

CILIP
**Health
Libraries
Group**

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N E W S L E T T E R

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Editorial

Many HLG Members have been campaigning for free online access to our professional journal, *Health Information and Libraries Journal* for some time now. Although this is still a little out of reach, Blackwell Publishing have taken a significant step towards making this a reality by providing free online access to the archive content of the fore-runner of *HILJ: Health Libraries Review* from 1984-2000. Many thanks to Sophy McHugh, Journal Publishing Manager at Blackwell Publishing for making this possible. The *Health Libraries Review* archive can be found at <http://www.blackwell-synergy.com/loi/hlr>

In 1965, HLG Member, Toni Bunch established the Library of the Scottish Hospital Centre. Now called the Health Management Library, this service is celebrating its 40th anniversary of supporting the changing information needs of managers in NHS Scotland. In this issue (pp.4-6), Gill Earl and Alison Bogle describe how this modern and dynamic library is responding to these needs today.

Also in this issue, Richard Bailey describes a study on the delivery of information skills training to healthcare practitioners in Essex where EEL (Essex Electronic Library) trainers have been delivering uniform, formalised training to healthcare practitioners since 2002. See pages 8-9 for further information.

Many readers will be users of Scopus, an abstract and indexing database covering scientific, technological, medical and social science research information. One year after its launch, Scopus is showing signs of evolving into a research solution that streamlines the complete research workflow. Read Tara Settembre's article to understand how this is working (pp. 9-10).

If you have ever wondered about the different approaches to indexing adopted in Medline and Embase, you will be interested to read Edith Leclercq's study on the indexing of an article on the use of interleukin-2 for drug therapy (see pages 10-13).

Finally, many thanks to David Law, editor of the Diary of Events section of this Newsletter, who is stepping down after contributing to this column for many issues. If you are interested in taking over this role in the Newsletter editorial team, I would be delighted to hear from you!

Margaret E S Forrest
Editor

**The Health Libraries Group
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Group News

Health Information and Libraries Journal

Again this month subscribers to HILJ will receive two issues. The first, our regular issue, and the second (supplement 2) is a theme issues entitled *Supporting e-learners in health care* edited by Phil Levy from Sheffield University. We are very grateful to Phil for putting together this very timely and interesting issue, which we are sure will be of interest to many readers. Copies of this supplement can be purchased separately from Blackwells (customerservices@oxon.blackwellpublishing.com)

As usual the contents of the December issue are subject to change at proof stage, but at the time of writing are:

Guest Editorial

Cornucopia of health: widening the contributions of museums, libraries and archives. Marcus Weisen

Original articles

Health information in Italian public health web sites: moving from inaccessibility to accessibility. Cristina Mancini, Monica Zedda and Annarita Barbaro

Access to learning resources for students on placement in the United Kingdom: what are the issues and how can we resolve them? Richard Marriott

Learning resource needs of U.K. NHS support staff. Anne Devaney and Herlen Outhwaite

A survey of users and non- users of a U.K. teaching hospital library and information service. Kathleen Turtle

Availability of accessible publications: designing a methodology to provide reliable estimates for the Right to Read Alliance. Suzanne Lockyer, Claire Creaser, and J Eric Davies

Knowledge in the palm of you hands: PDAs in the clinical setting. Claire Honeybourne, Sarah Sutton and Linda Ward

Brief Communications

Searching a biomedical bibliographic database from Hungary: the 'Magyar Orvosi Bibliografia' Vivek Furtada, Judy Wright and Clive Adams

How well are we doing in supporting evidence-based health care? The 'Informationa Mastery' perspective. Michele Hilton Boon

Document delivery service at a Scottish primary care hospital library: Maria Henderson Library – Glasgow. Uma Maheswari

Using Research in Practice

Using research to justify your service: cause and effect. Andrew Booth

Learning and Teaching

Supporting e-learning: a view from Open University

Penny Bonnett

Sub-Group News

IFM Healthcare

Membership. It's that time of year again, membership renewal! If you are a member of IFM Healthcare you will have had a renewal notice - please don't forget to return it.

If you're not already a member, here are the benefits:

- Inform Newsletter, three times a year. Issues are usually themed and include presentations from Study Days
- Reduced price for Study Days. Institutional members can send up to three delegates at a reduced cost
- Access to a discussion list enabling you to be in contact with a network of likeminded professionals

Membership subscriptions rates for 2006:
£30 for an individual subscription
£50 for an individual subscription
£65 for an international subscription
£10 for a student / unwaged subscription

For more information on IFM Healthcare activities and a membership application form go to <http://www.ifmh.org.uk>

IFMH Sponsors VSO Project. IFM Healthcare is pleased to announce that it is sponsoring Anita Pearson, a disabilities social worker, and Machteld Olthof, a physiotherapist/occupational therapist, who are VSO volunteers in the Kunene Region of Namibia. Anita and Machteld work together with their Namibian colleagues to improve support for people with disabilities. The sponsorship from IFM Healthcare is enabling them to produce a training manual and other training materials for social workers, physiotherapists and medical rehabilitation workers to help them structure and organise community based rehabilitation training in an area of Namibia where there are limited resources and budgets. For more details, including photographs and a report on the project go to <http://www.ifmh.org.uk/VSO.html>

Study Days. We are still putting together the diary of study days for 2006. The first one will be held March/April time, and then we will be holding a session at the Health Libraries Group Conference in July; the theme is "Informed and Interactive: health knowledge for all". Advanced notice and details of previous study days can be found at <http://www.ifmh.org.uk/studydays.html>

We run study days to help meet the training needs of all health and social care librarians and information professionals. In the past year we have held study days on e-learning, evidence-based management and quality information for public health. If you have any suggestions for future topics that will help fill your training needs, please forward them Susan Mottram (tel: 0113 343 6972, email: s.j.mottram@leeds.ac.uk) or Heather

Williamson (tel: 07879 414391, email: heather.williamson@cfh.nhs.uk).

Publicity Coordinator. The IFMH committee will shortly have a vacancy for a Publicity Coordinator. The primary role of the Publicity Coordinator is to ensure that IFMH develops and maintains a high quality profile within the library and information community. A marketing plan has recently been developed to provide a focus for these activities. Specific tasks include ensuring IFM Healthcare is represented at key events in the LIC calendar – often in liaison with the Health Libraries Group and Libraries for Nursing – and has up-to-date publicity materials e.g. leaflets, posters, pens etc. and stationery. For further details, please contact Maria on 0161 295 6423 or email m.j.grant@salford.ac.uk

Recent Changes. We are pleased to welcome Rosalind McNally (tel: 0161 275 7624, email: rosalind.c.mcnally@man.ac.uk) and Julie-Ann Rozkowski (tel: 01223 815103, email: julie-ann.roszkowski@each.org.uk) to the IFMH committee. Rosalind has joined Richard Bridgen as Joint IFMH Inform Editor, whilst Julie-Ann has joined as an Ordinary Member of the committee. Welcome to you both.

Valerie Wildridge (with Maria Grant)
Publicity Coordinator
IFM Healthcare
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Libraries for Nursing

LfN Events. In November 2005, LfN, in conjunction with IFMH held a Study day at Leeds University on the theme of information skills. Speakers included amongst others; Karen Smith from York University who discussed VLEs for students nurses, Alison Brettell and Jo Breenhalgh who presented on the eventiveness of information skills training and a workshop session was run by Alisn Lahlaf ad David Clark on the implementation of an information skills audit. A full write-up of the Event will be available in the December 2005 issue of the LfN Bulletin.

Libraries for Nursing Bulletin. Libraries for Nursing has recently expanded its remit to cover not only nursing and midwifery but also the Allied Health Professions. In doing so, we hope to cover information previously covered by the now disbanded CILIP subgroup INFAH (Information for Allied health).

To promote this change in focus, the September 2005 issue of the LfN Bulletin (vol. 25, issue 3) was published as a special issue, focusing specifically on how libraries and information services support the allied health professions. Articles contained within the issue focussed on:

- Meeting the information needs of pharmacists by Sarah Butler from the Royal Pharmaceutical Society of Great Britain
- Support on offer from the CSP (Chartered Society of Physiotherapists) Library and Information Services and an update on key physiotherapy information sources by Andrea Peace
- Supporting operation department practice students by Keith Nockels from the University of Leicester
- Supporting speech and language therapy by Stevie Russell from the National Information Centre for Speech-language Therapy (NICeST)

A very big thank you to everyone who contributed to this special issue and also to INFAH for their financial support in producing this special issue.

