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Autumn Study Day 1999:

26th November: "WOULD YOU CREDIT IT?"
Accreditation and quality in health libraries"

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groups/hlg/lfn.html](http://www.la-hq.org.uk/groups/hlg/lfn.html)**

WE NEED YOUR INPUT! INFORMATION FOR SUBMISSION:

If you'd like to submit an article/news item to the Bulletin just send the document to:

rebecca.davies@swansea.ac.uk or by post to:

Rebecca Davies

Library and Information Centre

University of Wales Swansea

Singleton Park

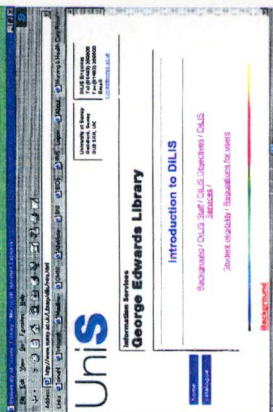
Swansea SA2 8PP

Any version of WORD or a rtf file is fine. We'd like a greater number of contributions from LfN members and any information on the following themes would be especially appreciated (short items are very welcome!):

- ⇒ OVIDS full text Nursing Collection – has anyone any experience of using it or has subscribed?
- ⇒ Summer vacation misery? Any solutions to this long term problem?

BULLETIN

THE DILIS PROJECT
DEBBIE LOCK, PROJECT MANAGER
GEORGE EDWARDS LIBRARY, UNIVERSITY OF
SURREY

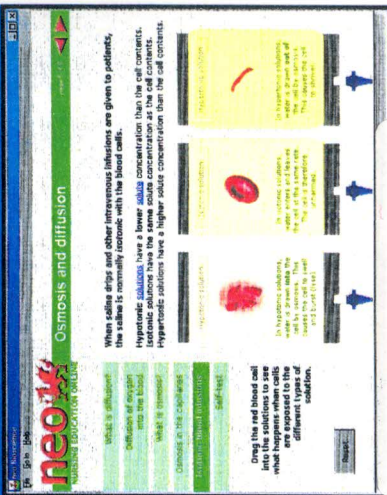


Debbie Lock, the DILIS Project Manager expands on her presentation at Umbrella 5 on pages 6-13. The DILIS project, with it's wide range of services and resources for distant learners provides an opportunity for us, as nursing librarians, to consider future developments.

The DILIS web pages;
<http://www.surrey.ac.uk/lib/dilis/intro.html>

COMPUTER ASSISTED LEARNING
AND NURSES
DR. MIKE TAIT, UNIVERSITY OF WALES
SWANSEA

The CAL (Computer Assisted Learning) Unit of the School of Health Science, University of Wales, Swansea, were established with the sole purpose of creating good computer based learning for the School's students (who are mainly nurses). On pages 15-17 Dr Mike Tait discusses what makes good CBL, and the developments at Swansea. This screen shot is taken from the neo programme.



CURRENT ISSUE

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THE RCN LIBRARIES

OUR MISSION: TO PROVIDE AND PROMOTE A QUALITY NURSING INFORMATION SERVICE

JACKIE LORD HEAD OF LIBRARY AND INFORMATION SERVICES.

The Royal College of Nursing (RCN) Library and Information Service was established in 1920 and is the largest specialist nursing library in the United Kingdom. The UK Library, which is based in London, has a stock of over 60,000 books and 400 journals. Specialist collections include the *Steinberg Collection of Nursing Research*, which is a collection of over 800 PhDs and MScs by British nurses.

The users of the Library are RCN members who number over 320,000, RCN staff and students studying at the RCN Institute. Although the UK Library in London is extremely busy with face to face work, the majority of users only access the service remotely. We do a large part of our work by telephone, post, fax, and of course we do a growing amount electronically.

My role as Head of Library and Information Services is UK-wide. One of the greatest challenges we face is providing an equal information service to all our members regardless of their geographical location. Our vision is for UK accessibility by creating a library without walls, using IT to create an effective information service. A new library management system, Unicorn, was introduced in 1999 and is the foundation for our future electronic developments, including document delivery and digitisation of parts of the collection.

RCN Library services have been established in Scotland and Wales in order to improve access to information for all our users. These are national services, which are largely electronically based. The RCN Library in Northern Ireland has been established since the 1970s. Members in Scotland, Wales and Northern Ireland are, of course, entitled to a full service from the Library in London. Librarians from

the four countries meet regularly in order to provide a strategic, co-ordinated service for RCN members. The Library Projects Coordinator, based in Leeds, is leading on the introduction of RCN Learning Resource Centres, which will be established around the UK, mainly in collaboration with other organisations and information services. The aim of the Centres is to plug gaps in information provision for nurses, not to duplicate.

