The Swimming Pool

Newsletter for the SWIMS Network

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EAHIL 2017

Thanks to some funding from the HEE SW CPD pot, I could go to Dublin for ICML/EAHIL 2017, the theme of which was 'Diversity in Practice: integrating, inspiring and innovative'.

Unfortunately, I missed the opening keynote speakers as my flight from Bristol was delayed, but I did get to attend a number of workshops and sessions on a variety of topics – all applicable to the aims and objectives of my library service, including:

- Embedding library & knowledge services
- Consumer health information (Public & Patient Information)
- Integration of library services (e.g. with Dementia team, Sir James Paget)
- Demonstrating your services' value and impact – tips and tools
- Knowledge management
- Research support
- Metrics

The Knowledge Café on embedding library and knowledge services was particularly useful, as we are currently looking at ways to develop a clinical librarian service in our library. The session was led by Victoria Treadway and she'd brought along the AMU consultant she works with – it was really interesting to hear about an embedded library service from a medic's perspective! We did some practical exercises about identifying what tasks we thought could be 'embedded' services and who in the library team could do them – the message being that it really is a team effort and doesn't all have to come down to one person. Also being 'embedded' doesn't necessarily mean attending ward rounds, it can be something like getting involved in a project or process - you don't have to start big! This was a really encouraging and practical session.

The other workshop I attended was on demonstrating value and impact, and we discussed all the various tools that are available to help you from the resources on Knowledge for Healthcare: http://kfh.libraryservices.nhs.uk/value-and-impact-toolkit/. We discussed how different tools are applicable to different scenarios, and how to identify the appropriate tool you need – an incredibly useful session!
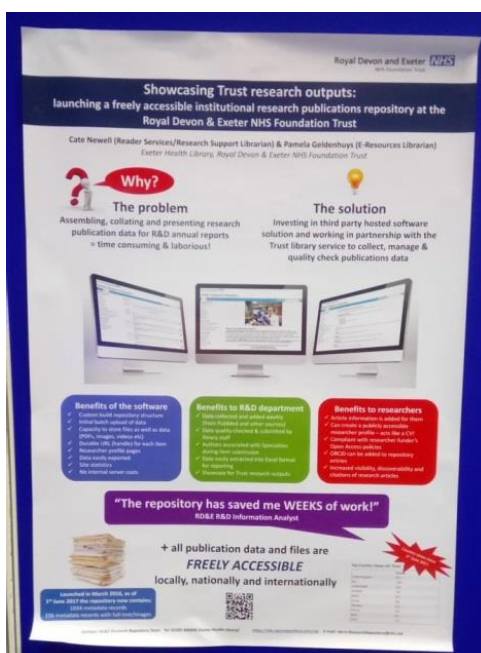
I was lucky enough to be accepted for a poster presentation in the Technology stream, about the **RD&E Research Repository** (http://rde.openrepository.com/rde/) which we have developed in collaboration with our R&D department. I also co-presented a paper with Tim Jacobs from the Christie NHS Foundation Trust about our similar experiences of developing research repositories with our R&D departments. You can download a copy of my conference poster from the RD&E Research Repository - http://hdl.handle.net/11287/620356.

It was only the second time I had presented a conference poster (or presented at a conference), after having my initiation at HLG 2016. I have to say that people were very supportive, and I received a few queries about our work with the repository from colleagues from all around the world! It was great to be able to share our experiences with interested colleagues.

The key things I took home were:
- Some practical tips on embedding LKS
- It's all about building relationships and trust
- Some ideas on how we can continue to build our relationship with Research & Development

What I would do if I could do it all again, would be braver about networking! Everyone there is passionate about what they do, and keen to share their experiences and people were networking all day long - during sessions, in the lunch queue, even in the ladies' toilets! I felt a little intimidated by all the 'big names' I'd seen from Twitter #ukmedlibs and 'Knowledge for Healthcare' leads etc but at the end of the day, we are all professionals and we can learn a lot from each other.

I would highly recommend colleagues to attend the conference next year, especially as it's just over the bridge in Cardiff!

Cate Newell
Reader Services Librarian
Exeter Health Library (EXE)

Chartership Q&A

Chartership is one of the three levels of [CILIP professional registration](#) and is available to all CILIP members who want to develop their existing professional skills and experience. As with Certification and Fellowship, it involves identifying areas for personal development and building up a portfolio of evidence linked to these goals. Recently chartered librarians Helen Pullen (BRI), Jess Pawley (TAU) and Katie Barnard (SMD) reflect on their experiences of the process.

