Hello and a warm welcome to the December issue of the Newsletter.

I would like to start my Editorial by saying a fond farewell to Kath Williams who has been Current Literature column editor for the last two years. She has been a pleasure to work with on the Newsletter and I wish her all the best in her new ventures. We therefore have a new member of the Newsletter team, so I would like you extend a warm welcome to Aoife Lawton who has taken over on the Current Literature column. Aoife works as Systems Librarian for the Health Service Executive in Dublin, Ireland.

In this issue we have articles about using social networking tools for research purposes and a ‘next steps’ about taking forward a cancer information event in South Gloucestershire libraries. We also have a number of shorter pieces highlighting the work of Public Health England knowledge and library services, the key messages from the recent Patient Information Forum’s Health Literacy Survey and finally a piece about two new internet resources for veterinary medicine. In addition we have a number of meeting reports and book reviews, which all make for interesting reading.

I have been delighted with the response of readers to contribute to this issue, so please do keep it up and contribute to the Newsletter in 2014. If you would like to get involved or have ideas for columns/developments or if you would like to write a short piece (1000-1500 words) for the Newsletter then do please get in touch with me.

I hope you find this issue of the Newsletter useful, informative and enjoyable. Wishing you all an enjoyable and restful festive season. See you next issue in the New Year!

Elise Hasler, Editor, HLG Newsletter

Please make sure you have registered your email address with Cilip via the website otherwise you could be missing out on important HLG announcements. It is not enough to have given your email address when renewing your Cilip subscription. You need to register via the Cilip website: http://www.cilip.org.uk/aboutcilip/welcome
Group news

Health Information and Libraries Journal
http://wileyonlinelibrary.com/journal/hilj @HILJnl

Dissertations into Practice
The Dissertations into Practice feature is proving to be very successful and I’m very pleased with the response it’s had. If you’ve recently completed a dissertation on some aspect of health information then please get in touch to see how we can turn it into a feature article. I will give you feedback and suggestions to help you work up a piece which is good for publication. Don’t be shy!
Audrey Marshall, Contact details: a.m.marshall@brighton.ac.uk; 01273 642420.

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Maria Grant, Editor and Penny Bonnett, Assistant Editor, HILJ
Email: m.j.grant@salford.ac.uk and pabonnett@tiscali.co.uk
Twitter: @MariaJGrant @HILJnl #hilj

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Sub-Group News

Libraries for Nursing (LfN)

Follow us on twitter at www.twitter.com/libs4nurs or browse our collection of bookmarked websites at http://www.diigo.com/user/libs4nursing

Bulletin

Following our successful themed Autumn issue the last issue of the year reverts to form with a wide range of articles including the history of the library at St Mary’s Hospital and a report from a trip to WILU.

Please contact the bulletin editor if you would like to contribute: Phillip Barlow at p.barlow@imperial.ac.uk

LfN Membership

Don’t forget to renew your LfN membership in January.

Bethan Carter, Secretary, LfN
Email: bethan.carter@york.nhs.uk

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International


With Return on Investment being a hot topic for health libraries, HLG members may be interested to read a study released by Health Libraries Inc. (HLI), the Australian Library and Information Association (ALIA) in relation to measuring the value of health libraries.

The study indicated that hospitals and other healthcare organisations gain a $9 return for every dollar they invest in their health libraries.

The partners commissioned SGS Economics and Planning to survey health libraries across Australia and assess the return on the annual investment in these services to their organisations.

The results demonstrate the on-going and exceptional value of health libraries despite increased service demand and reductions in the amount organisations are currently investing in their libraries.


Hélène Gorring, International Officer for HLG
Email: helene.gorring@bsmhft.nhs.uk

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Spotlight

HLG Conference 2014

The HLG Conference is being held in Oxford next year; home of Morse, Lewis, dreaming spires, and bicycles (lots of them!).

Taking place 24-25 July at the Examinations Schools the conference will give you the opportunity of finding out the latest thinking and research in health librarianship. Learn what other health librarians have been doing in practice. Catch up with fellow information professionals; share your stories and ideas.

Confirmed keynote speakers so far include Dr Ruth Carlyle from Macmillan Cancer Support, and CILIP CEO Annie Mauger.

Relax and have some fun at the gala dinner on Thursday evening at Oxford Town Hall, situated conveniently close to the conference venue.

Registration is now open; book now to get the early bird delegate rate of £240.

Why not present at the conference; share what you’ve been doing, your skills, knowledge and expertise. Your presentations could end up changing practice all over the health library community – a lasting legacy to the profession.

Sessions can be requested at the HLG Conference website. We have no theme, but as there is so much we can learn from colleagues in different sectors, we positively welcome abstracts from information professionals working in health and social care from all sectors including the NHS, higher and further education, government, the voluntary and charity sector, professional associations and commercial businesses.

This year we are offering a variety of sessions, to enable you to share your ideas, knowledge and expertise: speaking presentation; demonstrations; hands-on interactive workshops as well as poster presentations.

You may wish to demonstrate a product, or a piece of technology, or to get people to interact with the technology, product or service you’ve customised to use in practice.

Perhaps you want to hold a workshop demonstrating how to market your service effectively, or to write a business case; alternatively you can speak about your project, the way you’ve improved or developed services or their delivery. All are possible at HLG 2014; please register your session idea now.

HLG Conference Team

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Articles

Using social networking tools for research purposes

Introduction
This brief guide addresses two audiences - colleagues who want to use social networking tools for research and professional purposes and colleagues who are asked to give advice to researchers.

This article is based on participation in, and a personal exploration of social networking tools. It looks at what researchers might want to do, reasons why they might want to do it and examples of social networking tools. A comprehensive list of tools is available from Wikipedia (2013)¹.

The Guide

Getting a researcher identity [ID]
Your name links you to your publications. Individual IDs disambiguate different forms of your name used in publications, e.g. can identify Holland, M. Holland, M.J. Holland, Matt as being the same person. It can also differentiate you from other researchers who have the same name as you. Numeric IDs are used by SCOPUS and Web of Science. ORCID integrates all your IDs and can be used in publication process and on the web. Some publishers and universities will require you to have an ORCID ID.

ResearcherID www.researchid.com
ORCID orcid.org
SCOPUS ID pre-assigned by SCOPUS

Create a public online profile
Curate your own public profile to share online, using web tools designed for the purpose. Be your own public relations expert, choose the information you want others to see, or find, including your professional biography, qualifications, your research and your publications.

Academia.edu www.academia.edu
ResearchGATE www.researchgate.net
Mendeley www.mendeley.com
Zotero www.zotero.com

Participate in social networking in a research context
Use social networking to discuss and share knowledge and experience with peers on the process and craft of research. Ask for advice on specific topics relating to your research.