The UK Library in London is having its premises extensively modernised and expanded. We are offering a full service from our temporary location in Euston. The newly modernised Library will provide a high quality, fit for purpose physical environment, which demonstrates the commitment of the RCN to the lifelong learning needs of its members. It will be a hybrid library, with a mixture of physical and electronic resources. We will continue to take at least one copy of all British nursing materials, and maintain the strength of the Library's collection of grey material.

The RCN Library and Information Service is committed to working collaboratively with other institutions. We are a partner in *British Nursing Index*, which references articles from over 220 nursing journals and is available via the Internet, CD-ROM and in print. This is produced with colleagues from Bournemouth University, Poole and Salisbury NHS Trusts. We have also introduced a Corporate Membership Scheme, in order to improve nurses' access to information and recently held an Open Afternoon for interested librarians.

We are leading on an Information Strategy for the RCN. The steering group includes RCN Librarians from the 4 countries and colleagues from RCN Direct, the 24-hour telephone advisory service as well as other RCN staff. A series of focus groups have taken place throughout the UK to ensure that the strategy both anticipates and responds to RCN members' information needs.

Information is seen as one of the key building blocks for the Royal College of Nursing. The RCN Library and Information Service staff will make sure that all RCN members' information needs are fully catered for in the future.

"Information is seen as one of the key building blocks for the Royal College of Nursing. The RCN Library and Information Service staff will make sure that all RCN members' information needs are fully catered for in the future"

RCN NORTHERN IRELAND: THE VIRGINIA HENDERSON LIBRARY MAUREEN DWYER

The Library, opened by Virginia Henderson in November 1988, was extended and refurbished in 1994. Library users have access to a range of facilities including a stock of some 7,000 publications, a journal holdings collection of over 50 titles, a web-based catalogue of UK stock, Cdom and online databases, a video collection and viewer, photocopying facilities and a microfiche reader.

Access

Lending services are available to all Institute students. All RCN Members are welcome to use the library for reference and study purposes

Access to Information Technology

Users have access to a range of online and CDROM based databases covering the subject areas of nursing, employment relations, health law, health service management, government information, and evidence-based healthcare and audit.

User Education

The library service runs a number of user education programs and also hosts a series of Open Nights for RCN Professional groups and Stewards.

Staff

The library has four members of staff. All staff participate in ongoing strategic planning for service development, have input to internal information strategy development and are represented within health informatics development Northern Ireland.

LFN Representative

Maureen Dwyer has worked in specialist libraries within Northern Ireland. Experience has included architecture, tourism and most recently the nursing field, having worked in a college of nursing before taking up her current position as librarian with the RCN.

Further information about the RCN and its libraries may be found at the web-site www.rcn.org.uk

RCN UK
website: <http://www.rcn.org.uk>

A review of:

CORE LIST FOR NURSES, MIDWIVES AND HEALTH VISITORS

Compiled by Jim Moore

Medical Information Working Party, London, 1998 55pp

ISBN 0951341936 £5.00

Karen Blackhall

Cochrane Airways Group, St George's Hospital Medical School

It would be easy to criticise this list for being out of date but, as everyone who is involved in any way with books or publishing will know, it is almost impossible to produce a printed work which is entirely inclusive, especially in the healthcare field.

Many entries are included which will not only be useful in the short term so this gives the core list slightly more shelf life than one would, at first, suspect.

Being aimed at those who provide healthcare as well as those who provide the information for healthcare workers, it is laid out in a way that will appeal to those unfamiliar with bibliographic searching. The format is simple with well-spaced text, which is easy read. There is no doubt that user-friendliness was a big consideration during production.

Books are listed by subject, with title entries printed in bold. Subject areas are fairly broad but with a list of this size it is easy to browse through sections of interest. There is also an alphabetical list of authors at the back so individual texts are easy to trace. Each entry is listed with full publication details and a small synopsis. Although sometimes a little brief, it gives an indication of the content as well as the perceived audience. The latter will be of particular use to health librarians who are new to the subject area but will also suggest intellectual level, for those wishing to track down information for personal use.

