LIHNNK UP · LIHNN

by Health Libraries, For Health Libraries · **ISSUE 24 WINTER 2007**

LOVE I.T.!

Technology, communication and user consultation are the main themes of this issue.

Steve Glover reports back on the work of the Interlending and Document Supply Group and presents statistics from LKDN showing activity in this area. The discussion highlights external influences on ILLs, many linked to technology such as joint OPACs and electronic journals. It will be interesting to see the statistics from 06/07 to see how they compare. Steve's second article highlights access to the Ovid titles and discusses encouraging users to make the most of them and monitoring use to ensure that we get value for money.

Sue Taylor at Macclesfield shares with us the results of her exploration into the most effective way to carry out user consultation, which will give us all some more ideas for engaging with our users.

Jean Williams at Bolton Hospital held an open day, linked to St David's day to encourage staff to visit the library and see their redesigned study area. I like the idea of offering cake – if I had known I would have gone along myself!

Mandy Beaumont at Lancashire Teaching gives an overview of the CILIP Conference on the Wi-Fi, detailing both the barriers and benefits of the technology, including the lessons learnt from other organisations that have implemented the system. The message seems to be if you work with your IT department and market the technology then it can encourage new users.

Michelle Cotton CMMC and **Tegwen Williams** at Lancashire Teaching attended the Communication and Co-operation Residential. They provide an interesting overview of the days activities, including understanding communication and behaviours using LIFO, Belbin and the Six Thinking Hats method.

Finally, the bowling challenge between Christie, Hope and Stepping Hill sounded like an enjoyable event, full of history and washed down with some wine. Although, I thought that letting the LIHNN community know that Stepping Hill needed the "bumpers down" was a little unfair, as it is the taking part that counts!

Vicky Sergeant
Outreach Librarian
CHESHIRE AND WIRRAL PARTNERSHIP
NHS TRUST

LIHNN Inter-Lending & Document Supply Annual Report 2006

Steve Glover LIHNN ILDS Chair

The LIHNN Inter-Lending and Document Supply Group (LIHNN ILDS) was formed in 2006 and is responsible to the LIHNN Coordinating committee for all matters pertaining to Inter-Library Loans & associated protocols.
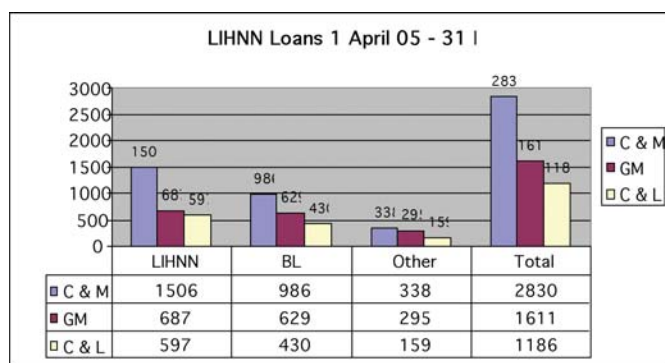
The Committee worked with HCLU to produce the LIHNN ILDS Document Supply Protocol which is available from the Aditus Website. The Group is representative of all staff groups and geographical demographics and meets 1 – 2 times per annum or as necessary.

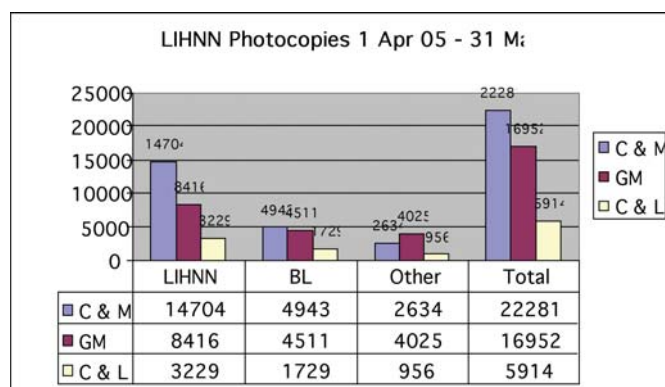In 2006 the group participated in a national document supply pilot administered via Dialog e-links, organized a North West workshop on behalf of the national NLH-LKDN ILDS Group and submitted a successful bid to carry out editorial work on the LIHNN Union catalogue hosted on Aditus.

