

Annual Report 2015-16



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Summary

Key achievements:

2015-16 was the first full year of library activity since the 5-year HEE library development framework, [Knowledge for Healthcare](#), was published, and it was good to see that Cornwall Health Library was named in the national strategy document as an example of good practice in promotion (p29). Since publication, we have been working to develop our services in line with the HEE areas of focus. For example:

More quality-filtered and synthesised service: We have a new service offering summarised results and a one-page synthesis of the evidence from literature searches. These have been very well received by users of the service.

Individually tailored current awareness and alerting services: We have acquired a system called KnowledgeShare, which allows users' interests to be profiled so we can offer tailored alerts, training and searches.

Optimise funding for best value: We reviewed cost per usage on our print and electronic journals. As a result, we have reduced expenditure on print journals and purchased the clinical information resource [Dynamed Plus](#) as part of a consortium.

Resources are digital by default: We have started conducting outreach 'Athens clinics' using an iPad to help people access electronic resources. We have also obtained startup funding for a resource offering rapid access to a wide range of electronic books.

Development of the LKS workforce: Two of our staff are enrolled on the year - long HEE Library and Knowledge Services leadership programme, and are engaged in national Knowledge for Healthcare projects (details below, p9 & 10)

During 2015 – 16 we achieved:

98% compliance in the HEE Library Quality Assessment Framework

25% increase in literature searches on the previous year

12% increase in reference queries

9% increase in book circulation

5% increase in library membership

4% increase in footfall in the hub library

Introduction

When [Knowledge for Healthcare](#) was published in 2015, it was clear there was a close parallel between the strategic objectives identified in the national document and the work underway in Cornwall Health Library's 3-year strategic plan.

Since the publication of Knowledge for Healthcare, staff from Cornwall library have been actively involved in the national project work in two of the four work programmes - *Workforce planning and development* and *Mobilising evidence and organisational knowledge*.

A further strategic development during 2015-16 was the merger of the HEE South West and Thames Valley and Wessex geographies, resulting in one larger Library and Knowledge Services team covering the South. As a result there has been scope for sharing good practice on a wider basis, and we have been actively exploring opportunities for greater collaboration with colleagues across the wider geography.

Another change in this year was due to the demerger of Peninsula College of Medicine and Dentistry. For the first time in Truro we welcomed 3rd year medical students from Exeter University and 1st year dental students from Plymouth University. This shift was accomplished without interruptions to the service to the students, and feedback from them remains excellent (see page 12)

To demonstrate local activity in support of the HEE strategy, this report has been arranged under the programme areas identified in the Knowledge for Healthcare 2015-16 annual review:

Quality and impact

Library Quality Assessment Framework compliance

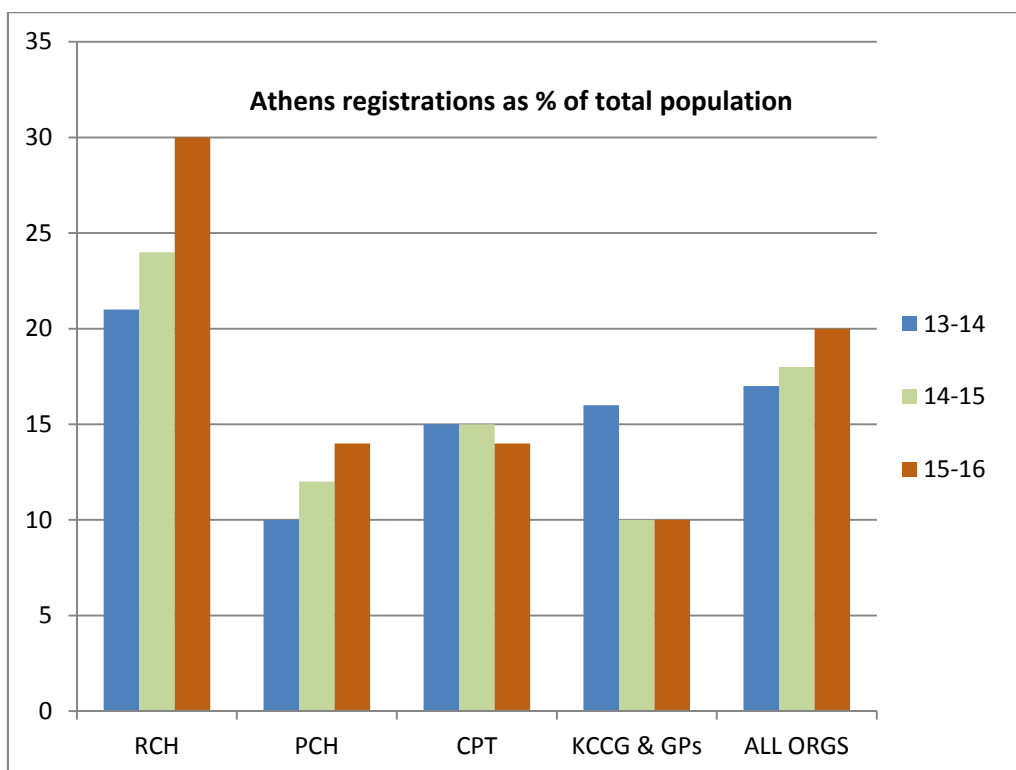
Improvements in services to patients and the public have increased our annual Library Quality Assessment Framework (LQAF) compliance, which is now at 98%.