Committee News. We unfortunately say goodbye to Sarah Greenley, Marketing and Website Officer who has had to step down from the Committee due to work commitments. The Committee would like to express their thanks for all Sarah's hard work. We do however welcome new member Mark Clowes who works at Sheffield University.

LfN Membership. If you are interested in joining LfN, please contact Lori Havard: email: L.D.Havard@swansea.ac.uk

Jenny Drury
jenny.drury@nottingham.ac.uk

People

Many HLG members will remember **Ann Hobart**, former Development Officer at the Library Association (LA, former name of CILIP) and a regular attendee at Group conferences. Her sudden death, after a short illness, on 16 April was reported to CILIP. It is hoped a full obituary will be published. At the LA, Ann was a valuable Group ally, active in servicing many committees (e.g. those on hospital library standards) and liaising with researchers, such as Alison Shaw and Lorna Bell (large print studies) and in other projects concerning disadvantaged readers.

M. Joy Lewis

Articles

A Quality Service for Scotland's Managers - Health Management Library and Information Service.

Gill Earl, Library Services Manager and Alison Bogle, Librarian

Established in December 1965 the Health Management Library celebrates its 40th anniversary of supporting the changing information needs of managers in NHS Scotland. During her time as Library Manager, Antonia Bunch the first professional librarian to work in the Scottish Health Service quoted of the service "*High standards of planning, management and clinical care in the National Health Service are dependent upon informed decision making. This in turn depends upon the efficient organisation and communication of knowledge and information*".

(Antonia Bunch, Library Manager, 1974, from a CSA internal paper).

Since its inception the Library has been attached to several organisations, whose remits have changed in line with changes in health service policy and reorganisation.

In 1965 the Scottish Hospital Centre was set up to promote and conduct research into the planning and function of hospitals and hospital equipment. Part of its remit was to create and maintain a library of resources on hospital planning and operation. Between the 1970's and mid 1990's the Library was attached to the NHS in Scotland Management Development Group and the emphasis of the collection and services was on supporting the management development consultants on site and management training within the Scottish Health Service.

Since 1999 the Library has been part of National Services Scotland (formerly Common Services Agency) and funded by the Scottish Executive Health Department. The Health Management Library's current remit is to provide library and information services to all healthcare professionals working in NHSScotland. The overall aim is to improve informed decision-making, to ensure service change is evidence based, to share good practice and to support lifelong learning. A unique resource for Scotland, the Health Management Library holds the country's largest collection of healthcare management information. Providing a Scottish perspective, the Library specialises in the non-clinical aspects of healthcare and focuses on healthcare planning, policy, management and redesign of services.

The Health Management Library has customers from all geographical areas within Scotland and from all NHS staff groups. The largest proportion work in the acute sector, followed closely by those working in primary and community divisions. We also have a number of customers working in Special Health Boards and the Scottish Executive Health Department. Our customers include practice managers, public health coordinators, commissioning managers, GPs, theatre nurses, board directors, speech and language therapists, librarians, and organisational development managers, all of whom are represented on the Library's virtual user group.

With a diverse user population, a fast changing NHS and increased availability of

electronic resources the Library team deals with a broadening subject field. Recent examples of requests include

- *Analysis of the funding, commissioning, provision and delivery of diabetes services in Finland.*
- *How far are mental health services in the UK still shaped by the legacy of Victorian Asylums*
- *Organisational change and organisational development approaches to the integration of staff from health and social care at a primary care trust.*
- *Delayed discharges from hospital, methods of addressing the problem and joint working to resolve this problem.*
- *Values and behaviours in the NHS.*

As a national service we deal with the majority of customers remotely. Our commitment to providing equal access to all customers is underpinned by the Library's customer charter and service standards. Interestingly, in developing the charter and service standards customers identified "quality and relevance of information", "up to date information" and "knowledge of staff" as most important, but also demanded fast response times.

To ensure the service reflects national priorities the Library works with key NHS partners including:

- Centre For Change and Innovation (part of the Scottish Executive Health Department) in supporting the National Programmes and providing resources to support the local implementation of service redesign.
- Institute of Healthcare Management in Scotland through supporting its members in their continuing professional development.
- Future managers undertaking the new NHSScotland Management Training Scheme.
- Healthcare libraries in Scotland and the NHS eLibrary, by working towards integrated access to management resources, participating in an active co-operative inter-library lending scheme with SHINE (Scottish Health

Information Network) and contributing to the implementation of the national strategy for knowledge services for NHS Scotland.

- Those at a local level taking forward the new Leadership Development Framework for NHS Scotland, which recognises *'the need to support managerial knowledge and skills for people leading clinical teams, community teams, functional teams and project teams'*.¹

It seemed appropriate that in January 2005, at the start of the 40th anniversary year, the Health Management Library was the first NHS Library in Scotland to be accredited with the Helicon quality standard. The accreditation process enabled us to:

- develop services within a national framework against recognised standards and in line with customers' current and future needs.
- benchmark services against the Helicon standards and identify areas for improvement.
- obtain feedback on good practice that could be built on, shared and celebrated with staff, customers and stakeholders.
- raise the profile of the library service amongst customers, our funding body and other library services within NHS Scotland.

All aspects of the service and resources were assessed by representatives from NHS Education and NHS Quality Improvement Scotland. Awarded accreditation with areas of excellence, the Library team was commended for its particular emphasis on customer focus, comprehensive and up to date print collection and electronic services, and commitment to innovative flexible delivery of information.

Areas identified as value added services included:

- Online services at www.healthmanagementonline.co.uk
- Scottish management briefings on such areas as recruitment and retention and managed clinical networks.
- High quality of literature searches and document delivery.

- *Current awareness bulletin.*

In awarding the accreditation the assessment panel pronounced that the "Health Management Library can be regarded as a model for other NHS Scotland Library Services."

Building on the work of the last 40 years the Library aims to continue developing its role in providing information services to NHS professionals. Priorities and challenges for the future include:

- Improving managers' awareness and use of electronic resources by developing accessible user education programmes throughout Scotland.
- Improving accessibility to the Library's extensive database through integrating information systems.
- Exploring opportunities to extend services to our partners within social services.

Reference

'Scottish Executive. Health Department. Delivery through Leadership: NHSScotland Leadership Development Framework. Edinburgh: Scottish Executive, 2005. <http://www.scotland.gov.uk/publications/2005/06/28112744/27452>

For further details please visit

www.healthmanagementonline.co.uk

Contact Gill Earl, Library Services Manager gill.earl@shsc.csa.scot.nhs.uk or Alison Bogle, Librarian

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Health Management Library, Scottish Health Service Centre, Crewe Road South Edinburgh.

Delivering skills, informing practice: a study on the delivery of information skills training to healthcare practitioners in Essex

Richard Bailey, Knowledge Services Manager, Basildon Healthcare Library

The Essex Electronic Library (EEL) trainers have been delivering uniform, formalised training to healthcare practitioners across Essex since 2002. A dedicated EEL trainer was appointed at each acute trust NHS Library and the Essex Public Health Resource Unit (EPHRU) to cover Trust staff, students on placement and those staff from Primary Care Trusts (PCTs), mental health trusts and other organisations where appropriate (e.g. social services, hospices).

The current training programme in Essex originated with the introduction of the NHS Core Content Project in March 2003 that gave all Trusts access to bibliographic databases, full text journals and other Internet resources. The Essex Training Strategy Group (ETSG) decided that all staff in Essex should have access to the same level and quality of training and the focus of such training should shift from product-based to skills based.

Marketing and delivery of the training has not remained static between then and now: it has evolved to better meet the needs of the community, and it will continue to do so. As part of this ongoing process, the EEL trainers undertook an evaluation project in 2004 to identify areas of potential improvement and recommend appropriate courses of action.

As part of the project, the trainers carried out a search of the literature for existing evaluation studies on healthcare information skills training. The literature found agreed that training is valuable, but gave no clear indication of how much was needed. It also identified that there was no existing reliable instrument for measuring the effectiveness of training.

In evaluating their own training, the Essex group only had one tool available for analysis: the feedback forms issued to

trainees immediately post-course. Using these forms, the trainers were able to measure the reactions of participants to the content and delivery of the courses and *any* anticipated impact in the workplace. The forms were also used to identify trends in the uptake of training, such as professional groups attending, reasons for attending, and relative effectiveness of marketing channels.