Academia.edu www.academia.edu
ResearchGATE www.researchgate.net

Have a “personal web page” to self archive versions of your work
Having a personal webpage allows you to upload pre or post prints of your work using the Green or Self Archiving Route for Open Access. You can also upload unpublished work, such as posters, conference presentations. Participation in self archiving allows different measures of impact (such as downloads) and, depending on the platform, different metrics for measuring impact.

Academia.edu www.academia.edu
ResearchGATE www.researchgate.net

Network with research colleagues
Find people interested in the same topics as you and create your own bespoke network of contacts/followers.

Academia.edu www.academia.edu
ResearchGATE www.researchgate.net
LinkedIn www.linkedin.com

Promote your research within your organisation
Your organisation may use profiling software to integrate with other corporate systems, such as staff profiles distributed across the Intranet / Internet, institutional repository and research management software. Completing your corporate profile and linking to an alternative public profile increases your exposure of your research and publications and the chance that like minded researchers can find you. Example of a Corporate Profile system www.vivoweb.org/international-researcher-network

Get your personal metrics tools
Tools provide you with access to metrics for your publications. ResearcherID provides data sourced from the Web of Science (Thomson Reuters), accepted as the Gold Standard for citation metrics. Tools like Google’s My Citations source citation data from a greater number of sources and frequently have higher citation counts than ResearcherID. Other metrics providing alternatives to citation based metrics, such as downloads have varying credibility. See altmetrics for a fuller explanation.

Google Citations scholar.google.co.uk/citations
ResearcherID www.researcherid.com

Get access tools to help manage references and work on projects in group
Use web based research management software to work in groups from a single database of references - collectively updating, discussing and sharing refs/docs.

Mendeley www.mendeley.com
Zotero www.zotero.com

Collaborate Online
Web tools can help you collaborate informally outside institutional networks and across distances. Easy to access and easy to use tools such as Google Drive, allow you to share and annotate documents and can be integrated with other tools such as email and social networks.

Matt Holland, Outreach Librarian, Northwest Ambulance Service NHS Trust Library & Information Service Matt.Holland@nwas.nhs.uk

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Next steps after Umbrella

Attending Umbrella 2013 was a fantastic experience and I am grateful to Cilip Health Libraries Group for my sponsored place. Back in July, when I cycled from home to catch the train to Manchester, I had a few personal aims I hoped to achieve as a result of Umbrella. I was looking forward to re-connecting with contacts I knew would be there, as well as making new connections to maintain electronically beyond the conference. As a newbie on Twitter, I hoped to pick up some tips and advice from more Twitter-versant delegates. This I achieved early on by speaking to several delegates who each gave me the confidence to use Twitter, as a great way to keep pace with rapid developments in the library and information world. Now I am keeping up with the progression of projects and ideas related to presentations at Umbrella by using Twitter to follow conference speakers and organisations.

As well as staying in touch with ideas and contacts, I was keen to take some conference inspiration forwards in a practical way which I could apply to my work as a librarian in a public library, in South Gloucestershire. This article centres on the tangible next steps I have taken, as a result of what I discovered through attending Umbrella.

Just before Umbrella, a series of Macmillan cancer information events were in the planning stage across libraries in South Gloucestershire. With this in mind Ruth Carlyle’s (Macmillan cancer support) presentation “Information prescriptions: personalised information through libraries and information services” on Day 2 stood out of the conference programme as a point of interest. I had a hunch that this presentation would offer the most interesting opportunities to inform my working practice and be useful to share with colleagues. It was a good hunch.

Ruth’s powerful and clear presentation had a big impact on me. Living with cancer can be daunting and uncertain. The right information, given at the right time can empower a person living with cancer, enabling informed decision-making and re-establishing a sense of control. Information Prescriptions are indispensable. They provide reliable health information tailored to meet the individual requirements of a person affected by cancer, presented in an accessible way, in a choice of formats and with relevant local content (e.g. support groups). Information Prescriptions are free to create using a simple online resource through the NHS Choices website, or directly at http://www.nhs.uk/ips

Ruth mentioned Macmillan Learn Zone free e-learning resources in her presentation, available at http://learnzone.org.uk/courses/. I made a silent pledge to myself to sign-up at Macmillan Learn Zone to gain more understanding of Information Prescriptions, and the work of Macmillan, and to bring Macmillan Learn Zone to the attention of my colleagues at our next team meeting. The variety of learning activities available at Macmillan Learn Zone are enjoyable to complete: interactive quizzes and multi-media content, as well as reading material. The most useful e-module for me was the “Introduction to Information Prescriptions” which explains what Information Prescriptions are and how they can be used, in detail.

I have also found the tutorial about Information Prescriptions “About this service” (6mins) on the NHS Choices website gives a very clear overview of how to use the Information Prescription Service from an end-user’s perspective. This tutorial identifies the range of health conditions for which an Information Prescription can be created, not only for many different types of cancer, but also other long-term health conditions. At present about 200 conditions are covered by the Information
Prescription Service: including chronic conditions such as asthma, diabetes and eczema; common experiences such as end of life/bereavement and menopause; disabilities such as autism, dyspraxia and a range of mental health conditions.

Fast forward four months from July in Manchester, to this week in Thornbury Library, South Gloucestershire. As part of Cancer Awareness Month in South Gloucestershire Libraries, a Macmillan cancer information and support specialist, Michelle, attended Thornbury Library on 20th November for a planned drop-in information session. This was well promoted, through local press, in the community and on the library plasma screen. The drop-in was well attended, the majority of enquiries arising from planned visits in response to seeing the event advertised. Michelle responded to a range of enquiries including symptoms of breast cancer, the financial impact of a cancer diagnosis and chemotherapy treatments. I talked to Michelle about what I had discovered from attending the Umbrella conference and Ruth Carlyle’s presentation in particular. Michelle and I chatted about Information Prescriptions and I told her how useful I had found the free learning resources available at Macmillan Learn Zone. Michelle will continue to offer a regular drop-in cancer information service in selected branches of South Gloucestershire Libraries, beyond Cancer Awareness Month.

Having learned more about Information Prescription Service through the NHS Choices website I am now wondering how this excellent, freely available online resource can be promoted to the public. On the NHS Choices website the “Create an information prescription” link is tucked away on the homepage – requiring the user to scroll down beyond the screenfold to “Editor’s choice”. From a user’s perspective the mysterious words “Create an information prescription” do little to illustrate what this excellent service offers. An explanation of the value and purpose of the service is needed. I wonder how public libraries might be able to promote the Information Prescription Service to library users. Macmillan Learn Zone contains case studies in the “Information Prescriptions in practice” section which outlines how this is already happening in some public libraries. I intend to share these discoveries and thoughts with colleagues, with a view to raising awareness of the Information Prescription Service amongst library users. Availability of promotional materials such as leaflets, written for potential service users, would be useful.