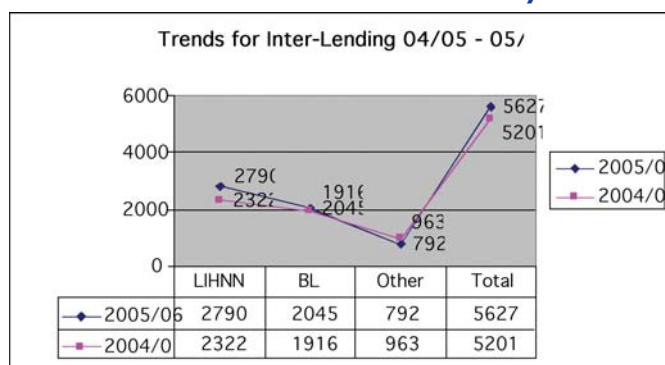Here are the statistics for activity reported in the 05/06 LKDN return

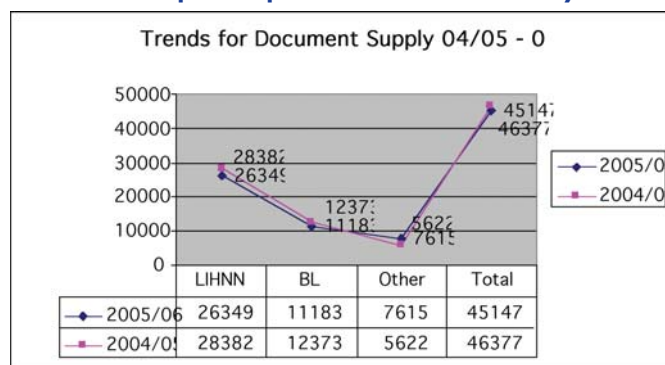### Table 1. Number of Loans by SHA Area

	LIHNN	BL	Other	Total
C & M	1506	986	338	2830
GM	687	629	295	1611
C & L	597	430	159	1186

Table 2 – Number of Photocopies by SHA area

	LIHNN	BL	Other	Total
C & M	14704	4943	2634	22281
GM	8416	4511	4025	16952
C & L	3229	1729	956	5914

Table 3 – Trends for Inter-Lending 04/05 – 05/06
* Number of loans increased in 05/06 by 8.2%

	LIHNN	BL	Other	Total
2005/06	2790	2045	792	5627
2004/05	2322	1916	963	5201

Table 4 – Trends for Document Supply 04/05 – 05/06
*Number of photocopies decreased in 05/06 by 2.6%

	LIHNN	BL	Other	Total
2005/06	26349	11183	7615	45147
2004/05	28382	12373	5622	46377

Discussion

The number of inter-library loans carried out across LIHNN is dependent on a number of external influences. Here are just a few scenarios which may have an impact in the future:

- An increase in the availability of articles and documents in open access forums will result fewer articles being requested via inter-library loans. However it is probable that the most current literature will remain behind subscription barriers for a period of time until it becomes un-embargoed.

- There may be an increase in inter-lending between libraries as joint OPACs are made available such as the Greater Manchester OPAC

- If more libraries subscribe to set packages such as the BMJPG journals, LWW on Ovid, Blackwell's Synergy collection, Elsevier's Science Direct, then there may be fewer unique titles available across LIHNN as we all buy access to the same titles.

- As more journals are available online and articles are linked via databases access will increase and requests may fall away.

- Improved current awareness tools drive up demand for articles

- Google Scholar licenses full text content

- Library budgets continue to shrink resulting is less subscribed content and document supply replaces subscriptions on a charge back basis.

Lippincott Williams & Wilkins journals across the NHS North West

Steve Glover Christie Hospital NHS Trust

On 1st January 2007 access was granted to nine of the most popular Lippincott, Williams & Wilkins journals across all NHS trusts within the North West NHS SHA area. This licence was the product of an offer made by Volters Kluwer, owner of Ovid Journals to the regional unit (HCLU) with a top up volunteered by some Trust Library Services.

In the first year a price was fixed by calculating existing NHS North West spend for print and electronic subscriptions on the nine titles and calculating an electronic access fee to make these titles available for all trusts across the region. The price in subsequent years will depend on cancellations to existing subscriptions and migration to online only.

The nine titles are Anesthesia & Analgesia, Anesthesiology, Annals of Surgery, Circulation, Clinical Orthopedics and Related Research, Critical Care Medicine, Laryngoscope, Neurology, and Stroke.