Section 2 consists of database and current awareness services. This is the section most likely to become outdated quickly. For this reason it would seem more suitable to refer to an electronic source or to produce a separate list which can be updated more often. The speed of change and development in this area may make the list appear more outdated than it is.

The last section consists of UK published journals aimed at the nursing community. Again, they are grouped by subject with full bibliographic details but without a synopsis. The author refers to a publication by the RCN for a review of the research quality of journals included. An alphabetical list follows which repeats all the publishing details and current prices. This could be a useful quick-reference source for the health library as comprehensive lists of journals can be bulky and time consuming.

The list is large enough to be useful but small enough to be easy to browse. The price makes it an essential purchase for any health library. It is also cheap enough for purchase by an individual who needs a useful guide to choosing quality literature in the healthcare field.

"The list is large enough to be useful but small enough to be easy to browse."

DISTANT USERS: LOCAL RESPONSIBILITIES
DEBBIE LOCK, DILIS PROJECT MANAGER
GEORGE EDWARDS LIBRARY
UNIVERSITY OF SURREY

The current thrust towards supporting life long learning through widening access to further and higher education has required many educational institutions to review the support systems in place for non traditional students. In the case of distance education, key areas such as library and information services have borne the brunt of much criticism about the appropriateness of the services they offer to this type of student. In the UK, the absence of a national policy or guidelines like the 'ACRL Guidelines for distance learning library services' (1), has resulted in a piecemeal approach to this area of library provision. Although improvements are being made, progress is slow and many distance learning students remain disadvantaged because of the sheer logistics of accessing the information they require to support their studies. In the case of distance learning nurses, there is the added disadvantage of the complex relationships that can exist between the NHS libraries providing services to students on clinical placement, and the higher education institutions who are responsible for their training.

"designing and testing a DILIS with the intention of making it available to all ... distant learners, including nurses on placement."

Over the past eighteen months, the George Edwards Library, University of Surrey (UniS) have been designing and testing a distance learners information service (DiLIS) with the intention of making it available to all of the University's distance learners, including the student nurses on placement. The purpose of this paper is to highlight some of the issues facing the DiLIS team, and the possible implications these have for library services for distance learning nurses.

WHAT ARE DISTANCE LEARNING LIBRARY SERVICES

The most comprehensive definition of a distance learning library service can be found in the ACRL Guidelines (2).

"Distance learning library services refers to those library services in support of college, university, or other post-secondary courses and programs offered away from a main campus, or in the absence of a traditional campus, and regardless where credit is given. These courses may be taught in traditional or non- traditional formats or media, may or may not require physical facilities, and may or may not involve live interaction of teachers and students".

IDENTIFYING THE DISTANCE LEARNER

Without doubt the first 'challenge' that most information providers will

face at the beginning of distance learning project is defining what a distance learner is. If you take the example given by ARCL that distance library learning services support "all post-secondary programs designated as: *extension, extended, off-campus, extended campus, distance, distributed, open, flexible, franchising, virtual, synchronous, or asynchronous*" (3) most nurses will be a distance learner at some point in their career.

At the UniS there are two types of distance learners, those that never visit the site, and those that attend during study blocks. The time between the self directed study at home and attendance varies, and is dependent on the structure of the module. There is a fine line between part-time and distance learning students at UniS, and for the purposes of the project only students following programs that had been designated distance learning during the validation process were eligible to use DiLIS.

DiLIS

1. DiLIS is a *Pro-Active* information service, the project team try to anticipate the information needs of the students before they have to ask.
2. DiLIS is '*client-orientated*'. No one individual decided what services to offer and develop. The ones provided through DiLIS are those that were chosen by the students
3. DiLIS is about encouraging '*information self-sufficiency*'. It provides students with the opportunity to take on responsibility for their own learning through educating them about the world of information, rather than just the world of an academic library. As information professionals we would be failing in our duty if we did not actively encourage students to investigate all aspects of information. It can be argued that through information literacy, students develop transferable skills that support life long learning and most importantly promote **INDEPENDENCE**.

