



## Health Libraries Group Newsletter

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Volume 36, Number 1, Spring 2019  
ISSN 02666-853X

### Editorial

#### **Hello and welcome to the Spring 2019 edition of the HLG newsletter!**

We have some great content in this edition, including shared learning from a Knowledge Café event, a practical rundown of editing a book (plus a review of the book!) and highlights from the Topol Review that are relevant to all of us working in information and knowledge environments. In addition, there are reflections from a repository consultation for NHS Ambulance Services in England, some adventures of a library mascot as educational board games are explored, and a fantastic report from Royal United Hospitals, Bath on how they are providing audiobooks for dementia patients in their hospital.

Along with these articles, we have our usual event reports, book reviews featuring new Facet titles, our diary of events and internet sites of interest relating to bacteria and bacteriology. Hope you find this edition useful and enjoy reading.

As always, we welcome features for the newsletter – just get in touch. Our contact details are at the end of the newsletter.

Joel Kerry & Rachel Gledhill  
Newsletter Editorial Team



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## Inter-site communication: Reflections on our 'Knowvember' Knowledge Café

As part of the 'Knowvember 2018' knowledge management initiative held during November 2018 and following on from attendance by members of the UHB Library team in September at the Leicester 'Knowvember' 2018 conference, it was decided that a knowledge café would be held before the Library team meeting on 14th November 2018. After consultation with the team, the subject chosen for the Knowledge café was **Inter-site communication**. This short reflective piece will offer an overview of the process and the impact, both short and long-term, on communication within the UHB Library team.

University Hospitals Birmingham NHS Foundation Trust (UHB) and Heart of England NHS Foundation Trust (HEFT) were officially merged in April 2018. This created one of the largest NHS trusts in England, employing more than 20,000 members of staff and treating over 2.2 million patients each year, with more than 2,700 beds across its combined sites. The new trust retained the name University Hospitals Birmingham NHS Foundation Trust.

There were two respective library and knowledge services to be merged and although there has been progress in merging some procedures and resources, this is still an ongoing process at the time of writing.

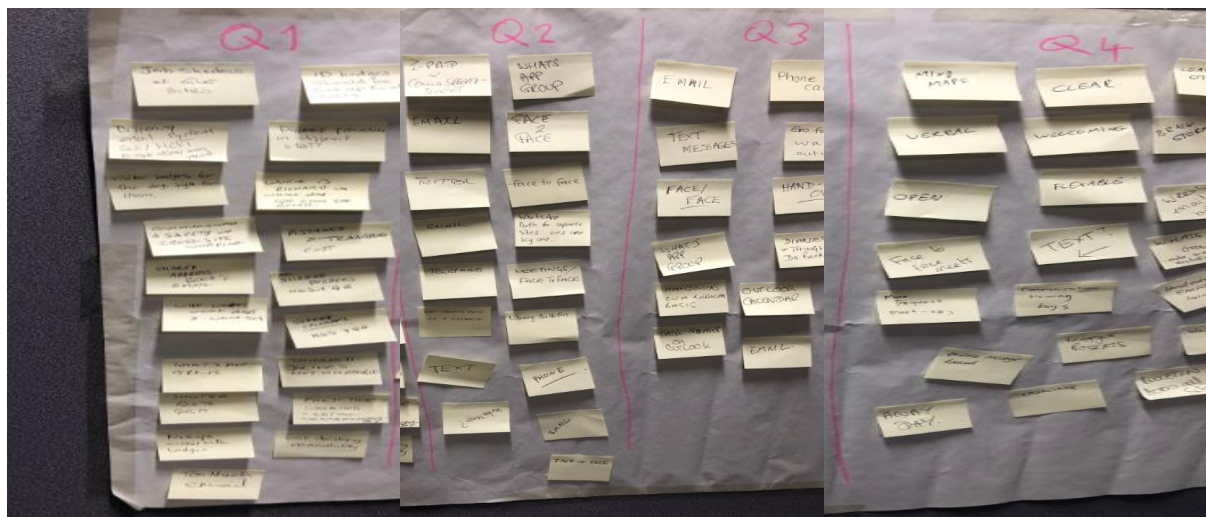


UHB's service is confined to one site, the Queen Elizabeth Hospital, Edgbaston. The team there is managed by the site Library Manager. HEFT's service maintained three service points covering the three main hospital sites; Heartlands, Good Hope and Solihull (HGS). HGS's Library team is traditionally managed by the Knowledge Manager. After the merger, this staffing structure still remains in place with the Knowledge Manager assuming overall management of the Queen Elizabeth site as well, although the Site Manager there is involved with day to day management of staff and service. There are now a total of 16 members of staff across the four sites.

After the initial merger period and as working processes between the four sites settled down, it was decided to initiate a Knowledge Café after drawing inspiration from the

event mentioned above. The same event saw the taking of a 'pledge' to organise a Knowvember 18 event in the workplace. After some discussion and with the notion of drawing the four sites together to improve working practices, the subject of inter-site communication was chosen.

The premise was simple, in keeping with the informal approach suggested by colleagues who had held knowledge café's previously; the Library team were gathered in the meeting room with four questions connected with inter-site communication. The team were asked to move around four tables on which there was each a question centred on communication. Colleagues were encouraged to discuss in groups and to write answers/comments/thoughts regarding each question on post-it notes. It was thought important that no same four individuals sat at each table when moving onto the next question; this was thought to encourage more diverse discussion and to encourage colleagues from HGS and UHB to network together to gain cross-site opinion on each question.



The post-it notes were gathered-up between table moves and arranged accordingly under each question. A short feedback session was undertaken to discuss comments received and if the session was useful.

From analysis of the post-it notes, the problems and scenarios associated with cross-site communication were identified in figure 1. Potential solutions were identified in figure 2:



Figure 1. Problems with communication identified during the Café.