There were certain issues limiting the study. For example, the sample group was self-selecting, and therefore biased towards those who wished to learn. Also, the skills and knowledge gained may have been perceived, immediately after the course, to be greater than those actually attained.

Nevertheless, the evaluation of the post-training feedback forms showed that the two courses offered by the trainers were well received, met the personal learning objectives of the participants and were perceived to have a positive impact on the work, study or CPD of those trained.

Participants' personal objectives for attending the courses varied and the vast majority felt their objectives had been met. The numbers citing improving IT skills as their objectives was concerning and possibly indicated that the learning objectives of the introduction course in particular needed better promotion before people attended. It had been noticed that even though basic IT skills are a prerequisite some people still attended who did not have the adequate skills needed.

Participants on the whole saw the courses as a means of furthering specific information skills. In turn these would lead to improvements in healthcare professionals' clinical effectiveness, their continuing professional development and time management. The courses also facilitated improved access to information required for studies and general confidence.

Where objectives had not fully been met respondents knew it was because they needed to practice or come to the next course.

The vast majority of respondents could see how the courses related to their work, and therefore a direct impact on patient care was identified. A very small number of respondents said the course would not have an impact on their work, and it would have been interesting to know the reasons behind this.

To improve practice following the report, the trainers made recommendations in three key areas:

1. To review existing methods of feedback and training evaluation. A fresh look at pre- and post-course questionnaires, and possibly the use of a post-course follow up might improve the strength of future evaluations.
2. To build on existing promotional activities. One area noted for a concerted effort was in the cultivation of more library champions. To complement promotional efforts, the trainers also recommended investigation of other possible training delivery channels, such as e-learning and telephone training.
3. To alter and increase existing courses to create a more flexible, modular training structure. This would make it possible to extend training on some resources that are currently inadequately covered. By delivering training in smaller, complementary “chunks”, which could be bolted together as required for longer training sessions, the trainers might create a flexibility that will improve opportunities for delivery and better meet practitioners’ particular requirements

The full training report is available to view on the Essex Electronic Library for Health website at:

<http://www.eel.nhs.uk/eel/Documents/DeliveringSkillsInformingPractice.pdf>.

Scopus: Creating an Integrated Research Workflow

Tara Settembre

Scopus is best known for being the largest and most comprehensive abstract and indexing (A&I) database covering scientific, technological, medical and social science research information in the world. This is undoubtedly true as Scopus provides easy access to more than 14,200 titles from over 4,000 publishers including:

- Over 12,650 academic journals including:
 - 100% Medline Journals
 - 465 Open Access Journals
- 750 conference proceedings
- 600 trade publications
- 27 million records from the last 40 years
- 230 Million references added to all abstracts from 1996 onwards
- 200 Million scientific web pages via Scirus.com

However, comprehensive coverage is only the beginning. One year after its launch, Scopus is evolving into a research solution that streamlines the complete research workflow.

For years researchers have struggled with the mixed blessing of information technology. While many information systems improved time-consuming aspects of research, the proliferation of different systems for different problems has forced researchers to master a multitude of complex databases.

For instance, the process of compiling useful references from literature research, storing those references and ultimately using them for tasks such as creating bibliographies for research papers or grant applications, usually means going from one database to another and logging in and out of different systems. As a result, researchers have had to master not just multiple systems, but methods for transporting information from one system to another.

Shortly after Scopus’ launch, the designers began to realize that Scopus, designed for

ease of use with the help of hundreds of researchers and librarians, would also make a good platform for a completely integrated research workflow. Working with their users to set priorities for integration, Scopus launched an internal project to improve Web integration as well as external projects with CSA and MDL to integrate their products: CSA's RefWorks and MDL's CrossFire Commander and Discovery Gate.

Launched in July 2005, Scopus' integrations with RefWorks, CrossFire Commander and Discovery Gate have given researchers a seamless, easy to use system for finding and using information.

The unique integration with RefWorks enables researchers to go straight from results on Scopus to storing them in RefWorks or, while in RefWorks, initiate a search in Scopus. All this is done live, with real-time interaction between the two systems which are continuously updated so the user can find out instantly how often selected articles in RefWorks have been cited, in which publication, by whom and even if new citations have been made since they last looked. Similarly while in Scopus it is easy to automatically save selected references to RefWorks and see which ones are already saved - a process which otherwise takes several more steps.

With the MDL integration, users of both Scopus and CrossFire Commander and Discovery Gate can now save time and effort by leveraging a fully integrated system that bridges the gap between text and chemical structure searching. From Scopus, researchers can seamlessly access up-to-date summaries of chemical compounds and reactions from the Beilstein database.

Finally, one of the original appeals of Scopus was the way in which it incorporated Web search into its functionality. New "View on Web" links provide access to the full text of cited documents that have been published online. These links extend Scopus' ability to provide a fully integrated research workflow by enabling researchers to collect all relevant items quickly and easily. In addition, full Web text links will be available for a wide

range of document types including theses, manuals, fact sheets, reports, standards, technical notes and so on. To date, over a hundred thousand "View on Web" links are available and Scopus will add hundreds of thousands more by the end of 2005.

Furthermore, Scopus has released an XML gateway for federated searching. Now all federated search engines have to do is develop their "configurations" to communicate with Scopus. Encompass for Resource Access has already released its "configuration" and Metalib is also able to search Scopus.

Conclusion

Scopus has received a strong endorsement from the community, serving nearly 8 million users among more than 500 customers, and is continuing to innovate to find new ways to meet the needs of researchers. The company is preparing to announce significant new developments, including a decision by the Joint Information Systems Committee (JISC), the UK government body responsible for information provisioning in higher education, to make Scopus easily available to all of the UK's universities. Scopus continues to draw upon user feedback to guide development and is planning on further enhancements that will speed the research experience and further simplify the overall research workflow.

Indexing of a clinical paper by Embase and Medline

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Introduction

For medical information specialists it is rather obvious to search not only one medical database like Medline (or the internet version PubMed), but also other medical and life science databases, like Embase. Medline and Embase both cover the medical literature, although the overlap of journals in these databases is only 34%

(Woods & Trewheellar¹), which may be partly due to the longer time lag for indexing of publications in Medline (Topfer et al.²). Although many authors recognise the importance of searching Embase as well as Medline to get an adequate answer to a medical question (Suarez-Almazor et al.³; Greenhalgh⁴), it is found that Embase gives more irrelevant material (Woods & Trewheellar¹; Topfer et al.²).

For a patron, a literature search on the use of interleukin-2 as drug therapy in clinical setting was carried out and as a result an alerting service on this topic was set up in both Medline and Embase. Interleukin-2 was searched as Emtree term resp MeSH term, together with subheadings for drug therapy and side effects. A publication by Ingen-Housz-Oro et al. (High-dose therapy and autologous stem cell transplantation in relapsing cutaneous lymphoma, Bone Marrow Transplantation 2004, 33, 329-634), was found in Embase but not in Medline. With respect to title and abstract it was not expected that this publication would be retrieved in both databases with the search strategies used. Therefore the thesaurus index terms given by Embase to this publication were critically evaluated and compared with those given by Medline.

Indexing of interleukin-2

The Ingen-Housz-Oro publication was indexed by Embase in April 2004. In its Drug Descriptors, the term 'interleukin-2/drug therapy' was added by the indexers, and also the CAS Registry Number of interleukin-2. However, after reading the title and abstract of the Ingen-Housz-Oro paper, it is not obvious that interleukin-2 has been used by the authors as a pharmaceutical. Medline did not publish the MeSH terms until December 2004, which is a delay in indexing compared to Embase in this particular case of about 6 months. Medline did not give details of any drugs used in this paper, and therefore this publication could be found only by searching for the (first) author(s) together with journal name and year of publication.

The paper by Ingen-Housz-Oro et al. discusses retrospectively the efficacy of

high-dose therapy (HDT) and autologous stem cell transplantation (ASCT) on 14 patients with relapsing cutaneous T- or B-cell lymphoma. HDT is defined by the authors in the Patients and Methods section as high-dose polychemotherapy alone or in combination with total body irradiation. No use of interleukin-2 as a drug is mentioned. Therefore the Results section was evaluated as well. Data on the various types of polychemotherapy are discussed and summarized by the authors in a table. Interferon-alpha was mentioned in two cases as part of the polychemotherapy. Of the 14 patients included in this retrospective analysis, eight patients relapsed. Treatment of these eight patients is described in the Section 'Disease status and response': "Four relapsing patients are now in CR (Complete Remission) ...CR was obtained with local therapies, interferon or standard polychemotherapy, and one patient received interleukin-2 (case 11)". A quote is then given by Ingen-Housz-Oro et al. for a citation of a previous publication, in which these treatments are discussed in more detail. Interleukin-2 was not mentioned in this paper again. It can therefore be concluded that indexing by Embase of interleukin-2 as drug therapy is based on this single sentence.