Thank you to Health Libraries Group for my sponsored place at Umbrella. The experience continues to shape my working practice, as I hope this article illustrates. The Umbrella 2013 strapline sums up the outcome perfectly: Discover. Connect. Achieve.

Rebecca Furness, Librarian, Thornbury Library, South Gloucestershire

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Public Health England – Knowledge and Library Services

Public Health England’s mission is to protect and improve the nation’s health and to address inequalities through working with national and local government, the NHS, industry and the voluntary and community sector. PHE is an operationally autonomous executive agency of the Department of Health.

Public Health England’s (PHE’s) Knowledge and Library Services is part of the Knowledge and Intelligence division of the Chief Knowledge Officer Directorate. The service is based on the former Health Protection Agency library service, but is being strengthened in order to provide a comprehensive and high-quality service for all PHE staff, regardless of role, specialty or location.

In addition to providing library and information services, the PHE Active Knowledge Management programme will provide support for a broad range of knowledge management activities, in order to help the transfer of knowledge within PHE, and throughout its communities, networks and partners.

The programme has three main strands:

- connecting people with knowledge - understanding and acting on user needs so that both published sources (internal and external) and implicit or tacit knowledge (people’s experience) can be sourced, managed and accessed
- connecting people to people – so that people can find, interact and work with the stakeholders, networks and communities that are most important to them
- active knowledge services - so that PHE receives the best quality, tailored knowledge services that provide expert navigation, mediation and training to help people find and use knowledge

PHE is also committed to promoting specialist library and information professional skills and services for the wider public health system. Our Knowledge and Library Services team is working closely with the Health Education England (HEE) Library and Knowledge Leads, NICE Evidence Resources, and the Local Government Agency, to make sure that the appropriate national and local responsibilities and functions within PHE, its partners, and the wider public health system are in place.

To find out more, please contact Anne Brice, Head of Knowledge and Library Services, (anne.brice@phe.gov.uk)

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Patient Information Forum’s Health Literacy Survey finds support for health information producers is lacking

A Patient Information Forum (PiF) survey on Health Literacy has found that although information producers understand why clear, easy to understand and usable health information for the public is important, many are not equipped to meet the challenge. PiF says this lack of support and guidance for producers could derail the government’s ambition for transforming information for the NHS, public health and social care.

Over 340 of the best-known health information producers responded to the survey including voluntary sector organisations, NHS organisations and commercial companies. The survey found that although more than 90 per cent viewed health literacy as very important when producing information for the public, only 10 per cent said they had a health literacy strategy or policy. Fewer than half produced online and printed materials with health literacy in mind.

When asked about the barriers and challenges to producing information that was easy to understand and enabled informed decision making, 73 per cent pointed to a lack of resources while 75 per cent said they had limited understanding of how to develop the right resources. One respondent highlighted the absence of any guidance saying there was ‘no written help on how to word patient information’.

Professor Theo Raynor, University of Leeds School of Healthcare, reviewed the survey for PiF. He said: “Enabling people to understand treatments is crucial to good and safe choices being made. Such understanding depends on the information we give people – and this report shows that the people producing this information lacks the resources to allow them to produce good information that we know works. It also shows that we need to make all health information usable for all – rather than just focussing on people with low literacy skills. Clear and well written information will not only benefit people with low literacy skills, but also those who can read and write well, but are not experts on health and treatments.”

Sarah Smith, Operations Director, PiF said: “Our survey highlights the need for better support, training and guidance for organisations producing healthcare information, in order to ensure that information can be understood by everyone, including those with low health literacy. Information producers are fighting a lack of resources, funding and investment in health information for patients. It's time to address these issues and provide people with information that meets their needs.”

To read the report, go to http://www.pifonline.org.uk/health-literacy-report

For further information about PiF contact: Julian Tyndale-Biscoe Julian.tb@inhealthcomms.com or 07882 985597
For further information about the survey contact: Sarah Smith operations@pifonline.org.uk or 07740 867297

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New internet resources are the best bet for vets

Academics at The University of Nottingham have launched two free internet resources for vets.

Scientists from the Centre for Evidence-based Veterinary Medicine (CEVM) at the School of Veterinary Medicine and Science have launched BestBETS for VETS www.bestbetsforvets.org and VetSRev www.nottingham.ac.uk/cevm/vetsrev.

BestBETs for Vets has been adapted from an evidence-based medicine resource for emergency doctors (www.bestbets.org). BET stands for Best Evidence Topic and provides a summary of the evidence found relating to a specific clinical question posed by those in the veterinary profession.

The questions found on the site have all come from vets in general practice and the CEVM team has then undertaken a structured literature search to find the evidence. A BET is structured in a very simple format and it is possible to just read the bottom line (where people can find the answer to the question), or the whole BET which includes the search terms used and the appraisal of the papers found. It is possible to sign up at www.bestbetsforvets.org to receive regular updates about new BETs published and also post questions for future BETs.

Dr Rachel Dean, the Director for the Centre for Evidence-based Veterinary Medicine said: “There is no other database of this kind in veterinary medicine, despite many that have been created for human medicine. There are also very few practitioner orientated evidence summaries for practising vets to help them incorporate evidence in clinical decision making. These new resources should help to facilitate the use of best evidence in practice.”

The other resource created by the team is called VetSRev, which is a freely accessibly online database of citations for systematic reviews of relevance to veterinary medicine and science www.nottingham.ac.uk/cevm/vetsrev.

Systematic reviews of good quality are considered the strongest evidence for clinical decision making and VetSRev now lists over 300 references. The CEVM team developed this resource to establish what had already been done and provide one place of reference for researchers of clinicians looking for veterinary systematic reviews.

More information is available from the Centre for Evidence-based Veterinary Medicine website www.nottingham.ac.uk/cevm at The University of Nottingham or via email CEVM@nottingham.ac.uk, or Charlotte Anscombe in the Communications Office at The University of Nottingham on +44 (0)115 7484 417 or charlotte.anscombe@nottingham.ac.uk. For up to the minute media alerts follow us on Twitter

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Internet sites of interest

Clinical trials, and the Philippines

The Philippines - if you know of anyone travelling to the Philippines to help, here are some health resources
Robin Young of Hesperian Health Guides posted to the HIFA2015 discussion list some Hesperian resources in Tagalog (Filipino), with the suggestion that they are shared with anyone going to the Philippines to provide help to those affected by the recent typhoon. Here is the list:

An advance chapter on newborn babies and breastfeeding from the New Where There Is No Doctor in the HealthWiki:
http://fil.hesperian.org/hhg/New_Where_There_Is_No_Doctor:Kabanata_27:_Bagong_Panganak_na_Sanggol_at_Pagpapasuso

A PDF of Where Women Have No Doctor in Filipino, including a chapter on medicines and dosages: http://hesperian.org/books-and-resources/resources-in-filipino/

I’d like to add these suggestions, which cover various topics, not all of which will be the most relevant:

MedlinePlus

Multicultural Health Communication (New South Wales)

Stanford Health Library, Multilingual Health Information
http://healthlibrary.stanford.edu/resources/foreign/tagalog.html#tagalog

Finally, there is also this comprehensive page of Typhoon Haiyan/Yolanda related health resources from the NLM:
Clinical trials

I found books by Jadad\(^2\) and Hackshaw\(^3\) useful when thinking about this column. And a recent paper in the BMJ\(^4\) discusses the availability or otherwise of clinical trial data, and was discussed on the BBC’s Newsnight programme. Here are some sites about clinical trials, how to conduct them, organisations that do conduct them, and how to find them.

