### 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

## Specific objectives for 2017:

- to identify progress on particular initiatives including usage of resources remotely, KnowledgeShare and other current awareness bulletins, also promoting further awareness and sign up.
- to promote outreach/clinical librarian services.

### Methodology

- A 19 question survey was created using Survey Monkey
   <a href="http://www.surveymonkey.com/">http://www.surveymonkey.com/</a>, which ran from 26<sup>th</sup> April 12<sup>th</sup> May. A prize of £30
   Amazon gift voucher was offered for the best answer to the "impact" question
   (Question 17), 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. An announcement was also added to the intranet and to Yammer after one week.
- 282 responses were received (2016 = 372).

### **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)? (282)

We wanted to identify respondents and any significant changes in stakeholder groupings. Similar to previous years the majority of respondents were OHFT staff (245/86%). This year we offered specific choices for stakeholder organisations and there were responses from all choices: the University of Oxford (2), University of Bedfordshire (3), Oxford Brookes University (5) NHS England South (2), Oxfordshire CCG (4), Buckinghamshire County Council – Public Health – 5, Oxford County Council – Public Health (5), NHS SW&C CSU (2). There were 12 'Other'

responses from the following: a flexible worker/student, HEE Thames Valley, University of Portsmouth, two other NHS Trusts, student social worker, Bucks Mind and Chipping Norton Health Centre.

### Q2 Which job title best describes your role? (282)

We want to understand roles of users, to allow provision of more tailored information services and to identify where targeting of specialist services may be directed to increase usage.

Responses were received from users across the choices of potential roles, again in similar proportions to previous years though it is notable that there were significantly higher numbers of Managerial, Administrative and Clerical responses and lower numbers of students than last year: Nurse, Health Visitor/Midwife (22%/62); Allied Health Professionals (16%/45); Manager, Admin/Clerical (17%/47) (higher); Medical/Dental Including GPs (10%/28); Students (4%/12) (lower); Clinical psychologists (5%/14); HCA/Support workers (5%/15); Psychotherapists (5%/14); Researcher/Teacher (3%/7); Social worker (3%/7); Estates (0).

Other roles (11%/31) listed included Carer Assessor, Clinical Audit/Quality, Clinical Effectiveness manager, Cognitive behavioural therapist, Commissioner, Consultant in Public Health, Counselling psychologist, Data Analyst, Forensic Psychologist, Occupational Therapist, Pharmacist, Physiotherapist, Project Manager, Psychological Wellbeing Practitioner (PWP), Public Health Practitioner, Receptionist/co-ordinator, Research Assistant, Research Support, Retired, HER facilitator, Senior stores assistant, Trainee Clinical Psychologist.

N.B. All the 'other' roles can be included in the main categories listed and would have raised the number of AHPs by 9 and the Managerial...response by 8 with small increases in other categories. This would not have changed the overall response percentages.

### Q3: Which libraries do you visit in person, and how often? (229)

As the main library, Warneford remains unsurprisingly the most visited library 117(190). Next is Littlemore 58(112) and Whiteleaf 56 (90). Last year's totals are shown in parenthesis. It is notable that all the figures show a decrease reflecting the lower number of responses. This year we added the additional option "I use the library service remotely - eg email, library website". This was intended to capture this remote usage as well as raise awareness of the availability of the library remotely. The response was high -145 (67%) of those who responded to this question, indicating a high awareness of remote ways of using the library which is important to ensure library resources can be delivered to dispersed users.

### 4: Which library services and resources do you use remotely, and how often? (243)

This question was changed due to the inclusion in Q3 of the remote use option. (The previous question asked 'Do you use library resources remotely (for example by e-mail, phone, library website, or post), and how often?')

This question aims to gauge use and emphasise the availability of library services for remote users in order 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	2017 (Used/not used)	2016 % total (% change)
Access e-resources (databases, journals and e-books)	<mark>166</mark> /55	<mark>265</mark>
Make enquiries and requests via online forms on the library website	99/98	<mark>186</mark>
Request documents or books to be emailed or posted.	<mark>103</mark> /90	<mark>175</mark>
Request literature searches	107/86	160
Find out about information skills training	43/136	126
Receive new alerts or evidence updates	90/108	161
A librarian visits my team	26/150	

"Accessing e resources" is again the highest usage type but this year the second highest usage was requesting literature searches with the third highest usage again requesting documents or books to be emailed or posted.

