by Health Libraries, For Health Libraries ISSUE 36 SUMMER 2011



As I write this editorial the coalition government is in listening mode, pausing the changes to the NHS in order to persuade the public and NHS staff that the reforms will be good for patient care.

At the same time many community-based staff are adjusting to their new homes within acute or mental health trusts - and a few to life in a community NHS trust. Against all of this is an economic backdrop and the need to find £20billion savings within the health service. Colleagues in higher education know that they face similar issues.

Unsurprising therefore that the message "business as usual" is more and more difficult to deliver and less and less believable. At the same time we have to find ways to "survive and thrive" - which is rapidly becoming my

We have a strong base from which to work:

- LIHNN is a robust network providing a supportive, welcoming and inclusive infrastructure for health sector librarians. LIHNN members have demonstrated their ability to work together and to innovate just look at the range of articles in this issue to prove the case.
- HCLU has nearly twelve years experience in supporting library services through significant change as well as a CPD programme that helps ensure library staff are up to speed, up to date and able to manage change.

- The concept of "evidence-based everything" is so well embedded in the healthcare system that every government paper emphasises the need for an evidence base.
- There are strong partnerships across library sectors and with emergent organisations such as AQuA
- We can face the unthinkable and try to work out the "what ifs..." - witness the recent time library managers spent thinking of practical steps to take if HCLU ceased to exist.

Without wishing to sound formulaic - we have to identify the opportunities that change presents:

- We have new organisations PCT clusters, GP Consortia and some new community trusts - all need the evidence base for patient care and decision making.
- We have trusts that, in the past, did not have their own, internal library service and the TCS process means that they have "inherited" a library service from a PCT.
- We need to take further advantage of the technologies - we are seeing more health libraries using RFID to free up staff time and also libraries moving to e-only for journals.
- We have to find more ways to share scarce resources – staff, funding and the information resources themselves.
- We need to continue developing our skills, our networks and our profiles.

Above all, in turbulent times, we need to keep our faith in the profession and our nerve!

David Stewart

DIRECTOR OF HEALTH LIBRARIES NORTH WEST

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manage their own data collection.

He left librarianship in 1979 to work at the University of Bradford, first as research assistant, then computer officer, in the development of the Universal Standard Book Code, leaving in 1984.

> Between then and 1989 he worked as a computer

programmer on a string of temporary jobs at Withington Hospital, Manchester; University of Bradford again; BLCMP in Birmingham (forerunner of Talis); and at the University of Manchester in the French Media Centre.

In 1989, after nearly a year's voluntary work in psychiatric care at All Saints Hospital, Birmingham and Withington Hospital, Manchester he chose nursing as a career. The experience was both eventful and enriching. He says his proudest moment was, as the only man amonast 19 female students, to be 'formally' made an Honorary Woman by the group - "The finest accolade a man can have," he said in his acceptance speech. Despite the rewarding experience, both clinically and personally, he found it hard to adjust to the patterns of shift work and left nursing in late 1990 to take up the post of Information Officer in health promotion at Bolton Health Authority. That job included managing the move of the whole department into new premises, an experience valuable for later use with libraries.

In December 1996, he at last (!) returned to librarianship when he took up post as Information Resources Manager based in

Bolton with Wigan and Bolton Health Authority, commissioned with setting up a new library service. It is during his time in the post that he joined the health librarians' network Norwesla, which later formed the merged network of Lihnn. He acknowledges that he gained much from the support and advice he got from its members. Around this time, he also became co-editor, with Kathy Turtle, of Lihnn's new quarterly publication Lihnnk Up. During this period, having no budget, he developed his own LMS (Diane). He also moved the new library over to Wigan, into the new headquarters of the Health Authority.

In 2002, the HA was disestablished and the library went into the new Ashton, Leigh and Wigan PCT. With this development came along community clinical services as library users, a library assistant (Teresa Couseins), another move to new premises and funding from HCLU for new furniture, shelving and facilities, all followed later by a library budget. Now renamed Knowledge Services Manager, he set up a Library Steering Group representing all main areas of the PCT, implemented a search skills training programme, began marketing through a range of librarybranded user guides, production of an animated, musical slide show for promotional purposes ("The library can speak for itself"), and was co-opted onto the Trust's Education and Training Group. Underway at last!

In 2005, the library moved again into a larger, brand-new PFI building and became part of the Learning and Development Department and, as he had planned, it had its own small but cosy training zone complete with five desktops and overhead projector. Teresa left the library for another post in the PCT and it was six months before another assistant was appointed (Tracy Mckay). During this period, the search skills training programme contents were mapped onto the KSF dimensions using the tool developed by the Lihnn Education

Many of you will know that David Ellis, Library Manager at Ashton, Leigh & Wigan Community **Healthcare NHS Trust has** retired from his post after working 14 years at mostly the same desk in a variety of organisations and work cultures normally only to be experienced through use of an H.G.Wells time machine (when he started out) or a Dr Who Tardis (when he finished).

David began his career in Librarianship in 1973 in the electricity supply industry as Reports Librarian based at the Central Electricity Research Laboratories in Leatherhead, Surrey. It was there that he developed an interest in the use of computers in library services and adapted the software that ran the nation's power stations to manage his large collection of technical reports, a package later adopted by the regional Scientific Services Departments to

Group, of which he was a member. This approach embedded the training into the PCT's overall education strategy and connected the training to individuals' PDPs. In January 2008, after the library was given Stage 2 Accreditation, the future was set to launch the planned outreach strategy.