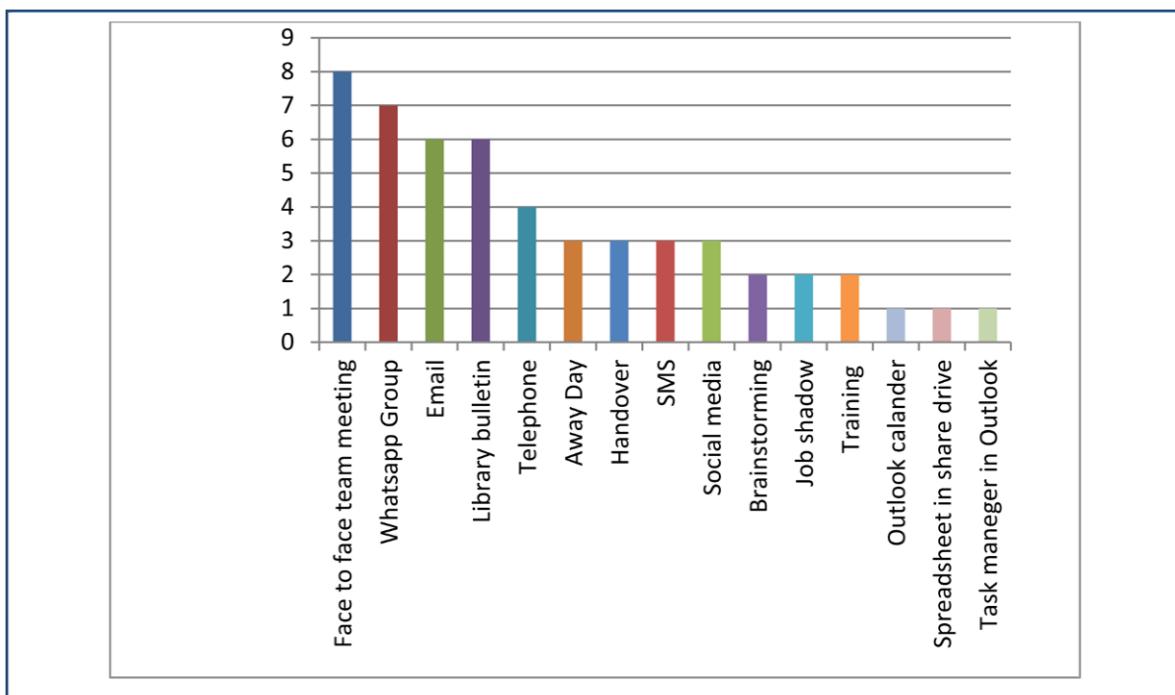


Figure 2. Feasible solutions.

- **Initial impact and action taken**

The first immediate action taken was the creation of a UHB Libraries **WhatsApp** group with all staff agreeing to sign on for the group. Although created as a more informal discussion platform to communicate everyday concerns and messages, it is envisaged that the group may employ WhatsApp to inform future working procedures cross-site. Another result of the Café was the decision by the Knowledge Manager to organise a **staff Away Day** in January 2019. Again, it is envisaged that the Knowledge Café format will be employed at some point during the day.

The Knowledge Manager also suggested a Task & Finish group to take forward the idea of a future **Library Bulletin**. This will be further discussed at the Away Day.

The overall experience of the café itself turned out to be very positive and pleasant. Staff shared ideas and views to learn from each other in an informal setting. Open discussion was encouraged and on some occasions it was difficult to end conversations before staff were asked to move to the next table and question. Some colleagues had never met before the Café, which further helped team bonding.

Inter-site communication is an important element in the efficient running of a multi-site service. It is believed the Knowledge Café has contributed enormously to this and further Café's will definitely be held in the future to help the UHB Library team deliver a more effective and timely service to Trust colleagues.

**Semanti Chakroborty (Associate Librarian), Emily Johnson (Librarian), and Phil O'Reilly (Librarian)**

University Hospitals Birmingham NHS Foundation Trust



## Audiobooks for Dementia Patients

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After a patient story was presented to the Royal United Hospital Trust Board in May 2017; the need was highlighted for activities to help keep patients with dementia stimulated and engaged during their time in hospital. Audiobooks were suggested as a useful tool to help alleviate the boredom of being in hospital, and potentially help with some behavioural issues associated with dementia. The Academy Library was contacted to see if this was something we could look into.

The innovative idea that we have developed is a project providing the opportunity for patients with dementia to borrow a dementia friendly audioplayer during their stay on our wards. Preloaded with audiobooks and or radio / TV programmes, the audioplayers can keep the patients stimulated and engaged, providing focus, and relieving some of the boredom of being in hospital. All of this is possible with minimal staff input. Our dementia co-ordinators and ward staff identify patients for whom audiobooks could be helpful. The dementia volunteers then assist the patients in using the audioplayers where required.

In March 2018 we applied to our Innovation panel for £1600 funding. The proposal was to purchase 10 dementia friendly Simple Music Players which can have audiobooks preloaded by library staff. A subscription was needed to an audiobook downloading service. Earphones were also purchased. In addition to the audiobook subscription service there are also thousands of audiobooks available to download freely as they are now out of copyright.



- **The process**

When a request for an audiobook comes into the library – usually from one of the Dementia Coordinators or a member of ward staff – we spend some time finding out about the patient's needs, and what kind of listening material they might enjoy.

We then search through the online Listening Books library to find an appropriate choice. We can search by genre, author, subject and audience, and choose from thousands of titles. The title(s) are downloaded onto the audioplayer.

The audioplayer and headphones are then taken to the ward. Here we demonstrate how the player works to either the patient, their family or a member of staff, depending on which is most appropriate. The patient can request another book at any point, and can keep the audioplayer for as long as they like. After about a week,

we will usually phone the ward to check on the patient's progress, and enquire as to whether they would like any more listening material. When they have finished with the player, or when they leave the ward, we collect the player and headphones and gather feedback.

- **Progress so far**

The project has been running since July 2018. Usage has been good following a soft launch. This approach was taken to help iron out any unforeseen issues. We expected to lose headphones and possibly the odd Simple Music Player, but surprisingly we have actually lost a number of power cables; we think this may be due to their resemblance to phone chargers. In September we publicised the project further through our Trust monthly newspaper and usage has continued to increase.

