

I attended an HLG conference in Belfast a few years ago, and came back inspired and enthused. Perhaps it was time for another trip. The theme for this year's event was "Impact and Influence: evolving to succeed". Faced with a personal relocation to an area with few job opportunities, perhaps this would help me both in work and in my attempts to look beyond a traditional role within information work, and help me make that move. An application for the Hazel Williamson Memorial bursary was sent off. It was a great surprise on opening the e-mail to see I had been successful. I had to make lots of hurried plans to get to Cardiff, and then I could sit back and wait for July.

Fast forward to July. A "sign" at the airport when travelling to the conference echoed the theme – a new invention of a book vending machine. Friend or foe of the librarian? First impressions of Cardiff were not too hot – due to the route taken by the bus from the airport. A lack of street numbers and obvious signs also made tracking down the hotel very difficult. Surely we librarians are meant to be good at finding things? I must be in need of a dose of conference CPD after all.



Next morning, an AA road sign showed I was on the right track in finding the conference venue. Has HLG ever made it on to road signs before? An imposing building beckoned, with several business like people flocking in. Only on spotting all the Reliance vans outside did I realise I was headed for the Court! I followed a few others with the relevant paperwork on a bit of a detour, eventually arriving at Cardiff City Hall.

The conference opened with a welcome to the 350 plus delegates – the largest conference for some years, if not ever. Next was the opening address by Dr Stephen Singleton, Chair of NLH Board and Medical Director, NHS North East. There were a few moments of despair when it became clear this was to focus on the development of NHS Choices, an English system which may ultimately replace or encompass NLH. But no, our near neighbours are driven by the same aims of better health and better healthcare, so of course the points made were still relevant to any non-English

delegates. The constant change faced by our profession was referred to frequently, no different no matter where we are based. NHS/HE “prejudices”, and a move to the inclusion of clinical and non-clinical care were other familiar topics. Dr Singleton’s key message was that ultimately we are all aiming for the synthesis and spread of knowledge, with us described as pilots not navigators in this Knowledge management voyage.

Bruce Madge, CILIP President followed, with an address which acknowledged further issues our profession faces, such as de-professionalism, junior doctors’ preference for Google over a library portal, and stereotypes and prejudices. On a positive note he emphasised our transferable skills, and encouraged us to look to cross-sectoral working, and to track down and engage enthusiasts from any role within our organisations to help promote our services.

From now on there were choices to make, with speakers grouped into themed sessions. “Re-shaping” was my first choice. Inspirational as always, Andrew Booth from Sheffield University spoke on “Reshaping support services for the X and Y generations”. A library blog acting as a 1 stop window, wikis as support tools for FAQs or specific projects, customised search engines such as Google Co-op, and social book marking and networking were tools and systems used within ScHARR. Andrew finished with a couple of warnings, one of the ever present problem of plagiarism, and another that technical literacy does not equate to information literacy. Another talk in the Reshaping session covered positive experiences of off the peg or bespoke electronic alert services for students and staff, one advantage being time freed up for librarians. The introduction of self service via RFID (Radio Frequency ID) was interesting. Again time was freed, but also space. In this instance the library opted for a complete change to self-service, with no “old familiar” option issue desks left. There was a focus on Change Management to introduce the project. The resulting new approach to an enquiry desk was appreciated, and students were amazed by the system’s “intelligence”.

With the morning session now ended, we were advised of where to find lunch, but told we had to go downstairs to have our OVID (sponsored) pudding! After visiting the trade stands, a warm sunny park outside beckoned for a rest.



My next choice was for a collection of presentations around “Advancing practice through research”. The University of Salford investigated perceptions around the provision of health information to patients and carers. Results showed “systems” in place were neither equitable nor systematic, and stakeholders had inconsistent knowledge around what was available. The research concluded there would not be a one size fits all solution, and proposed three models: a dedicated patient information library, an NHS/Public Library partnership, and NHS library provision. A second piece of research reported on came from an M.Sc. This considered attitudes and barriers to critical appraisal facilitation among UK healthcare librarians. An interesting conclusion to this work was that this is one area where we do not need to know “everything” before we can begin to teach the subject, and that we do not need a degree in medicine or statistics to be able to carry out critical appraisal.

For the final session of day one, I opted for “Changing Rooms: designing an information and library service fit for the future”. How would you feel faced with the news you were to relocate to a library facility just one third the size of your existing premises? It was so encouraging to hear Ray Philips speak about just such an event in his role within the Kings Fund library in a positive way. Ray quoted from Harold Wilson “He who rejects change is the architect of decay”. Quite a different attitude to change than the one which Ray described as “inevitable and often painful”; the one which most of us would relate to in this day and age. The focus of this change was to see the team “survive and thrive through change”, ensuring they were “equipped with the skill set to let them shine as a service”. A development plan covered issues such as past present and future effectiveness and aspirations. Compromises were reached; mutually beneficial storage arrangements were made. New products and services were developed to ensure a fit for purpose service, but this was done with an awareness of emotional attachments to existing services. Ultimately this process was viewed as “the end of the beginning”. I was encouraged to recognise again that in reality we all face similar challenges. It may feel like everyone else is getting a new purpose built library, but this may well come at a cost. Overall the positivity this challenge was approached with spoke volumes.