Other index terms

Interferon-alpha was mentioned in two cases as part of the polychemotherapy in this paper. Also the abbreviation of interferon, IFN, is used, which is defined by Ingen-Housz-Oro et al. as interferon-alpha. However, in their retrospective analysis, Ingen-Housz-Oro et al. do not make it clear which type of interferon is used. Their table clearly states interferon-alpha, but the text mentions only interferon. The original publication which is discussed by Ingen-Housz-Oro et al. in this paper has to be read to be sure which type of interferon has been used in these previous clinical studies.

Embase has indexed interferon as: interferon with subheading drug therapy, but also as alpha-interferon with subheadings drug therapy, drug dose and drug combination. It is not clear why the index term 'interferon' has only drug therapy as subheading, and the index term 'alpha-interferon' next to drug

therapy also drug dose and drug combination. Embase has indexed this publication with “controlled study”. According to the Webster Online Medical Dictionary a controlled study or trial is: “An experiment or clinical trial that includes a comparison (control) group” (<http://www.websters-online-dictionary.org/definition/english/Co/Controlled+study.html>). However, in the Ingen-Housz-Oro publication the files of 14 patients were reviewed retrospectively with relapsing B-cell or T-cell cutaneous lymphoma who underwent high dose polychemotherapy and autologous stem cell transplantation between 1987 and 2001, and with 14 different treatment schedules, without a control group. Embase has also given the index term “adolescent” to this publication. An adolescent is between 13-19 years old (<http://www.websters-online-dictionary.org/definition/english/ad/adolescent.html>) or between 11-19 years old (Dorland’s⁵). In Table 1 of the discussed paper the age of all patients is mentioned: one patient is 9 years old, the other patients are 29 years or older. There is no patient in the age range of 11-19 years, thus no adolescent is present in this retrospective study.

The index terms given by Medline to this publication are very general compared to those given by Embase. Index terms related to (total body) irradiation were not given by Medline nor any term related to chemotherapy or pharmaceuticals used. However, Medline has given three terms related to stem cell transplantation (Stem Cell Transplantation, Transplantation Conditioning and Transplantation, Autologous), while this was covered by Embase with only one index term (autologous-hematopoietic-stem-cell-transplantation).

Discussion

Index terms provide a consistent way to retrieve information that may use different terminology for the same concept. The index or thesaurus terms must be clearly defined, and synonyms are ‘translated’ or ‘mapped’ into the equivalent thesaurus term, thus avoiding typing errors and multi

interpretable terminology. Searching with index terms should therefore give a better response, i.e. higher precision, better recall, and less noise compared with free text searching.

Comparing the index terms given by Embase and Medline to this Ingen-Housz-Oro publication, it can be stated that, although the index terms given by Medline and Embase are very similar, there are also important differences between the two. Medline has given relatively more general index terms to this paper, while Embase is far more detailed, especially with drug related index terms. Medline ‘forgot’ to give some terms to this paper related to the given treatment (radiation, chemotherapy), while Embase has given some terms which are debatable (adolescent, controlled study). Regarding the indexing of pharmaceuticals, Embase gives far more details to publications than Medline does. In this specific paper, it might be too much: interleukin-2 is indexed by Embase based on only one sentence in this Ingen-Housz-Oro publication, while this drug was not used in this study by these authors but in another one, from which the results were cited. It is debatable whether such importance must be given in this publication to the indexing of interleukin-2 by Embase. With such overindexing too many irrelevant publications will be found. Instead of helping the searcher with a list of relevant publications obtained after searching the proper index terms, now the precision is decreased and the noise increased. And, in general, too many irrelevant abstracts will be downloaded from the Embase database.

Further research is needed to compare Medline and Embase indexing. Conclusions can not be drawn from only one indexed paper. However, the results give an indication that Embase may give too many index terms, and that Medline may be rather economic in assigning index terms to an article. Medical information specialists should be aware of this phenomenon and change their search strategy accordingly.

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News and Notes

DARE develops brief summaries

The Database of Abstracts of Reviews of Effects (DARE) has introduced a new feature: brief summaries of reviews written by staff at the Centre for Reviews and Dissemination (CRD).

The 60 word CRD summary aims to help searchers to quickly identify what the review is about, the authors' main conclusions and the reliability of the conclusions. The summary captures both the main points of the review and the DARE appraisal of its quality. This new feature will appear in all records where the original research was published in 2003 or later. This feature is live on the CRD website and will be available in issues of the Cochrane Library later this year. The summaries could be

useful for inclusion in current awareness bulletins, and we would be keen to discuss other ways to promote the use of the summaries in local settings.

A typical CRD summary is shown below:

Eysenbach G, Powell J, Englesakis M, Rizo C, Stern A. Health related virtual communities and electronic support groups: systematic review of the effects of online peer to peer interactions. *BMJ*, 2004;328:1166-1170.

This review assessed the effect of computer-based peer to peer communities and self-support groups on health-related outcomes. The authors concluded that there was no robust evidence available. These conclusions are appropriate and reliable.

<http://nhscrd.york.ac.uk/online/dare/20048372.htm>

CRD's databases can be searched at:

<http://www.york.ac.uk/inst/crd/crddatabases.htm>

CRD is funded by the NHS R&D Programme to promote access to research evidence via databases and an enquiry service. The enquiry service is available free of charge and is funded to provide specialist advice and help on searching for the evidence. Staff can carry out searches for effectiveness and cost-effectiveness evidence, on behalf of enquirers. To contact the CRD enquiry service call 01904-321846 or email crd-info@york.ac.uk.

Julie Glanville, Acting Director (Administration), Centre for Reviews and Dissemination, University of York
jmg1@york.ac.uk

Specialist Library for Palliative and Supportive Care

An online Specialist Library for Palliative and Supportive Care is now available as part of the NHS National Library for Health (see: <http://www.library.nhs.uk/palliative>).

It was launched on 28th September at the Help the Hospices' 21st Anniversary Annual National Conference in Harrogate, North Yorkshire. The Project Team developing the Library comprises: Professor Sam Ahmedzai, the Clinical Lead, (Academic Unit of Supportive Care, University of Sheffield), Dr Richard Stevens, Information Specialist (also AUSC, Sheffield), Melanie Hodson (hospice information, London), and Denise Brady (St Christopher's Hospice Library, London). The project is steered by a Management Group of professionals and supported by input from expert Reference Groups representing the user community. Users are invited to participate in the Reference Groups which help develop and review content for inclusion in the Library. For more information, see the Library website, or email the Information Specialist (r.j.stevens@sheffield.ac.uk). You can also join the email discussion group which supports the Library (see: <http://www.jiscmail.ac.uk/lists/nlh-palliative-supportive.html>).

The National Library for Health (NLH) is a library and information service for the NHS. Bringing together all NHS library and information services, and working with other service providers, NLH aims to deliver the best health library service to all NHS staff, students, patients and carers. The library offers a range of services on a 24/7 basis to support patient care, staff development and research. The library mixes traditional services such as professional support, with web based services such as a comprehensive search engine, clinical question answering, and current awareness.

NLH is a programme of work within NHS Connecting for Health, and is being closely integrated with other NHS Connecting for Health programmes so that clinicians have seamless access to the best current know-how and knowledge to support healthcare-related decisions.

Health Library Accreditation Scheme Revised

The Helicon accreditation scheme for health libraries has been re-released in a revised edition under the auspices of the Library and Knowledge Development Network (LKDN) Quality Group. The scheme is published as a suite of documents on the National Library for Health website, comprising:

1. *Accreditation of library and information services in the health sector: a checklist to support assessment*, 2nd edition 2002, revised 2005, compiled by Chris Fowler and Val Trinder, available for downloading as a PDF document.
2. Outline of the assessment criteria – also available as a PDF document
3. Workbook for library managers – a Word file for use in submitting comments to assessment panels
4. A report template for assessment teams – a Word file
5. A certificate template – a Word file

This is not a major revision of the scheme, because all of the assessment criteria remain the same as in the 2002 edition. However, the guidelines and guidance notes have been extensively revised, expanded and updated to reflect recent changes in healthcare and health library and knowledge services. There should now be much more clarity around interpreting the criteria, especially where situations in libraries run by Universities are different.

