

# enthusiasm and vigour!

Spring is traditionally the time when folk bound around with enthusiasm and vigour, ready to take on changes and challenges.

This is very true for your newsletter team who are taking a leap into the season with a new printing company, and new faces on the editorial board. The change of printing company means, that for copy-right reasons, we shall see

some changes to the established style. These, I hope, will not need to be too drastic!

The editorial board has seen some changes. **David Stewart** has replaced **Margaret Greenwood**. **David Ellis** has decided to finish after the Winter issue, and we will be joined by **Gwyneth Pearson**. A huge thank you is due to David Ellis who put in more than a year of sterling work for the Board, dealing with several bouts of proofreading for each



issue and many hours liaising with printers, and a good deal else!

Another farewell tribute, this time to **Margaret Gerrard**, is amongst this issue's varied package. Spring colours come to mind when contemplating

**Kieran Lamb's** new far from grey literature service.

**Colin Davies** has provided a summary of the Workforce Development Confederation's scoping report on health library and information services in Greater Manchester. The recent residential course on

quality management gave many of us plenty of food for thought and I have attempted to do it justice with a summary of the main issues, mostly in bullet points. Three other attendees have also given their views.

Finally, and on a much lighter note, I have had some wonderful contributions to the "Cap the Caption" competition! Happy reading!

**Kathy Turtle**

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# Two eyes staring cold and silent:

## FADE and the North West Grey Literature Service

**Grey literature, the very name makes the stuff sound boring, a background noise to the important stuff published, the white literature that inhabits your library.**

Such a view though is a touch facile, grey literature is a vital source of information; it defines the practice, policy and research framework in which the NHS operates, at both local and national levels. Invariably it is the grey literature that informs and supports developments in health care prior to conventional literature being published. However the very nature of grey literature in terms of the unconventional routes adopted to publish the material, it's frequent physical form as thin, floppy, spiral bound material means that it is a frequently undervalued resource, it tends to look like and be viewed as ephemera. Individual producers of grey literature frequently don't keep material because someone else will always have a copy, it is seldom deposited with the library, it's a classic case of tune in, turn on, throw out. This is where the North West Grey Literature Service comes in riding over the hill like some latter day Steptoe and Son. This is crucial particularly in a period of NHS reform. As organisations disappear their grey literature disappears with them, well this time there's a home for the grey literature.

### FADE

The whole point of the regional collection of grey literature is to make it available to users at point of need. A key element of this is the development of the FADE database made available on NHSnet. FADE as an acronym for the anoraks out there stands for; Frequently Accessing Documents that are Esoteric and for those of you wearing the full snorkel parka, yes it really does have its origins in the Visage song 'Fade to Grey' and the acronym came later to justify it! Items held by the library are made available to all NHS staff at point of need. If users find an item of interest on the database and contact NWHLIS, the item will be loaned to them via their local library.

Why NHSnet and not the internet? Three reasons, bottom line is the cost of making it available on the internet, the lack of local expertise in IT, and finally NHSnet has a discreet and relevant user base for FADE. However we are currently working on a mirror that will include the FADE web search engine if not the database itself. In addition we are in the process of installing and testing a media database that means that electronic documents catalogued will be just a click away.

### CURRENT AWARENESS

In addition we provide a fortnightly grey literature bulletin in Adobe Acrobat format with live links to electronic documents, which can be e-mailed

directly to users or can be found at the following locations:

[http://www.nwpho.org.uk/library/lib\\_index.htm](http://www.nwpho.org.uk/library/lib_index.htm)

<http://www.lihnn.org.uk/lihnn/org.paneris.nwhclu.admin.Display/GeneralReports>

<http://nww.fade.nhs.uk>

In terms of future developments for the current awareness side of the service we aim to pilot an SDI service in the near future with our colleagues in Liverpool and offer that as a service to the rest of the North West in the near future.

### SUPPORT US IN DEVELOPING THE COLLECTION

Grey literature is unconventional literature, most of it goes unrecorded by anyone other than the organisation that generates it, even then it gets lost. You can support the development of the North West Grey Literature Collection by adding us to your distribution lists for internal publications. Equally it is important that the Health Service ends its skip culture, if you are faced with a collection of documents from an office that's been cleared or an organisation that's disappearing, offer them to the North West Grey Literature Service. It's your organisation's chance to share its best practice with a wider regional audience.

