

Interim

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New SHINE Logo

The winner of the competition to design the new SHINE logo was Gillian Heron, Information Support Advisor, of Health Promotions based at 181 Union Street, Aberdeen.

The committee had a difficult decision to choose between the entries received. Gillian's entry, shown below, is simple and modern to take the association into a New Year, and depending on how you reckon, a new millennium.

The lettering is in black and the background oval is in lilac. You can see it in full colour on the web site.



It will be used on all SHINE posters, letterheads, etc. in future.

Notice of the SHINE AGM

The SHINE AGM will be held on Wednesday 7th March at the Royal College of Physicians, Queen Street, Edinburgh.

In the morning Margaret Forrest from HEBS and a representative from LINC Health Panel will speak on the Health Panel's accreditation scheme. A lunch of soup and sandwiches will be provided. The business meeting will take place in the afternoon. Look out for the forthcoming mail-shot.

Chair's Report

Learning Together: a strategy for education, training and lifelong learning for all staff in the NHS in Scotland celebrated its first birthday with a workshop held in Stirling Royal Infirmary on 11th December. I have recently been asked to represent the Health Education Board for Scotland on the Learning Resources Project Development Group of *Learning Together*, and was given the opportunity to attend the Stirling workshop. At the seminar, I was very interested to hear presentations made by representatives of six of the strategy's project development groups, including Mary Lakie who described the work of the Learning Resources Project Development Group.

A few days after the *Learning Together* workshop, the Scottish Library and Information Council (SLIC) held its first meeting with "LIS personnel in the NHS in Scotland". Although not all SHINE members received notice about this meeting, a report of the day appears in this issue of *Interim*. SHINE members are encouraged to contribute to discussions on how SHINE and SLIC can work successfully together to promote the *Learning Together* strategy for the NHS staff in Scotland.

I was delighted to meet so many SHINE members at the regional meetings held in Glasgow, Aberdeen and Edinburgh in September. Approximately 100 people attended the meetings which focussed on the new licence agreement between the Scottish Executive and the Copyright Licensing Agency (CLA). Jim macneilage, Business Development

Manager of the CLA in Scotland, gave a very helpful presentation concerning the new licence and answered a wide range of questions at each meeting. The slides from Jim's powerpoint presentation, which are now available from SHINE's website (<http://www.shinelib.org.uk/>), are a very helpful guide to the new licence.

Congratulations to Gill Heron at Grampian Health Promotions, who is the successful winner of our logo competition! A new logo for a new century.

Margaret Forrest
Health Promotion Library Scotland

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!! wanted !!
Your Contributions

As always, contributions are required for *Interim*. Two further issues are planned for 2001, one in late spring and one in the autumn. Please submit your articles, preferably by email, in

.txt, .rtf or Word97 formats to the address given on the back page.

Inaugural SLIC Meeting - Stirling, 14 December 2000

This was the first meeting organised by the Scottish Library and Information Council (SLIC) for NHSiS LIS personnel, and was an opportunity to hear Robert Craig (SLIC Director) explain what SLIC does, and an outline of the work for Learning Together being done by the Learning Resources Project Group.

SLIC's main activity is to facilitate networking and provide a forum for various sectors of the library & information service by hosting 'sector heads' meetings to discuss issues of common interest, influence (hopefully) government thinking, and link up with colleagues in other sectors. It also grants project funding. The main benefit for the health sector would be to act as a way of influencing government and NHS policy. There is also a commitment to provide funding (which will be ring-fenced for the NHS to ensure we won't be competing with other sectors) for projects, although he didn't expand on whether this would be SHINE-managed projects, or individual services.

A major difficulty in influencing government, or even NHS management is the lack of structure within the health sector compared to public libraries or even the H & FE sector - we are a large number of individual units and include HE and charities as well as the NHS. SHINE goes some way to bringing us together, but the involvement of a

body like SLIC should give us more clout, especially as the NHSiS has become a corporate member of SLIC - there would seem to be a readiness to listen to us.

