

## Aims and Objectives of the Survey

#### General:

- to obtain feedback about users' experience of and satisfaction with Library Services and resources
- to identify areas in need of improvement and development
- to collect evidence of the impact of the contribution of Library Services to patient care
- to promote the library, raising awareness and alerting readers to services or resources
- to evaluate the quality of library services and resources
- to keep in touch with dispersed users.

# Specific objectives for 2016:

- to collect information about remote resources usage and promote awareness of these services.
- to evaluate KnowledgeShare after one year and promote usage.
- to consult about possible new services/how the library can support teams

## Methodology

- A 22 question survey was created using Survey Monkey (<a href="http://www.surveymonkey.com/">http://www.surveymonkey.com/</a>), which ran from April 12 - 29. A prize of £30 Amazon gift voucher was offered for the best answer to the "impact" question (Question 16), selected by the LUC and library staff.
- Questions included new, modified and previously used questions with the aim of deriving some measure of comparison or improvement over the last year, and to highlight new services.
- A link to the Survey was sent by broadcast e-mail to existing and recently-expired members,
- 372 responses were received (2015 = 361).

#### **Analysis**

The responses to each of the questions were collated and analyzed to provide recommendations and further actions (n.b. number of responses in () for each question).

## Q1 For which organization do you currently principally work (or study)? (372)

We wanted to identify respondents and any significant changes in stakeholder groupings. Similar to previous years the majority of respondents were OHFT staff (318/86%). There were also responses from the University of Oxford (22/6%) and University of Bedfordshire (7/2%).

'Other' (25/7%) included: NHS England South; Buckinghamshire County Council; Oxford County Council – Public Health; Oxfordshire CCG; OBU; MOD; HEE Thames Valley office, University of Oxford and University of Bedfordshire.

### Q2 Which job title best describes your role? (372)

We want to understand roles of users, to allow provision of more tailored information services.

Responses were received from users across the expected range of potential roles, again in similar proportions to previous years: Nurse, Health Visitor/Midwife (27%/100); Allied Health Professionals (13%/47); Manager, Admin/Clerical (12%/45); Medical/Dental Including GPs (9%/34); Students (6%/23); Clinical psychologists (22%/6); HCA/Support workers (6%/20); Psychotherapists (4%/14); Researcher/Teacher (4%/14); Social worker (2%/7); Estates (1%/2).

'Other' job roles listed included Assistant Practitioner, Activities co-ordinator, Activity support worker, Carer Assessor, CBT Therapist, Chaplain, Child & Adolescent psychotherapist, Clinical Programmes Manager, Clinical academic (psychiatrist), Clinical Teacher, Commissioner with clinical background, Community Nursery Nurse, Data Analyst in Research, Dementia Adviser, Dental Nurse, Fitness instructor, Pharmacy assistant, Public Health Intelligence, Primary mental health development worker, Counselling psychologist, Educator, Research facilitator, Trainee clinical psychologist, Trainee Psychological Wellbeing Practitioner, Research Assistant, Registered Mental Health Nurse, Pharmacy, Complaints & PALS, Improvement and Innovation Facilitator, Paramedic, Resuscitation Office & Nurse, Workforce Development Tutor, Tutor, Vocational Development lead. N.B. A lot of the roles specified under other could be included in the main categories listed.

## Q3: Which libraries do you visit in person, and how often? (266)

As the main library, Warneford remains unsurprisingly the most visited library 190(175). Next is Littlemore 112(106) and Whiteleaf 90 (55). Last year's totals are shown in parenthesis and it is notable that all the figures show an increase indicating a higher level of use for all libraries. N.B. the response 'Never visited' for any particular library has been removed this year. It is assumed that those who skipped the question (106) have not visited the physical libraries.

# Q4: Do you use library resources remotely (for example by e-mail, phone, library website, or post), and how often? (291)

This question is aimed at measuring use and emphasising the availability of library services for remote users and to help overcome some of the misconceptions and perceived barriers to usage of library services, such as distance from libraries and inaccessibility of resources.