**General Information**

**ABPI Clinical Trial Disclosure Toolkit**  
Good practice guidelines, disclosure checklists and a standard operating procedure for pharmaceutical companies

**Clinicaltrials.gov**  
[http://clinicaltrials.gov/ct2/info/understand](http://clinicaltrials.gov/ct2/info/understand)  
Information about clinical studies (including but not limited to clinical trials).

**CONSORT Statement**  
Recommendations for reporting RCTs.

**Medicines and Healthcare Products Regulatory Authority – Clinical Trials**  
[http://www.mhra.gov.uk/Howweregulate/Medicines/Licensingofmedicines/Clinicaltrials/index.htm](http://www.mhra.gov.uk/Howweregulate/Medicines/Licensingofmedicines/Clinicaltrials/index.htm)  
Very comprehensive resource, aimed at healthcare professionals.

**NHS: Clinical trials and medical research**  
[http://www.nhs.uk/Conditions/clinical-trials/Pages/introduction.aspx](http://www.nhs.uk/Conditions/clinical-trials/Pages/introduction.aspx)  
Comprehensive information about what trials are, the different phases, how to take part, and how they are regulated. Part of NHS Choices and aimed at patients and the public.

**NIHR – Clinical Trials Toolkit**  
[http://www.ct-toolkit.ac.uk/](http://www.ct-toolkit.ac.uk/)  
Advice to researchers on designing and running a trial.

**NIHR – Understanding clinical trials**  
Booklet aimed at patients, explaining what clinical trials are, how they are run, and things to consider if you are thinking of taking part in one.

**UK Clinical Research Collaboration Registered Clinical Trials Units**  
The UKCRC publish two guides to clinical trials, for the public, “Understanding clinical trials” and “Clinical trials: what they are and what they’re not”, available via

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http://www.ukcsrc-ctu.org.uk/?page=Patients. There is also an explanation of what a Clinical Trials Unit does and a search page to locate them.

Registration of clinical trials

The NIHR Clinical Trials Toolkit discusses the need for registration (http://www.ct-toolkit.ac.uk/routemap/unique-trial-number), so that trials can be tracked from start to publication. The BMJ paper referenced above, however, found that a lot of trials do not get published, and the AllTrials campaign (http://www.alltrials.net/) is working to have all trials registered, and all results reported.


WHO maintain a Registry Network, and primary registries in that network need to meet certain criteria. Registries that meet these are listed at http://www.who.int/ictrp/network/primary/en/index.html. There are some partner registries (which have to meet slightly different criteria), listed at http://www.who.int/ictrp/network/partner/en/index.html. The ICMJE recognises these (http://www.icmje.org/faq_clinical.html):

Australian New Zealand Clinical Trials Registry
www.anzctr.org.au

ClinicalTrials.gov (US)
www.clinicaltrials.gov

European Clinical Trials Database (EudraCT)
https://eudract.ema.europa.eu/

ISRCTN
www.ISRCTN.org
A numeric system for the unique identification of trials.

Nederlands Trial Register
www.trialregister.nl
The options in the menu are in English but the pages in Dutch (or at least the ones I tried were!)

UMIN Clinical Trials Registry (Japan)
www.umin.ac.jp/ctr/index/htm
English language page (Japanese page is at http://www.umin.ac.jp/ctr/index-j.htm)

Finding clinical trials
There will be data about trials in the registries listed above, many of which can be searched using the UK Clinical Trials Gateway http://www.ukctg.nihr.ac.uk/default.aspx. Search results are available in two formats, and if results have been published, details will be given.
Once a trial has been published you can look for it the “usual” databases. Various kinds of trial are search limits in Medline and Embase, and you can use the sort of search filter listed at https://sites.google.com/a/york.ac.uk/issg-search-filters-resource/ to conduct systematic searches or searches for particular types of study. There is a list of filters for RCTs and other clinical trials at https://sites.google.com/a/york.ac.uk/issg-search-filters-resource/filters-to-identify-randomized-controlled-trials-and.

Another source of information about published trials is the Trials database within the Cochrane Library, which indexes trials located in the course of writing Cochrane Systematic Reviews.

PsycInfo, at least in the “native” EBSCO interface, enables you to filter your results by methodology, one of which is “treatment outcome/clinical trial”.

I show my health services research students Web of Science as an additional database to use, but you can’t filter to trials and would have to rely on title and abstract words. The same is true for Scopus.

All links were checked on 15th November 2013.

Additions to this column are welcome, as are suggestions for future columns. Even better would be offers to produce a column, especially if you work in the NHS or outside England. My contact details are:
Keith Nockels
Learning and Teaching Services Librarian
University of Leicester – UK
Tel. +44 (0)116 252 3101
Email: kn5@le.ac.uk

Keith Nockels, Learning & Teaching Services Librarian, University of Leicester
Email: kn5@le.ac.uk

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Meeting reports

Please note - in the last issue of the Newsletter, we had a report from an attendee at Umbrella. There are two further reports of Umbrella (from Lesley Firth and Helen Kielt) which are available on the HLG website at: http://www.cilip.org.uk/health-libraries-group/newsletter

A visit to our Canadian counterparts: the Canadian Health Libraries Association (CHLA) conference 2013

I’d always dreamed of having a job that would involve travelling overseas, yet I never thought that being a librarian would allow me to do this – how wrong was I?! I was very fortunate to be awarded the Leslie Morton bursary to attend the Canadian Health Libraries Association (CHLA) conference in Saskatoon, Canada in May 2013. I had successfully submitted an abstract for an oral presentation at the conference, so being awarded the bursary (as well as generous support from my own organisation) transformed this dream into a reality.

