Thames Valley Outreach Librarians
Minutes of the Meeting held at Verney House, Aylesbury
Thursday 2nd February 2006

Present:
Rowena Perry (Chair), Gill Bridgeman, Geoff Fleet, Anne Gray, Alison Paul, Lucy Cartmel, Sue Lacey-Bryant, Richard Comley (Secretary)

1. **Introductions and Apologies**

   There were no apologies. Alison Paul was attending to represent OCLIST.

2. **Minutes of Previous Meeting (20th October 2005)**

   **Correction:** Apologies: Should read Sue Lacey-Bryant and OCLIST

3. **Matters Arising**

   Item 4: The *presentation given at the residential conference* at the end of November will be put on the TVOL website. The presentation session itself had gone well, but was an optional session competing with one on copyright, and was attended by too few people. There was a sense of “preaching to the converted” as most of the attendees already knew about outreach and were committed to the principle. **Action: GF/AG to send presentation to RP for the website.**

   Item 8(i): Gill Bridgeman’s attendance at the “Improving Working Lives” human resources conference at the Oxford Kassam Stadium was a success.

   Item 8(ii): The *OCLIST meeting on NeLH/NLH* was, in fact, attended by Geoff Fleet and the resulting documents have been circulated to TVOL members.

   Item 10: **Outreach Posts:** We were pleased to hear that Anne Gray’s post has now been made permanent, and so she will not now be leaving. Geoff will be leaving his post at the end of February, and will become an IT trainer with Bucks. Gill’s post is still scheduled to finish in October.

4. **Sue Lacey-Bryant: NLH Primary Care workshop feedback, and her work for NLH**

   Sue talked about the work she has done on the primary care and public health librarian support programme, and with Anne Gray reported on the November workshop. All the presentations are available on the NLH website – (For Librarians/Events). Sue highlighted the usefulness of the RCN’s survey of the information needs of nurses, and the NLH user needs study.

   The Outreach Librarian survey suggested that primary care is a challenging environment, and found that some primary care librarians felt isolated, and that the information needs and preferences of their clientele were not well understood by some colleagues based in acute or academic services.
Sue drew attention to the Primary Care Clinical Question Answering service and the recent NKS audit of CQASs. Similarly, the emergence of a Primary Care Current Awareness Service has much to offer primary care librarians.

Consultation on the National Service Framework document is now underway. It is expected that the document may be rewritten, but it does serve as a starting point and discussions within the profession will shape it further.

Topics covered in discussion:

i. The need for increasing cooperation between different library sectors, especially between health and public libraries, with Milton Keynes as a good example. County groups are a forum, but closer partnership working is needed.

ii. A space will be developed on NLH for public librarians and primary care librarians to share material.

iii. Current awareness services: (The Trent Improvement Network [http://www.tin.nhs.uk] – was given as an example). These will become increasingly available through the NLH. RSS may not supersede a preference for email alerts, at least in the near future. However, the next version of Internet Explorer (IE7) will include support for RSS.

iv. NLH is committed to delivering personalisation for users, and the ability to add local content is a key aspect of this.

v. Sue has set up a Google group for primary care and health librarians.

vi. The Milton Keynes case study showed that for PH consultants, the priorities for primary care librarians are managing knowledge, supporting for evidence-based practice, best practice, and guidelines.

vii. It is hoped to do more to support for people in vulnerable posts, offering support in developing a business case. A strategic health-economy-wide approach will be needed, in line with the philosophy behind the NSF.

viii. It was felt that an area was also needed for creating and sharing strategy documents.

ix. There was a similar discussion around commissioning and impact, and the need for support and best practice guidance with this also. A useful Powerpoint on commissioning came to light, and a paper copy will be circulated.

x. A user-needs study of senior managers would be useful.

xi. There was general discussion of email and web-based groups, and it was felt that they were beneficial where they were small enough to be a trusted forum for the exchange of specialist knowledge, and large enough to have relevant experts contributing. Learning Sets are more fluid than groups and a good way of developing skills. Could we create an “expert group”? The place of the librarian (paramount in Muir Gray’s vision as the most valuable resource of
the library) was often as a means of connecting people – many people want to know “Who can I contact?”