The services offered through the project were based on the findings of a survey that investigated the information needs and requirements of the University's distance learners (4). These included:

- A web based information gateway
- A postal loan service
- A document delivery service (for items held in stock)
- Remote access to electronic information resources
- Tailored user-education programmes

POSTAL LOAN SERVICE

When developing a postal loan service, the following issues had to be addressed:

1. *Identifying the boundaries e.g. who will be eligible for the service*

Although there was universal agreement from the distance learners that a postal loan service was what they all wanted, it was widely acknowledged that time restrictions, inadequate postal systems and financial constraints would impede the success of an overseas service. Therefore, the service offered through DiLIS was restricted to students resident in the UK & Eire

1. Identifying the category of loan

At UniS, all postgraduate students can borrow ordinary loan books for a period of four weeks, with the option of renewing items providing that they are not reserved. These items were used in the service because the four weeks allowed for 10 days postage (4 days to reach the student and four to get back).

1. Who pays for what?

Any new service costs money, at UniS, the costs of the postal loan service are divided between the Library and the student. Books are sent to students when they ask, and they pay the return cost. The books remain the responsibility of the student until they return to the Library. Invoices are generated for lost or missing books unless there is proof of postage.

1. Policing the service

There are procedures in place for DiLIS defaulters. Failure to return reserved items is dealt with fairly severely in that the borrowing rights of the defaulting student are suspended if a reserved item is not returned to the library within one calendar month of its due date. Consistent failure to return books to the Library results in the suspension of borrowing rights and the DiLIS program, and involvement of the specific Course Director.

Postal loan services & student nurses on placement

The project team are currently reviewing the way in which DiLIS can be embedded into normal library operations, and in particular how nurses on placement can benefit from the new services.

© Positive initiatives like the VALNOW project could be introduced to improve the accessibility of materials. However this would require the clinical sites to have the same Information Management System (TALIS) as UniS, but the benefits would be a shared catalogue which shows the site location of an item thus giving the user the opportunity to order and reserve items from different sites. But what are the implications of this for nurses registered at the clinical site libraries but not studying?

© It can be argued that a negative route would be if a University decided to centralise the service i.e. materials are purchased and processed on the academic site, and deposited in the clinical site, with funding adjusted accordingly. Would this affect the resources available for nurses not studying?

"the project team are currently reviewing the way in which DiLIS can be embedded into normal library operations."

Many academic institutions do not have any contractual obligations to contribute towards services for nurses not studying at the host institution, but historically NHS libraries are a user 'melting pot' where the service boundaries between different categories are often blurred. In view of this, it could be argued that higher education institutions have a spoken moral obligation to ensure that the purchaser and provider issues between sites contributes towards a seamless and balanced service as much as possible.

DOCUMENT DELIVERY SERVICES

When developing a document delivery service, the following issues had to be addressed:

1. What type of service is going to be offered?

The DiLIS document delivery service (DDS) enables students to request articles from items held in stock at GEL. For items not held in stock, the request is referred to the Inter-Library Loan Department when possible. Overseas students are generally advised to use a commercial service like Uncover, UMI and the University of Minnesota because of time constraints.

1. To charge or not to charge?

There is a charge for this service. The Library charges for a photocopy to recover production costs "together with a contribution towards the general expenses of the library" (5). The current rate is £2 per item for a student living in the UK & Eire, and £4 per item for those living overseas. It is intended that these charges should cover copyright clearance, reproduction and postage costs. This compares favourably to commercial information services.

1. Copyright and distance learning

Document delivery services are inextricably linked with copyright. Like most higher education institutions, UniS has a blanket copyright license with the Copyright Licensing Agency (CLA). This does not cover the 'compilation of course packs' (6), and "distance learning materials are always to be regarded as course packs, regardless of length, because they are intended for use outside the licensed premises" (7), and clearance must be obtained through the Copyright Licensing Agency Rapid Clearance Services (CLARCS) system and fees paid. On the other hand, any UK library, including a profit-based service, can copy on behalf of individual under fair dealing [S.29] (8) providing that the legal obligations are fulfilled. How and if this will change under the new EU Copyright Directive is unclear, but it would appear that library privilege and possibly fair dealing may be at risk.

