

Interim



scottish health information network

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Interim is the newsletter of the
Scottish Health Information Network
(SHINE)

Chair's Report

NHS in Scotland elibrary

The idea of “virtual” health libraries has come closer to reality this year with the launch of the NHS Glasgow elibrary in June and, more recently the elibrary of NHS in Scotland. Being able to search not only databases online, but also read the full text articles, is something our readers are beginning to take for granted. This seems light years away from searching the heavy tomes of *Index Medicus* and writing out the references by hand and yet many of us will remember doing just this. Even if we don't work in an NHS library, we are all affected by this revolutionary change in the provision of health information to NHS staff in Scotland.

The launch of the NHS in Scotland elibrary was announced by Susan Deacon, Minister for Health and Community Care at the Learning for Life in the NHS in Scotland Conference at Heriot Watt University on 23 October. The Scottish Executive has invested £250,000 in this facility which will offer access to four major healthcare databases and more than 150 full-text journals, and will be available to all staff working in the NHS via computer at work and at home. It was good to meet several SHINE members at this conference. Many thanks to all those who acted as “Librarian facilitators” in the Learning Zone where the elibrary was being demonstrated.

Several SHINE members have been able to attend the elibrary training sessions organised by the Scottish Council for Postgraduate Medical and Dental Education in Aberdeen, Dundee, Edinburgh and Glasgow. These sessions were fully subscribed and unfortunately, a number of SHINE

members were not able to obtain places. However, the SHINE Committee is keen to work with Mary Lakie to ensure that more training is organised.

As with all significant changes in working practice, there are bound to be “teething problems” with the administration of the elibrary and the way it will affect LIS staff. If you experience problems using the new service or can make suggestions to improve the way readers and staff can access it, please communicate your ideas and thoughts to the SCPMDE and to the SHINE Committee. If you can suggest ways in which SHINE could be more proactive in promoting the service, we would be especially pleased to hear this.

SHINE Statistics Working Group

A new working group has been formed within SHINE to consider the collation of statistical information on health care libraries within Scotland. The decision to set up the Working Group was made at a recent SHINE Committee meeting following a number of discussions concerning the NHS Regional Librarians Group Statistics and their relevance to SHINE libraries. The difficulties of completing questionnaires, which are designed for English regional library services, with different funding streams etc., understandably leads to poor response rates from Scottish NHS library services where no regional units exist. It is intended that this working group, chaired by Enid Forsyth from the Royal College of Nursing Library, will seek information about current practice in collating statistics in Scottish health libraries and SHINE members' views on how we could obtain a national picture of health care library activities in this country. If you are interested in becoming involved in the work of this

group, please let Enid know
(Enid.Forsyth@rcn.org.uk).

Charter Mark 2001

I'm delighted to announce that the Health Promotion Library Scotland's application for Charter Mark this year has been successful! Applying to retain this government award for public service was hard work and it is a credit to the people with whom I work at HEBS that we have been successful. I am also tremendously grateful for the support of other SHINE libraries in our application. An important criterion for Charter Mark this year is "Working with other providers". This is something that I believe all SHINE members are particularly good at!

Margaret Forrest
margaret.forrest@hebs.scot.nhs.uk

Erratum

In the previous issue of *Interim*, it was stated that Richard German and Avril Conacher had both worked for the North Glasgow Hospitals University NHS Trust. This is incorrect and should have read Glasgow Primary Care NHS Trust.

1. Regional Libraries Group – has been invited to join SHINE. They would have access to the Digest of the Minutes in Interim.
2. Publication of the Union List will be delayed until after the summer to allow discussion of membership categories at the AGM.
3. SHINE web site – possible additions: dates of meetings, information about holidays, presentations.
Interim – will be distributed mainly on the web in future.
4. ILL system being trialled, with a view to purchase by SHINE.
5. Statistics – a new Working Group has been formed to look at this.
6. NHSiS contract – SHINE hopes to provide further training.
7. SHINE AGM will be held in Glasgow, last week in April.

The Committee Digest will appear on the SHINE web site in future,
(www.shinelib.org.uk).

People News

Congratulations go to Gill Hewitt of the Health Management Library, Scottish Health Service Centre, who married Michael Earl on the 15th of September.

