doctors to think back to their first day as an F1. What do they know now that they wish they'd known then and what do they wish they'd been told that they weren't?

I ask them to think about non-medical information such as telephone numbers, who to speak to about a certain problem etc. Another exercise is to ask them what are good and bad ways of sharing knowledge within an organisation. WhatsApp seems to be the most popular one at present but nobody is a big fan of email.

Knowledge Management can involve:

- Connecting people to people
- Connecting people to the evidence base
- Connecting people to best practice
- Helping people keep up-to-date
 - Sharing learning
 - Connecting people to corporate knowledge

This gives me the chance to talk about the library's Randomised Coffee Trials initiative, our evidence-search service and our current-awareness offer as well as telling them about quality-improvement websites such as The Academy of Fabulous NHS Stuff. I talk about the Communities of Practice at Pennine Acute and a final exercise asking them what changes they'd like to see to the Trust intranet can turn into a cross between a group-therapy session, a parliamentary select committee and the Salem witch trials.

And the sewage farm? Well, quite simply knowledge management is about organisations – and individuals – getting their sh-t together!

John Gale

MID-CHESHIRE NHS FOUNDATION TRUST

DISCOVER THE LIHNNK UP

INDEX

You know that sinking feeling you get when you pick up a textbook only to find that there is no index in the back? That has to be one of the most frustrating things ever.

Well, I'm writing this to spread the good news that LIHNNK-Up has an index, several indices in fact! There is an author index, an article title and picture index, a subject index, and finally a list of subject headings, all available via the LIHNN website

<http://www.lihnn.nhs.uk/index.php/lihnnhome/lihnnk-up/read-the-newsletter>

So why would you use one of the LIHNNKup indices? Well, you can...

... look up your own name and see all the articles you have published in LIHNNKup

... find photos of yourself or colleagues

... track down that article where you half remember the title

... discover articles on a specific subject, say for example, you want to develop your teaching skills, well maybe somebody else has written about that and has got tips for you?

The indices run right from the first issue in 2001 to the current issue. Over the years, several people from the LIHNN network have worked on this. Currently, I share the indexing with Angela Page (Wrightington, Wigan and Leigh NHS Foundation Trust), as we both have an interest in indexing;

before us, Kathy Turtle, Shân Annis and Gil Young all worked hard to produce these indices.

Feedback is always welcome, and if you spot any errors, please do let us know, we're only human! You can get in touch by contacting the newsletter editorial board

<http://www.lihnn.nhs.uk/index.php/lihnnhome/lihnn-groups/newsletter-editorial-board>

So, next time you are collating your CPD and are puzzling over the question of when exactly you published that article in LIHNNK Up, go to the index – problem solved!

Eva Thackeray

ASSISTANT CLINICAL LIBRARIAN, LANCASHIRE
TEACHING HOSPITALS NHS FOUNDATION TRUST



What's Worst for Your Health?

Being old, female, black or gay?

Intersectionality and diagnostic overshadowing. Big, intimidating words, right?

Even as I'm typing, my computer is indicating that it doesn't know what intersectionality means by displaying an angry red line underneath the word. Despite their relatively low profile, these are important concepts that health practitioners need to be aware of if we value equality and wish to move towards a more egalitarian society. I am happy to report that my computer at least knows what equality and egalitarianism are. Phew!

On 29th January 2018, [Leeds Public Health Resource Centre](https://www.leeds.gov.uk/pages/phrc-default.aspx) (<https://www.leeds.gov.uk/pages/phrc-default.aspx>) held an Equality, Inclusion & Diversity event for anyone with a responsibility for or interest in promoting health in the city. Guest speakers from two different local organisations attended, each supporting & representing individuals and groups who are often excluded and suffer many inequalities. Jude Woods from Yorkshire [MESMAC](https://www.mesmac.co.uk) (<https://www.mesmac.co.uk>) shared some common experiences from LGBT+ communities when accessing healthcare – for example, many Lesbian women report that they are not offered cervical screening (<http://www.bbc.co.uk/news/health-39230807>) despite the ability of the HPV virus (which causes most cervical cancers) to be transmitted through lesbian sex.