Monday evening saw the conference dinner in the Millennium Stadium. Guided tours were available before we ate. As each group came down the players' tunnel onto the pitch there was a (pre-recorded) loud roar from the (non-existent) crowd. What a feeling. And what a pitch too. It was tarmac; apparently it is made up of turfed palettes

which each contain a micro chip to ensure correct positioning. These are removed at huge cost when other events are on, during which time they are stored on a nearby airfield. We were there out of season which meant we stood on the bare tarmac used for concerts and bike racing.

Day two began with an address from the CMO for Wales in which he spoke of knowledge and information being at the heart of Public Health, just as in the beginning of the NHS 60 years ago when the CMO for England and Wales remarked on the need to "provide most recent information and quickly". He likened changes in transport through history to changes in information delivery. He recommended we meet clinicians half way, demonstrating to them how we can help them to do their jobs better. He sees libraries at the heart of aspirations of good health for all – global health.

The next presentation was a fascinating insight into plants and medicines. Where did this tie in with information? Well Professor Michael Heinrich aligned research into this subject to the differing histories in various locations around the world of what is recorded around plant medicine. A Spanish quote from his talk, "every old person that dies is like a library that burns down" maybe illustrates this. A drug derived from the snowdrop is now being used with Alzheimer's disease. This has been used in Russia for many years, but the detail has not been recorded, and is held only in the heads of those involved. Conversely, in Brisbane, details around a Euphorbia based drug used with skin cancer are well documented. A final study from present day in London looked at whether or not information around "alternative" therapies such as traditional remedies (plant medicines) used in many immigrant populations are recorded in their patient records. The conclusion was we must record knowledge. This was a very practical illustration of a point often made to us in encouraging us to share practice.

More “Re-shaping” at the next session covered health information partnerships, a “new library” project, and the DoH take on patient information in a Web 2.0 environment. The partnership working research was looking to encourage cross sectoral working. Toolkits from this research are available at <http://www.mlasoutheast.org.uk/libraries/health/partnerships/>. The presentation from Plymouth Hospitals’ Library staff was again an inspiration. Against the odds the team there had a vision for a new facility, and saw this become reality, working through all the stages, including the fundraising. The committee overseeing the project were fortunate (and wise) enough to have a Clinician as chair, who in turn drummed up support from further clinicians. (Remember Bruce Madge’s advice to make use of our enthusiasts?) Payroll giving helped in the fund raising. Users were involved in planning (even selecting chairs). Stakeholders were always involved and informed. The Chief Executive of the organisation was described as “ecstatic” with the end result! As well as a new building, the team gained so much more – a high profile, engagement with users, confidence in managing projects to name a few. The essentials they concluded were needed were interesting – a good team and one person at a time who believed it would all work. The Web 2.0 patient information work described changes in the English electronic library system. Again it was encouraging to recognise similar drivers and solutions to those going on in Scotland.

The final session I was able to attend before dashing off to the airport was a project showcase, where 7 different individuals and teams gave short presentations about “re-shaping” work they were involved in. In Leeds PCT an excel spreadsheet provides the basis for a simple personalised current awareness service. Birmingham City University have incorporated an Information Literacy module into the university’s VLE. Similarly in the University of Manchester, their VLE, Blackboard, is being used to develop training sessions for Reference Manager. Our former colleague Katrina Dalziel spoke of her experiences using storyboarding for e-learning tutorials in Swansea. NHS Blood and Transplant have devised new training (cheaper, shorter for time out of work, venue independent) solutions from existing IT resources (web conferencing and teleconferencing) to reach their 6.5 thousand staff dispersed across England and Wales. Storytelling is being used by Stirling University to change student perceptions and give them the understanding they need to learn. Finally, Leeds PCT described their work mapping usage and non-usage of four online elements of their services – ULMS, ATHENS, Alerts and, confession time, I missed

the last one! Next time you will have to apply for the bursary yourself to make sure you get all the information.

As well as all the presentations there were of course lots of interesting posters, and chats with some people on the trade stands. It was good to catch up with old acquaintances and make new ones. How would I sum up my trip to Cardiff? – a beautiful venue, inspiring speakers, encouragement that we all face the same issues in our day to day work, and inspiration from the smallest to the largest projects colleagues are involved in. I would encourage people to try to attend the HLG conference in the future. And maybe we should contribute more of our Scottish experiences. There were many “novice” speakers there, showing it’s not just those with 25years plus experience who have useful things to share.

Finally, for those who have long given up reading this epistle, here’s a “top ten” summary of the two days:

- Best aspect of the venue – Council Chamber for AGM –could have been from a Harry Potter set!
- Most inspiring speaker (I heard) – Ray Philips
- Best quote – “He who rejects change is the architect of decay” Harold Wilson – let’s start to embrace change!
- Best freebie – bright green Proquest VW Beetle Car stress ball (ok, a car is not ball shaped, I know)
- Closest near miss – check in to flight home with 2 minutes to spare
- Best excuse for not delivering your presentation – delivering twins instead!
- Biggest surprise – no turf on Millennium Stadium pitch
- Greatest encouragement – “new” library assistants presenting, supported by their managers
- Idea I hope to adopt – podcasts to promote our services
- Best food – warm welsh cakes with morning coffee, mmm

So thank you SHINE, for awarding me the bursary and allowing me to be able to say “I was there” (with apologies to those too young to remember Max Boyce).

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