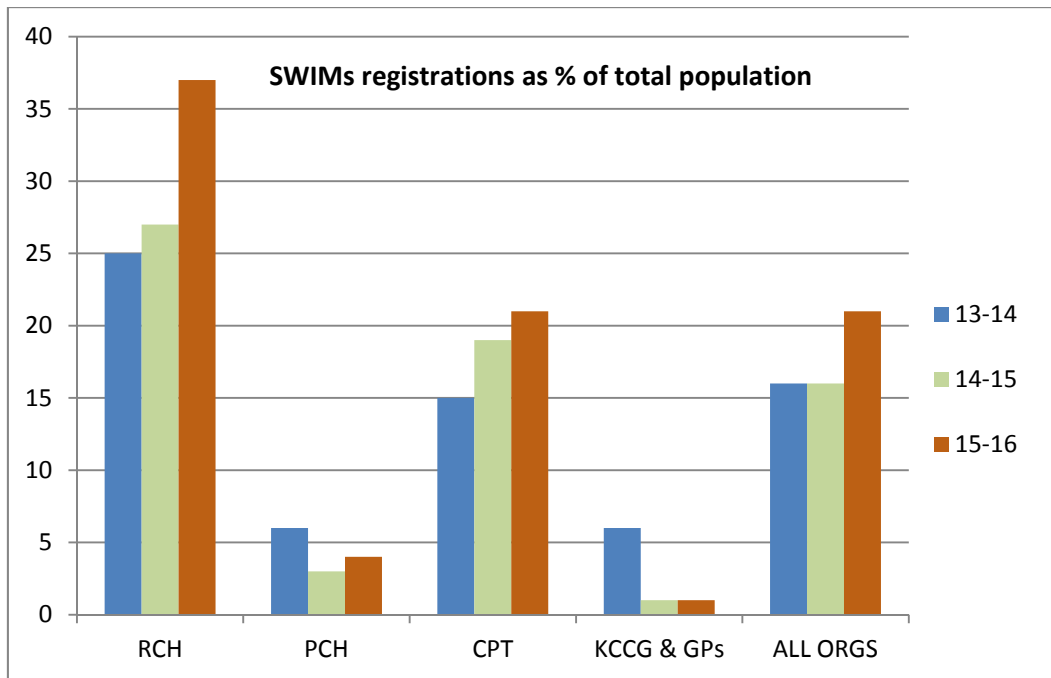
Key Performance Indicators

Standards 1 and 2 represent the overall 'market penetration' of our electronic and physical services respectively. Standard 1 is the percentage of the total NHS workforce in Cornwall who are registered with Athens to use electronic resources, and standard 2 is the percentage who are registered members of the library on the library management system, SWIMS.