Committee Digest

Digest of Minutes
Meeting 25/09/2001

**Like Topsy it just
grew and grew...**

*The Dementia Services Development
Centre Library and Information
Service, Stirling*

Context

In the late Spring of 2002 the Dementia Services Development Centre moves into a specially designed building on the University of Stirling's beautiful campus, the Iris Murdoch Centre. As this will mark a start of a new chapter for the Dementia Centre, it is a good moment to record the growth of the Centre's Library and Information Service.

The Dementia Services Development Centre was launched at the University of Stirling in the autumn of 1989 by the Dementia Services Development Trust. Being located at the University ensures that all the work meets academic standards as well as meeting the needs of those in the field of dementia care. The Trust's first task was to appoint a Director, Professor Mary Marshall, to assemble a team to begin to provide a service to people working in and developing dementia care services. By the end of 1989, two further members of staff were appointed – the senior fieldworker, Carole Archibald, responsible for finding out how care and support services were provided across Scotland and to assist in the improvement and extension of those services; and the Information Officer, Averil Harrison, responsible for establishing an information service available to dementia care practitioners.

Initially the Centre occupied two rooms, normally occupied by a lecturer, in the main teaching block, with the three members of staff sharing one of the rooms and the secretarial and administrative support

working in the other. Now, like Topsy the Centre, with 21 members of staff occupies 12 rooms plus a large meeting room. The Centre achieves its aim of extending and improving services for people with dementia by offering dementia care practitioners, managers and planners development and planning consultancy, training, advice and information, evaluative and qualitative research, and access to low cost publications, videos and audio material.

The Library and Information Service

From the outset it was decided that the most difference to the life of a person with dementia would be made by enabling them to retain and sometimes regain their skills and maintain or improve their quality of life whilst the illness progressed. The best way to achieve this was to educate and enhance the skills of those working to deliver support services to people with dementia. The aim therefore of the Library and Information service (LIS) was to collect, organise and make available relevant and current published material on the care of people with dementia to practitioners in the form of a specialist library on dementia care and service provision.

To support practitioners unable to come to Stirling a bibliographic database was created with a view to being able to provide literature searches on topics of interest. The database functions as the library catalogue, recording bibliographic details of all types of published material; books, reports, information leaflets and packs, video and audio cassettes, as well as papers and journal articles. The collection has some rare material in the form of grey literature and pre-publication papers,

sent to us from authors keen for our comments and for us to make accessible to others.

Each record has an abstract explaining the subject and readership of the material. The records follow AACR2 and UKMarc cataloguing rules as far as applicable with some refinements meeting our special needs. Classification is carried out according to a scheme devised in-house. In 1989 there were no schemes specialist enough to use. All types of media are classified in the same way. This enables visitors to our specialist library to find material on their chosen topic easily.

The library is generally regarded as a rich source of material in the field of dementia care with visitors frequently bemoaning the fact that there is not enough time to absorb everything available. Access to the library is by appointment only.

The Databases

The bibliographic database was designed and created in BRS Search (Dataware), a free text database with powerful search and retrieval abilities. Sophisticated Boolean search terms are used. As this software was new to the University, the support staff member assigned to BRS was learning the software's peculiarities at the same time as myself. There was much grinding and gnashing of teeth as we came to grips with BRS. In the twelve years we have moved onto using the windows version and more recently the database may be accessed via the web. In the Centre's three year plan, (our core funding comes from the Scottish Office now the Scottish Executive on a three year grant) our annual target is to add 1000 new records to the database each

year. At the end of October 2001 there were 13221 records on the database.

A second database was created to assist in the networking between practitioners, service development and initiation of innovative practice. This database recorded details of dementia services throughout Scotland. Designed on BRS Search initially the Dementia Services Database facilitated in service mapping and availability, and was used often as a means of linking up with people offering innovative and good practice.

The Services Database has gone through several transformations. In 1995-1998 the database became the basis for a European Dementia Service Mapping exercise (EACH) and was moved onto Microsoft Access. In October 2001, after being dormant for three years, activity in collecting Scottish dementia service information has become revitalised and we are now responsible for the Scottish arm of the DSDC Network UK Dementia Services Database, also held on Microsoft Access.