E-links to these titles have been integrated at North West level on Dialog Datastar Core Content databases so that users may seamlessly move from a literature search to full text using Athens authentication. Full text articles are available in varying formats such as HTML and PDF.

The LIHNN E-Resources Group will be monitoring usage of these titles as future regional deals will be based on value for money so it is important that these resources are promoted to interested users. Athens activity will also be monitored at trust level; this will give an indication of which trusts are benefiting the most from the deal.

These titles can be accessed via Dialog Datastar Core Content databases, MyAthens, TDNet, and local library websites in addition to PubMed and by logging into journals@ovid. So it is important to get the message out to users that these resources are now available.

Between 1 January 2007 and 16 March 2007 there had been 6572 Athens sessions recorded by NHS North West staff on Ovid

Accessing LWW from within Dialog

Journals. The highest users by Athens sessions are Lancashire Teaching Hospitals (660 sessions), Pennine Acute Hospitals NHS Trust (535 sessions) and University Hospital of South Manchester, Wythenshawe (515 sessions). All three of these trust purchase access to other LWW journals on top of the 9 titles included in the regional deal.

I am currently waiting for Counter statistics broken down by the 9 regional titles.

I have also put together a promotional poster available by request:
sglover@picr.man.ac.uk

An evaluation of alternative

East Cheshire NHS Trust runs a 10 day course for staff entitled *Leading Service Improvement.*

I recently participated in this along with a wide range of clinical and non-clinical managers – from senior nurses to catering supervisors. Those attending are required to carry out a work-based project which will lead to an improvement in services. For some time I had been reflecting upon the absence of a 'library committee' or 'user forum' and, with accreditation looming, felt that we ought to consider whether or not this was still likely to be a successful way of carrying out user consultation, given pressures on staff time and the poor attendance which had been observed at other Trust meetings.

First the various methods of obtaining feedback were identified. These included those currently in use, plus others identified by:
a) contacting other NW NHS libraries
b) posting a request for information on the lis-medical email list
c) searching the email archives of lis-link; lis-medical and lis-nursing
d) from the literature

Surprisingly little appeared to have been written recently on this topic. Email archives found that most libraries used multiple methods to attempt to reach the largest number of users. User groups and 'old-style' committees were generally not felt to be useful.

The methods which we currently use include:
- Attendance by Library Services Manager at medical or other formal meetings

- Email feedback received by individual members of library staff
- Evaluations from training sessions or presentations
- Suggestions boxes / slips
- Newsletters with feedback slips
- One-to-one conversation
- Smaller ad hoc surveys
- Accreditation visits
- Library E-mail address

Additional methods identified from other libraries were:
- Advisory groups (Library committees)
- Toll-free telephone number
- Online open discussion lists
- Feedback via web page
- Focus groups
- Annual survey of users

The process of obtaining feedback from users was mapped, from the point when the user offers a comment, to the point at which they receive a response. This showed a very linear process, and highlighted some issues which needed to be addressed.
- a lot of feedback goes directly to individual members of staff and is not communicated to, or discussed with other library staff.
- feedback received is frequently filed away and rarely communicated wider than the library staff.

- it is not clear what changes or improvements are being made as a result of feedback

Having identified the various methods above I wanted to assess the usefulness of each one. To do this, I used the option appraisal process as described on the web site of the Care Services Improvement Partnership.
www.cat.csip.org.uk/index.cfm?pid=340
Scoring each option
Option appraisal sets out all the options and assesses each one against a template of criteria, so a list of desirable criteria was drawn up. A small group of library staff and users were asked to vote on the relative importance of each criterion – 50% voted online using Smartgroups.com and 50% using paper slips sent by email. The criteria are listed below in order of importance.

The system should:
- Be accessible to majority of relevant stakeholders* irrespective of location
- Offer a quick and easy way for library to respond to user
- Be efficient / economic in terms of time and cost
- Allow discussion of issue between library and stakeholders
- Provide a permanent record of discussions for future reference
- Allow all library staff to offer opinions and comments
- Allow actions/decisions to be communicated to other stakeholders
- Provide feedback on outcome of any changes after implementation
- Allow other stakeholders to offer comments and contribute to discussion

