

**YOU TAKE THE A ROAD, AND I'LL TAKE THE B ROAD, AND YOU'LL
BECOME CHARTERED AFORE ME!**

(Personal reflections on Route B to Chartership)

Jim Moore

I qualified as a Librarian in 1993, and was keen to become chartered as soon as possible. However, my first job was in a hospital-based library, which was not large enough to offer Route A training, and so I registered under Route B (of the old Routes to Associateship scheme). Two years on, and in a different job, I have been asked to give my comments and impressions.

As you are aware, Route A candidates followed an approved one year on-the-job training scheme, and were then able to submit a 4-6,000 word Professional Development Report. Route B candidates, by contrast, had two years in which to create their own training programme (they were recommended to base this on Route A requirements) and then submit the same type of PDR.

Whilst appreciating the need for the A/B differentiation, I have two main criticisms to offer:

- 1) The candidate on a well organised Route A scheme has it easy! All they have to do is attend the training and write up the report. They even have someone appointed to help them prepare their PDR. A good candidate should have no problems, and even poorer candidates will probably get by. The Route B candidate's training, on the other hand, depends heavily on his/her ability to identify his/her own training needs and to seek appropriate courses/support, etc. This can be quite difficult when the candidate is newly qualified. The success of any Route B training also depends on the candidate's manager's ability and/or willingness to help meet the identified training needs, and to support the candidate.
- 2) Generally, smaller libraries are unable to offer Route A (unless they can participate in a Region-wide scheme), and yet a Chartership candidate working in a smaller organisation may well have a far wider range of work experience than his/her peer in a larger organisation, who may be employed in a very specific category and have limited experience of much else. To illustrate this, my duties in my first post included: user education; stock selection; classifying and cataloguing; enquiry work; supervision and training of Library Assistants; running the library in the Librarian's absence. One of my contemporaries, on the other hand, working in a large organisation, was limited to indexing and cataloguing, with brief visits to other departments.

Given these points, I fail to understand why a self-directed learner, with a wide range of experience should have to wait 2 years before submitting a PDR, whilst the recipient of a training programme, with possibly narrower experience, is able to submit a PDR after one year.

Having made the above points concerning the disparity I feel there is between Route A and B candidates, I'd like to conclude by considering the process of preparing a PDR. I found this an extremely valuable exercise, as it forced me to reflect on and evaluate my own work, and also on the library service of which I was a part. This evaluation resulted in a number of insights and

ideas, some of which - with my manager's support - I was able to put into immediate practice. The preparation of the report took quite a lot of personal time and commitment, but I feel that it was thoroughly worthwhile.

At the time of writing Jim was Acting Senior College Librarian at the University of Luton (Buckinghamshire)

APPEAL FOR HELP

As I approach the last year of my Information Studies Course, the requirement to undertake a dissertation is almost upon me. With this in mind, I have decided to undertake a research study connected with the following theme:

Title: Small is beautiful - an investigation into user preferences and library size in the Health Care Sector.

Outline: A study of user satisfaction among undergraduate nurses and apparent preferences for small information units. Case studies (large, medium, small) incorporated within the study.

The increasing emphasis for nursing to be a degree based profession has necessitated nurses to enhance their status by becoming graduates. Information discussions with a number of these nurses has led me to believe their information seeking behaviour is more suited to small information units. In my locality there is a preferred use of a small multidisciplinary library attached to a District General Hospital, rather than other options comprising a University Library and College of Further Education Library. This study will attempt to 'shed light' on this apparent preference and 'fuel' the debate as to how libraries in the health care sector should support nurse education into the next millennium.

I would be grateful for any comments, advice and additionally any notification of similar studies which will assist with the initial literature search and ultimately (hopefully) the successful completion of this study.

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