We added a new option "A librarian visits my team," to highlight the availability of this outreach service which we are keen to promote to support teams at workbases and in accordance with strategic objectives, supporting Knowledge for Healthcare priorities.

The relatively high level of non-use indicates a need to continue to promote services but also may reflect the increasing pressures on Trust staff which further supports the need for librarian support at workbases and to provide services such as literature searching to save staff time.

Q5: Which of these electronic resources have you used in the last three months? (241) Q6: Which of the resources above are you likely to consult first?(175)

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 use and understanding of quality resources. Highest used was again Google which was also the most likely to be consulted first. There were increases in the percentage of respondents usage in all choices

except for Google Scholar which showed a slight decrease. Google, Healthcare databases, NHS E journals, the NICE evidence portal/search and the Trust Intranet remained the most used resources. There was also significant usage of Cochrane, Pubmed, 'other e journals' and Wikipedia (included for the first time). The SWIMS catalogue and the Library Website were

least likely to be used first although the usage has increased since 2016. This indicates further need to promote usage of the Library Website (and to review its structure and content) and the SWIMS catalogue as well as continuing to encourage use of national, regional and locally purchased evidence-based resources.

7 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 whilst 28 respondents specified the order of resources they would use or listed several resources. A significant number of these included Google as the first choice which indicates that people are using Google to conduct initial broad searches but are aware of the need to back this up by using quality evidence-based resources. It indicates also that it may be useful to further promote the choices available and explain levels of evidence.

There were a few other resources listed including: CSP evidence search, NHS Choices, NHS library, Nursing Journal, Physiotherapy journals on line, RCSLT - wiley online library, Tavistock and Portman library, tend to go to Library team, Text books, Uptodate, UptoDateOnline. We will consider these when making decisions about future purchasing.

optobateonine. We win consider to	2016			2017		
Use of electronic resources	%	Usage	Use First	%	Usage	Use First
Google	61	<mark>183</mark>	<mark>27</mark>	<mark>63</mark>	151	<mark>43*</mark>
Google Scholar	44	132	<mark>25</mark>	40	97	<mark>21</mark>
Trust intranet	52	<mark>156</mark>	15	<mark>53</mark>	128	12
Healthcare databases, eg Medline, EMBASE, PsychINFO, CINAHL	52	<mark>155</mark>	17	<mark>62</mark>	149	14
Library website (eg How toguides, finding resources)	16	48	0	18	43	2
Pubmed	42		11	51	121	10
NHS Electronic Journals using Athens	50	<mark>150</mark>	15	<mark>62</mark>	150	<mark>29</mark>
SWIMS library catalogue	25	74	5	30	73	4
Cochrane (Systematic reviews)	34	101	2	42	101	7
Other E journals	36	106	7	38	91	1
NICE Evidence/portal search	52	<mark>156</mark>	<mark>18</mark>	<mark>55</mark>	133	10
Wikipedia				26	62	1
Other					11	
Suggest a new resource					3	
Depends						7*
Specified order or several listed						<mark>28*</mark>

Q7: Do you currently receive alerts from KnowledgeShare? (230) Yes=77 (80); No=153 (236)

Q8: If you don't receive KnowledgeShare alerts currently would you like to know more? (318) Yes= 90 (137); No (Already receive alerts from Knowledgeshare) = 75(76); No do not want to receive alerts = 65(105).

Those who wanted to know more were invited to leave their email address: 80 responded.

# Q9: How do you rate the overall quality and usefulness of the subject alert(s) that you receive from KnowledgeShare? (84)

- 82 (89) thought the alerts are very good/good/adequate
- Only 2(2) thought they are inadequate

Adequate	Good	Very Good	Inadequate
13	29	40	2

These responses were very similar to last year's. It is encouraging that 92% of respondents are happy with the alerts. Individual feedback from some users via email also supports this level of satisfaction. Last year 550 people were receiving the alerts, this year over 1000 people are receiving the alerts which indicates that many who receive the alerts are not participating in the survey. We should probably run a separate survey just for KnowledgeShare/current awareness to capture more comprehensive feedback.