**Kieran Lamb**

Central Liverpool PCT

## 25 years and almost going, going, gone!

**On Thursday 21st February**, along with Jean Williams, Mandy Beaumont, Pauline Francis, Roshanara Nair, Sheila Rudd and Valerie Ferguson I attended Margaret Gerrard's "leaving do" at the PG Education Centre, Royal Albert Edward Infirmary in Wigan. As you would expect there was lots of

good food and drink. A large number of Margaret's work colleagues came to listen to Dr. Marples summarise Margaret's achievements for the library service over the 25 years and present gifts, cards and vouchers. On behalf of NW health librarians I thanked Margaret for her contribution to health librarianship in the North West. After extensive research (well I e-mailed those people most likely to know) I reminded everyone that Margaret was editor of Gateway (a predecessor of LIHNNK UP) and a founding member of NORWHSLSA. Margaret thanked everyone for coming and promised not to say too much so

that we didn't have to use our hankies.

Judging by the gifts Margaret will be very busy in her retirement making bread and mixing all sorts of interesting cakes and other goodies. I think I need to qualify the word retirement though. Those of you in the know will be aware that in April Margaret will be back working part-time until the new Trust Librarian takes up post. Perhaps Margaret would like to do the catering for her next leaving do!

**Linda Ferguson**

Health Care Libraries Unit

# information governance

## NHS LIBRARY & INFORMATION SERVICES

A Summary of the Greater Manchester Workforce Development Confederation's scoping report on health library and information services in Greater Manchester.

"All NHS staff and students will have opportunities to develop information-handling skills and be able to access and make use of the knowledge base of health care".

Strategy Framework, North West Health Care Libraries Unit, 2002

### The Vision

#### ACCESS

Each Trust needs to provide high quality evidence-based patient care and must ensure that all staff and students have access to the information services and resources they require to carry out their work effectively.

#### RESOURCES

Library resources reflect local need, whilst encompassing a core collection based on national standards. Resources include multi-disciplinary books and journals, electronic information, computers, educational programmes and library staff who can develop, deliver and manage the service.

#### EDUCATION

The rapid expansion of electronic resources and services requires core IT competencies that enable health staff to access and use information effectively. Librarians deliver comprehensive training programmes in literature searching skills and literature appraisal.

#### PARTNERSHIPS

Local and northwest wide partnerships continue to be developed with NHS and educational organisations to enhance the provision of local library and information services.

#### FUNDING

The merged levy offers an opportunity to explore library funding and for Trusts to recognise their responsibility in funding services appropriately.

### 24-hour access to electronic databases and journals

ADITUS underpins the entire strategy for northwest health libraries. It provides online access to health databases, which support clinical governance, evidence based practice, life-long learning and research.

Access to electronic resources within the ward, department, surgery and clinic is becoming the norm. ADITUS is now available to all staff through any computer linked to the NHS network ([www.aditus.nhs.uk](http://www.aditus.nhs.uk)) or Internet ([www.aditus.nhs.uk](http://www.aditus.nhs.uk)) – at the desktop, workplace, home or library.

"The philosophy underpinning the ADITUS portal is that of multi-disciplinary and equitable access for all health staff and students in the northwest".

ADITUS Board Summer 2001

### Modern Library Service

Librarians are developing and delivering library services to support the extensive information needs of health staff in their daily work with patients, carers and families.

- Working with clinical teams in developing clinical guidelines and care pathways
- Providing work-based training and support in information handling skills
- Developing and managing distributed services
- Working with IM&T on electronic information provision – Intranet and Website development
- Managing the physical library that provides print-based resources to complement electronic services.

"Libraries are developing a culture of continuous quality evaluation and improvement at every level of the service".

David Stewart,  
North West Director of Health Libraries

For a full copy of the report, or information about the role of the Health Care Libraries Unit is developing and supporting NHS library services, please contact **Colin Davies**, Deputy Director of Health Libraries.

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# RESIDENTIAL COURSE ON QUALITY MANAGEMENT

Hoole Hall, Chester

Monday 4th & Tuesday 5th  
March 2002



Over the two days, we considered and discussed several issues concerning the management of quality in our organisations. The two days were divided into six sessions, and conducted by the CHT solutions trainer, Nick Carley.