The rest of the day was devoted to exploring 'Learning Together'/HDL (2000)¹. As Graham Buckley was otherwise engaged with Government Ministers, Mary Lakie introduced the work of the Learning Resources Project Group, and gave some feedback on one or two of the questions in the mapping questionnaire.

The project group consists of librarians, professional bodies and trade unions and is one of several sub groups of the Strategic Implementation Group (others cover qualifications, learning plan templates, continuing personal development, inter-agency working, etc), explaining how it fitted into the general work on learning together.

She explained that Learning Together was built on the premise of staff 'fitness for purpose' and 'personal competence', with a cycle of - 'using the knowledge base' - 'personal development plan and CPD' - 'improving practice and problem solving'.

At the end of the afternoon we discussed our priorities for what SLIC/LRPG should be doing at Trust/Board level. The discussion mostly highlighted what I'm sure we already know - the difficulty of maintaining basic services, let alone 'innovating', when we are predominantly part time with no clerical back-up - what do you stop doing in order to do professional work

and develop (both personally and services)?

There was also discussion of Personal Development Plans, and how far they had got. Some had had PDPs for some time, as a result of their Trust having gone for Investors in People accreditation; this led to a discussion of accreditation for libraries. There are moves to have Libraries separately accredited in medical training accreditation; Margaret Forest spoke about the value HEBS library found in going for the Charter Mark, and were now going for the LINC Health Panel accreditation. At the moment this hasn't been taken up within Scotland and was possibly unfamiliar to Trusts etc; however, Margaret pointed out that its backers include the British Library and the BMA (as well as SHINE), which would give it weight.

There was some discussion of line management - where should it be? The survey showed no specific pattern; it was felt that links with clinical governance or research were 01best, and that links with ICT were important; it was also important to have a line manager who believed in libraries and felt libraries were 'a good thing'.

Robert Craig was asked if SLIC would support the bid SHINE was making for a person to develop training and development for librarians. The answer was a qualified 'yes' that was almost a 'no' - SLA & SLIC were looking at on-line training which they felt was the route to take. SHINE felt that there was a need for someone to evaluate needs, and co-ordinate what exists already and develop materials.

For many trusts there was a problem of bits of funding, from trust funds, etc. There was a need to consolidate funding, and make it more reliable.

Some asked if SLIC could develop guidelines on staffing; the response was that SLIC preferred to ask what service was wanted, and then say what was needed to provide it. However, the NHS often doesn't know what it could want - expectations are low.

Electronic/on-line access to journals and databases was a major feature of the questionnaire. Mary showed a list of the databases that would go into the tender document, and Richard German has (by the time you read this) circulated a list of the core journals to be included. The benefits of central purchasing were discussed, and its effect on library budgets, which hadn't been tackled by the LRPG.

It was useful to hear what SLIC was about, and useful to get some feedback on the Learning Together survey. SHINE already facilitates networking and information exchange among ourselves; SLIC will be a valuable adjunct to this and will, hopefully, give us more clout where it matters.

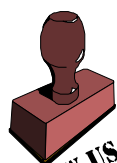
However, the 'Learning Together' part of the meeting tended to confirm my belief that the aims of 'Learning together' are rather muddled, and how they are to be achieved unclear, with a lot of the work being done seeming to be duplicated by other groups, or work that has been done in the past.

Malcolm, Dobson
Lanarkshire Health Board

Any initiatives in your library?

Done any research?

Been to any good meetings?



SHOW US
YOUR STUFF!

!! Tell us about it !!
Write an article for
Interim.

Union List/Membership Structure Ballot Results

On September 1st 2000, HDL (2000) 6 was published by the Scottish Executive Health Department: this HDL concerned the licence signed between the NHSiS and the Copyright Licensing Agency. This licence authorises copying within the NHSiS beyond the provisions of Fair Dealing and Library Privilege within the Copyright Designs and Patents Act 1988, and further removes the need for charges to be levied within the NHSiS.