### Q10: How could the KnowledgeShare emails be improved for you? (83)

Options	Response Count
my role/job has changed/I need to update my interests	18
I need more specific evidence than KnowledgeShare provides	10
I would like to change the frequency of the alerts	5
I cannot access the links provided in KnowledgeShare email	7
the alerts are suitable for me, no changes needed	45
Email address for contact	15
Total	83

Over half of the respondents were happy with the alerts and did not require any changes. 11 respondents left their email address for contact to make changes to interests, frequency of alerts, more specific evidence and access to links. There were nearly twice as many respondents to this question compared to last year which supports the change in question format to choice of pre-selected options rather than free text.

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

- There were very similar levels of usage in all categories as in 2016 (totals shown in ()
- The option Follow the link to the online request form...replaced 'Request articles from the library. This was intended to promote the new online request form.

Usage	Yes-often	Yes-sometimes	Total
Read/scan the contents	68(66)	14(18)	82(84)
Forward the subject alert to other colleagues	22(19)	38(39)	60(58)
Follow the links provided to full text resources	42(41)	38(34)	79(75)
Follow the link to the online request form on the	13(13)	28(32)	41(47)
library website(Request articles from the library)			
Save to read later	28(23)	26(33)	54(56)

Q12: How do you use the KnowledgeShare alerts? (Please tick all that apply.)(92)

• Response totals in all categories were similar to 2016 though support for research was significantly lower.

Use of KnowledgeShare alerts	Total
To keep up to date with developments in your area of interest	83(82)
To support service delivery	48(49)
To support service improvements	44(44)
To support research	28(37)
Other	11(na)

The 'other' option included some interesting and useful responses:

- For CPD for appraisal,
- For our team Journal Club
- I write reflections on things I have read in my eportfolio which is a very important record of my training
- improve patient care
- information for my studies
- my professional development and special interests
- teaching
- to bring to team meetings and discuss with colleagues

Q13: Do you currently access or receive via email the following specialist evidence bulletins or alerts and how do you rate them? If you would like to sign up to receive them please provide your email address where indicated (see them also on the library website). If you do not access any of these and do not wish to sign up please go to Q14.(94)

This was a new question designed to find out about usage of other email bulletins provided by the library and also to raise awareness of these resources and encourage additional users to sign up.

Answer Options	Very good	Good	Adequate	Inadequate	Yes I'd like to sign up	Number receiving bulletins
Primary Care Bulletins	5	9	9	1	37	24
CCG/Commissioning Bulletin	2	11	10	2	39	25
Public Health Bulletin	7	18	8	1	37	34
Education Bulletin	6	9	7	1	32	23
Health Management Bulletin	4	7	9	3	29	23
HDAS Alerts	1	6	5	2	19	14
Email address to sign up to alert(s					51	

For all choices/bulletins most respondents who received them found them to be Adequate, Good or Very Good. It is encouraging that over 50 people wished to sign up to at least one of the alerts.

Q14: How do your rate the quality of the resources provided? 207 (294). Suggestions for improvements (53)

- 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' but this year the Library Website was third highest with and 'Location/accessibility of libraries' 4<sup>th</sup>.
- The highest group of suggestions for improvement related to the quality and amount of physical Library space/Study space availability and the number/quality(speed) of PCs. (21) Tensions around multi-use of the library space are reflected in comments such as 'Enforce silence in the library. Sometimes people are having full blown discussions -so it's hard to concentrate'. There were again comments relating to the quality of the environment at Whiteleaf library 'feels quite crowded, enclosed and too hot' but also at Warneford it can feel very dark and old-fashioned. There were several suggestions for a better facility for reading in more comfortable chairs. Difficulties parking and accessing the library were also mentioned.
- Despite the high satisfaction with the location and accessibility of libraries there were 4 comments requesting libraries in Wilts/South/North ('of the county').
- There were 7 comments or suggestions for additional resources in particular subject areas and more full text journals.
- There were also 14 responses around raising awareness of resources and improving
  access such as librarians visiting teams to explain services available/provide training;
  suggesting improved ease of access to full text journals- some describing the difficulties
  of gaining access and disappointment with lack of full text availability.
- Of the 3 'other' category comments, one interestingly suggested that the library might have a space for service users to use the library. This may be difficult, not least owing to the pressure on space in the library generally but is worth considering seriously in view of the requirement to support patients and the public.