Using Library Services Remotely	2015	2016	% increase/
			% total
Access e-resources (databases, journals and e-books)	233	265	17% (91%)
Make enquiries and requests via online forms on the library	156	186	18%(64%)
website			
Request documents or books to be emailed or posted.	154	175	14%(60%)
Request literature searches	138	160	14%(55%)
Find out about information skills training	78	126	21%(44%)
Receive new alerts or evidence updates	NA	161	56%

There continues to be an increase in use of the library remotely for all services though the largest increase is for information skills training. "Accessing e resources" is again the highest usage type.

We removed the 'Never' option but added a new option "Receive new alerts or evidence updates", to measure use and awareness of current awareness, alerting and news services. This was in the middle of the range of use/awareness which is encouraging.

Q5: Which of these electronic resources have you used in the last three months? (301) (327) Q6: Which of the resources above are you likely to consult first?

These questions were designed to find out about respondents' usage and understanding of e resources in order to provide indications about how we might improve services. Some of the changes shown from last year to this may indicate perhaps that users (who may be completing the survey both times) may be learning something from the survey itself i.e. the survey increases use of the key evidence-based sources? Users were invited to indicate all resources used. It is noticeable there were far fewer responses to question 6 than in 2015. Highest usage was again Google which was also the most likely to be consulted first. There were increases in use of Google Scholar and in those likely to consult this resource first. Pubmed, 'NHS Electronic Journals using Athens' and Cochrane also showed an increase in usage. After Google and Google Scholar, the next top three resources used first were Healthcare databases (some specified particular databases), NHS E journals, the Trust Intranet and the NICE evidence portal/search. The SWIMS catalogue, Library Website and Cochrane were least likely to be used first. This indicates further need to promote usage of the Library Website (and perhaps to consult on its structure and content) and the SWIMS catalogue as well as encouraging use of national, regional and locally purchased evidence-based resources. Comments about difficulties using SWIMS may indicate a need to provide more training in use of SWIMS and/or improve underlying SWIMS searching.

9 respondents indicated that their choice of which resource to use first depends on their current circumstances e.g. the research/clinical question they are answering.

	2014-15(301 responses)		2015-16 (327 responses)		sponses)	
Use of electronic resources	%	Usage	Use first	%	Usage	Use First
Google	79	258	130	61	183	27
Google Scholar			20	<mark>44</mark>	<mark>132</mark>	25
Trust intranet	62	203	18	52	156	15
Healthcare databases, eg Medline, EMBASE, PsychINFO, CINAHL	50	163	52	52	155	17
Library website (eg How toguides, finding resources)	15	138	15	16	48	0
Pubmed	37	119	20	<mark>42</mark>	<mark>126</mark>	11
NHS Electronic Journals using Athens	32	104	40	<mark>50</mark>	<mark>150</mark>	15
SWIMS library catalogue	26	84	12	25	74	5
Cochrane (Systematic reviews)	23	74	5	<mark>34</mark>	<mark>101</mark>	2
Other E journals				36	106	7
NICE Evidence/portal search				52	156	18

Q7: Do you currently receive alerts from KnowledgeShare? (321) Yes=80 (28); No=236(293)

Q8: If you don't receive KnowledgeShare alerts currently would you like to know more? (318) Yes= (137) 180; No (Already receive alerts from Knowledgeshare) = 76; No do not want to receive alerts = 105.

Those who wanted to know more were invited to leave their contact details at the end of the survey.

# Q9: How do you rate the overall quality and usefulness of the subject alert(s) that you receive from KnowledgeShare? (93)

- \*\*N.b. 550 users receive the alerts from KnowledgeShare however only 80 of those answering the survey receive the alerts. It may be worth checking if all those signed up are actually receiving alerts? This can be done by requesting a KnowledgeShare report of all those receiving/not receiving alerts if requested but may require a further survey just on current awareness?
  - More answered this question than receive the alerts according to Q 7 responses!
  - 89 (49) thought the alerts are very good/good/adequate
  - 2 thought they are inadequate

Very Good	Good	Adequate	Inadequate
40	40	9	2

Q10: How could the KnowledgeShare emails be improved for you? (34)

The most frequently suggested improvement was that the alerts could be more targeted. Some suggested they might be more specifically aligned to their interests, job role, area of practice eg paediatrics, podiatry. Others mentioned that they often got irrelevant information and suggested that filters/selection might be more developed.