**Actions for Sue L-B:**

a) To send link to RCN User-Needs Study  
b) To send executive summary of audit of clinical question-answering services  
c) To send executive summary of user survey of preferences for CQAS  
d) To send Powerpoint relating to Milton Keynes case study

**Action for Rowena:**

e) To circulate paper copy of the Powerpoint on commissioning

5. **Mapping Information Skills Training to KSF dimensions**

A team in Greater Manchester have done this, and Rowena has circulated their document.

Merely attending a course may not be enough to justify a Key Skills target, but at the point where people have hit the ceiling of their current grade, they will be looking for training to enable them to progress higher.

This could be used as an element in the marketing of training, as long as training departments agree with this approach.

Courses would then need to be tied-in to supporting the KSF levels.

Non-NHS staff would not need this. GP practice appraisal may make use of it.

**Action: RP to put this document on the website**

6. **Changes to the Questionnaires, and Critical Incident Follow-up**

i. Changes to the questionnaire need to be made for the start of the new financial year.

ii. Geoff Fleet felt that page one was still too definite.

iii. Others felt that the numbering of the columns was confusing for the person filling it in, and that it could be moved to somewhere less prominent, perhaps the foot of the column. The numbering also needs to be harmonised throughout the forms: pages one and three are numbered 0-5, whilst the top of page two is 1-6.

iv. **Question 6: Employment details:** It is good to have the different professions listed, but the role and the employer should be separated, and the breakdown should be coterminous with the Athens categories, as this would make it easy to compare results.
with other training which uses these categories.

- It is useful to have the post title.
- It was felt that Question 6 could be split into two, separating the Trust/work area and the role.
- People often do not know who they work for

v. **Action: Revised questionnaire to be circulated with the minutes and changes discussed and agreed via email if possible.** Partly dependent on GF being willing and able to provide new spreadsheet to take account of questionnaire changes.

vi. It is good to keep the feedback sheets indefinitely – you never know when they will provide useful justification of activity.

vii. Good practice to have a signing-in sheet for each session, in order to be able to follow up participants.

viii. Everyone in the TV area should be using the same version. This makes for comparability across the region.

ix. Geoff made the point that the whole form could be changed if desired.

x. The Follow-up questionnaire should establish whether resources have been used more or less, and whether or not the user feels more confident. Geoff will draft another version of this.

xi. **Critical Incident Analysis:** Anne Gray circulated a draft of a questionnaire seeking to determine the impact for users of information (e.g. literature searches) provided by the library services.

xii. Copies will be circulated to members for use, with the results to be fed back to Anne. The draft will then be further refined. It would be good to use these by phoning clients to complete them.

xiii. It was suggested that more management questions should be included – all of those in the circulated draft were clinical.

**Action for Geoff Fleet:** To make changes to the questionnaire spreadsheet, including a new version of the follow-up (now done – revised spreadsheet accompanies these minutes)

**Action for Anne Gray:** To circulate the Critical Incident questionnaire

7. **NeLH vs NLH**

We considered the letter Rowena had circulated, detailing specific problems
and inconsistencies between the sites, and with a narrative expressing concern about these, and whether the problems could be resolved before the proposed shutdown of the NeLH site in April/May 2006.

Sue Lacey-Bryant said that the team were aware of the points at issue, and were becoming inured to criticism. They were a small team with limited resources working under increasing pressure as members were leaving. She suggested that a constructive approach, offering to help the team in developing the pages appropriately, would be the way forward. The April 2006 date for shutting down NeLH would not be met.

It was also suggested that the NeLH team might produce a regular newsletter keeping users informed on progress.

Rowena will redraft the letter, discuss it with the OCLIST group, and send it round the TVOL membership. The draft should remain confidential within these groups.

8  AOB

None.

9  Date of Next Meeting

September, to be arranged.