Document delivery services & student nurses on placement
Without doubt, it can be argued that the introduction of the DiLIS document delivery service to placement nurses would be extremely difficult to do, and that the structure of the service is unsuitable for distance learning nurses. The current inter-library loan co-operative that

exists between the South Thames Regional Libraries provides an excellent service for the nurses, and although DiLIS will be available to them in the future, the team is skeptical about the amount of use it will get. However, improvements to the existing regional system could possibly be made in terms of speed and efficiency. For example

- UniS could supply articles through the ARIEL system, (scanning and transmitting items) to the clinical sites
- The clinical sites could in theory, use the same software to request and supply articles to each other thus improving connectivity between the sites.
- In addition to this, the clinical sites could also apply to use the LAMDA service that would give them access to a variety of excellent academic library resources. LAMDA predicts a turnaround time of 48 hours, and is cheaper than the British Library

DiLIS WEB SITE

Links to two categories of electronic information services were available through the DiLIS web site, those with unrestricted access and those with restricted access that required passwords and usernames. Unrestricted Internet services included links to the library catalogue, various subject guides, a literature searching request service and numerous subject specific web pages. In addition to this, the DiLIS web site also directs students to various commercial document delivery services such as Proquest Direct (UMI) and Uncover (Knight-Ridder). The function of the DiLIS web site is to educate students about the world of information rather than limit them to the usual academic information services, and to provide them with alternative information avenues thus encouraging "information self-sufficiency" irrespective of their subject discipline or location.

REMOTE ACCESS TO ELECTRONIC RESOURCES

"Without doubt, given the chance most doctors, nurses and other health related professionals would like access to information 24 hours a day, 7 days a week, 52 weeks of the year" (9)

On the whole, the open access services did not provide links to the Institutions licensed materials such as the bibliographic databases and full text electronic journals. These services are restricted and require usernames and password to access them. As far as possible, access to the University's licensed databases is controlled through the ATHENS Authentication system. Its key feature the 'single sign-on' has had a considerable impact on students who are following programmes that require no on-site attendance. Some issues surrounding remote access to electronic resources included:

1. *Access and control*
 - Who is going to use them, how could the library ensure that only authorised users access the licensed materials

1. What type of control mechanism would be used ?

- Personal vs. access ATHENS account
- Remote access using a unique Library password
- Remote access using a personal password (not ATHENS)
- Remote access using 'Personal ATHENS' account

1. What type of support will be available ?

- From the Library
- From the University's computer services
- From the satellite libraries e.g. NHS libraries

1. What happens to distance learners that do not have access to electronic facilities?

- Should a parallel paper-based service be offered

Remote access to electronic resources & student nurses on placement

Within the next 18 months, most, if not all, students nurses will have been registered for their own personal ATHENS account. This will enable them to access a wide range of databases that are not linked to the University's IP address, and several full text electronic journal services e.g. Ingenta Journals & Ebsco On-line. It is easy to see that in the future, access to electronic information services will not be site dependent but user category dependent, and often dictated by the license agreements of the various publishers and service deliverers.

USER EDUCATION

"... many nursing staff lack information searching skills, awareness of information resources and skills in using information technology" (10)

It is easy to underestimate the skills required to undertake a distance learning course. Being off-site and away from the main campus and its readily accessible resources is hard, being away from your colleagues is hard and not having your tutor or lecturers close to is hard. In fact DISTANCE LEARNING IS HARD. For students of all disciplines it requires considerable motivation, determination and without doubt, an element of information self-sufficiency. Time is valuable commodity for most distance learners who generally have to balance their studying between work and family commitments.

During the DiLIS project, to promote effective and efficient information seeking skills, off-peak and out of hours user education tutorials are available for the students. These generally occur on a 1 to 1 basis or in a group setting when the students are attending a study block, and they can be delivered in either the Library, the Department or off-site. All areas of 'information' are covered including library skills and

literature searching (using stand alone, networked and Internet based databases) and Internet searching. It is essential that off-site students are given every opportunity to refresh and develop new skills that will support them during their studies e.g. the use of IT in relation to information management

User education & student nurses on placement

Nurses have a reputation for requiring more support than most traditional students in higher education. It is important to recognize that this is not because they are intellectually challenged or that they are overly demanding, but because of the nature of the profession in which they work. Nursing remains a practical profession. Whilst some nurses enter the academic domain, the majority do not and simply want the qualifications they require to practice and to progress in their chosen profession.

It is easy to underestimate the culture shock that student nurses can experience between using a multidisciplinary academic library and health library. Similarly academic library staff can also experience a culture shock at the level of support required by the nurses. For nurses on placement, the development of their information skills is the responsibility of all of the service providers irrespective of their organization and location. It is in this key area of user education and information skills development that greater collaboration is required between clinical and academic sites: Health librarians and academic librarians can learn from each other. Between them they possess a formidable knowledge bank, and now is the time to share it when services that will inevitably affect resources are being developed.