**Kathy Turtle**

*Chorley and South Ribble NHS Trust*

## Session 1

### Introduction

#### What is quality?

#### The fundamentals of QM

#### What makes a quality organisation?

"Kaizen" may sound like a word that an oriental martial arts cartoon character would use to threaten a foe, but it's a Japanese word meaning, in effect, the quest for continuous improvement. Thus our first session exercise got underway with us all thinking, in groups of four to six, how we would define the word "quality".

#### Points from the discussions:

Association – quality is what we've always regarded it to be

Concerns identifying what users want

Accountability – as reflected in statistics gathered.

Formal measures, e.g. Chartermark. Although the disadvantage is that staff feel a lack of ownership and motivation – just a "ticking the box" exercise.

The organisation's culture should be about quality. It is integral and collaborative and forms a continuous process of improvement.

It means never having to say you're sorry!

Unreasonable demands from users imply a re-education!

#### Complaints:

We are often the victims of limited resources.

Give us the opportunity to reflect and put right.

Depersonalise complaints and don't get defensive.

Complainers need to may need to remain anonymous.

### A quality organisation

After a brief resume of the history of quality, we turned our attentions to the characteristics of a quality organisation:

Motivated staff who are recognized as individuals.

Good communication.

Continuous improvement.

A reliable and reputable organisation.

One aware of its public image, and knows its market.

## Session 2

### Who are our users?

### Who are our competitors?

### Who are our suppliers?

### What do our users expect from us?

### What barriers exist between expectation and delivery?

Discussions revealed a wide range of stakeholders and users, from trust staff to deaneries, PALS and patients themselves.

A good means to identify users is to think of them in segments, which may be according to geographical location, information need, or directorate.

Users' expectations often related to how informed they are themselves and what experience they had of using libraries. Other issues concerned the accessibility of services and specific skills such as database searching.

### Barriers:

Geographical.

Lack of funding.

Hours of opening/No facilities for disabled users.

Staffing levels/Training needs unfulfilled.

Lack of marketing.  
No statistics about usage.  
Lack of appropriate strategy.  
Top down culture.

## Session 3

### How do we get our message across

#### How should we get our message across

#### How many Ps in marketing

#### How can we differentiate our offering

A marketing plan should be part of the strategic plan.

Put plenty of thought into the marketing plan, and don't rely on tried and tested ones – you can have too many leaflets!

Try more informal strategies such as joining working parties/groups.

Tailor your marketing strategy to specific groups.

Methods should ensure the next step is there i.e. telephone numbers and web site addresses on printed material.

Have a consistent image, and don't make materials too 'busy' – stick to one or two fonts and colours.

If you walk through the premises regularly – change your route – it's another networking opportunity!

## Session 4

### Where is our service now and where do we want it to be?

#### Challenging what we do and how we do it

#### Consulting with users

#### Comparing ourselves with others

The local authority initiative, "Best Value" indicates the four 'C's:

*Challenge, Compare, Compete, Consult*

We discussed these in terms of service planning which is vital for:

*Our own benefit!*

*It gives us clear objectives*

*It benefits managers who will then know what we're doing*

*Helps our staff understand and feel involved*

Build it into the appraisal system, so it's constantly revisited and reviewed.

Staff training plans should be there to support objectives.

Helps to focus communication with funders – clear objectives help arguments for more cash!

Ask yourselves the question "what business are we in?"

Think of your vision – where do you want to be?

Vision needs to be evidence based – what do users want?

Be aware of the government's agenda – this drives your service.

Analyse your environment – political/-economic/strategic.

Keep processes under review.

Be aware of the problem of ensuring your organisation will take your vision on board Differentiate between strategic vision (long term) and business plan (shorter term).

At this point, David Stewart made the point that the current time and immediate future will be very difficult periods, due to health authority/-PCT reorganization. It calls for "courage, conviction and strong coffee"!

Challenge what you do – difficult questions need to be asked.

Ask non-users in preference to library friends! Compare services with those of others.

## Session 5

### Tools and techniques for managing improvement

#### Problem solving techniques

#### Improving teamwork and communications

This session was largely spent on the case study. Groups spent time discussing strategies to improve the so-called Winnington library. The case study outline is included in the Handout Pack.

## Session 6

### How do we know we're doing a good job?

#### Obtaining qualitative and quantitative feedback

This session concentrated on performance measures, and in groups we discussed what we could meaningfully measure and how!