Each consultation method was then given a score out of 5, based on how well it satisfied each criterion. In scoring, it was recognised
a) that not all users are on-site and so may not have access to e.g. suggestions boxes
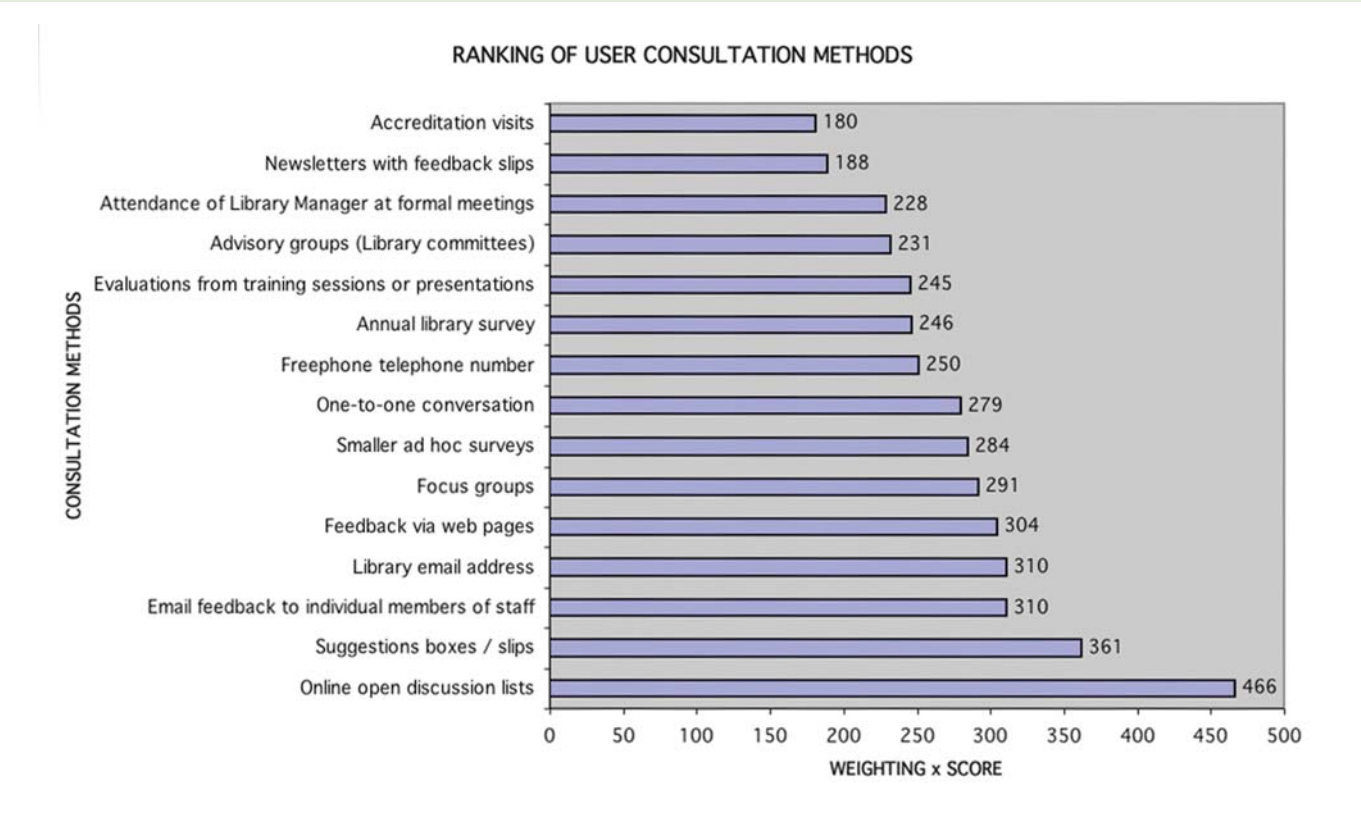
methods of user consultation

b) that not all users are, as yet, computer literate, and so all e-methods have been scored at 4 rather than 5 for the first criterion - accessibility.

A final total score was created by multiplying the criterion importance score by this ranking 1-5. The results are shown in the chart below.

Now that the evaluation has been carried out we are seeking ways to implement the findings. We have already added 'user feedback' as a standing item on our staff meeting agenda to encourage the sharing of comments amongst library staff. Discussions are taking place with colleagues in IM&T as to how we can use the new Trust intranet site as a vehicle to

The term 'relevant stakeholders' is taken to mean those directly involved in that activity e.g. evaluations from training sessions will only be relevant to attendees, and so we can say that they are fully accessible to that group. Similarly 'focus groups' are a group of individuals focussing on a particular topic, and they are the relevant stakeholders in that instance.