In March 2008 however, he was suddenly made Trust e-learning lead with e-learning having priority over the library with the objectives of implementing, promoting and running the NW-VLE in theTrust. This was done by making the library the hub of e-learning and having the excellent assistance of Tracy on the helpdesk. The user guides developed were library-branded and styled to fit in with the existing suite of guides and he grabbed

the opportunity to attend an e-authoring course in order to develop in-house training modules as part of the outreach programme. He was required to present bi-monthly progress reports to the PCT's Knowledge Network Board. This was a busy time as he was already committed to the GM PEAR project designed to give the smaller libraries, such as his, 'off the shelf' e-services such as tailor-made current awareness services, their own website, etc. At the same time, he had decided to replace the Diane LMS (which could not satisfactorily be web-enabled) with a commercial product, Heritage being finally chosen. David stepped down as e-learning lead end of 2009 when VLE ceased to be used in the Trust when it adopted the NLMS.

Resumed work on the outreach programme however stopped dead with the seismic changes in the NHS in the summer/autumn of 2010. The library was moved (this time internally) for the fourth time and shrank to half its size in area and staff: the library assistant post was made redundant. A fifth library move was scheduled for 2011. Although David's position was secure, all things considered, he decided to relinquish his post and take retirement. But not from life. His active interests include writing (novels, short stories and poems), bacteriology, history, listening to music and mooching about. As Inky Shaeffer might say -"For heaven's sake! Put that library down and do something real!"

...The Life of Riley



Linda Riley, Knowledge & Libraries Manager at East Lancs Hospitals NHS Trust, retired on 14th January 2011, after many, many farewell events!

Linda began work in the NHS at Blackburn Royal Infirmary library in 1973 and must have liked it very much because she stayed for 37 years! Linda saw many changes throughout those years and always worked hard to develop the library service. The library at the Royal Blackburn Hospital is a tremendous legacy, and a testament to Linda's tireless efforts to take the service forwards in positive new directions.

I'm sure that many LIHNN colleagues throughout the region will join the staff from Blackburn in wishing her well in her new role as a lady of leisure.

by Clare Morton

DEPUTY LIBRARY SERVICES MANAGER ROYAL BLACKBURN HOSPITAL

Ode to Linda

Now is the time to call it a day, So sit yourself down, it's time to play, To open a bottle and have some red wine, And if John wants some, say "No it's mine!".

No more meetings and strategic planning, Just lunches with friends and caravanning. You can travel for free with John on a bus, And go to nice places (we wish it was us).

And when you're in Spain having fun, Drinking a brandy in the hot Spanish sun, Please think of us, the poor library staff, Who talk a lot and like a laugh.

And if you feel "I really miss it",
Just jump in the car and pay us a visit.
So good luck Linda, we wish you the best,
You've done your bit, now enjoy your rest

Margaret Webster

LIBRARY SERVICES OFFICER
ROYAL BLACKBURN HOSPITAL

1 into 2 will go!

MAKING A JOB-SHARE WORK

Early in December, library staff from Royal Bolton Hospital (RBH) and Trafford General Hospital (TGH) had a great Christmas night out at Puccini's in Swinton. So what? you might say, but it wouldn't have taken place if Jean and Paula, Library Managers from the respective Trusts, hadn't just completed their first year of job-sharing.

Has it all been easy and straight forward, no hitches, all sweetness and light? Well, remarkably so given the complexities and demands of Paula combining two jobs and Jean relinquishing total control of 'her library'. As Paula also manages the library service at Trafford, the working week is actually a working fortnight ie 2 days (RBH), 3 days (TGH) followed by 3 days (RBH) 2 days (TGH), with Jean doing the remaining days of the week at RBH when Paula isn't there. Throw in a joint working Wednesday once a month, when all those knotty problems that can't be covered by copious notes are thrashed out, and you have a practising job-share. In theory the joint days are also when strategic planning takes place, but in

practice great effort has to be made to stop the daily running of a busy library service taking over. A quiet room down the corridor for at least half the day usually helps, as does a lot of talking and give and take!

We tried to take some advice before embarking on the job-share - although there were few models to follow - and it will be no surprise to learn that the most important consideration was, and is, communication. Handover notes are duly written (Paula's are neatly typed, Jean's handwritten and sometimes difficult to decipher) so that any vital deadlines or important issues aren't missed. Division of the more routine duties proved relatively simple as each had their own areas of interest or expertise. Meetings almost always fall on the same days, so Paula gets to sample the delights of Workforce Development and Medical Education, while Jean enjoys Clinical Quality and Safety, and liaising with the Foundation Doctors!

For Paula the hardest aspect has been keeping two sets of procedures in her head (which has led to some work to try to bring the two services into line where possible) and also learning which pieces of information really need to be passed on so things don't fall between the cracks. For Jean it has undoubtedly been 'letting go' and appreciating things like a new poster appearing which is different to the old one she did, and just because Bolton does something 'that way' it isn't necessarily the only/best way. However, as she gets half a week off and has only one service to consider it has perhaps been easier for her to adjust.

There have been a number of benefits from the job-share. Two heads really are better than one and being able to consult and discuss issues is great. Cross fertilisation of ideas has led to the adoption of new practices at both sites and sometimes very quick inter-library loans! The integration has clearly been aided by the personalities of the job-sharers – very different people but both born under the sign of Virgo, leading to almost OCD when it comes to tidiness! Both have similar positive attitudes to customer service, which is at the heart of everything the library service does.

The staff at both sites have coped remarkably well. At Bolton, working with two managers has honed the diplomatic skills of the rest of the team to perfection and they just get on with running the service! There have been some moments of confusion, indecision and frustration, particularly on those two day weeks when it feels as if very little has been achieved. Generally though, two halves have probably made a better whole and once Paula gets her hat on the right head, it will be full steam ahead for year two!