LIS Systems

The LIS subscribes to a range of Dementia related periodicals and are members of several organisations producing newsletters. The LIS is a 'Provider' library in the SHINE Union List and provides details of holdings annually. The issue details of periodicals are recorded on a card file with the subscription details being recorded on an Access database. Book purchase is carried out complying with the University of Stirling finance system and the details held in manual hard copy files. Book loans are also held in a manual hard copy file. It is envisaged that these separate means of record keeping will

be automated using a small library management system when the LIS moves to the new building. It will certainly be easier to follow through acquisitions, cataloguing, loans and recall, budget and user profiles on one integrated system.

All the details of each query are recorded on a Microsoft Access database. Using this we are able to analyse usage through the year, provide funders with statistics, determine 'hot' topics, and view how changes in the health and social care sectors are affecting our users. Annually we produce figures on the number of queries, where these have come from, the sectors for which the user works, the means of contact, and the topics asked about. As well as providing our funders with a profile of our work these statistics also help the Centre determine where there are gaps in development, specific training needs, areas requiring more information and areas to research.

How to Access the LIS

The Library and Information Service offers to all providing dementia care the following services:

- bibliographic literature searches
- specialist library study
- photocopying service (following copyright regulations)
- inter-library loan service

To those employed by health care, social care, and voluntary organisations the service is free of charge. To those working for the private and business sectors, in full-time education or from outside of Scotland there is a charge for searches. There is a charge for all photocopying.

The specialist library may be used by appointment free of charge by all users.

The Library and Information Service is open Monday - Friday 10.00 -16.00, with a restricted service on a Thursday.

Dementia Care and the Future

Over the twelve years the changes in the care given to people with dementia and their carers have been profound. The biomedical model of care has presented a picture of inevitable decline, but in recent years new drug treatments have brought hope and certainly care where evidence clinical practice may be measured.

The work of the Dementia Centre profiles another model, more person centred, which concentrates on the individual. A model where communication with the person with dementia, an understanding of their behaviour, by provision of a therapeutic environment, occupation in appropriate activities, and skilled carers can give the person with dementia back a sense of well-being and self-esteem.

The Library and Information Service lays at the heart of this understanding and will provide quality information by a variety of media for many years to come.

***Averil Harrison
Information Officer, Dementia
Services Development Centre***

Web Resources

Sites about Islam would make an appropriate subject this time, but as I have been asked to write something

for another publication (1), I have chosen other themes.

Free Bibliographical Databases

There are plenty of ways to find out about web sites, so it is possible that none of this is news. I always appreciate being told more than once, though, as I need reminding and like to think that if more than one person tells me about a site, it may be useful! So, on the pretext of being useful, I shall continue with this selection of free bibliographical databases.

NLM Gateway

<http://gateway.nlm.nih.gov>

This is the result of a change of policy within the NLM. Internet Grateful Med is being phased out, and separate databases in specialist subjects, like HISTLINE and SPACELINE, have been discontinued. Journal article records have been added to PubMed, and book records to LocatorPlus, and both these resources are searchable through the new NLM Gateway. Currently, if you go to the IGM web site, you will be referred to the new gateway. Searching the Gateway still retrieves my favourite SPACELINE reference, about growing salad vegetables in space, so all is not lost (2).

ENB Health Care Database

<http://www.enb.org.uk/hcd.htm>

Crossing over the border for the moment! This is a free database on nursing, produced by the English National Board. In a previous life, I have had students who have found it a useful source to use alongside CINAHL and the British Nursing Index.

Infection Control

<http://www.md.ucl.ac.be/didac/hosp/infcon.htm>

A database maintained at the Faculty of Medicine, UCL-Brussels.

PEDRO

<http://ptwww.cchs.usyd.edu.au/pedro/index.htm>

The splendidly named PEDRO is an evidence based physiotherapy database, produced in the University of Sydney. You may have problems accessing it through a firewall (as I discovered when trying to demonstrate it in a teaching session), but your IT people may be able to get round this. PEDRO aims to include all RCTs of physiotherapy, and you can make suggestions for inclusion. I have found it a useful complement to Medline and AMED.

National Research Register

<http://www.update-software.com/National/>

This is a register of current and recently completed research in the NHS.