What motivated you to embark on chartership?
Helen: My main motivation was professional development. Also, I'd been unsuccessful with two previous attempts at chartership and that was the driver for wanting to give it another go. You could say it was like a failed driving license! There were times when I wanted to give up but I stuck to my plan.
Jess: I was encouraged by Carol-Ann Regan [Library Manager, TAU], as it was a good development opportunity and could help prepare me for a possible transition to a professional role. I was working as a Senior Library Assistant in a semi-professional capacity, and was able to use aspects of my role for evidence and also identify areas for progression.
Katie: After completing my MA I wanted to keep developing my professional skills, and hearing about Helen's experience inspired me to get started. I also realised that, as I was new to health librarianship at the time and therefore trying my hand at new things, I was already clocking up valuable evidence that could contribute to my chartership portfolio.

What did you enjoy?
Helen: Working with an excellent mentor and visiting other libraries.
Jess: The opportunities to attend conferences and training that I had not previously had before, which in turn encouraged me to think about my role and the wider work we do, and how it is of benefit to our users. I also enjoyed putting together the evidence I needed to support my portfolio.

Katie: The reflective writing – I was surprised at how much more I got out of activities in terms of learning and useful practical ideas by simply sitting down and reflecting on them.

What did you find challenging?
Helen: Setting self-imposed deadlines.
Jess: Writing reflectively, and sticking to the very strict 1000 word limit for the evaluative statement.
Katie: Staying motivated – I hit a real slump towards the end. In hindsight, I should have been stricter with my personal deadlines and should have ring-fenced regular chunks of time to work on it.

How has chartership benefitted you?
Helen: It has given me an increased level of self-confidence.
Jess: I was able to progress into a professional librarian post. I still feel a bit of a fraud calling myself a qualified, professional librarian! I am also able to take what I have learned about reflective writing and transfer it into practice as part of the 'Reflection for revalidation' sessions I run for nursing staff.
Katie: The projects I involved myself in and the events I attended during my chartership made me more active in shaping our library service and helped me to engage more in wider NHS LKS goings on.

What is your top tip for people thinking about or working towards chartership?
Helen: Keep a reflective diary of all the work related activities you do.
Jess: If it doesn't pass first time, don't give up. A resubmission or edit helps you to see things in a whole new light.
Katie: Talk to people who have done it. Professional registration is an individual project so can sometimes feel quite lonely, but many of us have been through it and are only too happy to have a chat with you about it.

Helen Pullen, Outreach Librarian, University Hospitals Bristol (BRI)
Jess Pawley, Librarian, Taunton and Somerset NHS Foundation Trust (TAU)
Katie Barnard, Clinical Librarian, North Bristol NHS Trust (SMD)

Network News

Helen Dahlke

Hello, my name is Helen Dahlke and I joined Berkshire Healthcare as Deputy Library Manager at the beginning of June.

My background is in public and school libraries, but this is my first healthcare and the NHS. I'm enjoying learning new things and seeing how I can bring skills from other sectors to my new role.

Thanks to the rest of the team at PPH – Barbara, Ian, Jade, and Janine – for being immensely helpful and welcoming. I look forward to meeting some more members of the SWIMS network soon!

Helen Dahlke
Deputy Library Manager
Berkshire Healthcare NHS Foundation Trust (PPH)

Tasha Cooper

Hi everyone, my name is Tasha Cooper and in June 2017 I started working at UWE as a part-time Subject Support Librarian within the Faculty of Health and Applied Sciences. I am based at the lovely Glenside campus in Bristol and will be supporting staff and students within Adult Nursing, working with some of the professional short courses UWE offers, and liaising with Royal United Hospitals in Bath to support our students whilst on clinical placements.

Before UWE I worked as a Librarian for MIDIRS (Midwives information & Resource Service) in Bristol and spent 8 happy years there getting fully acquainted with all manner of things related to pregnancy, childbirth and midwifery!