Some however, asked for more frequent emails (perhaps they are not receiving regular emails because of their stated interests so these need amending or use HDAS alerts?).

Some asked for access to specific journals – eg the Australian Journal of Physiotherapy.

There were some helpful comments, in particular those that recognised that they need to advise library staff if their areas of interest change so that they can be updated/amended. In future it is expected that users will be able to log in to amend their own interests.

Others called for links to full text articles and pdf versions of the papers attached to the e-mail. The former suggestion is actually already available where licenses allow – perhaps those concerned however were getting emails without full text links because the articles listed were not subscribed (although the availability/accessibility is indicated next to each article).

Also some encouraging suggestions: "It is hard to see how the excellence of this service could be improved. It is essential to my work", "No need to improve really good service".

### Q11: What do you do with the KnowledgeShare current awareness emails? (88)

- More responses than claim to receive the alerts.
- There were increases in usage in all categories. 2015 totals shown in ()
- The additional option included following a suggestion in last year's survey save to read later scored highly.

Usage	Yes-often	Yes-sometimes	Total
Read/scan the contents	66(21)	18(17)	84 (38)
Forward the subject alert to other colleagues	19(6)	39(20)	58 (26)
Follow the links provided to full text resources	41(8)	34(26)	75 (34)
Request articles from the library	15(5)	32(17)	47 (22)
Save to read later	23	33	56

## Q12: How do you use the KnowledgeShare alerts? (Please tick all that apply.)(86)

- More responders than claim to use the alerts.
- Again there was an increase in usage in all categories. The usage order was similar to 2015.

Use of KnowledgeShare alerts	Total
To keep up to date with developments in your area of interest	82 (39)
To support service delivery	49 (16)
To support service improvements	44 (20)
To support research	37 (14)

## Q13: How do your rate the quality of the resources provided? 294 (305)

Responses showed a high level of satisfaction with all services although there were some notable areas where improvements were suggested. The highest levels of satisfaction were again recorded for 'Range and subject coverage of journals', 'subject coverage and currency of books' and 'Location/accessibility of libraries'.

Key areas of concern included again Study space availability and number/quality (speed) of PCs. Despite the high satisfaction with the location and accessibility of libraries there were 3 comments requesting libraries in Wilts/Bucks/ and "West/North of the county". One person suggested that books might be posted to staff at other sites via internal mail although another person correctly noted that we already provide this service.

In addition there were comments or suggestions for additional resources in particular subject areas and more online journals. There were also 8 requests for improved ease of access to online, full text journals, some describing the difficulties of gaining access and disappointment with lack of full text availability.

Some also suggested that increased promotion is needed to widen awareness of library services "as people don't know how useful you are". Some of the methods suggested we have already tried and continue to use.

Resources	VGood/ Good/ Adequate	Inadequate	Don't know/never used
Library Website	192(199)	2(1)	100(98)
Range and subject coverage of Journals (Print and Electronic)	<b>229</b> (216)	3(7)	62(74)
Subject coverage and currency of Books (Print and Electronic)	<b>208</b> (196)	<b>3</b> (5)	83(87)
Online catalogue (SWIMS)	<b>175</b> (175)	4(0)	<b>115</b> (115)
Location and accessibility of libraries	<b>221</b> (221)	<b>14(</b> 16)	<b>59</b> (57)
Study space availability and number of PCs	179(184)	<b>19</b> (19)	<b>96</b> (97)
Library resource guides and leaflets	<mark>96</mark> (192)	3(5)	100(99)

## **Suggestions for improvements**

**The following suggestions were made ,** the number of those making suggestions is shown at the start of each section:

**#5 Resources:** In specific topics: **Paediatrics, AHP, CAMHS, Technology in health journals, health visiting, public health, child health and well-being, maternal mental health, Oxford Online; more recently published <b>books** eg Telemedicine Journal and e-Health, Journal of Telemedicine & Telecare; Telemedicine Journal and E Health.

#### #8 Easier access to full text Journals

Still can be difficult to access journal articles via OpenAthens - I usually have to try several times and then end up asking the library anyway. It feels as if a lot of the commercial publisher portals such as SpringerLink find ways of making access laborious via OpenAthens and I'm not sure whether I could be doing better with this. I find that in theory I should be able to access an e - journal article but in practice often the links do not work #3 SWIMS – is too confusing, too complicated.