Resources	VGood/ Good/ Adequate	Inadequate	Don't know/never used
Library Website	139(192)	2(2)	66(100)
Range and subject coverage of Journals (Print and Electronic)	<mark>145</mark> (229)	6(3)	56(62)
Subject coverage and currency of Books (Print and Electronic)	140(208)	3(3)	64(83)
Resources to support CPD (CPD online, BMJ Learning)	106	3	98
Online catalogue (SWIMS)	117(175)	2(4)	88(115)
Location and accessibility of libraries	138(221)	11(14)	58(59)
Study space availability (and number of PCs -2016)	109(179)	9(1)	89(96)
Number of PCs	98	13	96
Library resource guides and leaflets	117(96)	1(3)	89(100)

### **Suggestions for improvements**

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

**#7 Resources: Journals:** Wider range /more full text /Occupational therapy/Physiotherapy Journals Books that are not just on mental health

# # 14 Facilitating access to journals/raising awareness/training/info on access to resources & range of Services including e bpooks /easier searching

- Raising awareness could be better like having a subject a month and showing how the library can help to obtain information support for staff who find academic learning a challenge.
- This may be a national issue, but it would be helpful if we knew which e journals etc we can and cannot access.
- Sensitivity of the online catalogue search function to be able to choose if you want to search aword
  or phrase \*anywhere\* in the title, rather than just the start which can sometimes miss relevant results.
- I find OpenAthens hard to use as I have to use trial and error to decide which journal resource to search in this makes it very slow. It is also usual for me to have to give up and email the library enquiries line for a copy of a journal as most access requests are refused via OpenAthens.
- Librarians visiting remote teams to explain services offered. Extended loans for large books.

### #: 21 Library physical space/access. More computers /slow speed of computers /more study space/chairs

- Water drinking facility required (Warneford);
- The environment could be improved/ modernised.
- At the Warneford it can feel very dark and old-fashioned.
- It would help to have adjustable desk chairs when using laptops at library tables (Warneford).
- More guiet study rooms, perhaps turn Littlemore space in to small booths for guiet study/
- More PCs and space to work. I often found I couldn't sit down and it was irritating at times to see others on PCs just looking at facebook.
- It is noted that staff use the library during work hours to do their work and this limits the computers available for library users
- Enforce silence in the library. Sometimes people are having full blown discussions -so it's hard to concentrate
- For Whiteleaf it is the space usually feels quite crowded enclosed and too hot
- A space that is relaxing and conducive to sit and read.
- A space to study and have a cup of coffee/tea and a sandwich, rather than having to go out of the library!
- A couple more chairs just for reading in.
- Parking difficult at Warneford and Littlemore puts me off coming along
- Accessibility of the libraries.

#### # 4 Libraries in other areas: Wilts/South/North of the 'County' (Oxfordshire?)/out of Oxford

### #3 Other

- I have only accessed the Library remotely for journal articles and had training on my work site. However I am now aware from this survey of all the other resources available.
- I found out I could use the BHFT libraries. This has been super helpful but I only found out after a while
- Space for service users to use the Library

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

### Q15: How do you rate the quality of the services provided? 207 (304)

The top 3 services were similar to last year with 'Availability and Knowledge of Library staff as #1 and Document delivery services at #2 However Literature searching replaced Inductions at #3. Only one response rated anything as inadequate and this was for availability and knowledge of library staff. There were still many responses in all categories for 'do not know about or don't use' services which indicates that further promotion and evaluation of services is required.

This year we included the categories, \*Support for CPD, to identify services to support revalidation in particular and \*'Support for Ward Rounds' which we started offering in 2017. The aim is to increase awareness as well as evaluate satisfaction with these services. We also added \*'Evidence review' to literature searching choice to raise awareness of this service. 'Other' comments included appreciation of professional services provided by library staff including advice, literature searching and document supply as well as the availability of

Services	VGood/ Good/ Adequate	In-adequate	Don't know never used
Availability and knowledge of library staff	<mark>169</mark> ( <mark>227</mark> )	1(3)	37(64)
Document delivery service (books and photocopies)	125( <mark>180</mark> )	0(1)	82(113)
Information skills training (Literature searching; Critical appraisal; Endnote)	91(136)	0(1)	116(157)
Inductions (introductions to library services)	113( <mark>183</mark> )	0(3)	94(108)
Journal Club Support	44(79)	0(3)	163(212)
*Evidence review/Literature search services	<mark>116</mark> (173)	0(2)	91(119)
*Support for CPD (revalidation/reflective reading)	51	0	156
*Support for ward rounds	25	0	182

#### **Other Comments:**

bookable study rooms (Warneford).