RANKING OF USER CONSULTATION METHODS

Consultation Method	Weighting x Score
Accreditation visits	180
Newsletters with feedback slips	188
Attendance of Library Manager at formal meetings	228
Advisory groups (Library committees)	231
Evaluations from training sessions or presentations	245
Annual library survey	246
Freephone telephone number	250
One-to-one conversation	279
Smaller ad hoc surveys	284
Focus groups	291
Feedback via web pages	304
Library email address	310
Email feedback to individual members of staff	310
Suggestions boxes / slips	361
Online open discussion lists	466

The method which scored highest was the use of an online open discussion group. Other new methods which scored well were the use of the Library web pages and focus groups, so it would seem sensible to try to introduce the use of these three new mechanisms.

The more traditional methods such as formal meetings; accreditation visits and large surveys did not score well. This was because of their lack of accessibility to all stakeholders; lack of interactivity and cost in staff time.

enable some of the other electronic methods, such as discussion groups and interactive forms. The use of focus groups should help us to target the needs of particular groups of users and discussions are taking place with clinical leads to identify appropriate groupings. LIHNN or HCLU might wish to consider running some training for library staff in how to facilitate this activity.

Although accreditation visits were at the bottom of the user consultation rankings I don't think we'll be able to use that excuse to escape the process!

Sue Taylor
LIBRARY SERVICES MANAGER
EAST CHESHIRE NHS TRUST

Wireless Broadband in Libraries:
getting full value from your investment in Wi-Fi
(CILIP Conference 13/03/07 in London)

In March I attended the wireless technology conference in London organised by CILIP. The aim of the conference was to address the issues that Wi-Fi was posing for libraries and how they could take advantage of this technology to provide additional services for their customers.

The main focus of the conference was on the implementation of wireless technology in public libraries. However, there were two health related presentations, which covered the implementation of Wi-Fi in the BMA library and partnership working between a PCT, public libraries and voluntary mental heath agencies in Peterborough to facilitate the delivery of Cognitive Based Therapy (CBT). I found this mix useful, as it allowed me to contrast the difference ways Wi-Fi was being used in the different sectors i.e. educational, leisure, business and as an aid to therapy.

Throughout the conference a number of themes emerged, which included the benefits, the barriers and lessons learnt that were encountered when introducing wireless technology. Each of these are described in more detail below.

BENEFITS
- Increased the libraries profile within the organisation and with its users. Library users expect to be able to use Wi-Fi and the ability to provide it will boost the libraries image as a modern service. It is also seen as the next step in the development of ITC provision in libraries. Evaluation of services before and after the introduction of wife has indicated increased usage of other services
- Increased the availability of PC's as users with laptops can connect to the wireless service and therefore it will allow a greater number of users to benefit from IT
- Allows access 24/7 as connections to laptops can be achieved outside library buildings and it provides convenient access for users
- Increases the type and diversity of services the library has to offer
- Allows greater flexibility in the use of space, which will allow for an expanded range of activities. This is especially important in libraries were space is at a premium
- Attracts new users and new uses of space

BARRIERS
- One of the main barriers to implementation was security of the system and in particular IT Departments had concerns about the ease with which organisational systems could be hacked into. Many of the Public Libraries have circumvented this problem by providing Wi-Fi via an external supplier, so that the system is independent of their local authority networks.
- Perceived cost of implementation and maintenance of the system. This included the purchase of laptops to lend to users who do not posses their own to comply with social inclusion policies
- Training issues due to the levels of knowledge and expertise both library staff and users have
- The effectiveness and stability of the organisations technical infrastructure
- Promotion and publicity needs to be widespread to promote Wi-Fi effectively and attract new users
- Funding can be a barrier, especially if the library service is implementing this independently within the organisation

LESSONS LEARNT
- One of the keys to success is to win round the IT Department. The main problem has been round security issues and the need to actively engage the IT Department to work through the issues and create a co-ordinated approach.
- Any contract that is taken out with an external provided needs to be looked at carefully. A commitment to recurrent funding is also important to ensure continuity with the service once it has been implemented
- Evaluations carried out in libraries that have implemented Wi-Fi have indicated that it does increase library use and have provide useful when asking for further funding to develop and expand the service
- Think about organisation wide access
- Marketing the service is of prime importance to ensure take up of the new service and the key is to advertise widely
- When implementing Wi-Fi especially as part of refurbishment plan it in with the overall design and look at purpose built furniture.