Library physical space/access

**#7: More computers /slow speed of computers** 

**#5 More space/study space** 

#3 Libraries in other areas: Wilts/Bucks/West/North of the county

#5 **Other:** It would be very helpful if there was someone to answer email queries at weekends as this is the time a lot of people are able to study and would really allow precious study time to be more effective.

**#6 Advice to promote services more** e.g. through weekly/monthly emails/open day/visits to teams/ more advertising/reminders with instruction on how to use services/a promotion campaign " as people don't always know how useful you are"

All these suggestions have been noted and assessed by library staff for actions required.

#### Q14: How do you rate the quality of the services provided? 294 (304)

Ratings in several categories were lower than the previous year (shown in ()) which may reflect lack of awareness of the services by respondents as still there were many who do not know about or don't use services listed. Journal club support and literature searching services were both rated more highly than last year and more respondents were aware of these services. This confirms that these services are highly valued by busy Trust staff. Very few people scored services as inadequate and the availability and knowledge of library staff was still rated highest of all services. Comments included appreciation of both the professionalism and customer service standards provided by library staff.

Services	VGood/	In-	Don't
	Good/	adequate	know/
	Adequate		never used
Availability and knowledge of library staff	<b>227</b> (252)	3(0)	64(51)
Document delivery service (books and photocopies)	<b>180</b> (198)	<b>1</b> (0)	<b>113</b> (100)
Information skills training (Literature searching; Critical	136(140)	1(2)	157(152)
appraisal; Endnote)			
Inductions (introductions to library services)	183(200)	<b>3</b> (6)	108(88)
Journal Club Support	<b>79</b> (67)	<b>3</b> (3)	212(219)
Literature search services	173(162)	2(3)	119(126)

### **Selection of comments:**

- Library staff are interested in helping appropriately and finding solutions
- Responsiveness and flexibility of services
- Extremely kind and helpful library staff. Always on the other end of an email and have been wonderful at getting me papers I couldn't find on line. I wouldn't be surviving my thesis without them.
- Only requested search once and was sign posted to NHS Athens to complete own search so have not requested since
- Personal kindness of librarians: excellent, thank-you!
- Staff are very pleasant and helpful
- Very good at providing electronic articles that I have requested but been unable to access. Particularly impressed with how quick this has been.
- Library staff have been incredibly helpful and very knowledgeable when I asked for help with a literature search for a research project

Q15: Has information obtained from the library led you to change or consider changing any aspect of your work which directly or indirectly contributes to improved patient care, enhanced efficiency, or time and resources saved? Please tick all that apply.(266)

A significant number of respondents have continued to use the library to make a difference to their work for the benefit of their patients. The top three changes were the same but changed in order from

2015: **1.** Advice to patients/carers (3); **2.** Research (1) **3.** Choice or treatments/therapies (2). These were followed by 4. Service Delivery; 5. Guideline/pathway development; 6. Audit; 7. Diagnosis; 8. Choice of tests. 64 people have not made or plan to make any changes.

#### Other changes listed included

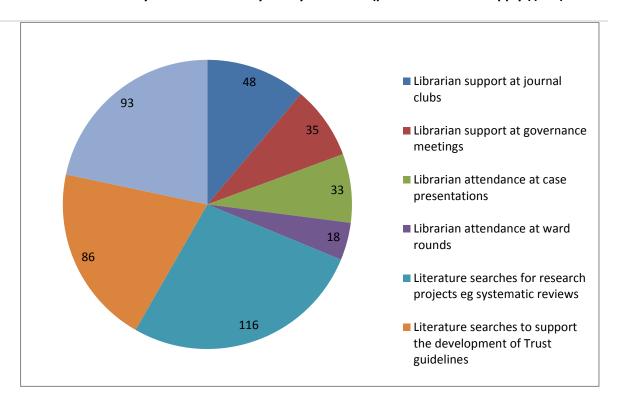
- Teaching, training and supervision for other clinicians
- Within university essays rather than work with clients; via a course at OBU
- Further awareness of current articles/ Essential way to keep oneself informed
- Teaching resources/preparing topics for teaching
- I tend to access information directly from the internet, or sometimes via Athens.
- To provide theoretic framework and understand of conditions/diagnosis that we work with.
- In my current role, this has not led to any changes but the information and guidance updates are most definitely useful for my future career.
- Information is usually for supporting Individual Patient Funding and therefore will affect an individual patient but not necessarily a service.
- In my role this question is not really applicable but I am hoping that in the future if I choose to go in the role that I would be able to put into practice what I have learnt from the library.
- General social work practice
- Not directly but through supporting MSC module and pre reading for courses that will directly relate to patient treatment
- Builds confidence of therapist when gave read about evidence based practice
- A book I used from the library was excellent preparations for an interview I had. It may have helped me obtain a place on clinical psychology training.