LKDN expects that a major revision of the accreditation process will take place as part of the NLH work to develop a National Framework for NHS Library and Information Services.

Literature Search Protocols: Recommendations for Researchers

A new tool to benefit staff involved in healthcare research has recently been launched on the Internet. Thames Valley Health Librarians, including a representative

from the UK Cochrane Centre in Oxford, have worked in partnership with the Thames Valley NHS Research and Development Network to produce *Literature Search Protocols: Recommendations for Researchers*.

Recently published evidence suggests that inadequate literature searches to support research programmes has led to unnecessary clinical trials (1). By failing to identify existing studies, the resulting duplication of effort has led to a waste of resources. The *Literature Search Protocols* aim to help researchers carry out effective and comprehensive literature searches by providing structured guidance for the following key steps:

- planning a literature search – guidance on identifying search words needed to perform a literature search.
- identifying key sources of information – a checklist of core, recommended and additional resources useful for conducting a health-related literature search.
- using a range of search techniques – a checklist of essential search techniques that can increase the chance of a literature search finding as much relevant information as possible.
- documenting the search process – an outline of information to include when documenting a literature search.

An alphabetical glossary of resources is provided in the appendix to help researchers identify and locate the most appropriate resources for their literature search.

The *Literature Search Protocols* are currently accessible from the National Electronic Library for Health website at: <http://libraries.nelh.nhs.uk/knowledgemanagement/default.asp?page=LZSEARCHNG> Anyone wanting to do a literature search for clinical decision making, professional development or research will find the tool useful. Your local NHS librarian will be able to help you to work through the document and offer professional advice and support in carrying out a literature search.

Questions and comments about the tool can be directed to:

Sarah Lewis (Librarian, Berkshire Shared Services) on 0118 9605016, Sarah.Lewis@berkshire.nhs.uk or Belinda Hylton (Knowledge Officer, Buckinghamshire Shared Services) 01296 318603, Belinda.Hylton@bssmail.nhs.uk

Reference

1. Fergusson, D. et al. Randomized controlled trials of aprotinin in cardiac surgery: could clinical equipoise have stopped the bleeding? *Clinical Trials*, 2005 June; 2(3): 218-232.

Healthybooks.org.uk

Healthybooks, an online bibliography of children's books covering many different health problems, is compiled and edited by Elizabeth Schlenker, a retired school and hospital librarian and is hosted by the Health Libraries Group on the website, www.healthybooks.org.uk/ The site, which has been running for four years, has over 1340 books in more than 40 browser sections covering topics such as AIDS, cancer, asthma, divorce, death, bullying, fostering and many others. The site has proved to be of great value to librarians, teachers, social workers and health care professionals – all those interested in helping children through their worries and concerns. Both fiction and non-fiction books are included. Excellent reviews in *The School Librarian*, *GP Magazine* and *Books for Keeps*, as well as mentions in other journals, have helped keep the "hit" rates high. Elizabeth Schlenker can be contacted at info@healthybooks.org.uk

Partnerships in Health Information – U.K. partners wanted!

Phi is pleased to announce that, thanks to the generosity of HLG, HELICON and CHILL, it has been able to secure funding from the Sir Halley Stewart Trust to enable us to find and employ a Programmes Officer for two years, starting in April 2006. This will be a

great step forward, since Phi have a number of health science libraries in Africa and elsewhere wanting partners in order to gain knowledge of up-to-date health sciences librarianship as it is practised in the U.K. This could sound like a formidable undertaking, but Phi has considerable expertise in supporting such partnerships, so that it becomes a rewarding experience and not without benefit to the institutions and individuals who take part.

If your library or a group of libraries working together are interested in:

- becoming a partner or
- contributing your particular expertise to a partnership, we would very much like to hear from you.

There is no commitment at this stage and Phi will keep you abreast of developments. Phi also aim to 'make poverty history'.

*Jean G. Shaw, Partnerships in Health Information, Programmes Officer
jgshaw@supanet.com*

Internet Sites of Interest

Comments on this column and suggestions for future columns are welcome. Please contact Keith Nockels, tel. 0116 252 3101; fax: 0116 252 3107; email: khn5@le.ac.uk.

Two subjects in this column: complementary and alternative medicine, and Hurricane Katrina.

Complementary and alternative medicine (CAM)

Rather than try to include a site for every therapy, I have concentrated on sites that cover the field as a whole. I have included bibliographical databases specific to CAM, and two sites specifically on CAM and cancer.

There is a range of terminology employed in this field. I have decided to use the abbreviation "CAM" here as it makes writing (and hopefully reading) easier. Different sites talk about "complementary therapy", "alternative medicine", "complementary medicine", "complementary and alternative medicine", as well as using the abbreviation "CAM". A discussion of the significance of the different terminology is outside the scope of this column!

All links were checked on 30th September 2005

BMJ: Complementary Medicine

http://bmj.bmjournals.com/cgi/collection/complementary_medicine

All the BMJ articles about CAM in one place, including the "ABC of Complementary Medicine" series first published in 1999, and subsequently published as a book.

British Homeopathic Association / Faculty of Homeopathy

<http://www.trusthomeopathy.org/>

A recent article in the Lancet (2005;366(9487):726-32). argued that homoeopathy is only a placebo. The site includes the Association's response to that, as well as much other information for the public, for practitioners, and about research.

Cochrane Collaboration: Complementary Medicine Field

<http://www.compmed.umm.edu/Cochrane/>

An international group of individuals, coordinated by the University of Maryland Center for Integrative Medicine, who facilitate systematic reviews of CAM. The site includes a glossary of therapies, and a list (without hyperlinks) of Cochrane reviews that involve CAM.

Edzard Ernst

Edzard Ernst is Professor of Complementary Medicine at the Peninsula Medical School, Exeter (UK) and writes a column in the Guardian. A search of the Guardian site at <http://www.guardian.co.uk> for his name finds the columns, which look at the evidence base for CAM.

House of Lords Science and Technology Committee, Sixth Report

<http://www.parliament.the-stationery-office.co.uk/pa/ld199900/ldselect/ldsctech/123/12301.htm>

The Committee enquired into training and regulation, the existence of an evidence base for CAM, and into NHS provision. Its findings were printed in 2000, and are available here online in full.

NCCAM

<http://www.nccam.nih.gov>

The NCCAM is part of the (US) National Institutes of Health. It applies “rigorous science” to CAM, trains CAM researchers, and disseminates information to public and professionals. Their site includes an alphabetical list of treatments at <http://nccam.nih.gov/health/bytreatment.htm>

NeICAM

Plans for a CAM Specialist Library as part of N(e)LH are outlined at

http://www.rccm.org.uk/static/NeLCAM_intro.aspx?m=3. NeICAM is to be developed

by the Research Council for Complementary Medicine, the Royal London Homoeopathic Hospital and the School of Integrated Health at the University of Westminster.

Prince of Wales’s Foundation for Integrated Health

<http://www.fihealth.org.uk/>

The Foundation encourages self regulation, education and training, and provides information on CAM.

Research Council for Complementary Medicine

<http://www.rccm.org.uk/>

The Council aims to extend the evidence base for CAM. The site is full of information about their work, and about research methods and courses.

Traditional Ecological Knowledge Prior Art Database (TEK*PAD)

<http://ip.aaas.org/tekindex.nsf/>

This initiative of the American Association for the Advancement of Science gives information on traditional uses of medicinal plants. Links are provided to Internet based information on each plant.

World Health Organization: Traditional Medicine

<http://www.who.int/medicines/areas/traditional/en/index.html>

This area of the WHO site includes information on WHO activities in this field, defined as “the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness”.