This licence had implications for the SHINE inter-lending scheme, the Union List, and the structure of SHINE as an organisation. SHINE held a series of Regional Meetings during September (Glasgow, Aberdeen and Edinburgh) at which Jim MacNeillage of the CLA gave a presentation on the new licence, followed by discussion on the implications of the licence for SHINE and its Union List. The SHINE Committee agreed that the membership of SHINE should vote on the restructuring of the organisation.

There were two votes in this ballot. The first vote concerned changes to the membership structure of SHINE. The second vote concerned the operation of the inter-lending scheme. 111 ballot forms were posted out to listed members of SHINE on October 19th 2000, along with a background paper on the different options, with the requirement to have them returned no later than 30th October. Names, which were requested to confirm membership of SHINE, were separated from the voting papers upon receipt. The ballot box was opened on the afternoon of October 30th. **64** ballot papers were returned within the time specified. The return rate was **57.7%**. (There were a further 11 papers returned after the closing date: the results from including those papers are in brackets in the tables below.)

Part 1. Membership structure results:

		No.	%
Option 1	Maintain the current membership structure	15 (16)	23.4 (21.3)
Option 2	Change to institutional membership structure for all libraries in the inter-lending scheme	49 (59)	76.6 (78.7)

Part 2. Inter-lending scheme results:

		No.	%
Option 1	Maintain the current structure	7 (7)	10.9 (9.3)
Option 2	Change to an NHS / non-NHS structure	17 (19)	26.6 (25.3)
Option 3	Change to a Participant / Provider structure	40 (49)	62.5 (65.3)

These results were very clear. As a result of the ballot, SHINE will change to a primarily institutionally-based membership. The inter-lending scheme will change to a Participant/Provider structure.

Membership structure

The current membership structure is primarily individual membership (£7.50 per annum) with a few institutional members (£50 per annum), which entitles up to six individuals to attend SHINE meetings and receive copies of Interim. Institutional members do not have a vote at the AGM. At present, there is no requirement for a participant in the Union List to be a member of SHINE, although it is suggested in the introduction to the Union List.

With the change to an institutionally-based structure, in order to have a listing in the Union List, any Library will need to take an institutional membership of SHINE (note this applies to each library with a listing in the Union List, including multiple libraries within an organisation). Up to six named individuals within that library will be members of SHINE. Each library in the Union List would have one vote on issues at the AGM. Individual membership of SHINE will still be available, and will entitle that individual to vote at the AGM. It is acknowledged that this will complicate voting procedures.

Inter-lending scheme

At present, the SHINE inter-lending scheme operates through the exchange of forms or numbers (together known as vouchers) for photocopies: one voucher for a postal request, two vouchers for a faxed request. Vouchers are redeemable for cash (£1 each) or can be exchanged for further vouchers (58 used vouchers are worth 50 new vouchers). This scheme was introduced in the days of ASHSL to comply with the

requirements of the Copyright Designs and Patents Act 1988.

The change to a Participant/Provider structure will realise the potential benefits of the CLA licence by removing barriers to information access as far as possible. It simplifies the charging system, extends the benefits of improved information access to sectors beyond the NHS, and provides a financial incentive for libraries who find the current scheme uneconomical.

Under this option, libraries choose whether to be a Participant Library or a Provider Library. A Participant Library is a full participant in the scheme, and can request and provide photocopies without charge. A Provider Library is one that chooses to opt-out of the “free” exchange scheme, but still wishes to participate in the Union List, utilising the scheme for income generation. The requirement under the Act to impose a charge for photocopies supplied outside the terms of the NHSiS CLA Licence is met by:

- (a) Individual libraries levying the appropriate copyright charge upon the user placing the request.
- (b) An institutional membership fee which covers the annual cost for interlibrary photocopying charges for the membership.

Thus, in summary:

- ◆ Requests between Participant Libraries: no voucher required
- ◆ Requests from a Provider Library to a Participant Library: 1 voucher
- ◆ Requests from any library to a Provider Library: 2 vouchers
- ◆ Faxed requests: same charge as postal requests

Because these changes to SHINE and the inter-lending scheme have implications for the constitution of the organisation, the changes will need to be ratified at the AGM. The current inter-lending scheme will therefore continue until after the AGM.