- **THE FUTURE...**

As this project has progressed, we have inevitably come across a few problems that need resolving. One of the biggest issues has been ensuring that the players, headphones and power cables are all returned. Despite clear labelling and instructions, a few pieces of equipment have gone missing. Because each patient is cared for by more than one staff member, it is quite hard to ensure messages are passed on and communicated between staff. However, we are confident this will improve over time: as we get more requests for audioplayers, staff on the wards will become more familiar with the equipment and loan process.

Although we started this project with a focus on dementia patients, we have had interest from a range of patients on different wards. This is very encouraging, and we can foresee the audioplayers being used and enjoyed by many different patients, not just those with dementia.

**Jason Ovens, Head of Library & Knowledge Services**

Academy Library, Royal United Hospitals Bath



## Systematic Searching: practical ideas for editing a book

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- **A Parcel...**

It's early January and there's a parcel waiting in my office. *Christmas is past so it can't be a present*. No, it's even better than that, it's the first copy of our book "**Systematic searching: practical ideas for improving results**"! We have only ever seen it on the screen before and now it's here, an actual book, published by Facet and available to everyone! It has taken just over 2 years to get to this point so how did we do it and what tips can we share with any aspiring authors?

- **Commissioning**

Jenny had published books with Facet before and had an idea of what would be involved. Paul, on the other hand, had no idea what he was about to let himself in for. The Commissioning Editor got in touch with Jenny in the autumn of 2016 and suggested it might be time for her to consider another publication with Facet. The first tentative ideas began to form when Paul and Jenny found themselves with some time to fill on a delayed train from Manchester to Warwick.

There were two immediate questions: what would the book cover and who would write it? We both spend a lot of our working lives doing the searches to support systematic reviews and we knew there were a lot of exciting developments in this area. Guides to systematic searching were already plentiful but there was a gap. There were lots of technical articles about the new methods and technologies but they were not in a format accessible to information specialists. We were in contact with many of the experts leading these changes through our various networks. The two issues came together nicely: the book would be aimed at information specialists and librarians but it would be an edited collection so we could collate the latest thinking on systematic searching.

- **Contributors**

Once we had the provisional 'go ahead' from Facet, the next stage was the most daunting one: **contacting the potential contributors**. It was obviously crucial to get the right people on board: no contributors, no book! We sent out a few exploratory emails to the people we knew the best to gauge their reaction. We weren't sure how people might reply when they opened an email asking them if they wouldn't mind writing a chapter of 5000 words on a topic we had chosen for them. We were pleased with the responses, especially as they all agreed that the book was a good idea.

There is a well-established process for submitting book proposals to Facet. It's not as daunting as it sounds and we worked closely with Facet to shape the contents of the book. Facet encouraged us to think big and to aim for an international audience rather than concentrating on where we work in the UK and the NHS in particular.

We didn't do too badly on this score. There were 22 contributors and 15 were from the UK, 3 from Germany, 2 from the US, 1 from Canada and 1 from Australia. Admittedly, 6 were from the North West of England and 3 from Yorkshire!

- **Planning the chapters**

One challenge we faced was that several of our contributors could have written the same chapter because they were all acknowledged experts in the field. It was tricky to balance some of the requests but it was beneficial in the long run. We asked some of the contributors to write on topics that they had not really written about before. This encouraged them to do some creative thinking and develop more innovative content. As one of our chapter authors said recently, "I wasn't sure at the beginning if I could make a valuable contribution on this topic, but I am happy with the results".

We were conscious that this had to be a book that would appeal to information specialists and librarians, one that we would enjoy reading ourselves. For example, we wanted a guide to how we could use text mining in our work and we didn't want a technical explanation of the computer programming, linguistics and mathematics that are used in this technology. It was quite nerve wracking at first asking professors and people with well-established reputations if they would write about what we wanted them to cover and in a way that we wanted them to do it. All of our contributors were really accommodating and the best part of the project was getting to work with such a great group of people.

- **The early drafts**

We had a confirmed list of contributors and chapters by the summer of 2017. We then worked up in detail what we wanted from each chapter and devised an outline structure to lend some consistency to the content. We staggered the deadlines so that we would receive the chapters in batches, rather than having to contend with them all at once. This enabled us to accommodate the contributors' schedules as far as possible, for example fitting around university semesters.

There was an exciting moment in December 2017 when we received the first batch of chapters and the editing process became a reality. We received the first drafts over the next months, until we had a full set by April 2018. It was really interesting to see the varying approaches taken, with some early submissions close to a final product and others more of an outline sketching out what was to follow.

We tried to feedback to the authors in different ways, according to their preferences. A lot of chapters were edited in Word but one was done entirely in Google Docs. One of the chapters was edited by having a good chat with the author over a coffee, although this was nearly scuppered by the infamous Beast from the East snow storm (blizzards were not in the Facet guide to the editing process). All of our authors were able to turn around a second draft within a few months of receiving our initial comments.

- **Cohesion**

It was a great moment when we had completed versions of the chapters. They had been written and edited over the previous 6 months so the connections between them were not always obvious. It was important to allow the contributors to speak with their own voice but it would be difficult for readers if the chapters contradicted each other, were structured completely differently or used inconsistent terminology. There was quite a lot of work at this stage going back and forth with the authors to check they were happy with the tweaks we were making or the paragraphs we thought should be inserted.

The breakthrough came in July when we spent an entire day organising the book. We looked at the different ways of ordering the contents, ironed out any clashes between different chapters and settled on the terminology we would use. The door wasn't locked but we both knew we couldn't leave until we'd cracked it!

We wrote the Introduction ourselves and it was an important way of tying together the various themes we had identified. It was clear that new methods were being facilitated by new technology in the first two sections of the book. But who is implementing these changes? The third section, on the theme of "People", makes a strong case for the role of the expert searcher, covering the importance of training, collaboration and communication. This was the message we wanted to convey: new methods and technology will only succeed if the right people are implementing them and that's why information specialists have a key role to play.