- I would like to know more about journal club support
- When we have needed articles often at very short notice for funding cases, these have been emailed, where available, speedily and efficiently
- Very good to have study rooms to book for study, small groups etc. Staff always on hand to discuss issues/requests.
- I've used the literature search resource a few times and am always very pleased with the results
- Excellent and responsive assistance in accessing journal articles.
- jigsaw puzzles in the W/ford library corridor: brilliant idea!
- The library staff are excellent. They help in whatever way they can.

Q16: 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. 199(266)

A significant number of respondents stated that using the library has made a difference to their work for the benefit of their patients. The top three changes were the same but changed in order from 2016: 1. Choice or treatments/therapies(3); 2. Advice to patients/carers(2); 3. Research (2). 36 people have not made any changes but 14 respondents plan to make changes

in future. There were 25 'Other' comments, including using information from the library for teaching, study, journal club, to support business cases, advice to CCGs, and some comments that proposed use in future.

Other changes listed included

- Academic work & 1, information for my studies, support for masters
- Articles are used as evidence to support business cases to change/continue with PH 1
- Clinical Effectiveness advises the CCG's on current evidence and 1.
- I have just changed role and I anticipate will be using the library services on a more frequent basis to support my decision making and role development
- Informing in service training teaching
- It hasn't yet but has the potential to do so! I have found the staff to be really helpful and approachable.
- It helped me on a course when I was traveling to Oxford weekly from Wiltshire and I was then able to access this service
- Journal Club

Changes	2017	2016
Diagnosis	25	36(8)
Choice of treatments/therapies	<mark>77</mark> (1)	<mark>90(3)</mark>
Choice of tests	14	26(10)
Advice to patients/carers	<mark>71</mark> (2)	<mark>105(1)</mark>
Service delivery	53	86(4)
Guideline/pathway development	43	58(6)
Research	<mark>70</mark> (3)	<mark>100(2)</mark>
Audit	29	49(7)
No, but I plan/expect to make changes in future	14	na
No, I haven't made or plan to make any changes	36	64(5)
Other	25	31(9)

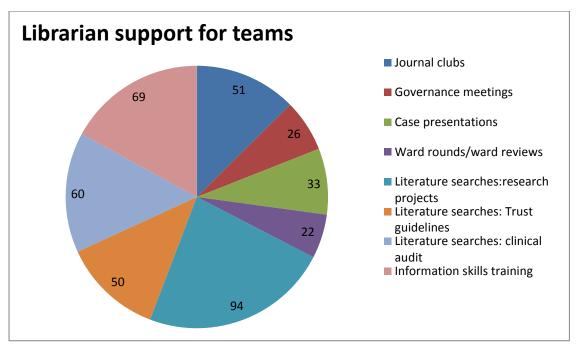
Q17 Please describe in the box below the changes you have made or expect to make using library support or information, as identified in Question 15 above. What did/will you do, and how has this benefited patients, staff or the organisation? (84)

See Appendix 1 for responses.

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:





All suggestions were popular though the highest rated were literature searches to support research projects, information skills training and literature searching to support clinical audit.

# Q19 Would you like the library to contact you about working with your team or a new service? Please leave your email address below.

46 respondents left their emails for contact about the services listed and most were interested in several services.

### **Suggestions for further services included:**

- Is the library resource available (and if yes to what degree) to workers in the Oxfordshire Mental Health Partnership?
- A lot of people are unaware of this service. A librarian present at meetings which require evidence based knowledge would be useful
- Attend team meeting, as a one off, so we can think about what you offer, what we need and how our patients/services could benefit.
- Bring in new research and thinking to support eating disorders team
- I forget to ask. So it is good to have been reminded that this is available.
- Explain services offered to all for increased engagement in library use
- General physical health knowledge for mental health nurses
- I'd be interested in the librarian attending our work stream perinatal mental health special interest group at some point to look at refreshing literature searching for evidence based research
- I'd like some support with using Athens to access online journals
- It may be useful for Librarian to attend one of our team meetings to identify what is available for use by the team
- Librarian support for students on placement to get us confident in evidence-based practice early on.
- Some of this might be great if available to staff in Wiltshire and would raise the profile of the library service to remote staff.
- This is my only observation, actual searches rather than telling me how to do them would really, really help.