At the end of the conference I came away with a better understanding of Wi-Fi and an enthusiasm to implement wireless technology within the library, funding and IT Department permitting.

Mandy Beaumont
KNOWLEDGE AND LIBRARY SERVICES MANGER
LANCASHIRE TEACHING HOSPITAL NHS
FOUNDATION TRUST

Education Centre Library
Open Day

Come and join the 'dragons in their den'
on **Thursday 1st March** between 11am and 3pm

Read in the re-designed quiet study area

Search for a book anywhere in Greater Manchester on
the new joint **Health Libraries Catalogue(GMOPAC)**

Use **UpToDate** the clinical reference tool to find evidence based information

Or as it's **St David's Day** join us for a Welsh cake, bara brith or just a coffee

Enter the free competition to win a £10 book token

Pauline Francis helping readers with literature searching

Communication and Co-operation Residential Course

Neither of us had attended a course on communication for a while, so we were interested in taking part in the residential to help us understand and adapt to other colleagues ways of communicating.

Lawraine Wood was to be the facilitator, and we had come across some of her work before. Also as a beneficial aside, there were a number of colleagues from the North West region attending whom we had not met before, so we looked forward to networking with them and maybe sharing a glass or two in the evening!

For the first morning Lawraine talked through the course and we were divided into small groups. We started by discussing communication in general and how it informs behaviour, working with LIFO as a basis. LIFO stands for 'life orientations' and is an approach developed by Stuart Atkins and Alan Katcher. It centres on the theory of human behaviour and communication and the differences in people's approaches. After completing a personal style survey the four main behaviour types were identified as controlling, adapting, supporting and conserving. Using the results of the survey we all had to identify our two main behaviours types. The theory put forward was that communication tends to break down when an individual lacks one of the four behaviours or uses one type to the extreme. This was interesting as we had always had the approach of treating others as you would expect to be treated – it sounds simple now, but we had not considered that those same words were what everyone expected from each other, and in many ways was a selfish approach in not expecting to have to alter.

The afternoon sessions further analysed the four behaviour types in terms of communication and perception. Positive and negative words associated with behaviour types were discussed and it was interesting to hear other's views. There were two periods of reflection time to review the information in line with our own working lives – firstly stakeholder mind maps to show interactions and communication styles from the library, and then as an individual – taking the

Course organiser and facilitator, Lawraine Wood

angles of employee, manager and colleague.

On reflecting on our own survey scores, we both realised there were definite areas that we needed to include in our communication and there were several ways we could implement these into our current roles. It also helped identify areas of weakness, for example overusing certain types of behaviour.

The second day of the Residential focused on communication with others in the workplace and it was all change on the personnel front, as we moved groups – another chance to meet new people. And despite a few sore heads from the previous night's festivities, we were all ready for another stimulating day.

The objectives of the sessions were to identify and analyse the role of communication in promoting our services and to use it to address key challenges. We also considered communication and behaviour in the context of meetings and teams and how to make them more effective.

In the morning we explored the subject of meetings. We all had experiences of good and bad meetings, so we were brimming with ideas when we discussed what helps make a successful meeting. Many of the groups had similar thoughts, with an effective chair for the meeting and a realistic agenda coming top of the desirables. We all concurred that these two factors would help reduce the all too familiar scenario of the rambling and unproductive meeting resulting in almost zero decisions being made. However many of us were adamant that refreshments were just as vital to having a successful meeting!!

To help us take a more constructive approach in meetings, Lawraine introduced us to a concept by Edward de Bono called Six Thinking Hats. This method was developed as a way of clarifying and simplifying thought processes and getting staff to think more productively. The main problem according to de Bono, with thinking is confusion; we all try to do too much at once. Thinking employs a host of different skills simultaneously and the Six Thinking Hats allows a thinker to do one thing at a time. There are 6 differently coloured hats (white, red, black, yellow, green and blue) and "putting on" any one of these hats at a time defines a certain type of thinking, giving a direction to your thinking. The Hats can be used by an individual but are most successfully used in a meeting

Held at the Suites Hotel, Knowsley 1st and 2nd March 2007

context and have been proved to reduce meeting times by up to one half.

The Hats switch people's behaviour getting them to think differently about a particular task instead of thinking of many things at once. Taking the Hats in a sequence and working through each one focuses the meeting and provides a logical framework for all attendees. The principle is that it is the intelligence and experience of all is harnessed and used in every direction. The aim is to make the fullest use of people. For example, everyone present wears the Black Hat at the appointed time and this is when everybody focuses in the direction of thinking about the disadvantages and drawbacks of an issue.