CONCLUSION

In the case of Surrey, we will rapidly be reaching the position where distance learners who have been on the DiLIS project have a greater understanding of the world of information than their on-site counterparts. Initiatives like DiLIS mark the beginning of a process that recognises that the needs of individual distance learners vary considerably, and these needs require a flexible and constantly changing range of support structures. In terms of distance learning nurses, it is essential that closer relationships between the clinical sites and academic institutions are forged. Information service changes in any of these areas will inevitably have repercussions on the nurses that they serve. It is the responsibility of health, nursing and general academic librarians to ensure that the changes benefit all users, and not just the privileged few.

NB: These comments are the views of the author and not the organization

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"... it is essential that closer links between clinical sites and academic institutions are forged."

The LINC Health Panel Research Working Party
Maurice Wakeham
Anglia Polytechnic University Library

The LINC Health Panel Research Working Party began work in January 1999. It came about because it was clear to many health libraries groups that there was a need to bring together various disparate efforts to encourage research in the field. Members, of what its present Chair, Andrew Booth, likes to call the LINC Party, are there because they have an interest in research.

The Working Party will seek to promote, support and facilitate research. It will also advise and support the LINC Health Panel on research related issues and attempt to promote 'health' information interests on wider research agendas. It will also be seeking to identify work that is already being done and promote it.

The Working Party is currently seeking to develop a programme of workshops aimed at assisting health librarians in developing research skills. These sessions will be based upon a course that has already been successfully created and run by the *Library and Information Research Group (LIRG)* but with a specific 'health' content.

In order to encourage research by practitioners in the health libraries sector a number of bursaries and awards currently on offer from various groups, including LFN, will in future be combined so that a more substantial sum can be offered. It is hoped that more information about this will be available in the autumn of 1999 – keep your eyes on the usual discussion lists and the LA Record.

Among other planned activities are the creation of a discussion list and web page, production of teaching materials which can be used in critical appraisal skills training for librarians and the encouragement of evidence based librarianship. A Business Plan is being produced as a guide for future activities.

Libraries for Nursing is represented on the LINC Health Panel and has supported the establishment of the LINC Party. It is hoped that LFN members will support the aims of the Working Party by attending events that it organises and seeking aid in carrying out their own research.

For further information contact:

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*"The Working party
 will seek to promote,
 support and facilitate
 research"*

*"CBL... an
 active rather
 than a passive
 experience"*

Online nursing education

- focusing on learning rather than just providing information

Mike Tait, David Jenkins, Mike Lewis
 Computer-aided learning (CAL) Unit, School of Health Science,
 University of Wales Swansea

What is good CBL?

There are currently few examples of high quality computer-based learning (CBL) packages designed for nursing students. This is due partly to the low number of packages that have been produced, and partly to the tendency of the authors of CBL packages to see their task as merely providing information rather than helping the students to learn. In designing the packages developed by our CAL Unit, we have tried to make our students' use of CBL an active rather than a passive experience. This has been achieved by including high quality graphics and animations, posing questions at appropriate points, encouraging the students to do something (and see the outcome), and including clinical scenarios that make the relevance of the material covered clearer. We have also tried to minimise the amount of text included and to only include the key points for each topic rather than trying to make the CBL package an electronic version of the lectures. This has the added advantage of reassuring the lecturing staff that the aim of introducing CBL was to complement rather than to replace the work that they do!

Is Web or PC-based learning better?

One question that many CBL developers ask themselves nowadays is whether Web or PC-based learning is better. Most people who have used the World-Wide Web know the problems associated with its use, in particular the slow arrival of larger images and animations via the Internet. Quite often it is more of a back road than an "information superhighway". When the student spends a considerable amount of time waiting for pages to load, s/he rapidly loses interest. This highlights a further problem with the Web in that the default browser layout makes it easier for the student to be distracted and s/he can readily jump away from the educational material and waste a lot of time looking at less useful pages. Web-based CBL does, however, have advantages. For example, it is only necessary to maintain one version of the package which all users will see when they access the

pages, and it can be viewed on a broader range of computer types, i.e. PCs, Macintoshes, etc. Our decision in developing our CBL packages was to first decide on what we wanted to put in the package and only then decide whether a PC or Web platform was the best way to achieve our aims. In other words, CBL should focus on learning rather than on the technology.