Richard German
Maria Henderson Library



! DO IT NOW! –
Put pen to paper
(or fingers to
keyboard).

Write for Interim.

**Clinical Governance :
more than just
washing your hands?
A practical guide for
information
professionals**

**Health Libraries Group & IFM
Healthcare Joint Study Day
Hosted by the British Medical
Association Library at BMA House,
London
24 October 2000**

I took an early-morning flight down to London on 24 October to attend my first HLG meeting. It turned out to be a very interesting day: we heard about the impact of clinical governance on NHS libraries, and then from two librarians whose work is designed to make evidence available to clinical staff, and so to contribute directly to clinical governance.

Veronica Fraser from the Department of Health and NHS Executive started the day with a brief overview of clinical governance. She said that the components of clinical governance are not new - the emphasis on quality of health care, the implementation of service standards, the priority given to professional development, and so on - but the introduction of more explicit accountability for performance is new.

She was followed by Pam Prior, the Regional Librarian for the West Midlands, who spoke on "Challenges to information professionals within clinical governance". The theme of her talk was openness and accountability. She asked, "Do we really know what clinical staff need?" She said that clinicians think about what they're doing, identifying good practice and poor performance, but that librarians are not always as good at this. She mentioned external accreditation, business planning, annual reports, benchmarking, user surveys, effective complaints procedures, outreach to users and CPD as some of the challenges for librarians as they make their services more accountable.

She also said that librarians should be part of the information culture of the organisation, for instance being involved in developing any trust intranet and website. They should be at the heart of the clinical governance team, helping to shape future developments. Of course many professionals have taken up this theme in the library press lately, and the remarks from the floor at the end of her talk reflected the fact that librarians are still "outside the loop" of management decision making in most NHS organisations.

The next speaker was Lucy Reid, who spoke about her job as Clinical Librarian at Barnet Community Healthcare Trust. This innovative post is designed as an outreach service and functions to support clinical governance in the trust. It has been funded for 2 and a half years from education consortium funding, which has paid for 2 clinical librarians (1.5 fte) to provide an information service to 13 multidisciplinary teams. She said that the aims of the posts are to supply patient-focused information on request, and provide access to the evidence base at point of need - this involves attending ward rounds and departmental meetings. They also do searches to support the formation of guidelines and standards; run workshops in literature searching and critical appraisal; and provide current awareness services for staff. Then one of the consultant psychiatrists she works with spoke about how her role was promoted within his department, and how she has become part of the team. He was enthusiastic about the service, talking about the importance of all members of the multidisciplinary team having direct access to information resources. The project will be written up for *Health Libraries Review*.

The next speaker was Lesley Glassington, the Clinical Effectiveness Librarian at UCL Hospitals NHS Trust. This post is running as a one-year project and aims to investigate the barriers preventing clinicians from accessing the evidence; to review and test services that might overcome these barriers; and to provide training to support clinicians' use of resources. Not knowing who would ask for what, an email was sent across the trust inviting interest in using the services

of the new Clinical Effectiveness Librarian. There were 8 replies from departments, and three were chosen for the project. Like the previous speaker she attends departmental meetings and has regular contact with the teams. She spoke about the importance of being seen as part of the team, and of encouraging the clinicians to become familiar with the resources themselves. The Ward Manager from the Teenage Cancer Trust Unit then spoke enthusiastically about the positive impact of the post in his unit, and how it reinforces a culture of inquiry among staff.

After the speakers, John Van Loo from Royal Hallamshire Hospital remarked that clinical librarians were around 20 years ago and they "withered away". He said that since the role is so suited to the new climate in the NHS, to which clinical governance is central, we should make sure that the idea does not fail this time. My impression during "networking" at lunchtime was that people liked the sound of these posts in theory, and often wanted to do more of this sort of outreach work themselves. However a common remark was that people are too busy with day to day work to consider taking on a lot of extra work, unless funding and/or staff are found to support it.