Two areas of CAM are now regulated in the UK, and the regulatory bodies are:

General Chiropractic Council

<http://www.gcc-uk.org/page.cfm>

General Osteopathic Council

<http://www.osteopathy.org.uk/>

Other areas are not regulated in the UK, although several bodies oversee activities, provide standards or codes of practice, or promote self regulation. One is the Prince of Wales’s Foundation for Integrated Health (see above). Others are:

British Complementary Medicine Association

<http://www.bcma.co.uk/>

Institute for Complementary Medicine

<http://www.i-c-m.org.uk/>

Other bodies, and information about other specific therapies, can be found through OMNI at <http://omni.ac.uk>. Search OMNI for the therapy, or try the alternative medicine subject listing at <http://omni.ac.uk/browse/subject-listing/WB300.html>

Databases

AMED

<http://www.bl.uk/collections/health/amed.html>

This is a subscription database, and is included in the NHS Core Content and the NHS Scotland e-Library (my thanks to the six Scottish librarians who verified this for me via the lis-medical list). AMED is

produced by the British Library and covers CAM and other subjects, including occupational therapy, physiotherapy and palliative care.

CAM on PubMed

<http://www.nlm.nih.gov/nccam/camonpubmed.html>

Use this link to search just the CAM subset of PubMed.

CAMEOL

<http://www.rccm.org.uk/comeol/Default.aspx>

CAMEOL – Complementary and Alternative Medicine Evidence Online – is a project of the RCCM and the School of Integrated Health, University of Westminster. It reviews research evidence, and seems very much to be a work in progress. There are terms and conditions to agree to before access is granted.

HerbMed

<http://www.herbmed.org/>

Produced by the Alternative Medicine Foundation, a nonprofit organisation based in Potomac, Maryland. Search HerbMed by name of herb for information about medicinal uses, efficacy, activity and safety. A smaller version of HerbMed is free, but there is a larger version available on subscription.

Hom-Inform

<http://dSPACE.dial.pipex.com/hom-inform/hominform.htm>

This homoeopathy database is produced by the British Homoeopathic Library in Glasgow, and is searchable via the web.

There is a more comprehensive list of databases for CAM at

<http://www.pitt.edu/~cbw/database.html>,

maintained by Charles Wessel at the University of Pittsburgh. His site includes many other CAM-related resources.

Research

You can find research through the databases detailed above, or through the RCCM (see above also). The National Research Register will lead you to other projects: go to <http://www.update-software.com/National/>.

Cancer

National Cancer Institute: Complementary and Alternative Medicine

<http://www.cancer.gov/templates/doc.aspx?viewid=14821490-ee6c-4e7c-80b5-c4fb3cbbb07e>

Site includes general information and information on specific therapies in relation to cancer. The complementary therapy related activities of the NCI are coordinated by OCCAM, the Office of Cancer Complementary and Alternative Medicine. Their site, at <http://www.cancer.gov/cam/> gives details of NCI sponsored research into CAM, details of trials, and links to health information.

There are details of NHS projects looking at CAM in cancer, on the Department of Health website (go to <http://tinyurl.com/9bgll>).

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Hurricane Katrina

Here are some websites I have noticed relating to Hurricane Katrina:

ECRI: Katrina Medical Technology Information Clearinghouse

<http://katrina.ecri.org/default.aspx>

Details of medical equipment required by health agencies in the region.

Eye of the Storm

<http://dancingwithkatrina.blogspot.com>

Eye witness reports of Hurricane Katrina from Biloxi and Gulfport, Mississippi. This is still (late September) being updated.

Geaux Library Project

<http://www.geauxlibrary.org/>

The Geaux Library Project provides information to health professionals working with the displaced. Its site, with rather bitter irony, is currently (late September) down following Hurricane Rita.

Louisiana State University: Hurricane Katrina Information Resources

<http://www.lsu.edu/faculty/mccarthy/katrina.htm>

Extensive listing, with lots of links, from Cavan McCarthy of the School of Library and Information Science.

MLANET: Medical Libraries and Hurricane Katrina

http://mlanet.org/hurricane_katrina.html

Includes many links to other sites.

National Network of Libraries of Medicine South Central Region: Hurricane Katrina Updates

<http://nnlm.gov/scr/blog/index.php?cat=6>

A blog for people affected by the hurricane to post information about themselves.

A sort of seasonal offering...

When you read this, Chanukah and Christmas will both be nearby. Santa is part of neither story, but if you want to see where he has got to, you can go to <http://www.noradsanta.org/>, where the North American Aerospace Defense Command, which monitors and controls US and Canadian airspace, track him. The site is not live at time of writing, but will be at the time of reading.

Please let me know if you have found a useful site that you would like me to share (I reserve the right to be selective!), or if there is a subject you would like me to cover.

To all readers of this column, especially any of you who have had first hand experience of Katrina or Rita, or any other adverse event this year, season's greetings and peace.

Keith Nockels
University of Leicester

Meeting Reports

This section of the Newsletter is edited by Helen Bingham. Please send items for inclusion via e-mail (as an attachment or as the text of the e-mail) to

Helen.Bingham@porthosp.nhs.uk, at least two working days ahead of the copy date published in the HLG Newsletter.

The very readable report below is by a librarian preparing her Chartership portfolio. If you are attending and reflecting on meetings as part of your pre-Chartership development, please do consider doing the same!

The Royal College of Surgeons of England: library open day for institutional members, held 30 June 2005

Liz Strachan, Librarian, William Harvey Hospital, Ashford, Kent

This was an interesting day that provided the opportunity to visit 'something out of the ordinary' and reflect on the diverse range of library and information work being done across the country. When working in an NHS hospital it is all too easy to focus on one's own organisational problems and lose sight of the 'bigger picture' information environment.

The group met within the elegant splendour of the College's reading room, named after a generous benefactor, Erasmus Wilson. We were a mixed bag of library and information staff from different types of organisation. Some had travelled from as far a field as Cambridgeshire and Kent, others from just around the corner, all of us interested in seeing the inner workings of this 'august' establishment.

After being welcomed by the Head of Library and Information Services, Thalia Knight, the morning began with a lively presentation by Tom Bishop, the Information Services Manager. Tom outlined the role of the RCS Library, taking us through the what, where, who, how and why of the service. It came as a surprise to learn that the RCS is a registered charity, independent of the NHS, and that despite the 'Royal' in the name (which somehow implies wealthy patronage) it is not without its funding problems. It was strangely comforting to note that the Library and Information Service has similar challenges to those of NHS libraries!

Before lunch we were taken on a tour of the 'working' library - a much more familiar if

less 'stately' environment. The library currently subscribes to some 300 journals, many of which are highly specialised, concentrating, not surprisingly, on different aspects of surgery. There is also a large journal archive, containing many titles in areas of anatomy, general medicine and surgery of the 18th and 19th centuries. The book stock is extensive and there are all manner of manuscripts, diaries, letters, tracts and pamphlets dealing with surgical history and the history of the College.

After the library tour we were privileged to be allowed to don white gloves to handle some of these rare documents. We were amazed and fascinated by the logged entry of the surgeon who was present when Nelson lost his eye, the superb drawings by Stubbs that made up his 'Anatomy of the Horse' masterpieces, the chilling diary entries of a Victorian resurrectionist (more commonly known as a body-snatcher) and of special interest to me, the first 17th century printed copy of William Harvey's 'Circulation of the Blood'. As I am the Librarian at the William Harvey Hospital, I was particularly interested in this small but immensely important book. Unfortunately my Latin is far too rudimentary for me to be able to read any of it!

After a sandwich lunch we were treated to a guided visit of the beautifully refurbished Hunterian Museum, in the adjoining building. This Museum is inspired by the life and work of the surgeon John Hunter (1728-1793), a life-long collector of all things medical, surgical and anatomical. Hunter amassed an enormous collection of specimens, artefacts and objects, which he kept in his purpose-built museum at his home in Leicester Square. Upon his death this private collection was regarded as being of such importance that it was purchased by the then government and presented to the Royal College of Surgeons. Many of the displays may not be for the squeamish but demonstrate, in my opinion, a memorable and beautiful fusion of art and science. The Museum is open to the general public and admission is free (see <http://www.rcseng.ac.uk/museums> for details).

Returning to the 21st century with a bump, we regrouped in the library for a brief but interesting presentation by Rachel Haley on the library's document delivery system. A question and answer session followed by some sustaining tea and cakes concluded the visit.

My impression is of a surprisingly small but dedicated staff who work hard to satisfy the information needs of Members and Fellows of the College, affiliates and institutional members, researchers and other medical professionals. They may be surrounded by imposing architecture and have a historical collection that many of us can only wonder at, but ultimately they are library and information professionals working in the modern world and using all the resources that modern technology has to offer. To quote Tom Bishop they "*select, organise, preserve manage and disseminate information and knowledge regardless of the format or age of the resource,*" an objective we can surely all identify with.