- **Technical editing**

The autumn was spent doing the technical aspects of the editing process. Once we were happy with the contents we submitted the manuscript to Facet. The copyeditor then got to work checking that we had followed the Facet style guide, clarifying the text and generally helping to make it more readable. Once we'd answered the copyeditor's queries, the text was sent for typesetting. This was another milestone as it was the first time the manuscript looked like a book rather than a very long Word document. Once we were happy with the text and the layout, it was sent to a proof reader. We also decided to use the services of a professional indexer as we knew this required specialist skills.

The final proof read involved a lot of late-night checking of references. It's amazing what you can miss the first 5 times you've read a chapter! The low point for Paul came when he was accused of cheating in a pub quiz for checking his phone, when, in reality, he had suddenly remembered he needed to update one last reference the night before the file was due at the printers (he could name 7 European countries beginning with the letter 'S' anyway).

- **The book...**

And so here we were with an opened parcel and our own book, in our hands. We had gone from some tentative discussions in 2016, to the first chapters in 2017 and editing throughout 2018, to receiving the first copies hot off the press in January 2019. It's perhaps too early to say if we would do it again but it's been really worthwhile and we would encourage anyone with a good idea to give it some serious thought.

- **Paul and Jenny's tips for editing a book**

**Do**

1. Give it a go – you've always thought there should be handy guide to being a clinical librarian so be the one to kick start the project.
2. Try and get support from your organisation - Paul and Jenny did most of the work in their own time but they were allowed some 'study leave' from work as well.
3. Get in touch with Facet – they'll be happy to talk you through the process.
4. Give clear instructions to the authors – make sure they know what you want, how you want it and when you need it.
5. Be realistic about what you can cover – our book has 13 chapters but we had ideas for another 20!

**Don't**

1. Expect to complete it quickly – our project took over 2 years and that was relatively quick.
2. Be afraid to ask – most people will be really pleased that you've asked them to contribute and even if they say no they might recommend a colleague.
3. Be reticent about editing the text – the authors have only seen their own chapter, you have seen all of the content and know how it all fits together.
4. Leave formatting the references until the very end – it takes longer that you think, even if you're a librarian!
5. Give up – it will all come together in the end

**Paul Levay and Jenny Craven, Information Specialists**

National Institute for Health and Care Excellence (NICE)

## Northern Health LKS Library Assistants Study Day - A Customer Experience Workshop

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I recently attended the customer experience workshop, organised by the Health Care Libraries Unit and aimed at Library Assistants and other paraprofessional library staff. Our trainer for the day was Claire Bradshaw, who had run the workshop twice previously, to accommodate the large number of interested attendees across the North. This workshop took place at The Principal Hotel, York. (A fantastic venue, I must say!)

We started the day by introducing ourselves to one another, which was a great opportunity for me to put faces to the names of colleagues who I've found myself emailing regularly. We were also asked to think of one thing we wanted to take away from the session as a measure of success and share with the group. I hoped to take away new innovations or ideas to improve my own customer service skills, and also the customer service we offer as a health library service.

As a group, we discussed what happens when library customers are dissatisfied and agreed three likely outcomes could be; they might complain, stop using the service or seek to source information themselves. We also discussed the implications of any of these actions taking place which may include; funding cuts, changes to staffing levels and potentially may lead to patient care being affected if the information sought by the user isn't evidence-based.

We then split into smaller groups for an activity. Half of us were asked to discuss a time when we had received good customer service, whilst the others were asked to discuss a time when they had received bad customer service. When we shared our discussions as a wider group, it was clear that it is much easier to recall examples of bad customer service than it is to recall examples of good customer service. This was echoed with one of the customer service facts that Claire shared with us; *"it takes 12 positive experiences to make up for one bad one"*.

For the next activity, we were each asked to take one piece of promotional material currently used within our service and think about what values and behaviours this communicates to our customers. I decided to look at our 'using the library' guide. I identified areas of the guide which worked particularly well, such as the full list of services allowing our library users to understand what they can expect from our service. I also thought about ways in which this guide might be improved. For example, could we convey the message in a more concise way? This is now something I plan on looking at in more detail and I will discuss this with my colleagues in our next team meeting.

After breaking for lunch (salad, fish and a little bit too much cake), it was time to find out more about listening. Claire introduced us to the four different levels of listening, which are:

- Cosmetic listening
- Conversational listening
- Active listening
- Deep listening

As a group, we agreed that in order to deliver good customer service, we should mainly be aiming to use active listening methods, which include the use of other non-verbal signals to show the speaker that you are listening (for example nodding). It was acknowledged there may be barriers to active listening, such as noise disruption. However, we worked to identify potential solutions to the barriers we may come across.

Claire then spoke to us about 'blocking language' and provided some examples of what this might be, one of which was 'that's not my job'. In small teams we were asked to come up with an alternative to the sentences, in a more customer service friendly way, which Claire called the 'can-can attitude.'

After finishing the activity Claire shared suggestions of other words/phrases we should avoid saying, for example apologising when an apology isn't necessary. Instead Claire suggested that we should try and turn negatives into positives, like saying 'thank you for your patience' rather than 'apologies for the delay'.

As the day drew to a close, we took some time to think about the actions we were going to take away from the day. I gave myself two actions; look at revising our 'using the library guide' and stop apologising when an apology isn't necessary. I also wanted to take away what I'd learnt and share with the wider network, and what better way than writing for the HLG newsletter?

**Natasha Craigs, Library Assistant**

Mid Yorkshire Hospitals NHS Trust



## Repository Consultation for NHS Ambulance Services in England

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A number of colleagues asked if LKS ASE could share the results of the consultation on implementing a repository solution for ambulance services in England. The full report is available on the library website <https://ambulance.libguides.com> This is a summary of the main points.