*Some of the points which arose include:*

Public libraries, for example, use a Needs Fill Rate, which indicates the percentage of readers who found which books they required on a particular day. Studied over a period of time, say a week, it provides a snapshot of the success of the service in this particular aspect. (Michael Mason, Ormskirk, has details).

The difficulty of distinguishing between qualitative and quantitative measures became apparent.

Measures could be service specific e.g. number of pcs available.

Measures should be considered with peaks and troughs in work patterns, e.g. book accessioning is no quick task after year-end spend!

The final part of the course was a resume of the main means of gathering information about our users.

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# RESIDENTIAL COURSE ON QUALITY MANAGEMENT

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Points which arose include:

Use questionnaires sparingly and have experienced input!

Balloting over specific issues, e.g. opening hours, may raise unrealistic expectations.

Focus groups can help to target issues, but need experienced facilitators and observers.

Don't let user groups become dominated by friends of the library – you need greater critical input.

With complaints and comments, be open about what you can and can't change/improve.

Roadshows – you need a way to record comments.

Egroups – very flexible.

Websites – make sure they're up to date.

In conclusion, it was a very thought provoking and enjoyable course.

The pack can be borrowed from me. Linda Ferguson will be putting the pack on the LIHNN website.

## What did other people think of the course?

Here are a selection of views:

*As I am not responsible for a service point, my comments can only be very general. However, I found the course useful and interesting and have put a number of elements it covered into the North Mersey Library Strategy that I am in the process of writing. I will be working with a selection (self-selected!) of librarians from my patch to consider Quality issues further.*

*Meantime, I am hoping to develop something round reference enquiry processes and outcomes in association with Melanie Hinde which will lead to improved performance indicators for this element of our work. I am also hoping that the patch co-ordinators can work together to develop the segmentation of our users and then the consultation with each segment that will be vital to ensure our services really meet the user needs.*

*This will be discussed further at our next co-ordinators meeting at the end of April. The range of consultation options described on the course will be most helpful in progressing this.*

*The most useful thing of all was to hear and participate in the small group and whole group discussions which gave me a good sense of where we are up to "culturally" in relation to quality management.*

Valerie Clark

*Having not been on a course like this before, I found it very useful. We will be undergoing a higher education QAA as well as Library accreditation, so I see the course as a good starting point for both.*

*I'll need to review all our quality measures in the light of these. The marketing and service planning elements of the course were the best parts. I think a lot of people had run out of steam for the last session, but the printed materials will be worth reading once my brain has had a rest!*

Colette King


*Those members of the Manchester Patch Group who attended the HCLU residential on Quality came away with renewed enthusiasm for addressing this very important issue.*


*We recognised that some work can be done at Patch level and we intend to hold a themed meeting to discuss options and define action plans. Outcomes will be fed back to LIHNN via the newsletter and the website.*


Melanie Hinde


# cap that captioncompetition


Thanks to all our contributors of the following alternative captions, from some of our stalwarts and from some very interesting characters called Cindy, Inky and Zelda. If anyone tracks them down, perhaps they'd let us know!!


 "Dr Carruthers waited some time for his NHSnet connection to work"  
Kieran Lamb


 "Newsletter, schmooseletter...this is the last time I ever volunteer"  
Cindy Loopy


 "New killer virus found on pc!"  
Zelda Blaster


 "Thank goodness we can retake our ECDL exams up to 10 times!"  
Gwyneth Pearson

 "BUPA to run NHS"  
Inky Shaeffer


 "How was I to know it wasn't plugged in?!"  
Teresa Couseins

 "These overdues are getting ridiculous!"  
Emily Goody


 "Waiting lists will be shortened!"  
Tony Blair


 "When did you say the network would be working again?"  
Sue Beames



 "I only ticked the box that said 'Organ donor YES' ."  
Peter Andrews

 "Blackpool staff take working their fingers to the bone to the extreme."  
Sue Beames

 "ECDL rule no 1: Never, ever forget to feed your mouse"  
David Ellis

 "Trevor, we told you tea and coffee were not enough to keep them going! More biscuits please!"  
Sue Beames





# “editor's column”

## notes for contributors

1. 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.

2. News items and short pieces, which can range from factual to amusing, are also welcome.
3. All items can be submitted in print or 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.

Guidelines for contributors are also available on the Lihnn website.

## contributions should be submitted to:

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**LIBRARY AND  
INFORMATION HEALTH  
NETWORK NORTHWEST  
NEWSLETTER**

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