	Standard	Target	2013-14	2014-15	2015-16
1	Athens registrations	15% of total potential population	17%	18%	20%
2	SWIMS registrations	15% of total potential population	16%	16%	21%
3	Document delivery Note: this standard includes response times from provider libraries and book postage. Our own time to send the request is less than 1 day on average)	90% supplied within LDA standard - 7 working days; urgent within 24 hours	88%	97%	91%
4	Training	95% of survey responses having Excellent or Good rating	100%	100%	100%
5	Literature searches	95% of survey responses having Excellent or Good rating	not measured	100%	100%

Athens and SWIMS registrations have increased year on year for the past 3 years:



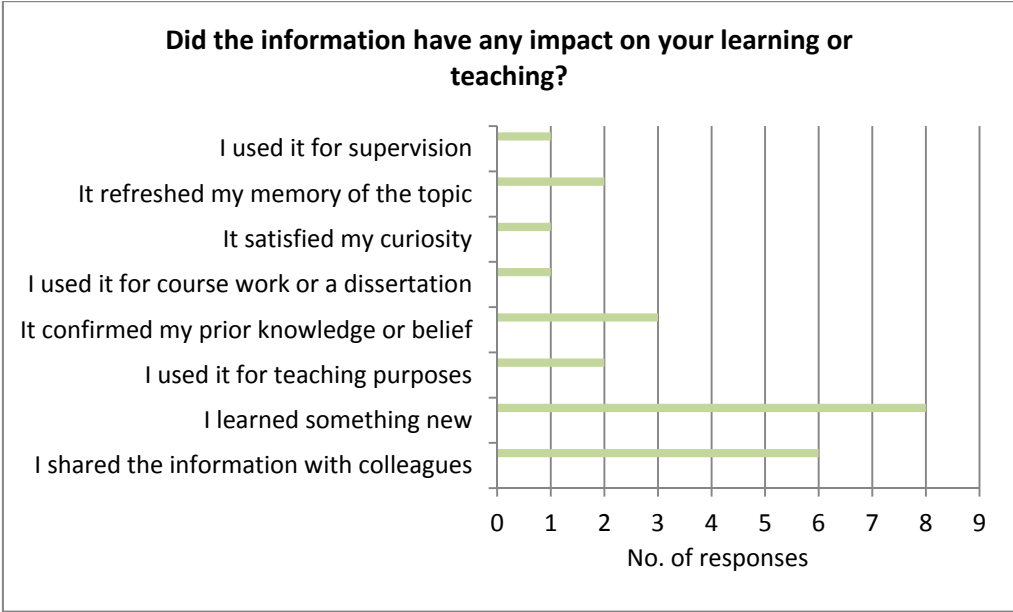
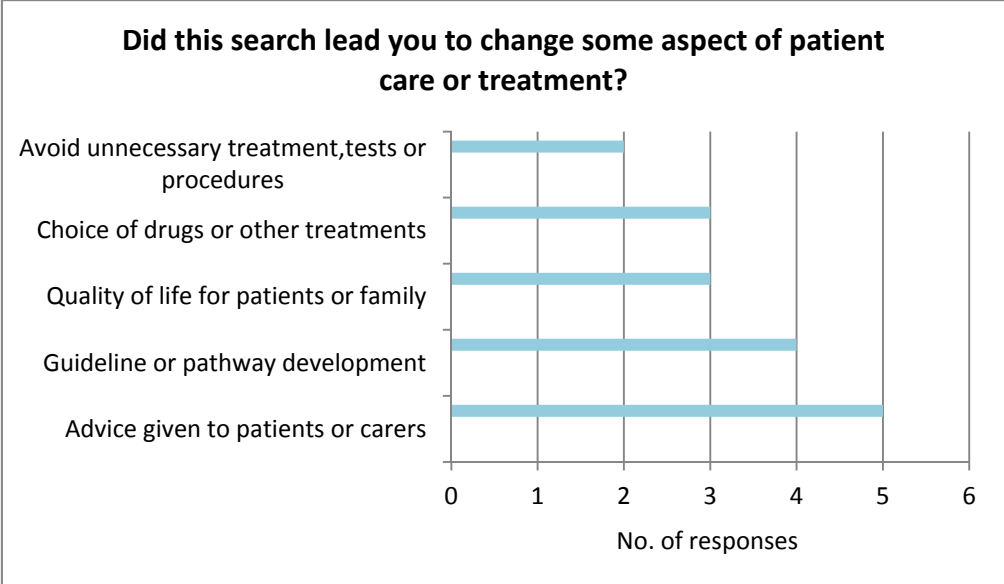
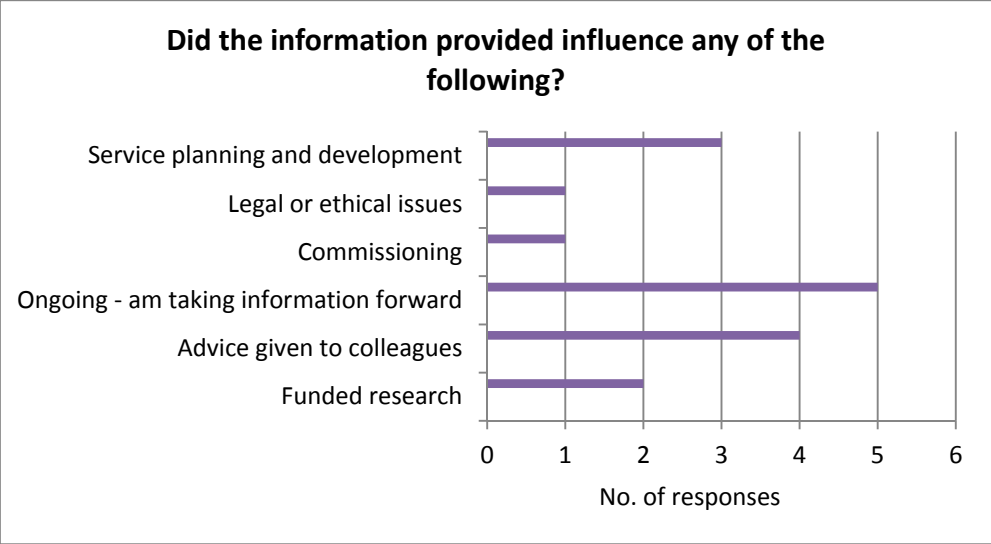