Paula Elliott

LIBRARY MANAGER, ROYAL BOLTON HOSPITAL NHS FOUNDATION TRUST AND TRAFFORD HEALTHCARE NHS TRUST

Jean Williams

LIBRARY MANAGER, ROYAL BOLTON HOSPITAL NHS FOUNDATION TRUST

Training & Development Programme for 2011-12

Thank you to everyone who completed the recent training and development needs analysis. A total of 86 complete responses were received. The information from the survey will form the basis of the LIHNN/HCLU training and development programme for the coming 12 months.

Objectives

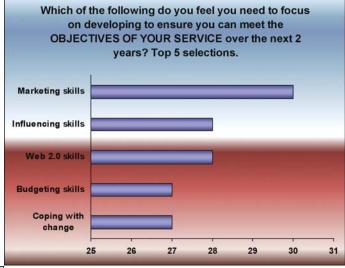
The main part of the questionnaire revolved around discovering what respondents viewed as the most important development needs. The two diagrams show the most popular answers in terms of personal development and meeting service objectives across all the bands.

When the results of the survey were broken by job title two of the most requested events by Library Assistants were enquiry desk skills and presentation skills. As a result of this two study days have been planned aimed at this group of staff which will

cover these topics.

Additional events will be added to the calendar in coming months. The Continuing Professional Group is also examining different ways of delivering training including e-learning and exchange of experience events.

but it is a part of most of our jobs and you will often be asked to do it at interview. The more you do it the better you will get at it. It doesn't have to be a big deal in the first instance. If you are going to a meeting resolve to





The March 2011 residential aimed to cover a number of the skills identified by managers as important for themselves and their services including leading, managing and coping with change. Forthcoming courses will include critical appraisal skills and marketing. As always these will be advertised using e-mail and booking will be through the LIHNN website.

Making the Most of Training and Development

Whilst HCLU and LHINN remain committed to providing relevant and challenging training opportunities the current climate may mean that events can sometimes be difficult to attend. Staff are encouraged to look for development

opportunities on a daily basis. An example of how this might work is shown in the extract below from a forthcoming book aimed at new professionals.

Scary is Good

"If you are frightened of something then find opportunities to do it. Many people say they do not like presenting speak out at the meeting. If someone is doing a training session or a presentation can you do the introduction or take questions at the end? The more you do it the easier it gets. It is also true that the scary things often turn out to be the most interesting and the ones that really provide us with opportunities to develop both personally and professionally."

Extract from forthcoming book: Ruddock, B. (ed.) (2012) New Professionals Handbook. Facet, London, UK

Conclusion

Thanks again to everyone who completed the survey. It will run again in early 2012 with the aim of planning the programme for 2012-13. In the meantime if anyone has any suggestions for events then please contact me on gil.young@nhs.net.

Gil Young

CPD & PARTNERSHIPS MANAGER HEALTH CARE LIBRARIES UNIT

Let's go FISHing...

The FISH (Finding Information to Support Healthcare) project was launched in 2009 by members of the Clinical Librarian Group to provide a supportive workshop environment for any library staff in the North West who undertake literature searches or want to develop their search skills.

FISH workshops are aimed at library assistants new to literature searching or librarians wishing to improve existing skills - anyone, in fact, who wants to develop and keep their literature searching skills alive! Workshops aren't run as a training session but are intended to facilitate discussion about a search scenario and the searching process. The project is based on a Search Skills Group from Thames Valley (now South Central), where librarians across the region meet to discuss a search topic and develop practical skills

Initially we wanted to invite library staff from all over the North West to our first 'FISHing' workshop, but we decided on a different approach for a number of reasons. Firstly, it is difficult for staff to be released for a short 1-2 hour workshop and secondly, different groups of staff may have different search needs. As a result, the workshops so far have been piloted after existing LIHNN meetings (Clinical Librarians Group and Primary Care Librarians Group).

Generally, workshops are tructured as follows:

- About 4 weeks prior to the workshop, the workshop facilitator creates a search question and publishes it on the FISH wiki.
- Workshop participants take the search question and perform the search in a couple of databases.

- Participants post their search terms on the FISH wiki and submit their top five most relevant or appropriate results, which are collated by the workshop facilitator.
- During the workshop a discussion about the search strategy and results takes place, hopefully exploring different approaches to undertaking the search (the art behind the science!), exchanging hints and sharing search tips.



The FISH wiki

In December 2009 and June 2010 we piloted workshops after Clinical Librarians Group meetings which overall were well received. Attendance at the workshops was good but this made it difficult for everyone to be involved in the discussions. The workshops also differed slightly from our intended model since many of the participants were experienced searchers. Feedback indicated that less experienced searchers may have found this environment intimidating. Even so, the discussion was extremely lively and the workshop evaluation indicated that most people benefited from an open discussion forum to discuss searching techniques.

In March 2010 a workshop was held as part of the Primary Care Librarians Group meeting and the search scenario was based on a real-life primary care question. Again the debate and discussion during the workshop was lively and informative. Some of the feedback indicated that searching

expertise within the group was variable and that this could be addressed by the facilitator providing more support in advance.

We hope to facilitate more workshops in the future and continue to provide peer support to those library staff involved in literature searching. If you have any questions or need advice about literature searching you can email the FISH support group at fishnw@lihnn.nhs.uk. All the content from the workshops has been published on the FISH wiki, so why not sign up today! If you would like to set up a local workshop you can contact Tracey Pratchett or Anne Webb for advice.

Read on for Victoria Kirk's case study about how she has adapted the FISH workshop model for the library team at Wirral ... and happy FISHing!

Tracey Pratchett CLINICAL LIBRARIAN

CLINICAL LIBRARIAN
UNIVERSITY HOSPITALS OF MORECAMBE BAY
NHS FOUNDATION TRUST
tracey.pratchett@mbht.nhs.uk

Anne Webb

LIBRARY OPERATIONS MANAGER
THE CHRISTIE NHS FOUNDATION TRUST
Anne, Webb@christie.nhs, uk

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Adapting FISH workshops for local use at Wirral: or

What happens when you get five librarians in a room to talk about literature searching?