The consultation ran from January 07 to February 01. Interested parties were asked to respond to a Consultation Paper and brief questionnaire. A request for comment was sent out on behalf of the LKS ASE Steering Group through Health Education England [HEE] and LKS ASE networks. 21 responses were received with 4 additional written responses.

The results are of course specific to ambulance services but in the light of the [Topol Review](#) they may have a wider resonance, in particular “*The NHS should strengthen systems to disseminate lessons from early adoption and share examples of effective, evidence-based technological change programmes (OD6).*”

The specific conclusions of the consultation were that:

- there is interest in a repository solution beyond English NHS ambulance services. Related areas of research (Urgent and Emergency Care), professional groups (Allied Health Professionals) and other areas of the NHS (Wales and Scotland) have expressed an interest in the outcome of this project.
- there is support for the aims of the repository project. Some respondents note that achieving these are dependent on successful engagement with potential users.
- there is support for including refereed or peer reviewed outputs in any repository. There is less support for including other forms of publication such as before peer review (Preprints) or where publications are subjected to editorial review (Book Chapters).
- there was qualified support for including teaching and learning materials. Issues identified include the variable quality of materials and conflicts generated by different clinical practices across English ambulance services.
- support from research committees to deposit with the repository is accepted. There was qualified support for more prescriptive measures to leverage participation in the repository.

- There is interest in including best practice protocols and guidelines being developed through national programmes, the *Carter Review* and the *Ambulance Improvement Programme* work streams.

Clearly, it would be wrong to generalise from such a small sample. However, with that caution the following points could be made:

- there was a much wider interest in the research repository and its applications than anticipated in the original proposal. One of the benefits of a consultation was to reach out to a wider community of possible stakeholders for the repository project.
- there was encouraging support for the proposed benefits of a research repository. These included *dissemination*, *collaboration* and *research into practice*, ideas reflected in the new knowledge management agenda. In the questionnaire these were presented as ...
  1. Encourage faster dissemination of research
  2. Facilitate collaboration
  3. Map the research landscape
  4. Help identify gaps in research
  5. Enable the translation of research into practice
- there was a preference among potential users for including only peer-reviewed publications and a resistance to including non-peer reviewed material. Going forward there will be challenges in extending the repository beyond published peer-reviewed content. This will require further education and awareness raising to make the case for any developments in this area.

**Matt Holland, Librarian**  
LKS ASE

## Preparing the healthcare workforce to deliver the digital future

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The final report of the Topol Review, published in February 2019, makes for an exciting read, illuminating just how different healthcare is going to be in the future.<sup>1</sup>

“We are at a unique juncture in the history of medicine, with the convergence of genomics, biosensors, the electronic patient record and smartphone apps, all superimposed on a digital infrastructure, with artificial intelligence to make sense of the overwhelming amount of data created. This remarkably powerful set of information technologies provides the capacity to understand, from a medical standpoint, the uniqueness of each individual – and the promise to deliver healthcare on a far more rational, efficient and tailored basis.”<sup>1</sup> (p. 6).

### **An independent review**

Led by Dr. Eric Topol, eminent cardiologist, geneticist and digital medicine expert, this independent Review was produced by Health Education England (HEE).<sup>2</sup> Dr Topol brought together three Expert Advisory Panels and a working group on organisational development to advise the Review Board.

Focused on patient benefit as the central driver of change, the report outlines how the NHS can deliver a better future for patients, and for the staff who care for them, by implementing technologies including genomics, digital medicine, artificial intelligence and robotics. The report advises on how these technologies will change clinical roles and functions and the implications for the education and training of both the current and future workforce.

A technology skills and enablement core group is already at work, chaired by Sir David Behan, Chair of HEE. This is one of five workstreams shaping the workforce implementation plan to deliver the NHS Long Term Plan. Looking at initiatives right across the system, part of their remit is to turn the recommendations from the Topol Review into concrete actions.

### **The report**

‘The future is already here – it’s just not evenly distributed’.<sup>3</sup> Indeed, this report is brought to life by vignettes of current usage of technology and by projections of their impact on productivity were these to be scaled up. You will also find future scenarios. There are four personas illustrating changes in role and in approach to education and continuing professional development.

### **What does the report say about evidence?**

Dr Topol proposes that workforce strategy for implementing digital healthcare technologies is guided by principles relating to 1) citizens, patients, carers; 2) the gift of time back to clinicians to care; and 3) evidence.

“Evidence: the adoption of digital healthcare technologies should be grounded in compelling realworld evidence of clinical efficacy and cost-effectiveness, followed by practical knowledge transfer throughout”<sup>1</sup> (p. 20).

Read the report in full to glean the full weight of this proposition which goes far beyond the level of evidence for clinical effectiveness required for apps to be approved and the development of an evidence standards framework for digital health technologies<sup>4</sup>.

Dr Topol's rejection of digital exceptionalism<sup>5</sup> will be music to the ears of HLG members already passionate about their role in informing #AMillionDecisions.<sup>6</sup>

“Boards require the expertise to make informed investment decisions, founded on realworld evidence of effectiveness, to drive improvement in a data-rich NHS”<sup>1</sup> (p. 82).

### **How did knowledge specialists contribute to the Review?**

The Review team drew on support from two teams of knowledge specialists:

- literature searches by staff of the Library and Knowledge Services at Surrey, Sussex Healthcare NHS Trust
- a Sharepoint, current awareness, enquiries and referencing were delivered by HEE's knowledge management team.

Meanwhile, I re-engineered my portfolio in order to manage the Review alongside my role as Senior Advisor, Knowledge for Healthcare, HEE.

Dr. Ruth Carlyle led on formulating HLG's response to the Review's call for evidence and David Stewart as our lead on workforce development, led on the response from HEE's senior library and knowledge services team.

### **What does the report say about knowledge management and knowledge specialists?**

Healthcare librarians and knowledge managers will readily pick up the emphasis on practical knowledge transfer. Picking out further highlights with implications for our roles:

“NHS Boards should take responsibility for effective knowledge management to enable staff to learn from experience (both successes and failures) and accelerate the adoption of proven innovations”<sup>1</sup> (p.16).