Impact of literature searches

2015-16 saw a 25% increase in the volume of literature searches we undertook, and we carried out an impact survey to investigate whether the evidence we provided had any concrete outcomes.

We had 15 responses to the survey following literature searches and received some interesting qualitative feedback about how the information was put to use. For example: “Looking at various specialties to reduce waste by avoiding overdiagnosis, overinvestigation and over treatment” and “It saved me a lot of research time”

The survey asked which work activities were influenced by the evidence, and what changed as a result. We found that not only did the evidence influence clinical care, but it was also shared with colleagues and patients and used to write pathways:



Resource discovery

Over recent years there has been a sea-change away from print resources towards provision in electronic formats. Because of this, we have increased our efforts to remove barriers to access by improving digital literacy amongst users. We have also taken advantage of new opportunities to provide targeted information to users more seamlessly.

KnowledgeShare

We purchased a product called KnowledgeShare developed by Brighton NHS library, which will enable us to create a profile of users' clinical or educational interests. We can use this information to bring together current awareness feeds, literature search results and training tailored to the individual. We also have the option to create networks of people with similar interests working across the health and social care community in Cornwall and further afield.



If you are interested in using KnowledgeShare, please [Contact the library](#)



Athens Clinics

Use of Athens authentication is key to accessing valuable NHS resources, but users often tell us it is a barrier for them. This year we have started holding outreach 'Athens clinics' at various locations in the Royal Cornwall Hospital, using an iPad to help people set up their password and to raise awareness of the electronic resources available. We are pleased to see a 6% increase in RCHT staff registered for Athens this year.



Promotional event highlighting electronic resources

Service transformation

Summarising and synthesising the evidence

We have launched a new service as an addition to our literature searching offer. On request, we will provide an Excel spreadsheet summarising the search results which can be filtered by study type or topic, and which includes links to the article's full text. We will also prepare a single-side synthesis of the overall search results. This service has been well received by clinical and managerial staff who require succinct, high quality evidence.

Patron-driven acquisition

We were fortunate to obtain startup funding for a new system which offers rapid access to a wide range of books in electronic format. [E-book Central](#) allows library members to search a large catalogue of e-books online and request a title. The library can then purchase the title, allowing the reader immediate download to their own device.