My experience of the FISH workshops at the Clinical Librarians Group was hugely rewarding and it occurred to me that the rest of my team back at Wirral might also benefit. I decided to facilitate a series of literature searching workshops at Wirral tailored to our own local needs.

Aim

I hoped to utilise the literature searching workshops as a vehicle to develop our searching skills as a team and to increase the confidence of those in the team who only did occasional searches. Each of us had our preferred searching style and strategies. I hoped the workshops would be a good way to share our expertise, knowledge and 'favourite' resources with each other. Ultimately I hoped to develop a consistent way for us to search and present results to users.

Workshop content

I devised a series of introductory exercises for us each to complete in advance of the first workshop. The content of future subsequent workshops was informed by the discussions and themes that emerged.

For each workshop I selected a search scenario from a 'real life' search request that we'd dealt with. All the issues raised and our full discussions around these issues are transcribed and can be viewed on the FISH wiki.

Benefits

There are several benefits to taking the time to share experiences and knowledge around literature searching as a team.

We found that our workshops:

- Provided a forum for sharing our varied knowledge and experience
- Increased our confidence in approaching the search questions, selecting resources to search, and presenting results.
- Offered a safe environment to discuss all those concerns that open with, "Is this a stupid question...?"
- Allowed us to take time to learn and reflect on a skill which is a big part of the day job but rarely discussed.

Challenges

The workshops also presented some challenges:

- Preparation is required and the team should anticipate some 'homework'!
- It's often difficult to find time for workshops – we tried where possible to tag them on to the end of team meetings.
- Someone needs to lead the workshops to maintain momentum and facilitate discussion.
- Your personal searching style and existing assumptions about searching may be challenged!

Reflection and learning

The workshops encouraged us to reflect on the way we currently approach literature searching as a team:

Workshop content	Issues discussed
Local workshop 1: Introductory literature searching exercises	Should I know more about this search topic? What resources are there for management-related questions? When do I stop searching?
Local workshop 2: Basic literature searching exercises	What if I don't find any results?How should I present my results?
Local workshop 3: Advanced search techniques: using the thesaurus effectively	What are the advantages to using the thesaurus in addition to freetext searching? How do I explain the thesaurus to someone using it for the first time?

- We've each had different training (or no training at all!) and so we all search in different ways. There is huge variation in the way that we each prepare for a search and conduct it, even though we strive to deliver a consistent service.
- We all make assumptions about the searching process. Many of our assumptions were challenged during group discussions, for example, assuming that a thesaurus search will retrieve all articles, or assuming that we all always explode a thesaurus search.
- We've never sat down and discussed the basics of searching! We need further discussion about the best ways to search to ensure that we're being consistent with searching and presenting results as a team.

Each of us also had personal reflections on our learning from the workshops:

- "There isn't an 'off-the-peg' model of searching"
- "Previously I felt slightly embarrassed by my lack of clinical knowledge but I'm more comfortable with acknowledging my ignorance now (!)"
- "I will be more inclined to speak to the requester to obtain as much information as possible about the search question"
- "I'm able to draw upon the skills of my team colleagues more now"
- "We're now better placed to provide mutual support"

Next steps

We hope to continue the local series of workshops and explore in more detail the presentation and annotation of results, with a view to developing a local literature search protocol.

If you're up to the challenge and would like to do something similar in your own Trust, all the exercises that we used in the Wirral workshops and our discussions are shared on the FISH wiki at: http://fishnw.pbworks.com

Victoria Kirk

CLINICAL LIBRARIAN, WIRRAL UNIVERSITY
TEACHING HOSPITAL NHS FOUNDATION TRUST
Victoria, kirk@nhs.net

Scoping in Gulu, Uganda

19th - 26th November 2010

University Hospital of South Manchester NHS Foundation Trust (UHSM) Global Link with Gulu University School of Medicine and the Gulu Regional Referral Hospital began in 2006.

Since then staff have visited to deliver teaching and to work alongside Gulu nurses and doctors, sharing experiences and learning from each other. The hospital has 250 beds but regularly accommodates about 500 patients. It is a post-war, resourcedepleted setting but working there is enhancing the skills of UHSM staff and medical students alike and is encouraging innovative attitudes. My interest in the link sparked from chats with our Gulu-link lead about library involvement in supporting the UHSM link. I attended the global information workshop at the Health Libraries Conference in July 2010 where Steve Glover introduced me to Shane

Godbolt (Director of Partnerships in Health

Kinengyere (Serials

Librarian, Makerere University in Kampala).

Information) and Alison

A meeting was set up with

and from then on it all

started happening!

our UHSM Global-Link Lead

Flights were booked and practical advice provided. Steve Glover gave me an excellent tutorial on HINARI and after meetings and regular contact with Shane for support and guidance, I felt ready for the mission.

I was fortunate to have a travelling companion and work colleague, Tracy Holdsworth, Head of Training, who was also going in a non-clinical capacity. Our arrival at Entebbe airport got off to a bad start when I realised my case had gone walkabout. Then, the next day, after a long 370km drive just as we approached Gulu a big government truck went into the back of our vehicle! Thankfully, we were all fine

although our luggage was a little flatter, and they found my case the next day.