What computers do well

When designing CBL packages, it is important to focus on what computers do well. For example, computers nowadays are very good at presenting graphical information and can animate processes such as osmosis that are difficult to describe either verbally in a lecture or using a series of images in a textbook. Since most people find reading large amounts of plain text on screen tiring on the eyes (and boring), CBL packages should not be "electronic text books". Instead, they should cover the key points only and help the students develop a mental framework that can be supplemented with information from lectures and text books. Computers are also good at allowing students to direct their own learning and good CBL packages should therefore allow them to navigate through the topics covered via alternative pathways.

"CBL packages should not be "electronic text books"

Design criteria for the neo package

The first CBL package to be produced by our CAL Unit has been called neo (nursing education online). It is an introduction to bioscience aimed at students in the first-year of the nursing course at the University of Wales Swansea. These students have a mixed range of experience of bioscience education. Some have had very little previous exposure to the subject; others have a biology A-level or better. Although the neo package is aimed primarily at students with limited experience of bioscience, our more advanced students have said that they still found the program useful as it covers the subject matter in a novel way. In designing the neo package, we used the following criteria:

- The pages should all be graphic-focused
- Animations should be used where possible
- The text should be concise
- Scroll bars should be banned to minimise the temptation to add too much text

- The program should have a clear structure and navigation
- The program should have an open structure
- The program should only cover the key areas of each subject
- The program should include clinically-relevant examples
- The program should be as interactive as possible

The screen shot shows how some of these were achieved in a page on isotonic blood infusions. The neo program is nearing completion and will be available for purchase from Autumn 1999.

Final thoughts

When it is well-designed and well-written, CBL can significantly enthuse students. It should also improve their knowledge and understanding of the subject and improve their IT skills. Proving the benefits of CBL is challenging as the results of an evaluation depend very much on the quality of the CBL package. Just as there are good and bad lectures (and lecturers), there are good and bad examples of CBL. We will shortly be submitting for publication a review of the use of CBL in nursing. It is clear from this work that the strategies used to evaluate nursing CBL are often badly designed, and the results therefore ambiguous. Although claims are made about how CBL can save staff time and money, these are debatable as in our experience CBL works better if teaching staff are present while the students use the package. Developing CBL packages is in fact time-consuming and therefore relatively expensive. Before embarking on the development of a new program, it is well worth searching for a suitable commercially-available package using, for example, the searchable database of nursing CBL at the CTI centre for Nursing and Midwifery Web site (<http://www.shelf.ac.uk/unip/projects/ctinm/>). When using CBL, therefore, it is important to focus on improving the quality of the students' learning experience rather than on saving staff time or money.

Further information

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FREQUENTLY ASKED QUESTIONS ABOUT IMPACT FACTORS

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Many research institutions are now asking their staff to be strategic about where they send papers for publication. They are encouraging their researchers to send material to journals where the number of potential readers is high and to journals whose contents get frequently cited. These journals can be identified by their Impact Factor. Below are some of the commonly-asked questions posed to library staff.

Q. What is a journal impact factor?

A. It is a numerical measure of the impact a journal makes on its readership and on research

Q. What will it tell me?

A. The number will help you evaluate a journals relative importance, especially when you compare it to others in the same field e.g. The BMJ impact factor is 4.411 but the Lancet is 17.332. The higher the number the greater the impact

Q. What else is it used for?

A. It is commonly regarded as a measure of which journals are highly regarded in their field, and therefore important when considering where to submit papers for publication. Publication in high impact factor journals is seen as a measure of cutting edge research quality and may reflect the reputation of the employing institution

Q. Who calculates them?

A. The figures have been calculated annually since 1961 by

the Institute for Scientific Information (ISI) in Philadelphia, and published in their Journal Citation Reports

Q. How are they calculated? (Here comes the science bit!)

A. The impact factor is essentially a ratio between the number of times the articles a journal publishes are cited, and the number of times those articles could be cited during two consecutive years - it counts the number of times that papers in a particular journal are cited by all journals

eg if ONCOGENE publishes on average 21 articles per issue

and publishes twice a month, it publishes 48 issues in two years

which is a total of 1008 articles

If 136 of these articles are cited -

1008 divided by 136 = 7.387

which gives ONCOGENE an impact factor of 7.387

Q. What about the immediacy index?

A. This index tells you how quickly (on average) an article from a journal gets cited. For researchers working in cutting-edge research, it can give a useful perspective and enables journals to be compared for immediacy of impact

Q. Where can I find Impact factor lists?

A. In the publication Journal Citation Reports. Generally speaking, only held in large libraries because of the high cost of the subscription. Not currently available free on the Web from home for copyright reasons.