

PARTNERSHIPS IN HEALTH: Effective access models to higher education and National Health Service libraries for health professionals and students

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INTRODUCTION

How can access to higher education (HE) and National Health Service (NHS) libraries for health professionals and students be improved? A recent research project in the North East has developed an integrated model of cross-sectoral access.

The project "Partnerships in Health" was funded by the British Library under their Co-operation and Partnership Programme (CPP) from June 2000 to February 2001. Research expertise and project management was provided by the Information Management Research Institute of the School of Information Studies at the University of Northumbria. The Director of the Institute, Dr Linda Banwell, was the Project Co-ordinator. The author was the Project Officer. The North East provided the conditions for a case study of relevance to the whole of the UK. Local health librarians from the NHS and HE sectors formed the project's Steering Group. The organisations represented comprised: Newcastle City Health NHS Trust, Newcastle upon Tyne Hospitals NHS Trust, Northumberland Health Authority and Northumbria Healthcare Trust, South Tees Medical Library; Health Libraries, North, Northern & Yorkshire Regional Library Advisory Service; University of Durham, Stockton Campus, University of Newcastle, University of Northumbria, University of Sunderland, University of Teesside; as well as a CPP representative.

The aim of the project was "To develop a model which would offer an integrated approach for improving cross-sectoral co-operation in the NHS and higher education sectors to improve access to library and information services for health professionals and students". The context of the project was established from government policy documents. Stakeholders from the NHS and HE in both librarian and senior management positions were interviewed. The findings from these interviews were presented to a wider stakeholder audience at a Colloquium. The purpose of the Colloquium was: (i) to validate the project's results; (ii) to act as a foresight panel; (iii) to be a creative partnership activity in its own right.

ACCESS PROBLEMS ADDRESSED BY PARTNERSHIP WORKING

A wide range of issues and barriers are well known to affect access to library information services: inequity of provision for different health professions and between different organisations; the complexity of funding streams and the low level of investment in library information services by some organisations; complexity and confusion over who has the right to be a member of a specific library and what level of service this right provides; lack of IT resources, network incompatibilities, licence conditions restricting access to databases and e-journals; work patterns of NHS staff and students on placement.

Cross-sectoral partnerships can address these issues. The model developed from the project's findings has at its centre the Workforce Development Confederations as a mechanism for co-ordination of library and information services across the HE and NHS sectors.

The model has a number of components:

- A Vision of Cross-Sectoral, Co-ordinated Library Information Services, describing:

- the types of library services appropriate in the current changing electronic environment
- how they can be co-ordinated across the two sectors

➤ **An Integrated Model Of Cross-Sectoral Access**, outlining:

- how the Confederations can manage, develop and integrate library information services
- the important role of library alliances - a group of organisations who have agreed to work together because of shared interests or aims in improving library information services
- the advisory and strategic roles of NHS Regional Library Advisory Services

➤ **A Mosaic Of Access Solutions**, describing:

- what various organisations at local, regional and national levels can contribute to make the integrated model work

➤ **The Developmental Process Of Successful Partnership Working**, describing

- how to achieve the partnerships required for co-ordinated activity

A VISION OF CROSS-SECTORAL, CO-ORDINATED LIBRARY INFORMATION SERVICES

"How do health professionals access the evidence and literature they need, in order to treat patients properly, twenty-four hours a day, and to take responsibility for, and to achieve, their own training and continuing professional development." [NHS Regional Manager]

Hybrid library information services, providing access to both electronic and print resources, will be required for some time in the future. Librarians are vital. They provide users with help, advice, support and specialist knowledge plus training in use of resources. Librarians also have a major role in collection development and management. Electronic resources need collection management as much as print

resources. HE and NHS library and information services complement each other. They each bring individual strengths to the partnership.

Services for HE within the NHS

The NHS library should provide access to IT resources so that students on placement can have on-line access to the HE library's service, and to e-mail and on-line educational information and resources. These IT resources will be in the library and at other locations throughout the organisation. NHS libraries would be a distribution point for hard-copy material from HE libraries via post / van delivery. HE would fund these IT resources via a SIFT-like mechanism, administered by the Confederation, paid to NHS organisations on a student number basis, with a proportion of this funding ring-fenced to go to the library. In addition, the NHS library would provide access to their clinical collections so that the student can reflect on experiences gained in the clinical setting and problem solve for the ward, to the benefit of patient care.

Services for NHS within HE

The HE library should provide access for NHS staff to educational-level material and specialist research collections. This access would only be for the wider need and the wider resource. This arrangement would apply to staff who do not already have HE library rights obtained by undertaking courses, providing teaching or mentorship, or conducting joint research projects. The NHS would fund this access through regional Service Level Agreements (SLAs), with top slicing via the Confederations.

Services between HE and HE

Because of the movement of students on placement, often to far geographical locations, and the geographical spread of NHS staff, full

access also requires arrangements between HEIs. Such arrangements are already in existence, e.g. for distance and placement students and for students on vacation to borrow material from HE libraries other than their home institutions. Such schemes should be extended to NHS staff with access to HE libraries under SLAs.

Publicly available services

As a by-product of developing systems for their core users, the NHS and HE should provide free, public, Web access to certain resources at no additional cost. These services currently include HE OPACs, JISC's national academic mailing list service, OMNI (the UK's gateway to high quality Internet Resources in Health and Medicine) and the National electronic Library for Health. Such services would provide a core resource for patients and the public.

AN INTEGRATED MODEL OF CROSS-SECTORAL ACCESS

This integrated model is based on the central function of Workforce Development Confederations as a mechanism for co-ordination of library and information services across the NHS and HE sectors.