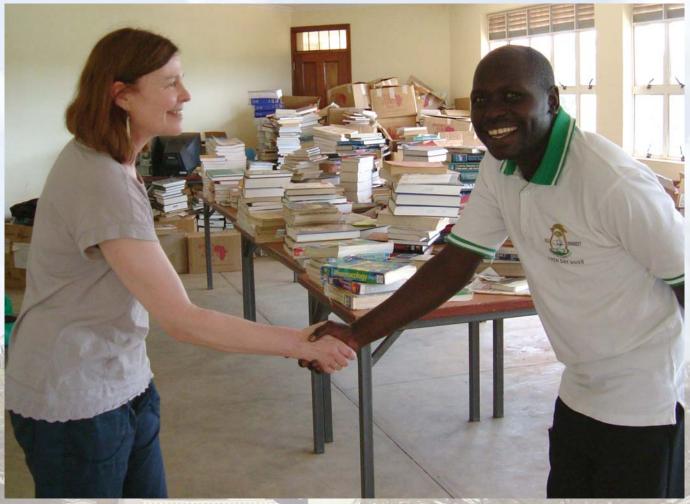
After a good night's sleep and a restful day at our accommodation in Gulu I was ready to start work. Our remit was to carry out a scoping exercise to:

- contribute specialist expertise to the work of the team at Gulu
- examine current training and management programmes at Gulu
- examine current HR practices with a view to working collaboratively for their improvement
- examine the issues in access to
 - and provision of health information in Uganda and to forge links with local, regional and national partners in Uganda as appropriate
 - visit library and IT resources in Gulu, exchanging information and ideas with colleagues around developing a mutually beneficial, sustainable partnership to improve access to health information
 - investigate Gulu's use of HINARI and train librarians as required

We had three working days in Gulu before travelling back to Kampala but managed to learn enough to realise we could make a



Donna and Tracy outside Gulu University Faculty of Medicine



Donna and Walter - Gulu Faculty of Medicine Library

difference. We met with hospital clinicians, the Dean of the Medical School, librarians, and other health workers. It was difficult looking around the hospital and distressing to see patients on the medical ward in beds pushed together, without the comforts of fresh linen and clean mattresses. However, it was clear that the patients were treated well using the resources available and that saving their lives was paramount. It was remarkable to see dedicated families of patients (patient attendants), supplying all the basic physical needs of their relatives such as food, drink and washing. The hospital circumstances make it impossible for employed health workers to provide this service themselves.

After the experience of the hospital, I was relieved to get away from the clinical areas and into the libraries! I was back to my comfort zone conversing with like-minded people and away from sickness and disease. My meetings with Onen Walter Yagos at the Faculty of Medicine Library and Ongaya Kizito at Gulu University Library were stimulating.

Limited Internet access and lack of time meant I could not give HINARI training for librarians. However, I was able to share information with Walter and we had useful discussions about resource access, the difficulties he has with Internet access and his priorities for the new library at the Faculty of Medicine. He was still waiting for shelving to arrive 12 months after he sent the order! Books were all over

the place, on tables and all over the floor. My first instinct was to start sorting but the fact that there were no shelves made it a losing battle. Although they have access to a vast range of electronic resources through HINARI, Walter was eager for printed versions of books and journals due to such poor Internet and power connections. He hopes to gain wider bandwidth, access to an electronic LMS via Gulu University and receive HINARI training for his library staff to cascade to their readers, but this all depends on the main Gulu University Library receiving the funding.

Continued...



Gulu University Campus and entrance to Main Library



Donna and Sister Caroline at Gulu Regional Referral Hospital

...continued

This new library is predominantly for medical students and doctors and its location away from the hospital site is a barrier for use by nurses and other hospital-based staff. There is neither a library nor any resources to support nurses on the hospital site. Our suggestion to set up a learning resource facility, based at the hospital, combining space for training workshops and library resources was inspired after discussions with Sister Caroline (Principle Nurse), who was anxious to improve support for the continuing professional development of her nurses. The Medical Superintendant met favourably with the idea and agreed to set a room aside for the purpose.

On our last day, we met with Alison Kinengyere and her colleagues at the Café Javas in Kampala. After an enjoyable lunch, Alison took us to the Albert Cook Library at Makerere University College of Health Sciences. Established by Dr Albert Cook in 1924, it holds medical collections of national importance including an archive of his original hand written patient records dating back to 1900. Now it is Uganda's major Biomedical/Health Sciences Library.

Tracy and I have written a joint proposal, and once funding materialises we can begin planning the Gulu Regional Referral Hospital learning resource centre.

Donna Schofield

LIBRARY MANAGER
UNIVERSITY HOSPITAL OF SOUTH
MANCHESTER NHS FOUNDATION TRUST

HCLU Workforce and Engagement

Survey 2011

OVERVIEW OF SURVEY

The survey ran for 3 weeks in late February and early March 2011. A total of 137 full or partial responses were received which is an estimated response rate of 62%. This is down on the response rate for the workforce survey carried out in 2002 which returned a rate of 68%.

Recruitment and Retention

Despite the difficult economic climate 21.6% of managers reported that they had recruited to at least one post in the last 12 months. However 52.2% reported that they are not currently allowed to recruit to a post if someone leaves. Of those that can recruit there are often restrictions placed on the process. These include having to make a strong business case for replacement or being restricted to recruiting internal staff only.

Managers were asked if they thought their service might lose posts in the coming year; 38% responded that they thought this was a possibility. When asked if they thought they would be able to recruit to new (not replacement) posts only 7.8% reported that this was likely.

An overwhelming majority, 91.2% of respondents, reported that they intended to continue working for NHS Libraries in the foreseeable future. This compares with 63% in 2002, which is perhaps indicative of the current economic climate. Of those that reported that they did not intend to continue working for North West NHS Libraries the most common reason given was retirement (33.3%). This compares to 2002 where the most common reasons for leaving were for better pay (38%) or a

North West NHS Library and Information Workforce

According to the 2011 survey the current workforce:

- Is predominately female (81%)
- Employed on a full time basis (68.6% in 2011 compared to 61% in 2002)
- Aged 33 or over (83.2%)
- Has worked in a health library for 6 years or more (62.7% in 2011 compared to 47% in 2002)
- Has been employed in their current role for 10 years or less (84.6%)

more interesting career (38%). In 2011 none of the respondents selected better pay as a reason for leaving their current role. Whether this is due to individuals' relief at having a job in the current climate or to improved pay levels resulting from the Agenda for Change programme is not clear.