What immediately struck me was that CHLA 2013 was perhaps the most welcoming and friendly conference I’ve ever attended. Health librarians from across Canada gather at this annual event, which I perceive as the Canadian equivalent of our very own Health Libraries Group (HLG) conference. Due to the vast geography of Canada, it is common for library colleagues to work in the same team but never meet face-to-face because they work hundreds of miles apart. This undoubtedly contributed to the lively and happy atmosphere as colleagues and friends came together to catch up on new developments. The friendly vibe was enhanced by the wide range of social activities that were included on the conference programme, including a morning walk/run, ‘unofficial’ drinking group and, of course, the conference dinner.

The themes that emerged from the conference drew many parallels with current issues in the UK: use of mobile devices in healthcare, measuring impact, and meeting the needs of users in challenging times. The full conference programme is available on the CHLA website at http://www.chla-absc.ca/conference/content/program.

As with most conferences, for me the most valuable part of the event was the networking. (A tip to any other librarians attending international conferences: take some business cards!). My impression of Canadian health librarians is that they are a similarly fascinating group of people as their UK counterparts, all eager to share and learn from each other. I was able to speak to one or two people whose roles mirror my own as a Clinical Librarian, and their perception is that the UK has made more advances with integrating with clinical teams than in Canada. However, there are still areas of good practice that can translate across the Atlantic and I’ve kept in touch with several contacts. I’ve also extended and diversified the valuable professional network that I have access to on Twitter as a result of attending the conference.

One of the highlights of the conference was an introduction to a new concept, that of the ‘fishbowl conversation’. During a fishbowl conversation, the room is set up with a central table and four chairs in the centre, with the remaining participants arranged in concentric circles around the ‘fishbowl’. A topic is selected for the ‘conversation’ and three participants sit in the centre and begin the conversation. One chair is left empty, and a member of the audience can, at any time, occupy the empty chair and...
join the conversation. When this happens, an existing member of the fishbowl must voluntarily leave the conversation. Participation is actively encouraged! The conversations that I attended covered topics including how the role of the health librarian has evolved, how to revitalise and rebrand our profession, and advocacy. Covering these topics in a fishbowl conversation format made the discussion inclusive and fast-moving, and encouraged almost everyone in the audience to join the fishbowl to contribute. I found it a really valuable way to share ideas and opinions while maintaining a controlled debate when some of the issues became controversial! It’s a concept that I’d like to see in the UK and I’ve since used it at a doctors study day within my own organisation, where it worked well with a smaller group for a more intimate discussion.

My own presentation reported on my work with the Critical Care department in my hospital. While presenting at a conference is always a daunting experience, the audience were responsive and genuinely interested in the project which meant that the question time at the end became more of a conversation between everyone in the room.

Since returning to the UK, I’m still noticing the impact of my attendance at CHLA-ABSC 2013. I’ve spoken about my trip and shared my learning at my regional Clinical Librarians group meeting. I’ve also maintained contact with the Canadian librarians that I exchanged contact details with. In June, two of my new Canadian colleagues who work at the Regina Qu’Appelle Health Region, Ashley Farrell and Jeff Mason, visited me during a trip to the UK. I was able to give them a quick tour of the hospital and spend time comparing notes about our roles.

Part of the allure of travelling to an international conference is the opportunity to taste the culture of a different part of the world, and happily I was able to combine the conference trip with some sightseeing of the Rockies. The whole experience has broadened my horizons, professionally and personally, and is an opportunity that I would encourage all health library staff to consider.

Further information:
Canadian Health Libraries Association (CHLA): http://www.chla-absc.ca
Follow CHLA-ABSC on Twitter: @chlaabsc

Victoria Treadway, Clinical Librarian, Wirral University Teaching Hospital NHS Foundation Trust. Email: Victoria.treadway@nhs.net Twitter: @librarianpocket

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Doing what it says on the tin? 10 year celebration of health librarianship: past, present & future. 12th November 2013, University Hospitals Coventry & Warwickshire (UHCW).

I attended the networking event to celebrate the journey that Health Librarianship has been on over the past 10 years and take a look into what the future may hold for the role of the Health Librarian (or its many job titles).

Jacqui LeMay (Head of Knowledge Services, UHCW) opened with a welcome and introduction for the day before handing over to the key note speaker:

Andrew Booth (Reader in Evidence Based Information Practice, School of Health & Related Research (ScHARR), University of Sheffield) began with looking at what health librarians have achieved in the last decade and the skills that have been
perfected. From a very handy website called ‘Waybackmachine Internet Archive’ ([http://archive.org/web/](http://archive.org/web/)) he was able to refresh our memories of the websites and resources that were once entirely new and innovative to us, such as NHS Core Content and TRIP Database, which are now common place to use. Demonstrating how far the internet has come in terms of what we are able to access at the click of a mouse that once upon a time used to be kept on shelves for reference only. He then discussed literature/evidence searches and answered a few questions that I personally often ask of myself. Answering these questions by using examples of searches that he has carried out and comparing the number of reliable results found when searching multiple databases was a real eye-opener for me and I found it reassuring to know that there is such a thing as ‘bibliographic futility’.5

Mr Richard King (Consultant Orthopaedic Surgeon, UHCW), then began an inspirational talk on “Innovation” and how it has changed the way people work at UHCW. Coming from an NHS Trust where I am more used to hearing the word ‘no’ than ‘yes’ (no matter what I’m asking) his outlook on innovation and who can make it happen was truly inspiring, from parking attendants to cleaners to clinical staff – anyone with an idea can put it forward for consideration and clearly putting ideas into practice has worked incredibly well at UHCW (Clinical Evidence Based Information Service [CEBIS] being one of them!!). Mr King’s passion for innovation and improvement was very clear and I can see that having someone with that type of motivation and enthusiasm would spur other people on to be the same.

Our very attentive host then gave an introduction and overview of the CEBIS service ‘what it says on the tin: understanding labels!’ From its beginning in 2004 through to the very exciting present day and all of its hurdles and milestones along the way, Jacqui gave a clear image of what it is that she originally hoped to achieve and how she has gone about it – including finding ways to work with and around people / issues that could easily have stopped the development of CEBIS. By asking for feedback from staff who actively use CEBIS and Evidence Based Information, Jacqui and her team have not only created good working relationships but are continually developing a database that is already having a big impact on evidence based practice in patient care and beyond, for which the possibilities are nearly endless.

Richard Parker, (Library & Knowledge Services Manager Derby Hospitals Foundation Trust) discussed ‘Mobile Technologies: Interesting Times for Health Libraries’ and what it means when someone hands you a phone and says ‘App me up dude’! We all know and use mobile devices in our daily lives and there is more often than not an app for that, whatever ‘that’ may be. Richard’s take on the development of apps and how libraries can adapt to stay at the forefront of information delivery was all about where we go from here and not what we have lost thanks to the constant evolution of handheld/mobile devices.

After a very nice catered lunch, Helene Gorring, HLG Committee, delivered an overview of what HLG do, how they can help and how members can get more involved.