Book Reviews

The NHS IT Project: the biggest computer programme in the world...ever! Sean Brennan. Oxford: Radcliffe Publishing, 2005. ISBN 1-85775-732-7, 225pp.

This book, written by a former Project Manager of the Electronic Patient Record Project, provides an accessible and surprisingly readable account of the origins, purpose, objectives, and pitfalls of the multibillion-pound effort to transform the NHS through IT. The author assumes no prior knowledge and builds the reader's understanding of the NHS, the history of NHS IT, and the development of the National Programme for IT (NPfIT), including its management structures, suppliers, and components. A foundation is thus laid for a detailed discussion of the relationships among IT, medical information, and clinical practice.

I did wonder at first who the intended audience for this book was. Certainly IT boffins and NHS suppliers would want to take a look, and the content is sophisticated enough that most anoraks could enjoy it as light reading, but the writing style (as suggested by the title) is generalist and popular. Rather charmingly, the author, with his evident enthusiasm for both IT and health care, seems to assume that just about anyone will be interested in this story, even the general public. He succeeds in crafting an engaging narrative that educates the reader by thoroughly exploring what is effectively a very large-scale, richly detailed case study. Along the way, the reader learns interesting facts about the potential impact of IT on clinical effectiveness and patient safety; irresistibly esoteric trivia such as the origins of SNOMED; and, of course, a raft of TLAs (Three-Letter Acronyms, essential to any IT project – all compiled in a useful appendix).

Of course, the outcome of this case study is not yet known. Combine this uncertainty with the fact that 'NPfIT' is no more and 'Connecting for Health' appears nowhere in the book, and you might be forgiven for thinking that the book is already too dated to be worth purchasing. However, the book is intended to provide comprehensive background information and history, as well as to discuss the roles of both computerisation and medical information in the broader picture of clinical care, and as such it will have a longer shelf life than most books on IT.

Although I found the book very useful in expanding my knowledge of IT in the NHS, I was disappointed that knowledge management played a very small part in the story, and libraries almost none. NeLH is mentioned three times, and then only in passing. All the same, this is a book that any NHS staff member or student could find useful if they want to understand why the NHS is making such an enormous investment in IT, what it's all about, and what the impact could be for clinicians and patients if it succeeds.

*Michele Hilton Boon, Information Scientist
National Prescribing Centre*

Legal solutions in electronic reserves and the electronic delivery of interlibrary loans. Janet Brennan Croft. New York : Haworth Press, 2004. ISBN 0789025590; 84pp.

Split into two sections, dealing first with electronic reserves and then with electronic delivery of interlibrary loans this book discusses a number of very important issues relating to the legal considerations of these services.

The first section on electronic reserves (i.e. items in electronic format held for access by a specific user group) provides a thorough discussion of the copyright implications surrounding the establishment of such reserves, and the differences between these and hard copy collections.

The discussion on developing in-house policies on e-reserves is very useful and covers numerous issues to be considered. As with any advice relating to copyright, possible solutions are presented with a general health warning regarding ultimate responsibilities.

Issues addressed include:

- confidentiality of user records
- responsibilities for clearing copyright prior to uploading
- IT support for access
- database contract negotiations to determine acceptable use of database material

Electronic delivery of inter library loans is dealt with in the same way, comparing the paper-based and electronic delivery of ILLs, and then discussing the development of in-house policies. Again, reference is made to US legislation, but general principles are worth reading about.

Considerations for e-delivery of ILLS include :

- Copyright issues relating to the number of copies in circulation
- Library's responsibility to provide users with copyright information

Again, the section on developing in-house policy is a good starting point for discussions, covering a number of key considerations.

The book concludes that e-reserves and e-delivery of ILLs are affected by similar copyright issues : publishers' interests to maximize revenue, authors concerns over control of material and library and information professional's commitment to provide as much free access to information as possible within the confines of the law.

As this book is American, the legislation referred to throughout is not directly applicable to UK libraries, but the text does discuss a number of very relevant issues for those establishing electronic reserves in UK libraries.

This book is mercifully short (copyright is not a sexy subject !), but the subject matter is important and it is a good starting point for anyone investigating in-house policies relating to two relatively new aspect of information delivery.

Charlotte Raynes, Librarian, St Mary's Library, St Mary's Hospital, Manchester

Delivering digital services: a handbook for public libraries and learning centres. David McMenemy and Alan Poulter London: Facet, 2005. ISBN 1-85604-510-2; 256pp.

I was looking forward to reading *Delivering digital services: a handbook for public libraries and learning centres*, although I'm not a public librarian nor work in a learning centre. The title promised me the latest and greatest in digital services and how we should provide such resources and deal with relevant issues.

The book is divided into three sections covering: policy and legal background, issues in the 21st century public library and content creation in the 21st century public library. The foreword describes the book as a handbook for libraries and community

networks, but continues to state that the book is for those whose formative education was in a time before the ICT revolution. The book is also about e-government and empowerment and the foreword advises that if we want to do something about the increasing divide between information rich and poor in a global economy we need this book.

That is a lot to cover in a small publication (176 pages)! In my opinion, the authors have tried to cram too much information into a book labelled with the wrong title. I was taken aback by their idea that public libraries are staffed by members who were qualified long before information technology was introduced in libraries, and even if this is the case, that it isn't likely that these individuals have any experience in information technology whatsoever and in fact resist it!

I found that the book was put together with essays on topics relevant to digital services, but not necessarily well selected for this publication. There was no cohesiveness in the book and I found it 'bitty'. There were some good discussions about the Disability Discrimination Act and Acceptable Use Policies, but shockingly poor information about the Copyright Act, in particular in Chapter 7, where the author encourages public libraries to allow users to use scanners and freely scan material and it also states that community library staff should digitise material as a core service for customers.

I was confused with regards to the American spelling at some points in the book. The case histories were equally confusing. This book was supposed to be discussion global ICT revolution, and yet all examples are from Scotland, not mentioning important developments in the rest of the UK or outside. This is obviously because all the authors, including the two editors, are all based in Scotland.

Chapter 3 is rather surprisingly basic assuming that the librarian reading it has never used the Internet before. I certainly hope this is not the case in the real world. The exercises are the types that I would expect from a basic 'How to Search the

Internet' book in general training courses, not in a professional librarian's handbook. On the other hand, some information in Chapter 5 is very advanced, which may overwhelm new users. This chapter is too concerned with teaching HTML too basic to those working with web design and too advanced to those not involved in any form of web production, when it could instead give an introduction into issues concerned with web design. The web site critique subsection was useful and could have been extended. Chapter 6 was nicely written, giving a good introduction into portals and more relevant to lifelong learning and e-government, although the examples are all again from Scotland.

I think the book would have been valuable if it had concentrated on one area of digital service provision, and the title had reflected this. As it stands, it offers a confusing mix of information, all of which do not reflect the title given. The rich and poor information divide wasn't sufficiently addressed and many promises from the title and the promises in the foreword were not covered. It would have been better discussing e-governance and lifelong learning under a similar title to that content with examples relevant to all readers, not just those in Scotland. As it is I don't think this book is worth spending £40 on.

Helena Korjonen-Close, Information Services Officer, Institute of Clinical Research, Marlow

Current Literature

This column is edited by Tiffany Moxham. For submissions or comments please contact Tiffany at t.moxham@medsch.ucl.ac.uk or Medical Library, Royal Free Hospital, Rowland Hill Street, London NW3 2PF.

Tiffany would like to thank all those who have suggested articles for the column and provided feedback. Please keep sending submissions and comments to Tiffany at: t.moxham@medsch.ucl.ac.uk.

Must Read

Summerskill, William. "Literature searches: look before you leap." *Lancet*. 2005. 366(9479). 13-14.

Once again it is not the depth of the article or the insight that makes this a must read, it is that the *Lancet* is so heavily read by health professionals. The brief discussion is not clearly structured and comes across at times as having been written immediately after an unsuccessful search. Still, if the *Lancet* is printing a discussion that questions the quality of available, synthesised, searches, and the effectiveness of health care librarians in the same short rant, it may be time to get ready to practice self-advertisement ready for health libraries week.

Consumer Health

Cole, Jennifer., Oelschlegel, Sandra. "Zoonoses resources on the Internet." *Journal of Consumer Health on the Internet*. 2005. 9(2): 51-60.