Engagement Levels

The remainder of the survey focused on trying to ascertain current engagement levels amongst staff. This part of the survey was divided into three sections looking at

- Individual engagement
- Engagement with the immediate work team
- Engagement with the wider organisation

Overall the reported levels of engagement were high from the point of view of the individual with their role, their team and their organisation. Some caution needs to be exercised in viewing the responses as in the current climate the high levels might simply indicate employees' relief at having a job.

Conclusions

There is little doubt that the next couple of years will be testing. The survey has demonstrated the library and information workforce in the North West NHS is in robust shape to face the challenges of the coming months. As with the 2002 survey there is no immediate indication of issues with recruitment or retention. The high levels of engagement are, with the provisos outlined above, encouraging. The purpose of the Health Care Libraries Unit (HCLU) is to "lead, coordinate, develop and monitor NHS libraries across the North West." (HCLU, 2011). The information gained from the survey will assist in this purpose by providing a greater understanding of the demographic of staff it exists to serve. The findings will be used to develop the strategy of the unit and to inform the training and development programme sponsored by HCLU. 🚻

Gil Young

CPD & PARTNERSHIPS MANAGER HEALTH CARE LIBRARIES UNIT

The MAP toolkit:

Making Alignment a Priority for health libraries

What is the MAP toolkit?

The MAP toolkit has been developed by LIHNN librarians and aims to bring together a number of resources that can be used to demonstrate how library services make an impact on organisational objectives and are aligned to key drivers within the NHS.

As well as demonstrating the impact of library activities, using the MAP toolkit has many other benefits to you and your service. Using the toolkit enables you to:

- Talk the same language as NHS colleagues;
- Protect and develop library services;
- Record the impact of one-off projects / initiatives:
- Gain awareness of the 'bigger picture';
- Share good practice within the library community

Find out more and access the MAP toolkit by visiting www.lihnn.nhs.uk/map

Get involved!

We have already run some workshops to show library staff how to use the toolkit effectively.

Additionally, we are hoping to expand our Steering Group and there will also be an opportunity for people to get involved as Content Editors of the toolkit.

If you'd like to take part in a future workshop or would be interested in getting involved in the project please contact one of the Steering Group members below.

In the meantime please enjoy our quick guide to using the MAP toolkit in practice.

How to use the MAP toolkit in 5 easy steps!

Step 1: Consider your aim

The MAP toolkit has been designed to support a range of library activities. Are you embarking on a new project? Is there a particular element of your service that you need to justify? Do you need to demonstrate the impact of your service as a whole? Do you want to propose a service development or new initiative?

The MAP toolkit has been used for a variety of purposes, including:

- Business planning
- Bidding for funding



- Showing examples of best practice
- Planning new projects
- Protecting existing services
- Mapping out current service provision

Step 2: Identify the key drivers

A driver is a factor that shapes the direction of your organisation. The MAP toolkit has identified what we perceive to be the key drivers that influence the work of NHS organisations locally, regionally and nationally. Having an awareness of these drivers enables you to 'talk the same language' as colleagues within your organisation.

Exploring these drivers will give you a broader understanding of the wider

NHS context at a crucial time of change. We have summarised national and regional drivers to enable to you easily digest the key messages of each driver and it's implications for health libraries.

Step 3: Plan your project

You can download a 'Local Service Profile' template that can help you to draft a project plan. This tool encourages you to think about your project team, timeframe, resources required and how your project is aligned with the drivers you have explored.

You can use this tool to plan library activities which fall outside of your 'core' services, such as:

 bespoke services that have been tailored for a specific client group, e.g. journal club;

- one off library project, e.g. developing a fiction collection;
- information consultancy work, e.g. records management, web development provided to other departments.

The MAP toolkit contains examples of Local Service Profiles produced by other health libraries in the North West.

Step 4: Write up your project

Once your project is underway or completed, you can use our Case Study template to write it up.

Writing up your project allows you to:

- Demonstrate the impact of the project;
- Align your project's successes with the wider objectives of the organisation;
- Share good practice with colleagues;
- Ensure your work is visible to stakeholders and senior managers;
- Reflect on any lessons learned to inform future development.

You may find it useful to look at the portfolio of Case Studies that have already been written up by other health libraries.

Step 5: Demonstrate impact!

Use the tools highlighted above to demonstrate the impact of your work within the wider context of your organisation. You can do this in a variety of ways:

- Share your project with stakeholders within your organisation to demonstrate the impact of your work;
- Publish your case study in your Trust's newsletter to publicise the good work you are doing;
- Use your Local Service Profile to inform a business case to propose to senior managers;
- Publish your case study to the MAP toolkit to share your good practice with the wider health library community.

To look at some examples of how other libraries have demonstrated the impact of their services, visit the Impact Assessment section of the toolkit.

We'd love you to submit your completed Local Service Profiles and Case Studies for inclusion on the MAP toolkit so that your good practice can be shared within the library community. By sharing your work you'll be helping us to expand our portfolio of case studies that demonstrate the value and impact that health libraries make within the wider health community.