Alison Brettle (Senior Lecturer School of Nursing, Midwifery and Social Work, University of Salford,) shared her own personal journey over the past 10 years from her first published systematic review in 2003 to where she sees the role of the librarian heading in 10 years to come. Her vast, varied experience in health and

academic libraries goes to show that evidence based practice is something that librarians/evidence based information staff can continue to support the development of, therefore enabling health and social care staff to improve patient care.

Margaret Rowley (Head of Knowledge Management, Worcestershire Health Libraries) looked back over the past decade across Worcestershire Health Libraries, the challenges and developments that they have faced and where she sees them going from here onwards.

Danielle Worster (Senior Information Specialist; Bazian Ltd, An Economist Intelligence Unit Business) looked at the role of the health information specialist in the private sector. Having a very varied career in libraries so far, from working with charities, working on NICE guidelines and then moving on to the BMJ group - it was very interesting to hear her take on the evolution of the health librarian.

And finally, Sarah Sutton (Clinical Librarian, University Hospitals Leicester) delivered a presentation that answered her own question: ‘The last ten years of Clinical Librarianship – still cutting edge or is it getting dull?’ and the answer is definitely ‘No’. Using her own experience to offer tips and advice on where to start, how to create interest in your service and even handy tips for when you’re on the ward – it is clear to see that having worked in this area for a long time Sarah is definitely not ‘getting dull’!

This was a very informative and motivating day. All presentations are available at: http://bit.ly/lks10 and I can thoroughly recommend having a read through them and thinking how you could use these ideas in your own library/information service.

Amber Dunlop, CEBIS Specialist, University Hospitals Coventry and Warwickshire

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Book review


This is the fourth in a series of books that are really conference proceedings. In fact the promotional material states this book is based on the proceedings of the Fourth International M-Libraries Conference held in Milton Keynes in 2012 which suggests that the articles in the book have been selected in some manner, but that is not explicitly confirmed. I was left to wonder why these particular articles were selected – the best presentations; those contributors able to provide the necessary material for the book; or this is actually all the presentations from the conference. However these articles were selected, they are organized into three parts: Transformation; Inspiration; and Implementation. These chapters are encased with a foreword by Char Booth and completed with a brief paragraph conclusion.

The various projects described in the articles are truly international in scope with contributions from many countries including Australia, Bangladesh, Canada, India, Japan, Nigeria, Qatar, Spain, UK and USA. There are papers from authors based in research institutes, academic libraries, LIS (Library and Information Science) departments, governments and medical colleges. There were just two papers from the health information sector; “Widening access and stimulating innovation through mobile health applications” and “Mobile devices in medical schools: the WCMC-Q experience”. Other papers in the book would also be relevant and could be applied to other settings. I have deliberately not picked out any specific papers in this review. This is in part due to the breadth of topics covered, not all of which will appeal to every prospective reader. The range of projects illustrates the variety of mobile technologies and their potential uses:

- Contents alerting using SMS;
- Text reference service;
- Promoting services and resources using social media;
- Mobile enquiry service using iPads and Android tablets;
- QR codes as signposts to digital content in the physical library stock;
- Loaning e-resources on lendable kindles.

Particularly useful to readers is that many of these articles highlight the negatives as well as the positives. Often the pitfalls, as well as being identified, are addressed with remedial actions. Documenting these “teething” issues enables others to learn from their mistakes and experiences generally, which is another benefit of this book.

The book is well presented with the formatting throughout the chapters consistent which unifies the various articles and different writing styles. There are some screen
As a set of conference proceedings this book has value, even more due to the speed in publication with the conference just last year, which is important with such a fast developing technology. The book provides an overview of different projects that use mobile technologies to enhance the library service and provision for users. This would be of interest to those willing and/or able to implement developments using mobile technologies; or those interested in this subject but who were unable to attend the conference. I feel the prospective audience is slightly restricted due to the lack of an introductory section on mobile technologies generally instead of simply introducing the papers. This would set the scene for readers new to the topic.

Karen Davies, Lecturer, Robert Gordon University

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As the title suggests, this is a how-to guide for using social networking in libraries. It’s aimed at academic libraries, but is useful to all kinds of libraries. Garofalo describes how “A social networking community built around the academic library can provide a means to support appropriate, precise, and critical skills to deal with the ever-changing and expanding information environment” – sounds like most health libraries to me!

Chapter titles include: ‘The whats and whys of social networking for academic libraries’, ‘First Steps’ and ‘Evaluating the impact of social media in academic libraries’ and the book includes detailed sections on ‘Basic Facebook’ and ‘Basic Twitter’ – which are very useful, both for first time users and people who have used these tools personally (there is even a very helpful section in the Facebook guide explaining the difference between personal accounts and Facebook pages, and groups). The section on Facebook is longer than the one for Twitter, but I think this is necessary due to the complexity of administering Facebook for people who haven’t used it – although the Twitter section includes some good tips including linking your Twitter to your Library’s blog, Facebook and website.

The book also includes details of a survey conducted by Garofalo into how academic librarians are using social media; what tools they use and what they use it for. 87% of respondents were using Facebook, followed by Twitter (69%) and YouTube (55%) – with 90% of them sharing ‘anything library related’ on these networks. These respondents are then looked at more closely with nine case studies, which I always find helpful when I’m starting on new projects. Knowing what worked well for others can be good to build confidence.

The ‘first steps’ sections include advice on posting schedules, being respectful and scheduling evaluation of your success. There are also some sample social media
policies from three anonymised libraries which make a good starting point for anyone having to write their own.

The evaluation section was very helpful to me – I work in a library that is using Facebook and Twitter although we’re not really sure how to go about evaluating this – Garofalo suggests ways to measure success, such as size and growth rate of the community and number of comments, but also suggest different tools to use to evaluate the social networking efforts, not only usage statistics, but focus groups, surveys and real-time interaction as well as describing a few different online tools such as Facebook Insights Google Analytics, and TweetReach which can all be used for evaluative purposes. This is definitely a section I will be re-reading!

Overall, the book has been very easy to read and very informative. While some of the information was not new to me as an experienced social media user, I can see that it would be very useful to a complete beginner and I picked up a few tips in the Facebook and Twitter How-to sections as well as some useful information in the Evaluating sections. I think this book has something for everyone – whether they work in an academic library or otherwise.

Lisa Basini, Telford Health Library, Shrewsbury and Telford Hospital NHS Trust

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Evans, G.E. & Alire, C.A.
Management basics for information professionals. 3rd ed.
ISBN 9781856049542. 577 pages. £49.95

Setting out to provide a comprehensive overview of the fundamental concepts of management, the author focuses on helping the reader build the basic skills that good library managers should exercise. It’s aimed at students and practitioners wishing to acquire a sound knowledge of the theory and practice of management within the changing information workforce.