I'm looking forward to working more closely with library colleagues within the NHS and across the academic sector as I enjoy meeting new people and collaborating on new projects or initiatives. When not at work I enjoy cycling, gardening, and running around after 3 small children whilst laughing at blog postings from Hurrah for Gin ;-)

Tasha Cooper
Subject Support Librarian (Glenside)
UWE Bristol

My Dublin experience

The conference programme offered a wide variety of presentations and workshops. I am going to share with you some of the key take home messages (found at the end) which I have come away with. The keynote speaker Michelle Kraft (www.kraftylibrarian.com) spoke about having a vision for the library services of the future and the fact that it is really important for librarians to adapt to change and not be afraid to change the way in which we carry out work. She provided us with lots of examples of where librarians in America had changed and adapted their practices to meet either the organisational or user needs.

Evidence summaries: adding value to the literature search

This was delivered by our Public Health England colleagues and they were sharing what they have created following their attendance at a Tim Buckley-Owen course. This was the same course which has been run in our region. They called their service an "evidence briefing" and these are created by following a protocol and created in a standardised template. Within their template they include the following: Summary/Key messages/ Main findings – this can either be done in tabular or narrative format. They also include sections on what the briefing covers, who is it for, what it doesn't do, and information about the sources as well as a disclaimer. They also try and keep its length to 3-5 pages. All of their references are compiled in Endnote.
The discussions around the room focused on how individual people or organisations carried out evidence synthesis. It was heartening to realise that we all had the same issues and time was a large factor which we all worried about. It did seem that various services have all been working on this and we all testing the waters so to speak.

Cooperation and benchmarking –finding the value and impact together

This has to have been one of the most activities engaging sessions of the whole conference; we were tasked to come up with a variety of difference benchmarking factors which could be used in a wide variety of health libraries sectors. The activities included "brain writing" – now if you have never heard of this before, it involves the ever present post-it notes and you are given 5 minutes to write down your thoughts on a separate post it note. These are then shared with colleagues on the table and more information could be added to these notes – this helps to engage everyone and then more ideas are discussed and added to even more post-it notes. We then had to share our most popular ideas and then these were presented to the group – then we had to rank all of the ideas into separate areas. The results of our discussions can be found on this blog – https://benchmarkingthreehealthlibraries.wordpress.com/2017/05/23/benchmarking-workshop-in-dublin/

Search Strategy Development – compare, contrast and advance

This session had asked for attendees to undertake a couple of literature searches, based on real-life examples of searches which the presenters had undertaken themselves. The session then collated the answers and it was really interesting to see how we all differed in compiling the search strategy. There were also discussions about various ways of inputting your search terms i.e. string searching versus line searching. It was heartening to hear that the experienced searchers learnt new ways of searching, as someone had included the abbreviation of .ot in their search strategy and they had not come across this before. By the way this means "original title" just in case you were wondering. There was also a couple of new resources which I had never come across before such as PubReminer http://hgserver2.amc.nl/cgi-bin/miner/miner2.cgi and Search blocks - https://sites.google.com/site/eahilblocks/a-c this site provides a wide variety of different types of search strategy which colleagues have previously used within their search strategy.

Key Take home messages:
- All literature searching experts are still learning, so you have no reason to worry about your skills. It is important to keep growing and learning.
- When looking at metrics ask yourself – is it useful? Is it important? Or are you just chasing figures?
- In research done last year 51.3% of searching was carried out on a mobile or tablet. I wonder how many of our resources are easily searched in this way.

What am I going to investigate or follow up?
- Can we embed our Libguides into the Electronic Patient Record?
- Provide literatures searches on the latest guidance which has been published to colleagues whose policies are going out of date when they get a reminder that they need to update their policy.
- Investigate the Quality Framework which can be found on the Lancashire NHS library page.
- Investigate Search Block and PubReminer.
- Should we have a standard protocol and template for our evidence synthesis?

The next EAHIL conference will be taking place in Cardiff next year and will be focusing on inspiring, involving, informing.

And Finally…..

This photo was taken straight after our talk – you can definitely see the relief on my face.