If you have any questions or to register your interest for future workshops please contact the MAP Steering Group:

Tracey Pratchett

CLINICAL LIBRARIAN, UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST tracey.pratchett@mbht.nhs.uk

Victoria Kirk

CLINICAL LIBRARIAN, WIRRAL UNIVERSITY
TEACHING HOSPITAL NHS FOUNDATION TRUST
victoria.kirk@nhs.net

Lis Edwards

OUTREACH LIBRARIAN, NHS WESTERN CHESHIRE lis.edwards@wcheshirepct.nhs.uk

Hannah Gray

KNOWLEDGE & LIBRÁRY SERVICES MANAGER WARRINGTON AND HALTON HOSPITALS NHS FOUNDATION TRUST hannah.gray@whh.nhs.uk

Tracy Owen

LIBRARIAN, FADE, LIVERPOOL PCT tracy.owen@fade.nhs.uk

Using CA\$H to produce current awareness bulletins

In April 2010 I attended the Current Awareness in the Health Sector Conference in Manchester organised by North West Health Care Libraries Unit, NHS North East & NHS SHALL. From the range of services covered, Current Awareness & Alerting Service for Health (CASH) seemed to best suit both our ability to get involved and our needs with regards to current awareness.

I took on Critical Care (incl. Anaesthesia) from the unassigned

categories. Recently the library was approached to produce a current awareness bulletin for the Neonatal Care team. CASH seemed the ideal tool with which to produce this too.

I use Google Reader including Page2RSS to keep informed of updates on various organisations' websites, as well as email updates from some sources. These stories I input into the CASH database throughout the month, then at the end of the month I produce a pdf

bulletin using Zinepal software which is available to CASH contributors. Aside from the time to set up the systems, daily monitoring and inputting stories to the CASH database takes 2-3 hours a month, plus a couple of hours a month to produce the bulletins.

Involvement with CASH has been extremely beneficial for our library service. It has provided an efficient way of producing two current awareness bulletins targeted at specific departments and teams within the hospital. Feedback has been positive; staff value the bulletins. It is also

possible to produce bulletins for your organisation using content others have added to the database. The more people who become involved in the project, the more topics can be covered and the greater the mutual benefit for all involved.

For further information about CASH visit http://www.tin.nhs.uk/welcome/keeping-up-to-date/

Catherine Pritchard

LIBRARIAN, MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST c.pritchard@chester.ac.uk



Rory Stewart MP opens Learning Network Showcase Event at

Voreda House, Penrith

North Cumbria and Morecambe Bay Library and Knowledge Services supported Cumbria Partnership NHS Foundation Trust new Learning Network event held in Penrith on 8th February.

It was officially opened by Rory Stewart (centre), MP for Penrith and the Borders, here with the Chief Executive Stephen Dalton and their Chair. Rory was particularly interested in the launch of the Trust's new Research Journal which aims to share information and best practice about research and other Trust projects.

Libraries also get a mention in the Journals first issue for their help in developing their new Learning Space within the catering facilities at the Trust's Headquarters. The café is run in conjunction with Eden Mencap and provides training opportunities for people with learning disabilities.

Print copies are available for the Trust and electronic access to Cumbria Partnership Journal of Research, Practice and Learning is available at http://www.cumbriapartnership.nhs.uk/volume-1-issue-1-spring-2011.htm

Sheila Marsh

HEAD OF LIBRARY AND KNOWLEDGE SERVICES NORTH CUMBRIA UNIVERSITY HOSPITALS NHS TRUST

Tracey Roberts-Cuffin

LIBRARY & KNOWLEDGE SERVICE MANAGER
UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS
FOUNDATION TRUST



Working

In 2007 there was an internal review of education at The Christie NHS
Foundation Trust who's strap line is "We care, We discover, We Teach" and it was decided that in patient care and research we were much stronger than the education element of the statement.

In January 2008 The Christie reorganised its structure and a new education directorate was set-up bringing together all strands of undergraduate and postgraduate teaching. As a result of this reorganisation the Kostoris Library moved from our Human Resources directorate into Education

As part of the reorganisation my role changed as I took on a wider field of responsibility and was given responsibility for running the education centre staff and facilities in addition to the library. At this point I was also given responsibility of administratively managing the senior nurse educators and their financial budgetary requirements. In September 2009 my role changed further and I now manage all the education finances in what is now **The Christie School of Oncology** which officially launched in September 2010.

My role now has five clear elements and I manage the library, the education centre, the education events and programmes manager, the School of Oncology e-learning and web technical author, and the School's finances. This has led to a more hands off role within the library.

The main advantage of this new role is a wider appreciation of education within the organisation and the NHS and access to important committees within the hospitals' decision making mechanisms. I am also



beyond the library:

The role of Education Business Manager at The Christie School of Oncology

undertaking an MSc in Health and Social Care Management at Manchester Metropolitan University Business School which has given me valuable skills that I have been able to apply in my day-to-day work.

In my role of managing the education centre I am responsible for its staff, facilities, and finances. During the first 12 months it was a steep learning curve and I had to learn about the world of audio visual technologies and the vagaries of lighting and sound. The centre is filled with a large number of high value assets such as £36,000 HD projectors, Matrix systems, AMX screens, and the associated wiring and maintenance contracts they all come with. I am sure Jane Bennett my centre technician had a window of opportunity to get what she needed before I became street wise! It seemed like every piece of replacement kit had to go to our workforce and capital planning committee for approval.

Managing Robert Boyle, the Education Events and Programmes Manager has been a very rewarding challenge as the post is self funding through income generation. Together we have been successful in establishing a national programme of oncology study days and in 2011/2012 we already have 12 events scheduled to take place in subjects such as Lung Cancer, Beast Cancer, Metastatic Spinal Cord Compression, Ovarian Cancer and much more. For these events we work with senior consultants and nurse researchers to provide a programme and speakers. The medics source the speakers and we run the marketing, advertising, invoicing, delegate materials, and obtain pharmaceutical sponsorship. After the events we split the profits 50:50 with the medics. Last financial year we rose over £70,000 in income and made £25,000 profit after Rob's salary costs.