It’s the third edition of this text, and this updated version pays attention to recent changes in the field of management, including developments in management theory, the impact of emerging technologies and a recognition that the current economic environment has impacted significantly on the way that libraries and their managers operate.

The book is divided into five sections: managerial environment, managerial skills, managing people, managing things and managing yourself and your career. Each section is further broken down into chapters focusing on specific details of management such as legal issues, advocacy, ethics, budgeting, marketing and change management. Although each chapter includes relevant examples from the information and library profession, much of the advice is transferable to any workplace setting, and so is a good general introduction to the field of management.

The chapter that focuses on the impact of technology on leadership and management is particularly interesting as this increasingly becomes the centrepiece
of today’s libraries. Practical tips are given on issues such as cloud computing and social media, but it also covers associated issues such as addressing staff skills and controlling budgets. I like the acknowledgement that, contrary to the stereotype, library “staff are not backward looking; libraries are reasonably quick to adopt new technologies” (p.458).

The comprehensive nature of the book means that it’s quite lengthy, but the text is broken up by the inclusion of “side bars” featuring authors’ insights, tips, and case studies that help to illuminate the text. I also liked the key recommendations lists at the end of each chapter that helped to summarise that chapter’s content, and meant the book could be used as a quick reference tool. Each chapter also finishes with a full list of research consulted, and includes a “launching pad” of suggested further reading in that area.

The book is easy to read and written in a relatively formal style which suits the subject matter. It’s intended to be non-sector specific and doesn’t explicitly mention health and social care libraries, but the general nature of the book means that ideas and concepts can be easily adapted to different library sectors.

This is a UK edition of the US text and it’s written by G. Edward Evans, a researcher, writer and teacher on library issues, and Camila Alire, Dean Emeritus of the University of New Mexico and past president of the ALA. The US focus of the text is most obviously felt in the chapter on legal issues, where the citations and legal acts aren’t directly applicable to a UK audience. Better transferable are the more abstract concepts of management theory that cut across country borders.

Overall, the book succeeds in offering an introduction to management within the context of library and information services. Providing such a broad scope entails that it’s going to be a long read, but the clear structure of the book also means that it’s suitable to read as a quick reference text too.

Kathryn Butler, Norfolk & Suffolk NHS Foundation Trust

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This clear and thoughtful book gives an insight into developments in library catalogues at a level suitable for the interested generalist librarian. The overviews and discussion will also be of interest to specialists.

Edited by Sally Chambers, who has worked on digital libraries for some time and is now based at Digital Research Infrastructure for the Arts and Humanities in Germany, chapter authors are drawn from several countries and are both experts and practitioners. The editing of this book is admirable: the choice of topics and authors and the logical arrangement of chapters make a cohesive and useful summary of this disparate subject. The book is well-presented, with chapters
broken into bite-sized sections; and well-written, with clear summaries of complex concepts. Extensive notes and references add explanations and point to useful further reading.

Many readers may want to pick just a chapter or two and each chapter can be read alone. However, I’d recommend the first chapter to all: by starting from the user perspective, it roots the book firmly in an understanding of the goals of the library catalogue. An overview of research on user-centred design includes some counter-intuitive findings – for example, users weren’t enthusiastic about sharing their own tags on catalogues, preferring the catalogue to remain neutral. The theme of trust and authority repeats through the book, alongside the challenge of meeting user expectations for functionality, and the position of the library catalogue within the array of alternative tools.

From the first chapter's focus on users, the second chapter gives a readable explanation of how search works, looking at the differences between traditional catalogues and modern search engines. This leads to the third chapter's focus on discovery tools. Librarians who want something more than their current catalogue will find the summaries of commercial, open-source and in-house tools useful: although they don't go into detail about benefits and drawbacks, these impartial outlines are more helpful than providers' sales material. This is the only part of the book to discuss open-source: it includes tips and a case study for those considering it.

Chapter 4 focuses on mobile catalogue tools: it takes a practical approach assuming no knowledge of mobile technology.

The second half of the book, while still aimed at the generalist, may be the section that experts find more stimulating. Chapters 5 and 6 cover linked data and the Semantic Web. Whenever I read about these topics I find myself sinking in a morass of acronyms and standards. These chapters have useful diagrams and real-world examples and are a fine effort to drag people like me out of the swamp. An interesting comment in chapter 6 is that library systems have always been good at sharing data, but only with each other: these new standards could be the connection to the wider world. Finally, chapters 7 and 8 consider the role of the catalogue: Karen Calhoun discusses research libraries' support for scholarship (much of which is applicable to health libraries), while Lorcan Dempsey's authoritative final chapter reads as a state of the nation of modern catalogues, drawing themes together.

Interestingly, the first mention of Google is in the context of delivery of full-text, not search. There are many reminders here of things about catalogues we know but take for granted: their role in location and delivery as well as discovery, the problems with Boolean search, the conflicting needs of different users. The sections discussing specific tools are bound to date, but in examining themes in catalogue development this book should remain relevant and interesting for some time to come.

Hannah Prince, The Princess Alexandra Hospital NHS Trust

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**Current literature**

**Social media**


The authors review literature from 2002-2012 on the use of weblogs by palliative care patients. They find there is a growth in use but more evidence is needed to evaluate their effectiveness.


This work reports to be the first overview study of medical related research based on Twitter and related microblogging. Published work in PubMed related to Twitter is found and classified using 5 dimensions. The results provide an insight into the use of Twitter in the medical domain.


This study datamined tweets related to Dementia on Twitter and performed a content analysis on a sample. Results are reported and highlight the need for those involved in dementia research to consider the reach of Twitter as a tool for engagement.

**Library collections**


The author describes the results of seven libraries use of leisure reading book collections. Those in charge of the collections were interviewed using semi-structured interviewing. Librarians reported high use of collections with user benefits of stress relief, relaxation and exposure to other perspectives.


This article reports on the results of one of two surveys conducted in 2012 by Health On the Net (HON) to find out trends amongst users use of Web 2.0 platforms for health purposes. The results offer some insights into consumer health information seeking behaviour and their use of Web 2.0 platforms. The research received funding under the EU’s Seventh Framework Programme.
Badia G (2013) Patron-driven acquisition of e-books satisfies users' needs while also building the library's collection. *Evidence Based Library and Information Practice* 8(3): 58-60. (Open Access)  
This is a case study of the University of Iowa's pilot of patron-driven acquisition of eBooks. It reports findings including the demand for interdisciplinary materials and highlights new research areas for librarians.

http://www.jmir.org/2012/6/e175/  
Treatment recommendations of 200 clinical topics from 4 sources (DynaMed, UpToDate, Physicians' Information Education Resource (PIER) and Best Practice) were compared with recent articles from the evidence rating service (McMaster Premium Literature Service, PLUS). Results showed that variation in topics requiring potential updates varied substantially.