Nicola Forgham-Healey
Weston Area Health NHS Trust (WSM)

Learning Zone - let's not keep it secret any longer

There have been many terrific outputs from the task and finish groups created to support Knowledge for Healthcare, and it does seem that some have been hiding their light under a bushel. One of the great undiscovered gems is the Learning Zone.
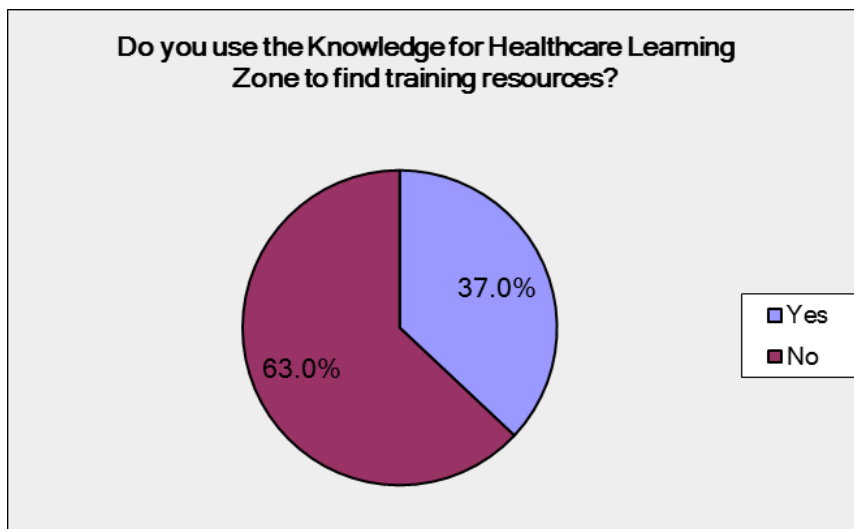
The 2017 training needs analysis ran back in January Identified that levels of awareness are rather low, with nearly 2/3 of staff not using the Learning Zone. This low level of uptake rises to rises to 75% of paraprofessional staff not making use of what is a treasure trove of goodies, all freely available to NHS LKS staff.

Why use the Learning Zone?
Well, in simple terms there are loads of really useful resources which you can use to help support your professional development. As we all know CPD isn't exclusively about "going on a course", often the best learning happens in the workplace or in similar informal settings.

People learn in all sorts of different ways and while the classroom approach may suit some others may be more comfortable with something they can run at their own pace. The Learning Zone gathers together all manner of resources, from induction checklists, blogs and websites, to recommended trainers and even that old favourite the printed book.

Having a look at the Critical Appraisal and Statistical Skills section will gives a good idea of the variety of different flavours available in what is a smorgasbord of CPD opportunities.
As you can see from the screenshot there are three distinct sections

Generic Skills covers broad areas such as
- Change Management
- Communication skills
- Customer Care
- Teaching

Specialist and Technical Skills moves into more hard-core library world of
- Cataloguing
- Critical Appraisal
- Knowledge Management
- Synthesis

Career Pathway and Vocational Skills looks at areas including
- Apprenticeships
- Interview Skills
- Mentoring and Coaching
- Talent Management

So, do yourself a favour, bookmark the URL below and spend a little time over the next week sampling some of the delights of the Learning Zone.
http://kfh.libraryservices.nhs.uk/learning-zone/

John Loy
Library & Knowledge Services Manager
North Bristol NHS Trust (SMD)

Becoming a Certified Change Agent

Since November 2016 I have been working, in addition to my part-time Librarian role, as a job share part-time Administrator in the Salisbury NHS Foundation Trust's (SFT) Programme Management Office (PMO). My line manager, one of the Trust's Project Managers, encouraged my job share partner and I to participate in the 2017 School for Change Agents. She took part in the 2015 School and had found it invaluable as an introduction to the key tools which can help bring about change. Her attendance at the School partly led to the successful roll out of the SFT Save 7 change programme which encourages all staff, no matter what their level, to put forward ideas to cut costs and improve patient experience.

Anyone who wants to bring about change has to be ready to break rules. But in sectors such as health and social care, that can be really difficult. That's where the School for Change Agents comes in. Set up and run by the NHS England Horizons team, the School is entirely online, free, backed by the NHS, and is a platform for change agents to learn together, using guided learning.

The School is a five week virtual learning programme. The hour long modules in 2017 were on a Thursday afternoon but if you were unable to "tune in" at the time, then it was fine to watch to the video of each session at a time that suited you, which is what I did. There was also an optional, additional study guide for each module for those who had the time and inclination to learn more.

To qualify as a certified Change Agent, I was required to submit a 1450 word application based on the topics covered in the School, along with evidence that I had taken part in a change action. I based my application on the monthly Fabulous Stuff bulletin I had recently set up which summarises the most relevant stories for an acute Trust, taken from the Academy of Fabulous Stuff website (which I highly recommend visiting/following), alongside the work I carry out in the PMO responding to Save 7 ideas.