Pria Bhabra and Sam Powell from [TouchStone's Migrant Access Project](https://www.touchstonesupport.org.uk/services/migrant-access-project-plus-map/) (<https://www.touchstonesupport.org.uk/services/migrant-access-project-plus-map/>) explained how language barriers, difficulties understanding the processes for accessing UK services, and fears about being deported prevent many refugees, migrants and asylum seekers from seeking or obtaining health care.

Those who were lucky enough to be at this session learned that some people suffer from **multiple disadvantages** when it comes to being included and offered the same standard of service and access to opportunities as those without any disadvantages. To give a basic example, if you're a black, female, bi-sexual, working-class immigrant living in the UK then it's possible you may encounter more discrimination and disadvantage than someone who does not have

those characteristics. Intersectionality is about recognising how social categories (such as race, sexuality, age, gender and class) overlap and interconnect and can result in a complicated maelstrom of discrimination and inequality for those who fall into more than one category. If we don't, won't or can't recognise where the highest degree of inequality exists in our society then we can never hope to do anything about it.

In terms of health care, we learned that sometimes health professionals presume that symptoms are a result of another known condition or characteristic and that certain advice or treatment options won't be offered or discussed. For example, a person with learning difficulties may not be given the same level of advice as someone without, on the assumption that they wouldn't understand or be able to implement it. This is a simple example of **diagnostic overshadowing**, where one characteristic or existing condition affects how new issues are assessed and treated.

There really is no substitute for hearing from passionate, knowledgeable speakers on the issues they care about and Leeds PHRC was delighted to host this event and provide an opportunity for our partners and customers to attend, learn and be inspired by the work of Mesmac and Touchstone. Feedback from the session was overwhelmingly positive and there are now more health professionals across Leeds who are better able to identify where diagnostic overshadowing may be at play, and to offer additional support to people with multiple disadvantages that intersect. The Resource Centre has since updated stock to ensure we have books and resources on the issues and topics raised, to enable customers to further educate themselves if they wish to. The Public Health team in Leeds is part of the City Council and our vision for Leeds is that people with the most disadvantages improve their health the fastest. Educating and empowering the Leeds health workforce at events like this, to help them recognise and challenge inequality when they experience it, is one way in which Leeds PHRC is supporting the City to achieve its vision.

Rebecca Cumberworth

LEEDS PUBLIC HEALTH RESOURCE CENTRE

Editor's Column

How you can contribute to the Newsletter

All members of LIHNN are welcome to contribute to LIHNNK Up. We particularly encourage contributions from para-professional staff and anyone who has not previously written for publication. Members of the Editorial Board would be pleased to "mentor" new writers and provide advice on what makes a good readable contribution.

What could you write about?

Really it is up to you as we are looking for topics of interest to health library staff. It could be:

- something new that you have used or your library has introduced
- an overview of a piece of software such as a social media tool
- lessons learned (good or bad) from doing something differently in the library
- good news that you want to share with LIHNN
- an account of events and courses attended. For conferences and courses please include what you found most valuable and what you will do differently from having attended the event or course.

Format of contributions and other "rules"

1. Please send your documents as Word (i.e. either .doc or .docx) files.
2. Photos and artwork should be submitted in JPG format. Please don't embed them in the Word documents. They should be submitted as separate files with a meaningful caption.
3. Don't forget your name, location, title of article and date of article.
4. Please give full details of events, courses and conferences attended. This should include:
 - The name of event and location
 - Date of event
 - Name of organising or sponsoring body
 - Details of how any support materials can be obtained e.g. website urls
 - Full references to any published reports, articles etc.
5. All acronyms should be written out in full for the first occasion they are used in the text.

PDF copies of back issues and indexes to the newsletter are available at:
<http://www.lihnn.nhs.uk/index.php/lihnn/lihnnk-up/read-the-newsletter>

Contributions should be submitted to:

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