Bioterrorism Resources

The front page of a recent Evening Express tells of the discovery in Aberdeen's sorting office of a package containing white powder. There are similar stories from elsewhere in Scotland and Europe as a whole. Therefore it seems wise to be prepared, just in case, even if it is only a packet of talc, rather than anthrax, that you are sent.

The Scottish Centre for Infection and Environmental Control web site includes a page of information, which is updated as new things become available. It now includes guidelines to those receiving post, as well as links to some of the resources mentioned

below. Go to
<http://www.show.scot.nhs.uk/scieh/bioterrorism.htm>

The recent PHLS paper on anthrax is at
<http://www.phls.co.uk/advice/anthraxguidelines.pdf>

There is much on the CDC web site in the USA, at <http://www.cdc.gov> and on the UK government News Co-ordination Centre site at <http://www.co-ordination.gov.uk/>

There has been a lot of traffic on MEDLIB-L, the US based mailing list for medical librarians, about this subject, (and other things resulting from the attacks of 11th September) and many other sites are mentioned in those messages. The list archives are at <http://listserv.acsu.buffalo.edu/archive/s/medlib-l.html>.

We have added a list of resources to the University of Aberdeen Medical Library web pages at <http://www.abdn.ac.uk/diss/library/geninfo/sites/medical/bioterrorism.htm>

References

- (1) Forthcoming in *Health Information on the Internet*
- (2) Kliss M, Heyenga AG, Hoehn A, Stodieck LS. Recent advances in technologies required for a "Salad Machine". *Adv. Space Res.* 2000;26(2): 263-9

Feedback?

If you want to comment on anything in this article, please contact me at k.nockels@abdn.ac.uk. If you feel there is a subject area it would be

worth covering, please do let me know.

Keith Nockels
Aberdeen University Medical
Library

Do you remember the first time?

The first Evidence Based Librarianship (EBL) Conference, held in Sheffield (3-4 September 2001), was memorable for a number of reasons. I won't remind people of the delightful train journey through East Lothian - with many delegates arriving 3 hours late. Instead I will ask you to recall the delightful food, the amazing atmosphere (over 150 delegates), the sun and the conference's vibe.

I was in Sheffield for an intensive dip into the murky world of evidence based librarianship. Many of us are au fait with evidence based this and that. Some of us during the conference even tried our hand at "evidence based drinking" (I'll leave you to work out how many rounds are needed for a statistically significant drinking session).

But evidence based librarianship may be a new concept to us. I have vague memories of library school, sunny days spent doing research, playing around with questionnaires and statistics. Well, the conference was about this, improving the research base of librarianship and getting us, the practitioners, and not just the academics involved.

Jon Eldredge (University of New Mexico), credited with coining the phrase "evidence based librarianship" (EBL), gave the opening address and

delved into a crystal ball vision of EBL. He predicted the creation, in the near future, of structured abstracts for research in librarianship, while qualitative research will generate valuable exploratory hypotheses. Eldredge then suggested that by 2020 65% of original research in librarianship will be cohort studies, randomised controlled trials or other rigorous research. This is a tough challenge and he warned us of various distractions along the way: time, money, toys (ie distractions from the main issues), sibling rivalry (quantitative versus qualitative research) and parochialism.

This thought provoking address led neatly onto the talk by Andrew Booth (University of Sheffield) on the UK context of EBL. He noted that there are many ways in which practitioners can lead the way in EBL. For example, librarians have been involved in CASP (critical appraisal) and the National Electronic Library for Health (NeLH) is being evaluated. We could set up EBL journal clubs or take part in research study days or get a grant and do some research ourselves. He mentioned that at some stage in the future the Cochrane Library might accept EBL techniques into its database.

The whole point of EBL is to get results of research into practice. Librarians should be good at this as Booth mooted that evidence based medicine is really just information management - a "pragmatic paradigm for researchers". At this early stage we should not give up overwhelmed, but instead ask ourselves "what is the best available evidence?" and then, when better research is available, this improved research overwrites the previous "best available".