Changes	2016	2015	2013
Diagnosis	36(8)	<b>53</b> (7)	<b>37</b> (8)
Choice of treatments/therapies	<mark>90(3)</mark>	<b>103</b> (2)	<b>111</b> (2)
Choice of tests	26(10)	<b>26</b> (9)	<b>28</b> (9)
Advice to patients/carers	105(1)	<b>102</b> (3)	<mark>95 (</mark> 3)
Service delivery	86(4)	<b>87</b> (4)	<b>76</b> (4)
Guideline/pathway development	58(6)	<b>77</b> (5)	<b>56</b> (6)
Research	<mark>100(2)</mark>	<b>108</b> (1)	<b>123</b> (1)
Audit	49(7)	<b>43</b> (8)	<b>39</b> (7)
No, I haven't made or plan to make any changes	64(5)	<b>63</b> (6)	<b>66</b> (5)
Other	31(9)	<b>18</b> (10)	<b>17</b> (10)

Q16 Please describe in the box below the changes you have made or expect to make using library support or information, as identified in Question 15 above. What did/will you do, and how has this benefited patients, staff or the organisation? (84)

See Appendix 1 for responses.

Q17: How could the library work more closely with your team? (please tick all that apply.)(259)



**Librarian Support for teams** 

All suggestions were popular though the highest rated were literature searches to support clinical audit, research and development of trust guidelines.

#### Q18 Are there any other services you would like the library to offer? (31)

Suggestions for further services included:

- Input into staff PDRs to support areas of development
- I am not sure if the library could develop a reading together group for both patients and staff, taking into account the patient involvement agenda which we have to satisfy
- training sessions on how to use services (more in depth than Trust induction), searching and EndNote
- requests for more libraries/delivery of books in other parts of the Trust –Wiltshire, Bicester, Witney/Carterton (extend the book loan service);
- additional resources books, e books (for Kobo, Kindle readers); more technology based journals

Also further compliments!

- I am really very happy with the library service.
- No, the team are superb
- Personally no. However just to say how helpful the library staff are when visited on site.

Q19: Finally, please leave your name and contact details below if you would like to enter the competition in Q16, for a chance to win a £30 Amazon voucher.

103 respondents wished to enter the competition;

There were some excellent answers which demonstrate the range of uses that library information/services support. This made it very difficult to select an overall 'winner' but after much deliberation the following answer was chosen to win the prize of a £30 Amazon voucher:

The literature search carried out by the library informed our service evaluation, leading us to pursue research into delivering Speech and Language therapy via Skype for a paediatric population. Without your support, this literature search would have taken us much longer and we would not have identified this gap in the research as quickly, which enabled us to progress the research. It also taught us the stages of performing a literature search!

Alys.mathers2@oxfordhealth.nhs.uk; Alys Mathers, Speech and Language Therapist, Oakridge Health Centre

Q20 Would you like the library to contact you about KnowledgeShare, working with your team or suggesting a new service? Please indicate below and leave your contact details.

100 people wanted to receive more information on KnowledgeShare, 23 wanted to discuss how librarians could support their team and 5 wanted to suggest a new service.