The Education and Events Team - Jane Bennett, Robert Boyle, Shirley Crook, David Glover

lectures from external speakers. We have a zero budget for this and have to generate enough sponsorship to cover the food and speaker expenses. Again we have had to establish good relations with our pharmaceutical sales reps to recover the costs.

Managing the finances for all of the School's education budgets has been very exciting and this year's "March madness" was for me very intense. The term March madness originated from the crazy end of year spending by

government departments in Canada. The education budgets at Christie total £5.2 million split between the MPET budgets received for MADEL, SIFT, NMET, and in addition to our exchequer funds and charitable funds that support education. This has meant I have become involved in managing all the doctors teaching PAs or programmed activities, otherwise known as teaching sessions.

It has been a steep learning curve but it has had its rewards and challenges. Hopefully it has put me in a good position to fully understand the impacts of the new post Health Bill operating environment and its likely financial impacts on education and library services. In the future I can see more opportunities for library managers to manage in the wider sphere of education in the NHS.

The Christie School of Oncology Study Day Schedule 2011

UK Cutaneous Lymphoma Annual General Meeting Thursday 5th May 2011

The Christie

National Mortuary Conference Thursday 12th May 2011

Introduction to Acute Oncology Tuesday 17th May 2011

Ovarian Cancer Tuesday 20th September 2011

Still Confused about Feeding Tubes? Monday 26th September 2011

Teenage and Young Adult Cancer - Patient Perspectives
Wednesday 12th October 2011

Metastatic Spinal Cord Compression Study Day Wednesday 26th October 2011

Adjuvant Breast Cancer Study Day Tuesday 8th November 2011

Caring for Lung Cancer Patients Undergoing Concurrent Therapies Thursday 24th November 2011

Prostate Cancer Thursday 1st December 2011

Psycho-Oncology Thursday 8th December 2011

Please visit www.christie.nhs.uk/pro/education/events or email education.events@christie.nhs.uk for further details about these events

Steve Glover

EDUCATION BUSINESS MANAGER SCHOOL OF ONCOLOGY THE CHRISTIE NHS FOUNDATION TRUST

We also run the Friday Grand Rounds and Scientific Lectures Series which includes grand rounds presentations, the clinical audits, the Morbidity and Mortality meetings, and guest



Editor's Column

Notes for contributors

 Articles and news items are welcome from all members of Lihnn, including support staff and staff in higher education institutions.

Lihnn members are actively encouraged to write up accounts of events and courses attended. Articles on new developments and projects successfully managed are also welcome.

- News items and short pieces, which can range from factual to amusing, are also welcome.
- 3. All items should be submitted in electronic format.

Please abide by the following points:

Don't forget your name, location, title of article and date of article.

All acronyms should be written out in full for the first occasion they are used in the text. Please give full details of events, courses and conferences attended. This should include:

- The name of event and location
- Date of event
- Name of organizing or sponsoring body
- Details of how support materials can be obtained (where necessary)
- Full references to any published reports, articles, etc.

Items not submitted in time for the publication deadline will be published in the following edition.

Lihnn is on the web at:

Contributions should be submitted to:

Mike Hargreaves University of Central Lancashire Email: mhargreaves@uclan.ac.uk Tel: 01772 892127

LIBRARY AND INFORMATION HEALTH NETWORK NORTHWEST NEWSLETTER

EDITORIAL BOARD

Mike Hargreaves (Chair)

Uclan mhargreaves@uclan.ac.uk

Rachel Bury

University Hospital Aintree Rachel.bury@edgehill.ac.uk

Linda Ferguson

Health Care Libraries Unit Linda.ferguson@nhs.net

Kieran Lamb

Fade, Liverpool Kieran.lamb@fade.nhs.uk

Steve Glover Christie Hospital Steven.glover@christie.nhs.uk

Andrew Craig

Lancashire Teaching Hospitals NHS Foundation Trust andrew.craig@lthtr.nhs.uk

Penny Ralph Pennine Acute Trust penny.ralph@pat.nhs.uk

Victoria Kirk

Wirral University Teaching Hospital NHS Foundation Trust victoria.kirk@nhs.net

LIHNN GROUPS AND CHAIRS 2010

GROUP	CHAIR	E-MAIL
LIHNN CO-ORDINATING COMMITTEE	Tracy Owen	tracy.owen@fade.nhs.uk
Cheshire & Merseyside Librarians	Gill Swash	gill.swash@wcheshirepct.nhs.uk
Clinical Librarians	Anne Webb Victoria Kirk	anne.webb@christie.nhs.uk victoria.kirk@nhs.net
HCLU CPD	Gil Young	gil.young@nhs.net
Cumbria & Lancashire Librarians	Debra Thornton	Debra.Thornton@bfwhospitals.nhs.uk
E-resources	Kieran Lamb	kieran.lamb@fade.nhs.uk
Greater Manchester Libraries	John Addison	John.Addison@PAT.NHS.UK
Heritage users	Jean Williams	jean.williams@rbh.nhs.uk
Information governance	Tracy Owen	tracy.owen@fade.nhs.uk
Interlending & Document Supply Grp	Steve Glover	steven.glover@christie.nhs.uk
Mental Health Libraries	Bernie Hayes	Bernie.hayes@5bp.nhs.uk
Newsletter	Mike Hargreaves	mhargreaves@uclan.ac.uk
Primary Care Librarians	Emily Hopkins	emily.hopkins@manchester.nhs.uk
Quality Brief and Exchange	Hannah Gray	Hannah.Gray@WHH.NHS.UK
Trainers	Joanne Taylor	Joanne.Taylor@lthtr.nhs.uk