Anne Brice (University of Oxford) followed with a talk on critical appraisal and using CRISTAL (a user guide for librarians based on the JAMA model). She forced us to think about how many decisions that we make are based on evidence, where we go to find this evidence, and how valid this evidence is? The answers came back "not many" "LISA (Library and Information Science Abstracts)" and "no time to find out" but help could be at hand if CATS (critically appraised topics) were created and disseminated.

The afternoon then split into a whirlwind of mini-sessions, I managed to make the talk by Michelle Kirkwood of North Glasgow University Hospitals NHS Trust about their Delphi Study to determine nursing priorities. Then I rushed to catch Alison Brettle (University of Salford) who informed us of the initial findings of a rapid review of the literature on information skills training. The conclusion of the review was that 18 valid papers mentioned 17 different types of training, with no evidence of any particular type being more effective. Then it was a rush to hear LISU (Library and Information Statistics Unit, Loughborough University) discussing the statistics, found in part at <http://www.lboro.ac.uk/departments/di/s/lisu/list00/list00.html>, which can be used to improve services by, for example, benchmarking your results with a neighbouring library service.

By this stage our brains had expanded with all these ideas being stuffed into them so fortunately LISU's paper marked the end of day one's learning curve. We were let loose on a delicious dinner that evening. In the morning we were then "forced" to consume an extremely edible cooked

breakfast in order to keep our strength up for what would prove to be another thought provoking day.

First to speak on day two was John Sumsion (Loughborough University) who discussed his work in public library research – using surveys to show how good libraries are or should be. He declared that the intention of every action in a library should always be to improve.

Next up was Nigel Ford (University of Sheffield) who took an alien's (ie non-medical) view of EBL. He approached the topic quite sceptically suggesting we should be careful not to research in the wrong areas (eg does experimental laboratory conditions tell us anything about real literature searching?). He commented that at the moment we are trying to build an evidence base out of "fine jewels" when what we actually need is "bricks and sand" – something quick, effective and giving us a solid base.

Ellen Crumley (University of Alberta) discussed EBL methodology and whether it should have similar domains to evidence based medicine. Should this evidence be based on a medical or social science standard or a mix between the two? What is needed is an ongoing discussion to continually develop EBL.

Following on from this Margaret Haines (NHS South East) focused on how EBL could work in health libraries. She suggested that EBL requires a change in thinking, health librarians need to grab initiatives such as knowledge management and lifelong learning and use them to their advantage. This creates change and through change come new opportunities for development.

After another delicious food frenzy (lunch) we were given a choice of 3 short workshops. I felt that the workshop "Understanding User Needs: a CRISTAL Workshop" sounded most promising. We were duly led through how we could identify user needs (and non-user needs). This led into a discussion of how valid are the results of research. The best research collects data in different ways using complementary strategies which can minimise bias within these strategies. We then had a quick shot at appraising an information needs analysis paper which involved a quick statistics tutorial.

By this stage of day 2 my brain was again filling up. (It's not usually used to too much activity between 9 and 5 weekdays). I was starting to dread the end of conference debate would it be one of those dull, but worthy, filler debates where everyone really wants to go home or down the pub?

To everyone's utter delight the debate was a fast and furious – an action packed humorous resume of the conference. Andrew Booth's carefully constructed debate was a joy to hear. Although Veronica Fraser (Department of Health) tried her hardest to outwit him, it was clear that Andrew was the winner of the debate and indeed winner of the conference, given that the event proved so successful.

This concluded an incredibly thought provoking conference. I would urge everyone to look at the papers and abstracts on the conference web site <http://www.shef.ac.uk/~scharr/eblib/conf.htm> to familiarise themselves with the issues. So to sum up, Sheffield, a city of surprises, first Jarvis Cocker and Pulp, now Andrew Booth and Evidence Based Librarianship.

Acknowledgements: I would like to thank SHINE for their vision in creating the Hazel Williamson Bursary which enabled me to take part in this conference.

Lynn Easton
Argyll and Clyde NHS Board

UmbrelLA 6

Manchester Conference Centre
5-7 July 2001

This is a personal account of my experience of UmbrelLA, intended to convey some of its flavour to those who missed out this year, or may consider attending in future.

The experience of each delegate is necessarily unique. UmbrelLA is a gathering of professionals, not all librarians, from all backgrounds, each attending sessions of specific interest to themselves. Numerous core and fringe sessions were available, along with a tempting social programme. I shall attempt only to give my own account of an exciting few days.