**Role of Librarians in Health**

The October 2013 issue of the Journal of the Medical Library Association has a special themed issue dedicated to exploring new roles for health science librarians. The coverage includes case studies and other featured articles of relevance to this topic. Two articles are highlighted there, however the entire issue is worth a look for those interested in new roles for health librarians.

McClure LW (2013) When the librarian was the search engine: introduction to the special issue on new roles for health sciences librarians *J Med Libr Assoc* 101(4): 257–267. (Open Access)  
http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3794680/  
This introduction offers an interesting overview tracing the changing roles and relevance of the Health Science Librarian through from the 1940s to the present day. Traditional skills of collection management (acquisitions, classification, cataloguing and referencing) are described and the changes in information technology and the ‘online revolution’ are explored in relation to evolving roles for health science librarians.

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3794682/  
This paper identifies new roles and activities for health science librarians from literature spanning 1990-2012. Job announcements were also included. The authors intend the results to help inform new graduates, guide continuing professional development and librarians to consider new activities.

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3738078/  
This is a prospective study which reports on the effect of a clinical medical librarian (CML) on outcomes of in-patients on the internal medicine service. It is the largest study to date studying the effect of a CML on rounds. Some highlights include the CML is more likely to get questions when the patient has complex health issues and
no difference was found in clinical outcomes between the intervention group and the control group.


This opinion piece looks at the evolving roles of librarians working in healthcare environments and highlights the value that they add. This article could be very useful for advocacy for health librarians and libraries.

**Information Literacy**

Dalton M (2013) Developing an evidence-based practice healthcare lens for the SCONUL Seven Pillars of Information Literacy model. *Journal of Information Literacy* 7(1): 30-43. (Open Access) [http://dx.doi.org/10.11645/7.1.1813](http://dx.doi.org/10.11645/7.1.1813)

This study develops a lens to reflect the unique needs of evidence based practice in healthcare. The lens could be useful for those developing information literacy programmes in clinical settings.

**Editor’s Pick:**


This is a study from Finnish university Librarians on how 100 Finnish librarians and information specialists view changes in light of Web 2.0 developments to their identity and knowledge. All answers were indexed with keywords assigned. The keywords were then analysed using a co-word analysis. The authors include a review of competence and Web 2.0 developments in the literature.

**Key points**

- The increased use of social media is an important technological change
- Competence is closely linked with the shaping of professional identity
- ‘Librarian 2.0’ is closely associated with the Web

**Take home messages**

- The more traditional characteristics of librarianship have retained their relevance
- The change towards ‘Librarian 2.0’ is seen as intimidating by some librarians
- There is little discourse about what the outcome or desired goal of Librarianship 2.0 should look like.

Aoife Lawton, Systems Librarian, Health Service Executive, Dublin, Ireland

Contributions should be sent to aoife.lawton@hse.ie

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Diary of events

13 December 2013
Extended critical appraisal skills workshop
BMA House, London
http://bma.org.uk/events/2013/december/extended-critical-appraisal-skills-workshop
£160 + VAT (lunch included)

30 January 2014
The digital book
Royal College of Physicians
Free to RCP members and fellows; £10 for non-members

27 February 2014
Book preservation and conservation
Royal College of Physicians
Free to RCP members and fellows; £10 for non-members

3-6 March 2014
HEALTHINF 2014: 7th International Conference on Health Informatics
ESEO, Angers, Loire Valley, France
http://www.healthinf.biostec.org/
Range of package options (Early registration deadline 23rd December 2013)

20 March 2014
Writing books
Royal College of Physicians
http://www.rcplondon.ac.uk/future-and-medical-book/writing-books
Free to RCP members and fellows; £10 for non-members

23-25 April 2014
LILAC 2014
Sheffield Hallam University
http://www.lilacconference.com/WP/
Registration and fees to be announced

16-21 May 2014
MLA ’14: Building Our Information Future
Chicago, IL
http://www.mlanet.org/am/am2014/index.html
Registration will open in January 2014

11-14 June 2014
14th EAHIL 2014 Conference
Rome, Italy
http://www.iss.it/eahil2014/
Registration and fees to be announced
13-18 June 2014 [Pre-conference 13-14 June, Conference 15-18 June]
HTAi 2014: Optimizing Patient-Centered Care in an era of Economic Uncertainty
Washington DC
http://www.htai2014.org/
Registration and fees to be announced

16-20 June 2014
CHLA/ABSC Conference 2014: Scaling New Heights Together
Chicago, IL
http://chla-absc.ca/conference/
Range of package options (Early bird registration starts 10 March 2014)

17-20 June 2014
The Nottingham Systematic Review Course
University of Nottingham, Nottingham
http://szg.cochrane.org/workshops-training-and-events
£750

24-25 July 2014
CILIP Health Libraries Group Conference
University of Oxford, Oxford
Range of package options

16-22 August 2014
IFLA World Library & Information Congress: 80th IFLA General Conference & Assembly
Lyon, France
http://conference.ifla.org/ifla80
Range of package options (Early registration deadline 15 May 2014)

Julia Garthwaite, Deputy Site Librarian, Cruciform Library, UCL
Contributions should be sent to j.garthwaite@ucl.ac.uk

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Newsletter editorial notes

CILIP is the UK’s professional body for library and information professionals and includes the Health Libraries Group (HLG) as one of its subgroups. HLG has two regular publications: the Health Information and Libraries Journal (HILJ) and the HLG Newsletter. In a collaborative approach, they provide their joint readership with a comprehensive coverage of the health and social care information sectors. The HLG Newsletter is freely available to all across the globe and is posted quarterly on the HLG web site. Published by Blackwell Publishing Ltd., HILJ is the official journal of the HLG. Reduced subscription rates are available to members of HLG, the European Association for Health Information and Libraries (EAHIL), the Medical Library Association (MLA) and the Australian Library and Information Association (ALIA). Members wishing to subscribe to the journal should order direct from Blackwell Publishing Ltd., 9600 Garsington Road, Oxford OX4 2DQ, quoting their CILIP membership number.

Contributions to the Newsletter should be sent to:

Editor Elise Hasler
elise.hasler@wales.nhs.uk

Internet sites of interest Keith Nockels
khn5@le.ac.uk

Book review Rebecca Dorsett
hlgbookrevieweditor@hotmail.co.uk

Current literature Aoife Lawton
aoife.lawton@hse.ie

Diary of events Julia Garthwaite
j.garthwaite@ucl.ac.uk

Next Copy dates:

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HLG Members email discussion list

Sign up today by going to http://www.jiscmail.ac.uk/hlg-members and following the onscreen instructions.

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