## Key findings/Further actions.

1. Library use: A high level of use is recorded by respondents for physical library use as well as remote use indicating that the physical study space continues to be highly valued/used whilst the ability to access services at a distance is also important. Further increases in use of online methods to access library services may confirm that promotional activities have increased awareness and usage of all services. Some comments indicate that still there is some lack of awareness around access to services remotely. One suggestion that "it would be very helpful if there was someone to answer email queries at weekends as this is the time a lot of people are able to study and would really allow precious study time to be more effective", is something we cannot offer although other libraries might offer some cover perhaps for part of the weekend.

**Actions**: Continue to promote remote services to further increase awareness. Increase promotional activities using a variety of methods. Update Marketing plan. Find out if other LKS may be able to provide an enquiry service at the weekend.

**2. Evidence-based resources**. Still a high dependency on Google as a first stop for evidence. However there was a comparative increase in use of Google Scholar, an increase in those likely to consult this resource first and other high quality evidence resources also showed an increase in usage. The SWIMS catalogue, Library Website and Cochrane were least likely to be used first.

Actions: Offer information skills training to further clarify issues around quality of evidence in order to encourage more use of better evidence sources. We have developed an e learning module on "Making the most of Google" which we will use to help improve understanding of its limitations and benefits. We will consult on improving the library website and investigate whether training on use of SWIMS needs to be developed and promoted and whether underlying searching in SWIMS might be improved.

3. **KnowledgeShare.** There is a high level of interest in signing up to this service and a high level of satisfaction with the service recorded by current users.

**Action:** Contact all those who expressed an interest in signing up. Further publicise this service to all OHFT staff and stakeholders. Address issues raised such as better targeting of alerts with

the supplier. Check number of users receiving alerts. Email all KnowledgeShare alert users advising them to let us know if they wish to change their interests to improve the service they receive. Carry out a separate survey of current awareness services later in the year?

5. **Quality of / access to resources and services provided.** All services/resources, physical and remote, were rated highly by users but suggestions were again made particularly for improvements to accessibility and study space, requests were made for additional resources and for easier access to online resources. Suggestions to further promote services is supported by response to Q14 which indicates that a relatively high number of respondents are still not aware or have not used key library services.

**Actions:** Although we have invited several library suppliers to suggest better use of space at Whiteleaf Library, we have not been successful in obtaining useful plans for development. We will therefore attempt to create our own plans and obtain quotes for implementation. We will contact ask IT again if they can suggest a systematic, ongoing method to improve the speed of pcs in the libraries

Investigate provision of additional online resources where specifically suggested and invite further suggestions. Investigate issues with online access and work with wider LKS to improve accessibility via Knowledge for Healthcare groups and regional SERC group.

Further promotion of services such as journal club support, literature searching, document supply and information skills training through outreach librarians and via methods such as the intranet, library website, twitter, posters and targeted publicity actions e.g. supporting awareness days, promoting resources in particular subject areas.

6. Library information leading to changes in patient care. Many respondents used library information for this purpose. The top three remained Research; Choice of Treatments/therapies; Advice to patients/carers.

**Actions:** Use responses in posters/presentations to promote use and understanding of how library services can support staff delivering patient care. Develop 2 posters for commercial printing to display in libraries and elsewhere.

**7.** How the library may work with teams/suggestions for new services. All suggestions were rated highly.

**Actions:** Action plan to be developed to plan outreach activities/outreach librarians to contact teams and offer services indicated. Of the additional suggestions, particularly of interest are provide input into staff PDRs to support areas of development and development of a reading group for patients and staff.

# Appendix 1 Library survey competition responses – examples

Please describe ... the changes you have made or expect to make using library support or information. What did/will you do, and how has this benefited patients, staff or the organisation?

The literature search carried out by the library informed our service evaluation, leading us to pursue research into delivering Speech and Language therapy via Skype for a paediatric population. Without your support, this literature search would have taken us much longer and we would not have identified this gap in the research as quickly, which enabled us to progress the research. It also taught us the stages of performing a literature search!

I have worked for the Trust for nearly 27 years. I spent 25 years as a medical secretary and was eventually persuaded to try a secondment of Direct Payment Worker and then did some sessional work as a Carer Assessor. At the end of the secondment as Direct Payment Worker I was then offered a secondment as a Carer Assessor, a secondment that I am still continuing in. I am enjoying this role very much and my manager is keen for me to develop in this role. She introduced me to the library recently and encouraged me to take out a counselling skills book which I am working my way through (slowly as I have a lot of commitments outside of work). Just this one visit to the library has encouraged me to think about further training and I am considering a course at Aylesbury College now.