“The NHS should increase the overall numbers of clinicians, as well as scientists, technologist and knowledge specialist posts, with dedicated, accredited time to keep their skills up to date and with the opportunity to work in partnership with academia and/or the health tech industry on the design, implementation and use of digital, AI and robotics technologies (AIR5/DM4)<sup>1</sup> (p. 57).

“Effective knowledge management is essential to enable the spread and adoption of innovation, with lessons from early adoption shared widely (OD6): an innovation culture is dependent on a learning culture. The NHS must build a reputation as a learning organisation that values and enables the transfer of learning about successes and failures (OD5). This can only happen with the creation of new senior knowledge management roles”<sup>1</sup> (p. 68).

There is more. What of our role in digital literacy? What part will we play in enabling NHS staff to gain the necessary digital skills, and to work with patients and carers in this area?

“We need to tackle differences in the digital literacy of the current workforce linked to age or place of work”<sup>1</sup> (p. 9).

“The workforce will need to assess the level of digital literacy of patients and carers”<sup>1</sup> (p. 25).

### **What does it mean for members of HLG?**

The Topol Review emphasises the need to evaluate and spread innovation, to enable organisations to better manage knowledge, and the importance of helping staff to share their learning. As such it offers a springboard for healthcare librarians, evidence specialists, knowledge skills librarians, knowledge managers – knowledge specialists all – to make a greater impact on quality and productivity. HEE will be working with CILIP to optimise the opportunities.<sup>7</sup> To conclude with the words of the report:

“... there is now a window of opportunity in which to strengthen the infrastructure, upskill the workforce and catalyse the transformation. There is no time to waste.”<sup>1</sup>

**Sue Lacey Bryant**, Topol Review Programme Manager and Senior Advisor  
Knowledge for Healthcare, Health Education England

## References

1. Preparing the healthcare workforce to deliver the digital future. An independent report on behalf of the Secretary of State for Health and Social Care, Health Education England, February 2019.  
<https://topol.hee.nhs.uk/>
2. For more information about the Topol Review see <https://www.hee.nhs.uk/our-work/topol-review>
3. William Gibson. See [https://en.wikiquote.org/wiki/William\\_Gibson](https://en.wikiquote.org/wiki/William_Gibson)
4. Evidence standards framework for digital health technologies, NICE.  
<https://www.nice.org.uk/about/what-we-do/our-programmes/evidence-standards-framework-for-digital-health-technologies>
5. For more on digital exceptionalism see 'Is digital medicine different? Editorial', The Lancet, Vol 392, July 14 2018
6. A Million Decisions: An ongoing joint initiative from Health Education England (HEE) and CILIP  
<https://kfh.libraryservices.nhs.uk/a-million-decisions-a-day/>
7. CILIP response to the Topol Review of Technology in the Healthcare Sector  
<https://www.cilip.org.uk/general/custom.asp?page=TopolReview>



## Adventures of a library mascot: using educational board games for learning and development at a hospital library

### The story

University Hospitals of Morecambe Bay NHS Trust (UHMBT) Library and Knowledge Services (LKS) had an interest in purchasing educational games aimed at supporting the learning and development of NHS staff. The opportunity for funding arose in November 2017 and the library was successful in securing funds specifically for the purchase of the games.



Ideas for promoting the games and the launch day were discussed at a team meeting in May 2018. Ideas agreed upon included sending out emails to staff and department leads that the games are specifically tailored for; such as the Infection Control and Sepsis games. Hosting a Games Launch at both the Royal Lancaster Infirmary (RLI) and Furness General Hospital (FGH) and promoting through social media were other agreed strategies. The launch date was set for the 11<sup>th</sup> July 2018.

Prior to the games launch, the assistant librarian attended a session at the Heath Libraries Group (HLG) conference centred on the games and

what other NHS Trusts have done in terms of purchasing, monitoring impact and promoting the games to service users. Library staff also took part in a Trust event the week before the games launch to showcase the games and the library service with a selection of the games on display; there was a lot of interest at this event.

The games launch was relatively quiet at both sites on the day; however there were some attendees and some of the games were immediately requested or borrowed by staff. Around half of the 15 the games purchased were either out on loan or reserved by service users in the following days.

The Director of Nursing made a visit to the library to enquire and borrow some of the games and invited library staff to bring the games and facilitate them in the matrons

meetings in the future. The assistant librarian also recently facilitated the Infection Control game at one of their full team meetings.

Plans are being made to attend training sessions hosted by the Learning and Development department to facilitate the games at events. Other outreach opportunities are being developed by the assistant librarian.

The games have also been added to the library website. Here service users can see a full list of the games that are currently provided by UHMBT LKS. The list includes images of the games and basic information including the topics covered and learning outcomes.

### Resources required:

- Time to send out emails to individuals and department managers within the Trust with games that are specifically of interest to the department/individuals.
- Time for staff to promote on the social media platforms Twitter and Instagram using the UHMBT LKS mascots.
- Time for staff to send out written pieces for the weekly news that is sent to all staff and students within the Trust.
- Tea, coffee, biscuits for the launch day.

### The games:

- **Communication**
- **Dr Jargon**
- **Drugs round**
- **Dysphagia**
- **Game of stools**
- **Harm free care**
- **Hospital life (patient flow)**
- **Hydration**
- **Infection control**
- **Masterful mentoring**
- **Nutrition**
- **Removing barriers**
- **Sepsis**
- **Stop the pressure**
- **Stroke**
- **Teams that care**



## Educational Board Games



### Communication Game

This game offers innovative and practical ways to improve the communication and skills of individuals and teams within the NHS.

The Communication Game encourages reflective discussions between players and allows them to reflect on their own experiences and learn from each other.