Zoo who? Zoonotic is apparently the name given to diseases that can be passed between humans and animals. While the terminology may not be particularly familiar, recent outbreaks of such diseases as SARS and anthrax has spurred great interest in the subject. While these global killers gain most of the media attention, it is our pets that are most likely to cause us to come into contact with a zoonotic in the form of such diseases as; roundworms, mange, and cat scratch fever.

Volk, Ruti. "Bringing order to chaos with Brochure Boss: A brochure ordering system." *Journal of Hospital Librarianship*. 2005. 5(2): 33-44.

Keeping up with stock selection, maintenance, and ordering of consumer health journals takes up vast amounts of labour intensive resource time. Looking for an effective way to keep up with user needs and staff time constraints, Volk's institution implemented *Brochure Boss*. The electronic program requires initial set up but has resulted in a streamlined tracking and

ordering process. *Brochure Boss* holds not only information on the titles and publishers of the different brochures; it includes invoicing information, bulk buying discounts available, and regular reports. For larger institutions the benefits also include the ability to differentiate orders between sites allowing for the benefits of bulk ordering while keeping budgets and use records separate.

White, Pam J. "Health information for the public from the National Health Service in south west England." *Journal of Consumer Health on the Internet*. 2005. 9(2): 43-50.

It is great to see such an English-centric article appearing in a predominantly American publication. The article acts as a good brief introduction to the NHS core content, NHS Direct, and similar core NHS information outlets for those unfamiliar with the system. For those already familiar with the NHS, the discussion on Trust generated web-sites will be of interest.

Resources

Fitzpatrick, Roberta Bronson. "What is BioOne?" *Medical Reference Services Quarterly*. 2005. 24(2) Summer: 59-70.

Summarises the content of BioOne, a full-text database of bioscience research. I can hear you now, "not another one." Good news, this one adds something new to biomedical databases in the form of journals previously unavailable in electronic format. Most of the titles are published by small societies and non-commercial publishers. Fitzpatrick, as always, does a great job describing the database and providing searching tips.

Connor, Elizabeth. "Searching for science: a descriptive comparison of CiteSeer, FirstGov for science, and Scirus." *Journal of Electronic Resources in Medical Libraries*. 2005. 2(2): 35-48.

Trying to find an alternative search engine to Google that returns science and health related information? Connor looks at three free federated aggregate collections,

concluding that they are all superior alternatives to using Google for health and science information and for finding items from the, 'Invisible web.' In addition to brief discussions on each engine's history, governance, and usability, is a short comparison of features and content size.

Henderson, Jim. "Google Scholar: A source for clinicians?" *Canadian Medical Association Journal*. 2005. 172(12):1549-1550.

Also available at:

<http://www.cmaj.ca/cgi/content/full/172/12/1549>.

A brief article which in effect summarises the many discussions which have taken place since Google Scholar emerged. Henderson sees the potential in Google Scholar, especially with future plans to link to Universities' full text holdings. Until then, Google Scholar it appears will not be challenging any of the other specialised search engines such as SCIRUS, at least not in the medical and science fields.

Spasser, Mark A. "Evidence-based nursing resources." *Medical Reference Services Quarterly*. 2005. 24(2) Summer: 71-86.

Spasser looks at some of the resources available that relate specifically to how the nursing profession practice and research in terms of both their subject scope and focus.

Collaborations

Broering, Naomi C., Chauncey, Gregory A., Gomes, Stacy L. "Senior health goes electronic: Partnership on access to health information services." *Journal of Consumer Health on the Internet*. 2005. 9(2): 11-26.

Senior citizens have steadily increased their use of the Internet since its inception. Health information is one of the most searched for queries by this age group. Unfortunately this is also the same age group least likely to have the computer literacy skills generally, and searching skills specifically required to access the most reliable electronic-based health information. Broering et al. describe a project that bridges this gap in knowledge

with collaboration between a college, a church-based senior's clinic, and senior community centre.

Rourke, Diane Ream., Samsundar, Devica Ramjit., Shalini, Channapatn. "Author! Author!: Creating a digital archive of publications in a hospital library setting." *Medical Reference Services Quarterly*. 2005. 24(2) Summer: 87-94.

Struggling to integrate the library/knowledge centre into the hospital/institution? Want more staff to be aware of your services? While this paper's main focus is on creating the digital archive, it is the history of, Author! Author! Day, which I found most interesting. Baptist Hospital's Health Sciences Library (Miami, USA) have been holding a day honouring recently published medical and nursing staff for more than a quarter century. The day includes a luncheon and a panel discussion and presumably must be quite successful if it has been continuing for so long.

Publishing Training

Doyle, Jacqueline D. "Teaching the publishing process to researchers and other potential authors in a hospital system." *Journal of Hospital Librarianship*. 2005. 5(1): 63-70.

Scholarly publishing is often seen as a complex process better suited to academia than practicing physicians who must go through the process with little if any assistance from their work place. This article describes a course taught by librarians to various staff at a Health Facility to help them through the process.

Spivey, William L. "Developing an Open Access class for authors." *Journal of Electronic Resources in Medical Libraries*. 2005. 2(2): 49-58.

Another great example of the changing nature of our profession. The Ehrman Medical Library, New York, provided formal instruction on Open Access publishing. The session included a definition and discussion

on the publishing model as well as a discussion on the benefits and otherwise of Open Access. Considering the importance of being published to most professors, providing up to date information on the publishing world is yet another way information professionals/librarians can be invaluable in academia.

Open Access

Wood, Elizabeth. "Open access publishing: Implications for libraries." *Journal of Electronic Resources in Medical Libraries*. 2005. 2(2): 1-12.

A well written, succinct history/current discussion of the issues with special attention to the realities of who actually pays in the open access model, as it relates to libraries and in particular institutional and academic libraries. Surprisingly, for many, will be the reality that as the, 'author pays' model increasingly becomes the, 'institution pays' model, library budgets may again feel the financial affects of publication costs. The article includes additional references for further reading on particular aspects of open access.

Additional Specialty Resources

Lacey Bryant, S. "Doctors.net.uk Education: GP usage of e-learning modules." *Work Based Learning in Primary Care*. 2004. 2(4): 362-365.

Lacey Bryant, S., Ringrose, T. "Evaluating the Doctors.net.uk model of electronic continuing medical education." *Work Based Learning in Primary Care*. 2005. 3(2): 129-142.

Doctors are always looking for ways to gain CPD credits. The use of e-learning to gain these credits has substantially increased in the UK. These articles describe the activity/results of an e-learning program provided by doctors.net.uk since 2001. The verdict may still be out about the effectiveness of e-learning but the satisfaction rates of the participants are high.

Shpiko, Inna. "Locating Grey literature on communication disorders." *Medical Reference Services Quarterly*. 2005. 24(3): 67-80.

By definition it can be difficult to find grey (gray) literature on any subject, never mind a field that is still considered young in research terms. Shpiko looks at some of the sources for finding this literature and includes some pointers to evaluating communication literature.

Diary of Events

This column has been edited by David Law. There is a more comprehensive and more detailed listing of events available on the HLG website (<http://www.cilip.org.uk/groups/hlg/index.html>). It also has links to other listings, including those for general LIS issues. Details are correct at the time of writing, but please check with event organisers.

30 January 2006

Digital Rights Management. ASLIB Training. 9.45am – 4.30pm. Course Director Naomi Korn. Cost = £260 for corporate members and £325 for non members. <http://www.aslib.co.uk/training/4/28.html>

08 February 2006

CILIP Framework of Qualifications Roadshow. CILIP West Midlands Branch. Birmingham Central Library. 10am - 12 or

1.30pm – 3.30pm. Free. Details Trsiah Fouracres (0121 607 3551)

<http://www.cilip.org.uk/training/calendar/bydate/February06/CILIPFrameworkofQualificationsRoadshow.htm>

20 March 2006

Training the Trainers. CILIP South Western Branch. Exeter Central Library. 9.30am – 4.15pm. Cost = £100.

<http://www.cilip.org.uk/training/calendar/bydate/March06/TrainingtheTrainers.htm>

31 March 2006.

Freedom of Information. ASLIB training. 2-5pm Course Director Graham Southwood. Cost = £150 for corporate members and £187.50 for non members.

<http://www.aslib.co.uk/training/4/14.html>

10 – 12 July

Health Libraries Group Conference. Devonshire Park Conference Centre. Eastbourne.

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Newsletter Editorial Notes

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2006 Copy Dates

**Please send your contributions to the *Newsletter* by the following dates:
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