I have often found that the open plan offices that we have in Oxford Health means that it is difficult to work without interruption sometimes. I often need a quiet and undisturbed environment in order to be able to concentrate on quite complex work, including documents like prescribing guidance, where an error could be very risky. I was not aware of the fantastic services offered by the library until I returned from mat leave two years ago. I was seeking a quiet place to work and came across it- and have been very happy to find the peaceful oasis that means I can work in silence and without any closing/opening time restriction. This has really helped me to work to a high quality standard and optimise my service delivery. In addition the staff at the library (Warneford) are supportive and very helpful. I have highly recommended the library as a place to work to many of my colleagues!!!

While making use of the library resources and help from staff, I was able to find some rare papers that explored some treatment options for treatment resistant schizophrenia. These were discussed in a journal club and case presentation and allowed for a good discussion on a complex case. This would not have been possible without the help of the library staff, and I am very thankful for their help which saved a lot of time.

As a medical student, not many of the decisions that I currently make on a day-to-day basis directly benefit patients, but the library has proved to be an invaluable source of knowledge and information upon which I intend to base my clinical practice. In this way, the library will have guided my clinical judgement and enabled me to make decisions which will benefit, and even save the life of patients in the future.

Help with my literature review for a research project on values-based practice and commissioning for the royal college of psychiatrists. We hope to publish 2 scientific journal articles and report from the college – we hope these will help commissioners, manager and clinicians commission services reflecting what is important to children and young people.

Using resources from the library have allowed me to manage my time better, inspire staff which has led to better staff morale and increased output by staff.

Performing a literature search for dissertation writing was a nightmare before I approached the staff at the library. They helped immediately if and when directly approached, and email correspondence took less than 2 days at the most. Thanks to their help I was able to create an Athens account and have thus been able to successfully access many journals which have not only helped me complete work for my dissertation, but it also created within me a sense of confidence and interest when performing literature searches, having never realised how so many journals are literally just a click away.

I used the library to inform decision making about the change over from less safe to safer sharps. I have used the library services to access information in regards to the personalisation of care. This resulted in a quality improvement project in a district nursing team with very positive results. I will be using it as I further develop a project relating to patient experience across health care

I have used the results of literature searches to shape the curriculum for the PG Diploma in CBT and to inform my teaching on a variety of clinical topics.

Information obtained about mental health has made me understand the barriers to healthcare people face in the community and in prisons

I am currently on secondment as an Assistant Psychologist in an impatient setting. It is a significant change to my previous role and for my own confidence at least, I felt that I needed to be reading more to get some ideas on the direction to take and to help me solve the various obstacles and stumbling blocks that come with therapy and service improvement. Outside of clinical supervision, the information provided by the library, the books that I have read have been one of the most important resources for supporting me in my role. I think the books that I have read and the journal articles I have read online through the SWIMs website have helped me in two significant ways. The way is that they have helped me to better understand my clients and help with the therapeutic relationship that I have tried to foster. I find working with clients with autism or Asperger's to be challenging and requiring a shift in mind-set. I find that I ask better questions and I also find that I don't get as frustrated as I used to from miscommunications. This is something particularly difficult without some guidance and the library has a good selection of books to guide me (something that has been predominantly displayed during autism awareness month). It also allows me to pass on some of this knowledge to other members of my team and hopefully help them in a similar manner. Secondly, the resources have helped me to develop my clinical skills and allow me to read the research behind the therapy that I am trying to employ. This gives me not only greater confidence in the skills I'm using but allows me to consider the story behind the work (the development of the theory and where it may be going). There are some limitations of course but I can't expect to have every question answered and every problem solved. However, I believe that the library's resources give me a good headstart. I can only apologise when some of the books I take out are returned late...

Evidence relating to LSVT (lee Silverman Voice training) training for people with Parkinson's Disease. Intensity of sessions required according to research outcomes has led us to change the way we deliver our in-house version of this therapy using an assistant to offer a higher intensity of sessions over a shorter period of time focusing on one strategy only.