By playing the game, players should:

- Improve their communication skills
- To communicate with service users, carers and their families in the way they prefer
- Increase their knowledge and understanding of communication support needs
- Implement lessons learned into their daily practice

### Alignment to local, regional and national drivers:

**“To provide the highest possible standards of evidence and knowledge management to support the very best patient care and staff experience”**

- UHMBT LKS

UHMBT LKS provides a wide range of resources to support staff and students in their professional roles with a goal to provide the best quality care for patients. The educational games selected are both specific to clinical skills and practice within the Trust but some; such as the communication game, can also be used in the learning and development of all staff and students. The games offer the staff and students chance to have relevant discussions to solve various scenarios and answer questions. This promotes teamwork, improves their communication skills and enables them to learn from each other. Therefore, the games support the UHMBT Behavioural Standards Framework; which has particular focus on communication, improving patient outcomes, accessibility and working as a team.

### Impact of this project:

There is now an increased awareness of the library and the services it offers, particularly the games. Interest and usage of the games increased directly following the launch and continues to do so in 2019. The games are enabling new opportunities to collaborate with other departments within the Trust in order to support the learning and development of staff and students. This should lead to the library service's increased involvement in the wider organisation. The written and verbal feedback collected from service users has also been positive. The games have also proven useful for the new international nursing recruits who have benefited

from the games as icebreakers and team building exercise as well as increasing their learning.

### Lessons learned:

The promotional strategy can be considered a success as it generated a lot of interest from various staff and heads of departments. The emails sent out targeted departments and staff who would directly benefit from the games. The market stall at a Trust event the week prior to the launch allowed service users to see the games on display and be informed of the games launch.



The games launch itself was not well attended at either site. RLI had some users who were photographed playing the games. The date of the launch may have had an impact; an autumn or spring launch may have had better attendance. Having the launch at the library was considered to be the best option however this has restrictions as the staff and students do not always have the time to leave their departments. This is why the new strategy of taking the games out to staff for team meetings or training events may be more productive.

### Next steps:

- Purchased a second copy of the more popular games such as the Communication, Sepsis, Teams That Care and Infection Control Games.
- Continue to promote through social media.
- Organise another 'launch' day for the new games in 2019.
- Attend Trust events and departmental team meetings.
- Attend matrons' meetings and any training events in collaboration with the Learning and Development department to facilitate the games.
- New games have been purchased to market to a wider service user base within the Trust; Safeguarding Game, Priorities Game (nursing), Shared Governance Game, MAP Game (both the healthcare and workplace editions).

### Kerry Booth, Assistant Librarian

University Hospitals of Morecambe Bay NHS Trust



## London, Kent, Surrey and Sussex Library Knowledge Services Forum 2018

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On the 15<sup>th</sup> November 2018 about 80 Health Library and information professionals came together for the annual LKSS Forum (#LKSSforum2018) at Stewart House, London. This year's conference was split into 3 separate sections and included a fun randomised coffee trial (RCT) to celebrate #knowvember. A week before the event we were sent the name of another attendee of the event from another trust who we may have never met before, and were encouraged to find our RCT mate and have a chat. In the search to find my partner I met other librarians and knowledge professionals and the whole experience was a great way to network and gain contacts.

For the first section of the day we had a welcome from Louise Goswami and then straight into three different but thought provoking talks. First was from Liz White, Head of Strategy Development at the British Library. Liz talked about the creating and re-energising the public library sector with the concept of a new single digital presence for public libraries. Liz ensured us that the project does not intend to replace physical libraries but wants to make information more accessible to a wider public. A single digital presence could be a useful tool for the health sector as Liz mentioned that they are keen to have health and wellbeing information easily accessible for the public.

The third talk was presented by Clare Edwards (Deputy Head of Library and Knowledge Services and Technology Enhanced Learning at Health Education England) who spoke about enhancing quality and demonstrating the value of library and knowledge services. A pilot form of the new quality improvement standards for *Knowledge of Healthcare* is in the process and is looking to be finalised by March 2019 and implemented in pilot sites from April 2019. The outcome of this is to ensure library and knowledge staff deliver high quality, user focused knowledge and evidence service to enable providers of NHS services to achieve their mission. This is something that library staff already strive to achieve but enhancing this will help achieve excellent healthcare and health improvement. One statistic which was provided was calculated by library staff: "303 hours of a senior midwives time is released by using the expertise of a clinical librarian". The impact that librarians can have in hospitals feeds into the fact that the library and knowledge services do need to promote themselves and their specialist knowledge and skills well within the healthcare community.

The second half of the day was a brilliant display of quick 5 minute pitches of innovative ideas from various trust libraries and knowledge teams. Some highlights for me were Clinical Librarian at Brighton and Sussex Universities NHS trust, Tom Ropers talk on the time it takes to research. Tom and his team of library assistants

and librarians have calculated the median time it takes to undertake an evidence search. This time has been reduced from 3 hours to 2.5 hours over the last 3 years and they are now looking at what elements of the search take the longest time and how to reduce those. Maintaining high quality but reducing the time it takes to complete a search means becoming a more efficient service for those who are seeking the skills of a librarian.

We also had Karen Holmden from Surrey and Sussex Healthcare Trust who's innovation won the prize on the day. She showed and talked us through their activity dashboard which displays their libraries activity on a monthly basis. This is displayed in the library and is a good way to showcase what the library does, and can do for departments and individuals at the trust. Karen mentioned that they are hoping to get separate boards which can be displayed in separate departments to show the impact the library has throughout the hospital.

And we had Claire Jones from Kings College Hospital NHS trust who had created a library App for her trust. She had previously done this online for free but met many limitations of the software creating it this way, and she spoke us through how she managed to get funding to create the current app which allows users to access library contact information, current awareness, online resources, new books, access payslips, to book training and soon to be able to have access to e-learning. This App is in it's early stages and it will be interesting to hear how successful it has been in getting users to sign up and use.

The day also included talks from David Law, National Services Manager regarding the Health Libraries & Information Services Directory, and Alison Day who discussed knowledge mobilisation and the importance of demonstrating the impact of our knowledge. We also had an Elevated Pitches Workshop from Jo Whalley which ended the day with some self-reflection.