The Conference

I attended meetings mainly in the Health Libraries Group Programme, though I was often tempted by the alternatives. This decision made it easier for me as I am renowned for getting lost between meetings!

The opening session, the Bishop and Le Fanu Memorial Lecture, was fascinating, though perhaps of little direct relevance to modern medical librarianship. The talk, 'Ancient Egyptian Mummies', was by Rosalie David of the Department of Biomedical Egyptology in Manchester. Her

department is undertaking pioneering work on well preserved Egyptian mummies, studying their causes of death and investigating whether they provide lessons for the study of modern diseases. Egypt is unique in that preserved bodies have the same genetic make up as the modern population. The particular focus is on schistosomiasis, a parasitic disease still in existence. The talk was a fascinating insight into ongoing research in genetics, and the simultaneous establishment of an International Mummy Tissue Bank.

The remainder of the programme was more prosaic, though equally stimulating. After all most of us live and work in the mundane world of providing access to health and medical information in our various workplaces. Two themes emerged as the conference progressed:

1. Developments in electronic delivery of information
2. Importance of the physical features of the library

I had expected to hear much about the first of these, but found discussion of the second stimulating and thought provoking.

Electronic Delivery of Information

Most delegates were from England and Wales, and since devolution the Scottish context has steadily diverged from the mainstream. Nationally the National Electronic Library for Health (NeLH) is still in pilot stages, but the prototype is accessible and the full NeLH should be available for all NHS staff by April 2002 (www.nelh.nhs.uk).

The mission statement of the NeLH is to provide easy access to the best

current knowledge to improve health and patient choice. The NeLH will be available to Scottish health professionals, who by then should be enjoying the benefits of the Scottish online contract.

Another session was devoted to NHS Direct, in its various formats. It is primarily an Internet resource, though as yet half the population have no access to the Internet. It is government policy that all official transactions between government departments and the public should be possible electronically by 2005 – at present the figure is around 43%.

Most use of NHS Direct at present is as a 24hr telephone service offering advice to patients in England at any time. While the service has attracted criticism, it is officially regarded as having improved access to appropriate care without increased demand or adverse results. The NHS Direct web site www.nhsdirect.nhs.uk is steadily attracting users, having 2 million visitors to the site in 2000.

Other methods of delivering NHS Direct include information points consisting of touch screen kiosks in shopping centres or libraries, of which 180 are now in place.

My overall impression is that in Scotland we are incorporating the advances of NeLH with our parallel comprehensive provision. A Scottish equivalent of NHS Direct is planned, though there is nothing to prevent Scottish patients using the site for advice. The emphasis is on delivery of timely, accurate information to those who need it, when they need it. Demand by patients is growing steadily, and information increasingly delivered on-line.

Physical Layout of the Library

As methods of delivering information change, so too is the library less likely to be a room with books and reading spaces. An added impetus to reconsider library design has been the recent decision to build 29 new hospitals in England.

However even those of us not in the situation of designing a new service can usefully examine our space difficulties. Do we use all our space to its best advantage? Do we need to keep everything or should we be more ruthless in discarding? Are we using the light to best effect, and are readers comfortable studying in the library? More to the point, does the library offer what the readers want?

The most effective way of answering these is to systematically and critically examine our own use of existing space and resources, perhaps by comparing similar libraries, and certainly by consulting the users. The new library at the RCN aimed to achieve the WOW factor – exclamations of delight as new users came through the door. How many of us can claim the WOW factor?

The Umbrella Experience

It would be difficult to fail to find sessions of interest from the hundreds on offer at Umbrella, even if not all are directly applicable to our own situation. Most valuable of all is probably the opportunity to converse professionally and socially with old friends and new, without having to rush home after a day meeting.

The trade exhibition is always a focal point – it is usually adjacent to the refreshments – and offers a unique opportunity to examine products at

leisure without feeling under pressure. On a related theme, I found that the catering arrangements had improved since my last visit. No longer did the lunch queue wind three times round the UMIST campus!

For those with energy, a varied social programme was on offer, including the normal discos and quizzes, along with a choice of enticing dinner excursions.