Dynamed Plus

In recent years there has been a growth in the available Point of Care Tools (POCTs) on the market, all varying in pricing, structure, currency and coverage. Cornwall Health library was involved in a SW-wide task and finish group to develop

an online survey which allowed local libraries to canvas their users' opinions on the three leading POCTs.

Following from this research, a consortium obtained [Dynamed Plus](#), a product which offers clinical topic summaries based on the best available evidence and updated daily. The purchase was shared across 5 library services in the SW with a saving of £7000.

New reading area in the hub library

Feedback from users often emphasises the importance of the physical library space as a refuge to study, reflect and work. Having decreased print journal holdings, we put the space to good use by creating a comfortable reading and small group discussion area, which has already become a favourite area with library users:



We have added display shelving making it easier to browse the journal, fiction and DVD collections, and installed a coffee machine. We have also lifted the ban on eating in the library so that people can use the space more flexibly.

Workforce planning and development

The Knowledge for Healthcare Leadership Development Programme was launched by HEE in 2015, developed in conjunction with the Chartered Institute of Library and Information Professionals. It is the first leadership programme tailored specifically to healthcare librarians and knowledge specialists. Two of our staff are currently engaged in the year-long Programme, which is very practice-based and includes group projects and action learning sets.

Under the *Workforce planning and development* programme of Knowledge for Healthcare, one of our Librarians, Katy Oak, was part of the national project team which created [The Learning Zone](#). This acts as a gateway for librarians to access high quality resources in support of their personal and professional development. Katy is also working on a national project as part of the leadership programme to design a Training Needs Analysis template for library staff.

Mobilising evidence and organisational knowledge

This year our Systems Librarian, Chris Johns, was asked to advise on the national Knowledge Management project carried out under the *Mobilising evidence and organisational knowledge* programme of Knowledge for Healthcare. Following on from this, Chris is undertaking a leadership development project which aims to co-ordinate resources for capturing organisational knowledge and will contribute to the Knowledge for Healthcare Knowledge Management Toolkit.

Library staff are involved in the Clinical School, a collaboration between RCHT and Plymouth University to encourage nurses and AHPs to write for publication. Recent library activity in support of the School includes compiling a list of publications by nurses and AHPs employed in RCHT and Plymouth University.

Patients, carers and the public

We have been working in partnership with clinical staff and the public library to jointly fund a library offering fiction and patient information at a psychiatric admissions unit in Redruth. This has worked well and we are hoping to extend the service to an inpatient rehabilitation ward.

We have adapted a Patient Information Leaflet from Taunton called [Health Information Websites](#), which has been approved for use in RCHT. It is designed to support patients searching for information on the internet, and gives advice about safe places to access health information, how to identify good quality sites and how to evaluate website quality.

Given the importance of health literacy to the local strategic plans for health and social care, we are keen to maintain this collaboration with local patient information providers, particularly the public library. We offer training for public library staff and for hospital volunteers, and continue to deliver information literacy sessions for PenCLAHRC's Public Involvement Group, PenPIG.

Optimise funding for best value

This year, to ensure value for money, we carried out a complete review of the usage of print and electronic journal holdings. We set an upper cost per usage limit of £60 -

£70, and cancelled most of the titles which came in above that threshold. Rapid access via document delivery is a better model for low usage titles, and we can set up current awareness feeds to alert users to tables of contents. As a result we have reduced the print journal spend significantly, and were able to purchase a point of care tool, Dynamed Plus (for more information please see p8).