The scenario that we used to try out the Six Thinking Hats was of a meeting convened to discuss the redesigning of a merged library service, concentrating specifically on the colour scheme and furniture layout. It was challenging to use the Six Hats method and did indeed focus the mind and forced us to think and behave differently.

As a system of working it has a lot of potential within the workplace and could make meetings more constructive and productive by channelling thinking in one direction at any one time. It could also be beneficial because it can devolve power to all participants. The intelligence, knowledge and experience of all members are used and as everyone is looking and working in the same direction at the same time, the resulting focused mental ability can solve tasks more easily. As a group you are less reliant on one person.

The second main activity of the day was the completion of the Belbin Team Roles questionnaire.

This centred our thoughts on our own behaviour and the way we behave when

working in a team. Team working has many benefits, not least because it enables groups to share ideas and experiences and put them together to (hopefully) solve a problem. As a team develops, communication, flexibility and morale can increase and challenges can be overcome. Nevertheless creating a successful team takes time and the temptation to just become a talking shop,

Course venue, the Suites Hotel

rather than a forum for decisions is great. Not to mention the potential for personality conflicts…. Making an effective team relies on having a good mixture of talents and abilities and from our own experiences, we all know that there is an ideas person, a decision maker and so on. In our own behaviour pattern we can see that we tend to have a preferred manner of behaving within a team and indeed a secondary role as well. The Belbin questionnaire came out of research that discovered just this, that everyone has a "preferred" team role. Therefore by balancing these roles with a team, they can become more effective.

There are 9 roles ranging from the Completer Finisher, to the Resource Investigator to the Plant. Filling out the questionnaire really made us think about our behaviour and communication styles and we found some of the questions quite hard to answer - we didn't feel that we fitted any of the answers. (The trick was not to think about it too hard!) In each section of the survey, 10 points had to be distributed among ten statements, which you thought best described your behaviour. After taking the survey it was time to analyse the results by transposing the points attributed to each statement on to a grid and this concluded your preferred behaviour style. The results of which caused much discussion with various people declaring that their role suited them to a tee or shouting "I'm not like that at all". We also compared these roles to the behaviour types that we had used the day before in the LIFO Profiles.

Although Lawraine had proved adept at keeping the course's pace even and lively, it was very tiring with lots of concentration required and the end couldn't come soon enough! Overall we would definitely recommend the Residential and we found the whole thing very interesting and thoroughly enjoyable. It was much more reflective than we had anticipated (although we now understood that to be an important part of communication). The whole group worked well together and we met some really nice people. It was also good to have a relatively small group with similar levels of responsibility. The chance to self-assess through the LIFO Profiles and the Belbin questionnaire gave valuable insights into our own behaviour styles and it was useful to cross-reference to those with whom we work. The venue was first-rate as was the food, with plenty of the latter! For us this completed the experience.

Michelle Cotton
LIBRARIAN, CMMC LIBRARY SERVICES,

Tegwen Williams
ASSISTANT LIBRARIAN, LANCASHIRE TEACHING HOSPITALS NHS FOUNDATION TRUST

The Big Bowling Challenge

Christie Hospital vs. Hope Hospital vs. Stepping Hill Hospital

By Bernie Beisty and Steve Glover
Photographs by James Allen

[Bernie] The Bowling Challenge has a history but it has been around 4 years since the last event. We at Hope decided we needed an excuse to go out and Team Build so after a few emails and a lot of consulting diaries we fixed a date.

[Steve] During a conversation with Bernie, James and Rachel in the Fab Café on our annual ex-MMU library staff excuse for drinks in town! The challenge was laid down for a bowling competition. The date was set far into the future to allow Bernie plenty of time to instigate an intense practice regime.

[Bernie] We had a good turn out. The numbers were mainly health librarians and partners with an archivist and Sam the Egyptian engineer thrown into the mix for good measure. There was a mixture of skill levels; some of us being beginners but all of us enjoying the night. Part of the fun was watching the beginners try to master the art of bowling which Steve Glover likened to a rugby tackle! We spent an hour bowling and then moved on for something to eat.

[Steve] The teams where spread over three lanes with a mix on Christie and Hope bowling on lanes 7 & 8 with Stepping Hill bowling on lane 9. James provided the actions shots with the camera and some long exposures. The final scores taken as an average where Christie 106, Hope 95, Stepping Hill 87. Although it should be noted that Stepping Hill bowled with the "bumpers down".