### **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. Actions: Continue to promote remote services to further increase awareness. Increase promotional activities using a variety of methods including outreach team activities. Highlight events supported as examples of what can be provided, to encourage further take up.
- **2. Evidence-based resources**. There is 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 and options available in order to encourage more use of better evidence sources. We have developed an elearning module on "Making the most of Google" which we should use to help improve understanding of its limitations and benefits. In addition we will aim to make use of the nationally commissioned elearning modules on training in use of HDAS. We will review and update 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. We will consider subscribing to a discovery service to provide better access to and increase usage of all resources.

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. Continue to work with the supplier to improve alerts for categories/subjects that are not currently well represented. 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 next 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, also evidenced in responses to Q14 and 19, indicates that a relatively high number of respondents are still not aware or have not used key library services. One suggestion, providing space for service users to use the library will be considered carefully in the light of the expectation to support patients and the public with information and knowledge.

**Actions:** Continue to consider re-organisation of the space at Whiteleaf library. In all libraries look into issues highlighted with furniture, study space availability and conflicts around usage of the library. We will pursue the issue of the speed of PCs with IT.

We will investigate provision of additional online resources where specifically suggested and invite further suggestions. **We will also continue to** work with wider LKS to improve accessibility via Knowledge for Healthcare groups and regional SERC group.

We will further promote 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.

We will consider how we might offer service users support whether by providing physical access to premises or otherwise supporting their information needs.

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 and presentations to promote use and understanding of how library services can support staff delivering patient care.

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

**Actions:** Contact all who left their email address and also use the outreach team spreadsheet to contact teams and offer services, with the aim of building a wider user base and increase awareness of these specialist librarian roles.

# **Appendix 1 Library survey competition responses**

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?

I am currently doing my PhD research and I am focusing on the experiences of mental health nurses after a patient dies by suicide. I hope to provide support for nurses and other health and social care professionals after a patient with suicide.

I have been investigating the possible link between dietary intake of histamine/vasoactive amines with a range of symptoms so being able to access papers relating to this has been very useful. I have carried out a service evaluation and have submitted an abstract with the results to BSACI. Am hoping to plan a small research project with the help of one of the research nurses here to investigate further. I have also requested articles relating to specific symptoms e.g. Eosinophilic oesophagitis and migraine which have helped me to understand these in relation to diet better and provide appropriate advice to patients. I really appreciate being able to email the requests and have the papers emailed back to me which saves a lot of time.

I circulate info each month to over 350 health and social care contacts. The evidence of better care for patients is badly needed by these professionals and they value the information to help them make changes.

As a student I was able to consolidate my experiences, trust resources and wider research resources to adapt my understanding and treatment of personality disorders. I was able to utilise this effectively in both practice and an academic assignment due to the good range of materials provided by this service.

Has encouraged me to use new therapy techniques

We have recently worked with a young person with a newly understood and complex disorder, the information we received influenced and supported out work and is leading to further research and papers on the topic to disseminate to others

I haven't yet changed my practice but I intend to following ongoing review of research

Evidence based in service training on scapular position/rhythm and how to treat impairments. Sharing my learning with colleagues.

Assists me on my studies to become a qualified RGN

All of the above, improving and enhanced all care direct and indirectly

Just so grateful for the support and speed of assistance provided in my literature search for an article I am writing, I will ensure I use this valuable resource more in the future - thank you!

Library services were very supportive when I required help for a systematic review I was conducting. They were helpful both with suggestions in terms of literature search and retrieval of appropriate articles. Their service was very accurate and timely. This allowed me to complete the review within a tight deadline. This work is now part of the evidence-base for a quite challenging topic on the treatment of inappropriate sexual behaviour in dementia, where there is not much published around. Since then, I have been contacted several times by other professionals in order to share this knowledge at a number of events in the UK.

I have not made specific changes but I would like to see access for service users.

Would like to see more resources that are currently increasing in interest, ie particularly relating to nutrition/diet and effect on behaviour, so this can directly benefit patient care.