I have used the Oxford library services to help inform my work with people with Functional Gut Disorders. The library services were an integral part of my PG Dip in CBT This has led to improved CBT delivery and continues to inform the development of distance learning programmes for those who cannot attend a specialist centre

Helping CPNs understand the skills they possess for triage, using a literature search provided by the library. CPNs have little-no confidence when triaging when actually they all possess a lot of very key skills and use these well

A broad range of clinical resources and Library staff who are motivated to help clinicians in their clinical task has a significant and regular impact on the aspects of care ticked above.

Through borrowing literature from the library, I extended my knowledge of personality disorders whilst writing a case study on a particular patient. It helped give me confidence on the approach to take with the patient and to encourage reflection with the patient. This has since gone well and she has accessed psychological services as a result.

As a result of receiving information via the library, I developed a new evidence-based patient information leaflet on chronic lung disease and swallowing. This is designed for any patient living with chronic lung disease but as a team we particularly wanted to have a leaflet available for patients with acute problems coming into hospital. This is now ready for piloting and we will ask for patient comments on the leaflet going forward.

I was starting a new psychology group on one of the wards and I had some ideas about content and how to run it based on my experiences from running groups in outpatient settings. However, I used the library to do some reading around running groups on acute inpatient settings which influenced the way that I went on to plan and run the group. This has benefitted patients as they get a highly specialised service that is better tailored for their needs meaning they have more opportunities to work towards recovery. This may also go on to benefit the organisation in terms of possibly contributing to shorter admissions.

Library research has helped me to set up a group for people with dementia as it has given good evidence base for me to provide this. Library searches have helped me to look into patient's diagnoses (or possible diagnoses) in greater detail and to be more confident in what I write in neuropsychological reports

I recently found a number of critical psychiatry books in the library and had an eye-opening experience upon reading them. Critical psychiatry critiques the overemphasis on the medicalisation of human distress and looks at how mental illness diagnoses were invented by academics and as such have poor validity and reliability and little scientific evidence. Reading this work has helped me understand how and why psychiatric medications are largely ineffective and the processes by which pharmaceutical companies are able to sell the myth that psychiatric drugs work. This understanding has encouraged my own efforts to work with our service users' distress in a way that goes beyond the label and stigma of "mental illness" and to fight for an emphasis on non-pharmaceutical interventions such as therapy to help people deal with and express distress.

Both during my social work placement and my ASYE year, the library has (and will continue to be ) an invaluable resource. It provides a space for me to work in, along with a huge amount of evidence based / research material. The library has already helped me in developing my knowledge and skills, which has led to me working in different ways with service users examples include working with delusional ideas and a better understanding of older adults mental health such as diagnosis and treatment. The library has benefited my own learning and in turn this has benefitted the patients I work with.

Currently using the library information while studying a Certificate course in Public Health and have been able to research my coursework effectively using Healthcare databases, intranet and this has enabled to improve my approach in communication to patients. Currently working on a NHS public health intervention to look into ways how to improve the transitional period of patients between adolescence to adult services and a system in place for their settlement period on the inpatient ward where I work. If the proposal could be approved it could be rolled out at the Forensic Services nationally.

Updated latest material for teaching staff about the treatment of patients. Kept aware of related clinical developments in order to broaden my own service delivery. Learnt about new skills for example supervision.

I have introduced Carers involvement in in-house training on Wenric Ward and it is working very well. Identified carers, are regularly invited to facilitate training of staff in an hour time slot, as part of in house training, to discuss their perspective re their relatives illness and recovery. The information or tips acquired from carers, friends and families had enabled the team to formulate personalised care plans which had aided effective recovery.

There is a wide range of impact to my clinical practice. One example is the reading I have done to consider treatment options for grief work with a dementia sufferer and I found a useful simplified model to inform our therapy work. In my neuropsychological assessments I have been able to read the latest guides thanks to the library staff responding to book requests and updating their resources. In work with the brain it is vital to stay uptodate with latest studies as MRI studies are increasing our knowledge rapidly. I am also conducting an audit of group delivery of CST and the library has supported me in accessing research to compare our findings with and inform our evaluation of practice.

The support from the library and the staff has allowed me to successfully pass my minor injury and illness course at Level 7, which I never thought possible.