[Bernie] Meanwhile once at the restaurant we realised that our booking hadn't gone quite to plan and that we had a wait on our hands. Being amongst hungry health librarians was a

James Allen

scary experience and not one I would wish to repeat. As a result I have made a mental note to double-check any subsequent bookings. As compensation we did receive free wine and drinks but this turned out to be a double-edged sword for me. I couldn't resist the free wine, drank more than was wise and then next day paid the consequences.

[Bernie] The talk included the ethics behind the Giant Squid that was killed for apparently being dangerous which I felt was a dangerous precedent to set but we were all so hungry at the time that had said giant squid been served up to us I would gladly have partaken. We also discussed family trees and I was very impressed to discover that John Coulshed can trace his ancestors back as far as the 1600s. Anyone out there who can beat that?

[Bernie] In the spirit of cross-cultural relations Joanne and I from Hope chatted to the Sam the Egyptian engineer. I, of course, decided to mention Cleopatra who I was told was Greek (I knew that!).
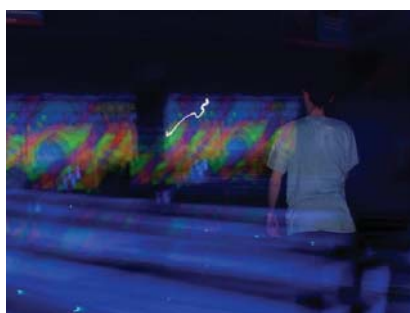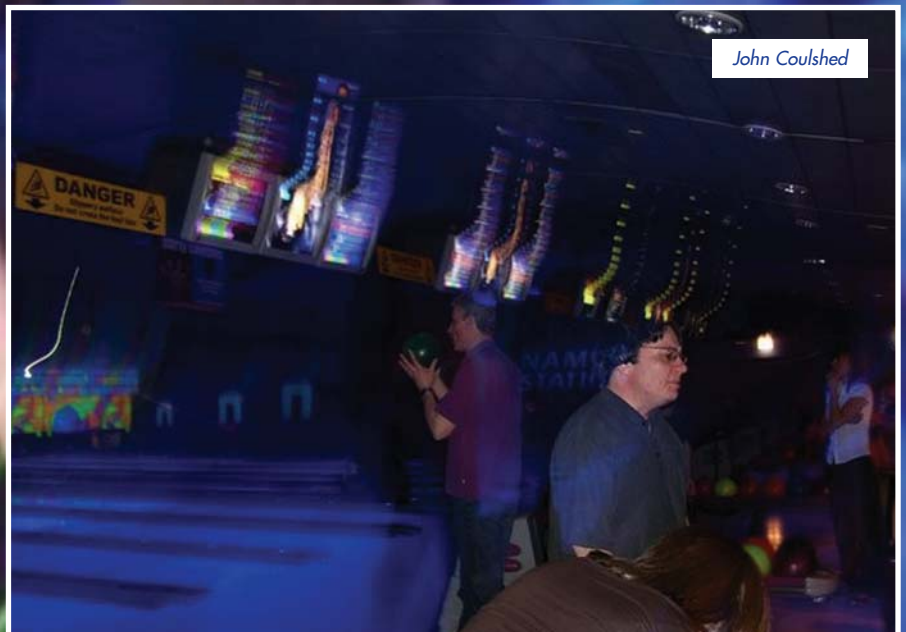
2007

Riz Zafar and Anne Webb, Christie

John Coulshed

[Bernie] So, what next? I'm hoping we repeat the Challenge next year (with more personal success for myself). At the time of organising the bowling event many of those I contacted said that they would go out to a restaurant but for various reasons didn't want to go bowling. I'll be in touch in a few months to organise going out for a meal. Also if anyone out there has any other ideas please contact me. So far I have had a number of suggestions like going to the dogs, a book group, a film group and a Girls Night Out.

Please email me with ideas bernadette.beisty@srht.nhs.uk.

The hungry health librarians

LIHNN

"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.

contributions should be submitted to:

Kathy Turtle, Librarian, Lancashire Teaching Hospitals NHS Foundation Trust, Education Centre, Chorley Hospital, Preston Road, Chorley PR7 1PP

Tel: **01257 245607**
Fax: 01257 245501
Email: kathy.turtle@lthtr.nhs.uk

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