I was recently sent the latest guidelines from NICE; Cerebral palsy in under 25s: assessment and management. This will be an important document used in helping our team revise our Cerebral Palsy Pathway. It will help us to ensure the most up to date and gold standard of care for the children on our caseload with Cerebral Palsy. It will also help our team to focus on what the priorities are for care with this patient group in line with national recommendations. Thank you very much for sending it out so promptly.

The Library is an invaluable resource as it enables us to have access to recent research in order to help draft policy for CCG's.

I am now a nurse prescriber and I used the library support to get me through this course. As I work in palliative care I expect to be able to support patients with their symptom control more effectively by prescribing and obtaining the medication required in a much more timely way. The library even bought a book for me which I found invaluable.

Following a literature search which confirmed there were no national standards local consensus was used to identify audit standards

The training videos enabled me to learn and develop, in my own time and set pace, new manual therapy techniques in treating various musculoskeletal conditions.

I am undertaking training in Interpersonal Psychotherapy (IPT) and the Clinicians Quick and Comprehensive Guide books were invaluable in this process. As a counsellor that doesn't diagnose/label clients, they have helped me sensitively diagnose Mood disorders in a way that benefits the depressed patient. It was great being able to access the key texts including research for the course right at my base (Whiteleaf). It has greatly enhanced my effectiveness as a practitioner.

I received a regular library update which is always thought-provoking but I don't always have time to look at it properly. The update had a link to a podcast about 'polypharmacy' which I was able to watch during a night shift. It was such a lively, well produced and carefully researched resource that I remembered it clearly and was able to put some of the points to practical use the very next day. Medicine is constantly evolving so it is vital to stay up to date which is what these innovative podcasts were all about. I also reflected on my reading and thinking as a result of this new information in my eportfolio which is a vital aspect of my training. The best thing about it was that I felt empowered in my role as a GP trainee. I love visiting the library and feel we are very lucky to have a staff library at the Whiteleaf Centre. It shows how the Trust values its staff and their continuing learning development.

One of our patients was finding it difficult to make a decision regarding treatment options. I requested my extremely helpful local librarian to perform a literature search. The results of the search were shared with the patient, who was able to make an informed decision based on evidence.

If there is instant information professionalism will be adequate

When writing my dissertation while working for the trust I used information provided by the trust website, intranet, NICE guidelines to support my work. This has led me to further develop my communication with relatives/carers to help ease their burdens and expectations with regards to care.

I have used information from the library to determine what would be the most appropriate therapy to use with patients. I have then gone ahead and used this. For example: CBT for OCD. I have also used library information in an audit on self harm admissions for adolescents. This lead to changes in service delivery.

It is very interesting to find and read books and resources in the library that I can then recommend to my patients, e.g the "Overcoming" series etc. I have also accessed useful material that helped me for my MRCPSych exams and used the facilities for stimulating study groups

Use of Therapy Outcome Measures to be implemented by the Team as a result of being able to access and recommend the book

Asthma awareness sessions have improved through the lastest research led articles.

Using research to guide the way we develop and deliver individual intervention

I have been more able to keep up to date with my awareness of new research, even if I have not read all of the papers. The library has also been supportive with providing books which have helped my CPD re: different models of therapy. Finally, I will be letting my team know that you provide support with Journal Club ... however, it would be useful to know that form this would take.

Unfortunately the one book that I have borrowed was loaned from a different library and then sent by post to me. I was unable to read the 2inch thick book in the week that I had it for so I was unable to use the book to its full potential. Longer loan terms would have been very beneficial.

I have become much better at explaining both to team members and to patients the specific SLT role for patients with tracheostomies - because I am clearer in my own mind as to the up to date evidence on what we can offer.

Using the library and the journals and books they provide has enabled me to look at the way of the delivery of the service I provide for service user and to understand their expectations. I understand that sometimes it can be difficult to work with different professionals and service users but research and the different resources and literatures can holistically educate professionals around the difficulties that there can be in all aspects of service delivery from dealing with non-engaging service users to using other methods of communications. I would like to support the different clinicians in the team to unable them to look at books, literatures and all resources that are beneficial in regards to enabling a better a service delivery and as it is a high importance factor and is our primary duty of care towards the service users. And it is my understanding that if the resources are more advertised for professionals they can explore different approaches to help support engagement and service delivery of various different service users from all different aspects.