Summary of income and expenditure

These figures were submitted to the HEE South Knowledge Services Team as part of the 2015-16 statistical return:

1. Income

Education tariff funding (was MPET)	£247,525.00
Other LETB funding	
Own NHS organisation	
Service Level Agreements (SLAs) with other NHS organisations	
Higher Education institution (medical)	£59,079.00
Higher Education institution (non-medical)	£10,026.00
SLAs with other HE/FE organisations	
Charitable Trust	
Local authority funding	
Other (please give details in "Comment from Library Manager")	
Income generation (this can only be non-recurrent)	£7,544.00
TOTAL INCOME	£324,174.00
OVERALL INCOME (i.e. Recurrent + Non-recurrent)	£324,174.00

2. Expenditure

Staff (gross costs)	£202,112.00
Materials: Books and other non-journal print materials	£6,457.00
Print Journals	£25,004.00
Print and e-journals (bundle)	£10,478.00
Electronic databases	£16,545.00
Electronic journals only	£16,554.00
Electronic books	£19,140.00
Audio-visual and e-learning materials	£1,135.00
Inter-library lending and document supply	£1,088.00
Marketing and promotion	£494.00
Library staff training/development	£864.00
Total (sum of 3.1 to 3.10)	£299,871.00
Other	£0.00
Capital charges, maintenance, other on-costs	£23,730.00
TOTAL EXPENDITURE	£323,601.00
OVERALL EXPENDITURE (i.e. Recurrent + Non-Recurrent)	£323,601.00

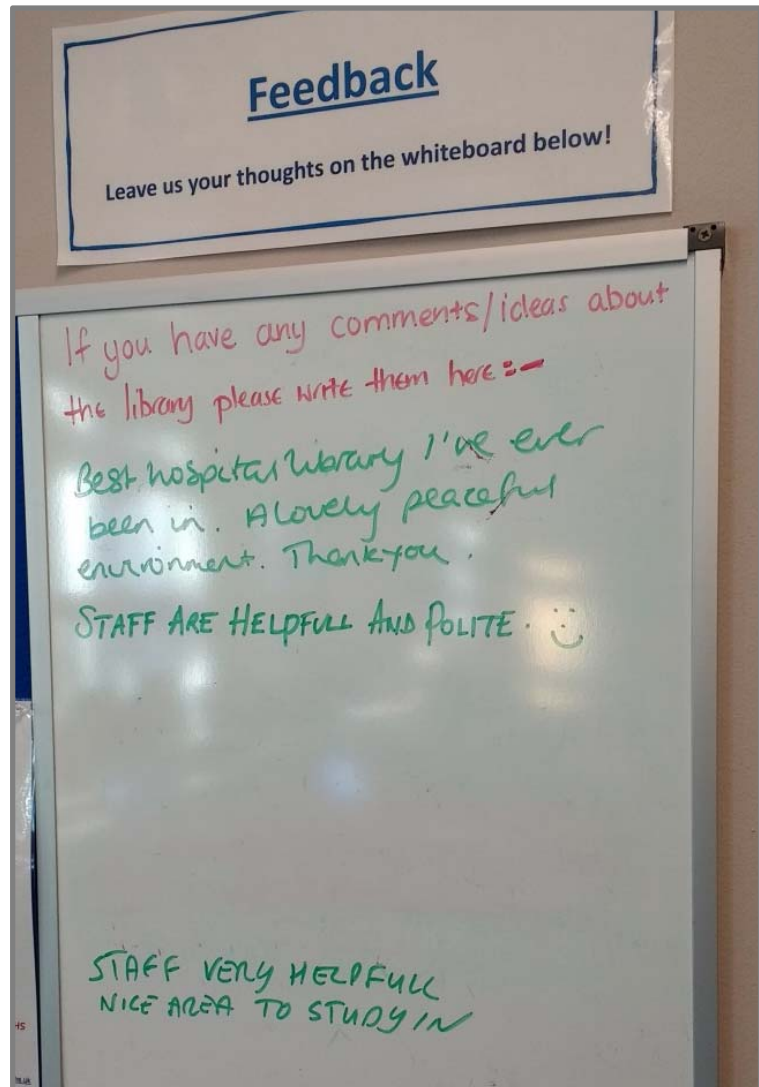
Finally, thank you to all our users who have taken time to comment on the service they received this year. Some examples:

“The help I had from the library service was excellent. I had regular communication via email and was impressed by the effort that the staff member made to investigate several search terms in order to help my with the information I needed. Many thanks”

“Lightening quick! Superb service, thanks.”

Thanks for your quick work,
This has made a real impact on clinical decision making for our patient today.
Very much appreciated.

“The staff are brilliant “



... popped in to say thank you very much for the alert you set up for him. He says it is very useful, saves him time and he is grateful.