We had lunch served to us in the members' dining room at BMA House, where we found a 3-course meal, white table linen and waiter service. This was worth the trip in itself.

In the afternoon we were split into workshops to discuss 2 case studies where librarians could provide information to influence a trust's services. One was about

investigating the possibility of commissioning a new endoscopy service, and the other one involved dealing with relatives taking a complaint about patient care to the local press. We discussed the information issues involved, and how to solve them. This was interesting, but I found it less relevant than the morning session.

Overall this proved to be a very interesting day, although as the only Scot present I was very aware that people only spoke about developments in the NHS south of the border.

***Catriona Denoon,
Library, Glasgow Royal Infirmary***



or welcome. Or just email

efpgmc_library@hotmail.com

IsNTO - Information Services National Training Organisation

The first meeting of the Scottish panel of the Information Services National Training Organisation (isNTO) took place in Glasgow on 23rd August 2000. The isNTO is one of a number of national training organisations (NTO), Government approved and regulated, employer-led strategic bodies, which are the authoritative voice of employers on education, training and development in the sector in which they operate. Is it the government's intention that each employment sector of significance will

have its own NTO, the scope of isNTO being the Information Services Sector, comprising archives, records management and information services of all kinds.

The organisation as a whole operates as a company limited by guarantee, and it is also a charity. isNTO is governed by a board made up of 11 leading employers from across the sector, and a Trades Union Representative. The Chair of the Board is Sheila Corral, Librarian of Reading University, and the board membership includes *inter alia* Martyn Wade, Head of Libraries and Archives at Glasgow City Libraries, and Veronica Fraser of the Department of Health. There are two Committees, Standards and Qualifications and Lifelong Learning and Employment Initiatives and they are responsible to the Board. National Panels exist in Scotland, Wales and Northern Ireland, and it is anticipated that Regional Information Services Skills Panels will be established in the English Regions.

isNTO has a number of objectives including

- Identifying current and future skills needs throughout the sector
 - Formulating plans to ensure supply of all required skills
 - Influencing education and training provision in the sector to meet employers' needs
 - Promoting the sector to potential employees
 - Developing and Promoting National Occupational Standards for the sector
- amongst other objectives.

In order to meet these objectives, isNTO is undertaking a number of activities on a UK wide and Scottish

basis. A major part of its current work is to identify and map skills needed in the sector, both now and in the foreseeable future. The sector's qualifications and its education and training provision are also being mapped, and a framework for skills benchmarking is being developed. It is hoped that a substantial part of this work will be complete by March 2001. Two of Scotland's largest public library services are undertaking pilot projects in conjunction with isNTO. In Glasgow, an Information Skills passport is being piloted. This is a portfolio approach to an individual record of skills achievement. In Edinburgh, the City Libraries are piloting work to identify and promote the broadest range of uses for the sector's National Occupation Standards, which are currently only used as the basis of Vocational Qualifications. A website is being developed, although it has not yet gone live.

The isNTO, like the other NTO's is to be funded from within the sector, and to that end a subscription scheme has been set up, seeking subscriptions from employing organisations. Benefits of subscribing include free access to the reports and practical frameworks and guidance issued by isNTO as a result of the project work it undertakes.

For more information on isNTO in the first instance contact me at 0141 227 3204, or email james.beaton@rcpsglasg.ac.uk

James Beaton
Royal College of Physicians and
Surgeons of Glasgow
Member, Scottish Panel isNTO



People

Good wishes go to Avril Conacher currently of the Maria Henderson Library, Gartnavel Royal Hospital, Glasgow and Alison McIntosh, information officer at the Chief Scientist Office who are both moving to pastures new. As a result they are resigning from the SHINE committee, although they intended to remain members of the association.

Avril is about to start a new job as one of three digital library officers in Edinburgh University Library, based in the Kings Buildings.

Alison will take up post in March as project co-ordinator at the Scottish Nutrition and Diet Resources Institute based at Glasgow Caledonian University.

Many thanks go to them both for the hard work they have put in for SHINE.

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

Contributions should be sent to the editor at the address below:-

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Copy date for the next issue

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