Proof of the excellence of the organisation of UmbrelLA is that the ordinary delegate finds everything running smoothly. The Conference is a tribute to the LA Organisers, the Group Committees, UMIST for the accommodation and the local team who were so friendly and helpful.

Looking back at UmbrelLA from the everyday workplace, I remember nuggets of information I gleaned, contacts I made. I would recommend this experience to any professional, most of all those who work alone.

***Janice Grant
Ayr Hospital***

**CPD Event – Support
for Chartership &
Fellowship**

The half-day Continuing Professional Development event was held in the Walton Conference Centre of the Southern General Hospital in Glasgow on the afternoon of Friday 2 November. It was organised jointly by SHINE and the Career Development Group (Scottish Division) of the Library Association and was intended to support health librarians undertaking the process of Chartership or Fellowship of the Library Association. There were three speakers, all from within SHINE, and the day was to end with an informal discussion.

First up was James Beaton the librarian at the Royal College of Physicians and Surgeons of Glasgow. James spoke about his own career and experience of writing his PDR (Professional Development Report), stressing the need to be analytical and giving some useful hints on writing style and the kind of content expected by the Library Association.

James was followed by Katrina Dalziel of the Royal Alexandra Hospital in Paisley but this time speaking in her guise of Press & Publications Officer of the Career Development Group. Katrina spoke about the support that the CDG can offer candidates and provided some useful handouts of relevant articles and web-sites. She also spoke about some benefits of chartering and highlighted that around 1/3 of the adverts in a recent LA Vacancies Supplement mentioned that candidates should be chartered or working towards Chartership. The final speaker was Margaret Forrest of HEBS who covered applying for Fellowship of the LA. The prospect of applying for Fellowship can seem pretty remote for someone struggling for PDR inspiration. However, as Margaret said,

Chartership and Fellowship can be seen as a process and material collected and dumped in a big pile for Chartership should be kept and piled higher by anyone considering Fellowship. Also, much of what Margaret said about Fellowship could apply equally to Chartership including a great tip on time management that involves a cucumber.

During the informal discussion at the end of the afternoon we had a chance to talk to the speakers, the other candidates and to Laura White, the LA's Regional Registration Liaison Officer for Chartership. Laura gave good advice on the different methods of Chartering although most candidates I spoke to seemed to have settled on the PDR as the preferred method. There was also the opportunity to borrow completed submissions and steal any good ideas. It was during this informal discussion that Margaret mentioned to me that it might help my PDR if I were to write a report on the event for Interim. I may have just nodded my head ever so slightly and possibly said "hmmm" – next thing I know I'm getting emails about deadlines! Anyway, throughout the afternoon the emphasis was informal but also that Chartership was worth doing and that it shouldn't be left too late (helpful advice for me about a year and a half ago). Another point which I think all the speakers made was that CPD is not simply about achieving Chartership or Fellowship but that it should be an ongoing activity and whenever this was mentioned we would all nod our heads sagely.

As I'm sure anyone who has completed their Charter, or who has contemplated doing it, will testify the major stumbling blocks are not that it seems particularly difficult but may be

more motivational. This is especially true for anyone working full-time and, perhaps, especially if you're working in the health service where there are rarely immediate tangible (ie monetary) benefits. There are also no deadlines to meet and it can be an easy thing to put off. However, apart from the helpful tips and advice, the positive tone of the speakers – and the fact that people from within SHINE had used their time to talk about their own experiences – was motivation in itself and I certainly left for the pub feeling suitably inspired.

*David Burns
Maria Henderson Library,
Gartnavel Royal Hospital*

Public Health & Health Promotion Librarians' Meeting

Notes of a meeting between Public Health and Health Promotion Librarians / Information Specialists held on Friday 22nd June 2001 at Greater Glasgow Health Board.

Purpose of the Meeting

To discuss the possibilities of joint working to improve access to electronic journals (relevant to public health and health promotion) in the light of the Scottish Executive national contract for databases and electronic journals.

The Meeting

Scottish Executive National Contract for Databases and Electronic Journals

The meeting arose out of the growing awareness that the priority list for the Scottish Executive's national contract

for databases and electronic journals did not take into account the significant role of public health and health promotion within the NHS. It was accepted at the meeting that perhaps the majority of the NHS may be employed by acute trusts, but this was no excuse for the lack of consultation.