Unfortunately, I have made very little use of the library for years. Despite being university-educated, I derive little value from my existing knowledge, and instead need to do a lot of informal ad-hoc learning on a more or less daily basis, just to keep up with ongoing change in my area of work (ward clerk). This, and the fact that I am over 65 and the NHS is generally rather chaotic and unpredictable, means that it rarely occurs to me to think strategically, or to seek formal learning outside of the area of mandatory training. The people I know who do use library services regularly (and rate it highly) are all doing formal studies for further qualifications.

Libraries and the services they provide are like sunken Galleons full of marvellous treasures if only we knew how to fully access their wonders. I would like to invite a representative to come and talk to the whole team Approx 100 staff to share the wonders of what they can offer us and help support us to further develop Evidence Based Clinical Pathways

I use Oxford Health Libraries' online access to journal articles. As a Trainee Clinical Psychologist, this helps me, academically, to ensure that I am up to date with the emerging evidence-base and, clinically, to ensure that I am choosing those therapies that are most likely to help the clients I see.

Resources from the library have allowed me to widen my knowledge base and skill set to tailor interventions for some of my patients more meticulously to meet their specific, unique needs.

The library has made me an up to date practitioner. It has helped with my practice.

Library searches have supported my research when planning and writing a recent paper on national prescribing for ADHD, ensured my lectures for the MRCPsych course on Tourette's and ADHD were up to date and enabled me to plan research into develoing teaching and mentoring within the Trust. Hooray for the library! You are always thoughtful, helpful and provide what I need and in the current NHS which is more and more stretched that is a rare and precious thing.

Improve practice through knowledge of theory or research from other sources

I am currently seconded to my role, however would very much like this role to be made permanent. I would access the library more if my role is made permanent which would then enable me to be eligible in the training that I would like to do in my role.

I have changed and ameliorated my practise on the prescription of medicines during pregnancy

The info I accessed during my course and via the librarians enabled me to pass my course in non medical prescribing.

I really struggle sometimes to best appraise all of the information out there. There is lots you can get from Google Scholar and sometimes I admit I use this as it is quick. However when I have used the library service at least I know I am getting approved clinical evidence. I struggle sometimes because of time and therefore having library staff available is really helpful

As a psychologist/psychotherapist the work I do is enhanced by my knowledge and understanding of different models of therapy and recent evidence based interventions. I have been able to choose to deliver different therapeutic approaches as i have had access to materials and books that has deepened my knowledge and understanding of practices and techniques.

We are contracted by the CCG to provide a countywide service. the information that I have received from knowledge share has been at times invaluable in scoping the service delivery and strategic planning for the future.

Increased effectiveness of intervention for an elderly patient with severe scoliosis

I used the library when studying for my AMHP training and this service assisted me in finding material. Staff were excellent in helping me and getting resources renewing books and without the support from staff my stress levels would of been even worse. So thank you!!

I recently read a paper on perfectionism and also one on empathy. They found that perfectionism in clinicians is negatively correlated with positive patient outcomes. They also found that high levels of empathy is correlated with lower burnout in clinicians. As a result I am striving to be less perfectionistic and spending time working on my empathy! Hopefully this will benefit patients and me too!

We have used the library resources to enable our team to run a journal club, which has meant that as clinicians we are keeping our CPD portfolios up to date, and also we are ensuring our patients receive better therapy by making sure we are up to date with the latest evidence. I also intend to use the library resources for my own career progression, from junior to senior occupational therapist.

Used for literature review as part of PhD research project. The project aims to identify factors influencing mothers to expect antibiotics for their children. A great understanding of these factors will hopefully enable healthcare professionals to provide interventions and strategies to improve prescribing compliance

The library has accessed two books, had a chapter scanned for me from a very heavy book, too expensive to send from Truro and conducted a literature review on self harm and spirituality and religion. I work in team, assessing people who have self harmed and present to the Emergency department. The work can be very draining on staff. With the information provided I am working with staff to develop a holistic approach to self harm, to enable them not to feel stressed and burnt out when working with this group of people. The information will also inform a Seminar, within the Academic Health Sciences Network, with the goal of improving and developing integrated care for the people of Oxfordshire.

Articles are used as evidence to support business cases to change/continue with PH service delivery