The Confederation, in close partnership with the Deanery, will be responsible for commissioning and funding library information services for all professional staff and students covered by the education levy(ies), in both the NHS and the HE sectors. To ensure appropriate use of these funds, the Confederation will be involved in performance management and quality assurance of these services.

The Confederation should set up a functionally-based subgroup to cover library information service issues, and their relations with IM&T. This would be the library alliance. However the particular partnership pattern chosen for this alliance would depend on local requirements and

circumstances. The library alliance, on behalf of the Confederation, would work to achieve the goal of improving access to NHS and HE library information services. The alliance would achieve this by leadership and co-ordination of NHS libraries and by partnership working with HE libraries. The alliance would be led by the Confederation, which would provide core funding to support its activities, e.g. the employment of a library alliance co-ordinator.

A region-wide focus for library information services issues is provided by the NHS Regional Library Advisory Service (RLAS), working closely with the Confederations in the region and providing advice and strategic development. The RLAS would advise and train NHS librarians and quality assure their service. It would also work in partnership with HE libraries.

A MOSAIC OF ACCESS SOLUTIONS

A wide range of organisations at local, regional and national levels need to contribute to make the integrated model work. Their activities would cover policy, strategic and operational issues. The role of the Confederations, Deaneries and RLAS have already been described. HAs, PCTs, Trusts and HEIs should (a) join their local library alliance, with commitment to the alliance's goals at the highest level within the organisation and (b) fund and provide multi-disciplinary services for all staff and students. Nationally, government departments and professional bodies should provide policy direction, support and leadership to achieve these co-ordinated library information services. Involvement should be extended beyond the NHS and HE sectors, e.g. to social services, public libraries, national libraries, further education, private health care establishments, charities and voluntary organisations, patients and the public.

THE DEVELOPMENTAL PROCESS OF SUCCESSFUL PARTNERSHIP WORKING

To achieve this vision of cross-sectoral, co-ordinated library information services will require partnership working between a wide range of organisations. Successful partnership working is all about human interaction. It is a long and complex process:

- Starting the process
 - Overall Champion to kick start the process; with a vision and power and influence to start things off
 - Principal of a joint venture with the partners working in a climate of equality
- Achieving agreement
 - Additional champions to snowball the process into other organisations
 - An "implementor" to make contacts, organise meetings, write papers, etc.
 - Communication: True dialogue, Honesty, Clarity
 - Goodwill and commitment to sustain the process
 - Listen to the views of all the stakeholders
 - Gain mutual understanding / Establish trust between stakeholders
 - Gain support of top management: Demonstrate the benefits to them
 - Establish ownership in all stakeholders
 - Reassure fears and concerns, e.g. territoriality, loss of control
 - Achieve compromise
 - Agree a partnership pattern
 - Establish what each partner will give and receive
- Ownership and commitment at the highest levels in the partner organisations

- Infrastructure for the partnership activities, i.e. a lead organisation, a dedicated co-ordinator, committees, strategy document and business plan
- Quickly demonstrate the practical value of the partnership

➢ Time, Time, Time

The access problems and issues identified in this project are not new. They are well known and have been in existence for a long time. Similarly, the need for cross-sectoral partnership is well known and many initiatives have taken place. However, despite this history, the access problems still exist and suspicion and misunderstanding exists between the NHS and HE sectors. Why? Three main barriers might be responsible: the existence of the internal market in the NHS, which was a reflection of a national ideology of the benefits of a competitive environment; low priority placed on libraries in the NHS; true partnership working is very difficult to achieve and maintain.

However things are changing. The current political climate is far more supportive: partnership working is being encouraged; libraries have moved up the NHS agenda; and the establishment of the Confederations provides the best chance there has been for many years to achieve improvements in access to libraries for the benefit of all people involved in the health field.

CONTACT DETAILS

For a copy of the full project report in either html or pdf format, look on the Web at <http://is.northumbria.ac.uk/imri> and follow the links: Research Areas / Health Information / Completed Research / Partnerships in Health

DISCLAIMERS

In a recent discussion with other Health Science Librarians I mentioned that, at my Library, we had introduced Disclaimers when sending search results to clients. This came about as a result of lurking on various Internet User Groups associated with Librarianship. The idea had been mooted and debated and it turned out that a lot of Librarians were considering their position regarding the responsibility of producing research to back clients' need to show that their practice was Evidence-Based.

We all want to think that the Health Professional we trust to treat our ailments is using Evidence-Based Practice - but where do these people get their evidence? Yes - the Library - that's You!

The snag is that you might not have had the time to exhaust all the sources of evidence on the requested search. There might be databases of which you were unaware, etc., etc. In the, hopefully remote, possibility of some lawsuit arising against the Health Professional for whom you have provided evidence, which implicates the information source, your Library Information Service and the Organisation that employs you may be vulnerable.

Thinking about this, as the result of hearing various comments on the User Group, prompted me to download one of the suggested "Disclaimers" and I shaped it up to become personalised to our organisation and more user-friendly. This way I feel that I am pointing out the fact that the search cannot be exhaustive and the client is invited to become a partner in developing the search.

Any *Bulletin* reader may be interested to develop for themselves the following suggested "Disclaimer".

HEALTH STUDIES LIBRARY SEARCH REQUEST

REF: YOUR SEARCH ON :-

We hope the enclosed material will be useful. If you would like to see any of the abstracted items in full text please complete a Photocopy Request form . THANK-YOU.

Whilst care has been taken in the selection of the materials included in this literature search, the Library is not responsible for the content or the accuracy of the information.

Accordingly, whilst every endeavour has been undertaken to execute a comprehensive search of the literature, the Library is not and will not be held responsible or liable for any omissions to pertinent research information not included as part of the results of the enclosed literature search.

Clients are welcome to discuss the literature search findings with the Librarian.

We welcome suggestions on additional search strategies/ use of other information resources for further exploration.