The evolution of the priority journals list was discussed. The Learning Together Project Group (made up of Richard German (then of Greater Glasgow Primary Care NHS Trust), Gillian Hewitt (Scottish Health Service Management Centre), Sheila Cannell (University of Edinburgh) and, only joining at the 3rd meeting, Margaret Forrest (HEBS)) created a list of priority journals.

The Project Group then sent (via Richard German) a list of priority journals to lis-shine in early 2001. He invited anyone to email him with any omissions. Several of the members at today's meeting did individually suggest some more appropriate public health titles. It appears from the subsequent list circulated in May 2001 (to lis-shine and Mary Lakie's list of NHS libraries) that none of these suggested titles appeared on the list.

Reasons for this were discussed for example there may not be full text electronic access for the public health journals requested. Despite this it was felt that lis-shine could have been consulted for suggestions before the list was drawn up initially. It appears that the journals that are on the list do not appear to be representative of the majority holdings of the public health / health promotion libraries in the SHINE union list.

The current situation regarding the Scottish Executive national contract

for databases and electronic journals is that 2 suppliers have given presentations to the Project Group - namely OVID and HCN. It is not known at this time who has won the contract. Richard German sent an email message to lis-shine in mid June noting that the contract is likely to be in place by the end of the year.

Possibilities

A consortium bid for relevant public health and health promotion journals could be prepared. As this would potentially run across 15 health board areas the Scottish Executive is the one common denominator, so any action may need to stem initially from them.

This bid would cost extra on top of the priority journals already being funded. The supplier of the national contract might be in a position to supply electronic journals at a suitable price ie as a top up of the national contract rather than a fresh bid. This could be the most cost effective way of moving forward.

The Greater Glasgow e-library was admired for its efforts, but this model is easier to set up in some respects as it was focused on just one geographical locality. Any public health / health promotion bid would be across geographical boundaries which has a tendency to affect the price from suppliers

Agreed action to be taken

- Publicise today's meeting through lis-shine in a bid to encourage interest amongst other librarians (within public health or other disciplines).

- Get in contact with the Health Promotion Resource staff through their contact list. It was noted that many health promotion staff may not be members of SHINE and would therefore miss any lis-shine messages.
- At a future date, once the contract for national journals and databases is announced, another meeting of public health and health promotion librarians should be arranged with a view to getting the opinions of as many relevant people as possible. It was acknowledged that it will be easier to proceed once the facts are known.
- In preparation for this it may be useful to think what journals are currently taken by public health and health promotion in NHS Scotland and what electronic journals have a potential use.

Other Issues Raised

SLIC and an "NHS librarian"

There was concern expressed at SLIC's (Scottish Library and Information Council) lack of understanding of NHS libraries. The Scottish Executive is planning to fund a post within SLIC for the short term with the aim of transferring the post into the NHS in the long term. It was queried whether it would be preferable for this post to be, for example sited in the Scottish Executive in the first instance to ensure suitable political clout.

Special Health Boards

Some discussion also took place over whether organisations within the NHS such as PHIS (Public Health Institute of Scotland), Clinical Standards Board for Scotland and the Health Technology Board for Scotland had library support. The Health

Technology Board for Scotland has advertised for a librarian and PHIS appear to be using the SCIEH library for its service, but otherwise this appears to be a grey area.

Acknowledgements

The meeting closed and Malcolm Dobson was thanked for arranging the meeting. Anne Davis was thanked for her provision of a venue and strawberries and chocolate to round off an unusually sunny afternoon in Glasgow.

***Lynn Easton
Argyll and Clyde NHS Board***

Contributing to Interim

Contributions can be sent in either hardcopy, on floppy disc or by email to the editor at the address below. Files should be .txt; .rtf; or Word97. If you are sending a Word2000 file please let me know as I need to use a different PC to open it.

**Dorothy McGinley
Postgraduate Library
Victoria Hospital
Hayfield Road
Kirkcaldy
Fife KY2 5AH**

Tel: 01592 643355 ext 8790
Email: interimeditor@hotmail.com

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