

## **LfN CHAIRMAN'S LETTER TO NURSING STANDARD**

### **The uncut version**

*The Nursing Standard has recently been running what must be one of the highest profile campaigns on the subject of nursing libraries ever to occur. The campaign began on October 29th 1997 [issue 12(6)] and ran through until January 21st 1998 [12(18)]. Many of the problems raised will not be new to Bulletin readers but the campaign seems to have been successful in raising the profile of libraries with nurses.*

*An edited version of the following letter appeared in the Nursing Standard for November 12, 1997.*

Dear Editor

I am writing on behalf of *Libraries for Nursing* (LfN) to welcome the *Nursing Standard's* campaign to bring pressure to bear on employers to provide adequate library access for their nursing staff. Your campaign will hopefully support what LfN has been saying for years. Much of the research evidence that supports your own telephone survey has been at least part-funded by LfN.

There is nothing new in nurses having poor library facilities. They may not be as bad as your survey shows. Library users, and more especially non-users, are not always aware of what services or facilities are available to them.

The move of nurse education into the higher education sector has served to draw attention to the inadequacy of provision for trained staff. In itself it is not a bad thing and nor is the closure of small or inadequate on-site libraries. We should not think of 'access' as only meaning the ability to walk into a room full of books and journals on the site where you work and the opportunity to take things away. 'Access' can just as easily mean a computer network link to a library catalogue or named librarian or document delivery system which can be contacted by email, 'phone or fax. A 24 hour (is this what 'flexible' is supposed to mean?) service fully responsive to user demands would be possible. University libraries may not offer a service to all practice staff but they might be open to negotiation to do so. We all know that libraries are largely free at the point of delivery; unfortunately they are not inexpensive to provide, whatever form provision may take.

Setting up a library let alone an integrated information service is no easy task. The hierarchical and tribal nature of the health service, the competition for money and the sense that the library can be provided for when all the 'important' things have been funded, and the limited knowledge of many nurses of how to use a library are among the problems. It can only be hoped that your campaign may bring attention to this issue and encourage nurses, managers and information workers to cooperate in providing a sound basis for the provision of services to support evidence based practice.