Key messages that I took away from attending the School were:

- Resistance is a natural part of the change process and an indication that the individual/community cannot see the relevance of the proposed change, so need to be nurtured first before they will be able to fully understand the benefits of the proposed change.

- Facts alone don't change people's minds which is summarised really well in a The New Yorker article. This was a real eye opener for me as when I reflect back on 20 years of Library work, it's true that data alone often isn't enough to convince someone to come round to our way of thinking. To convince someone to change their behaviour we need to connect with them on an emotional level.

- The need to involve all staff involved in the proposed change, no matter what their role or level. This was covered in an interesting Nature article on hospital checklists and why they often fail. The days of top down management are over.

- Social connection is 14 times more effective than the written word. Networks are the way forward to bring about large scale change and also need to be nurtured.

I would highly recommend taking part in next year's School if you are at all interested in learning more about how to implement effective change in the health and social care sector. Becoming a certified Change Agent can also help raise the profile of the Library in the eyes of your Transformation team as it demonstrates that you understand their role better.

References:

1) Kolbert, E (2017) Why Facts Don't Change Our Minds: New discoveries about the human mind show the limitations of reason. *The New Yorker*. [Online] 27 February. Available: http://www.newyorker.com/magazine/2017/02/27/why-facts-dont-change-our-minds
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2) Anthes, E (2015).Hospital checklists are meant to save lives — so why do they often fail? -An easy method that promised to cut complications in surgery may not be so simple after all. *Nature*. [Online] 523 (7562). Available: http://www.nature.com/news/hospital-checklists-are-meant-to-save-lives-so-why-do-they-often-fail-1.18057 [Accessed: 02 July 2017]

Helen Clemow
Librarian
Salisbury NHS Foundation Trust (W11)

Swimming Pool's 100th Edition!

Believe it or not, Swimming Pool is very close to reaching its 100th edition, which will probably be in October this year providing we don't merge any issues as sometimes happens. Please get your thinking caps on – perhaps you'd like to write a retrospective of the last few years since the first edition was published in November 2008, or maybe you'd like to take a look forward in to the future to see what the next few years, decades, or centuries might bring.

#UKMedLibs – Professional Development: are you up to scratch?

If you have never 'attended' an #UKMedlibs chat and wonder what we talk about, wonder no more. The last chat covered professional development and offered the following questions for participants to consider:

1. Have you recently used a professional development tool? If so, which one? And, how?
2. What are the benefits of the MLA competencies?
3. Is there anything missing from the MLA competencies?
4. What are the benefits of the CILIP PKSB for health?
5. Does it cover everything that medical information professionals need?
6. Do these tools inspire you to fill in any knowledge gaps or fill you with dread about what more you should be doing?

Interestingly, the chat session didn't quite follow the usual format of question and answer as it turned in to a more 'organic' group conversation which actually felt more interactive as people discussed what they felt was important to them. Snippets of the conversation are:

@hollingtonn "@GoswamiLouise Smaller PKSB for specialist roles? IE. Outreach/Clinical Librarian. Then Library Manager PKSB would be something aspire to? #ukmedlibs"

@ukmedlibs "might be helpful to explain the breadth of the work we do to non library professionals? #ukmedlibs"

@samanthaclare "@ilk21 @ukmedlibs in theory all library staff should be able to work in all sectors although knowledge and experience of sector does help. #ukmedlibs"

@ciliphlg "#ukmedlibs Q5. No. I feel that the creativity and the way that different LKS professionals work can't be covered in a framework"

@ilk21 "@hollingtonn interesting – I've been wondering how to test at interview for ability to do outreach successfully #ukmedlibs"

And you can read the transcript of the chats via the blog – ukmedlibs.wordpress.com

If that has whetted your appetite, the next #ukmedlibs chat will cover Patient and Public information: how is your library service getting involved? That's at 8pm on Tuesday 18th July, so do join us on twitter and don't forget to use the #ukmedlibs hashtag.

Sam Burgess
Library Service Manager (H05, H04, H18, and H34 amongst others!)
Hampshire Healthcare Library Service.

Health Information Week

On the assumption that you have all had a very successful Health Information Week, we are looking forward to giving HiW a particular focus in the next edition of Swimming Pool. Please do send in your photographs and experiences; do tell us what went well, and what you might do differently next year. Tell us all about your successful HiW!

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