My summary of the day is much better presented by scribe artist Annalees Lim @makeandcreate, who brilliantly live scribed the day as it unfolded:



CILIP Health Libraries Group Newsletter, 36(1) Spring 2019  
[https://www.cilip.org.uk/members/group\\_content\\_view.asp?group=200697&id=686518](https://www.cilip.org.uk/members/group_content_view.asp?group=200697&id=686518)

## Book Reviews

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This issue's reviews cover three titles, on searching, on knowledge management and on bibliotherapy. I offer my thanks to the reviewers for their time and intellectual effort. If readers are interested in reviewing for this column, do get in touch. Contact me at [tom.roper@nhs.net](mailto:tom.roper@nhs.net) with your preferred contact details, and tell me of any particular areas of interest or expertise you may have. It's an excellent way to expand your professional reading, get published, and can be cited as an activity in support of applications for professional accreditation and revalidation.

Levay P and Craven J (eds).

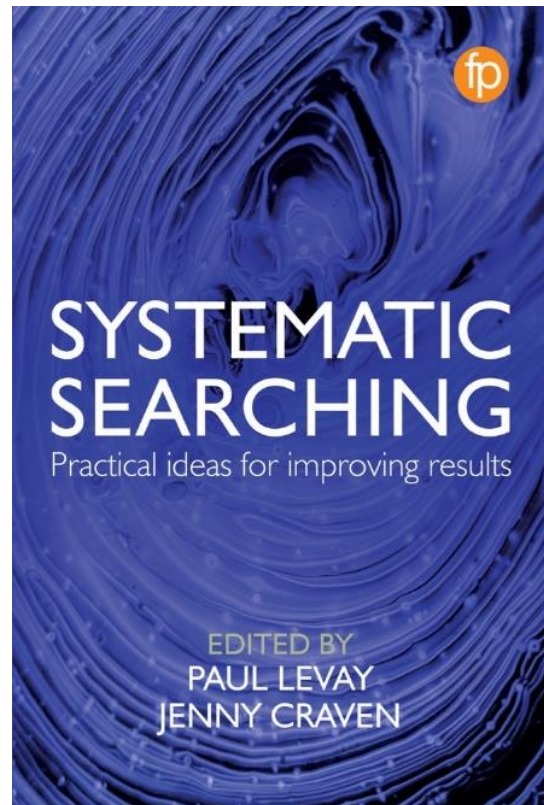
**Systematic Searching: Practical ideas for improving results.**

London: Facet, 2019.

ISBN 9781783303731. 352 pages. £69.95.

A team of 23 experts from the UK, Germany, the US, Canada, and Australia have put together this edited textbook aimed at all information professionals and librarians who conduct systematic searches (not just those who work in health or medicine), as indicated by the title. This is a timely and much-needed book in a field which seems to grow ever more complex each year.

The editors are both Information Specialists at the National Institute for Health and Care Excellence (NICE). Levay and Craven outline in their introductory chapter how the book is placed in the field, citing previous publications that cover the various systematic review stages, search methods, and guides about how to do systematic searches. This book is complementary to those such as Booth, Sutton and Papaioannou's 2016 text, *Systematic Approaches to a Successful Literature Review*, as it provides new information about "the themes that are emerging from the current work on systematic searching... to see how they are being applied in new directions". The editors state that, "This book is an attempt to survey the current trends in systematic searching and to suggest ways of harnessing new methods and technologies to ensure information professionals continue to play a strong role in evidence-based policy and practice". Levay and Craven end the book with a brief concluding chapter about the importance of the expert searcher in improving both the results and, implicitly, the quality of systematic reviews.



As indicated in the subtitle, every one of the twelve chapters is full of practical ideas that we can use to improve our search results. Every page is well referenced, and with recommended further reading suggested at the end of every chapter for us to explore the topics of interest. The first few chapters set the scene about the importance of systematic reviews (as well as realist and mixed methods reviews) in informing policy. There follow five chapters about resources and new technologies. Kugley and Epstein's chapter about sources and methods for searching the grey literature will be useful. The case studies included in this chapter illustrate the ways in which grey literature sources, such as unpublished health records, have been used for particular systematic reviews. Golder's chapter about social media is enlightening as to the many uses for systematic reviewers, such as identifying new and forthcoming studies, or contacting authors.

Service managers will be interested in the chapters about the skills and knowledge needed to train the next generation of systematic reviewers, as well as Brett's chapter about the importance of expert searchers, which includes a helpful table of suggestions for the best journals to help us to keep up to date with new methodologies.

The chapter by Sampson about communication features a timely reminder about the importance of sharing search strategies. One participant in the February #ukmedlibs chat about expert searching disclosed that they deposit their search strategies in an institutional repository which gives them a digital object identifier (DOI). It is this kind of best practice that the authors of this book would encourage to highlight the importance of the role we play in improving the quality of systematic reviews. This book certainly fulfils the editors' purpose and aim. It marks the stage that this field has reached, and each chapter offers tantalising ideas about the future. I can wholeheartedly recommend this readable and excellent book for novices and veterans of systematic searches.

**Eli Harriss, Knowledge Centre Manager and Outreach Librarian**  
Bodleian Health Care Libraries

Schopflin, K and Walsh, M.

**Practical Knowledge and Information Management.**

London: Facet, 2019.

ISBN 9781783303359. 120 pages. £64.95

The book's title succinctly summarises its aims: this is a practical guide to knowledge and information management. It aims to offer advice and best practice on the topic, rather than focusing on theory, and is aimed at practitioners working in organisations. The authors are practitioners themselves: Katharine Schopflin has worked in a variety of roles as an information professional and has taught and



published on the topic, and Matt Walsh has been a knowledge and information professional in a variety of roles, currently knowledge manager at Dunnhumby. The book is logically structured to give a simple to follow, practical overview of the concept, which would be ideal for those new to the field wanting a solid introduction, and a comfortably succinct one at a mere 120 pages. Chapters include an introduction and definitions, and a chapter for each of the key issues of knowledge and information management, from introducing it as a new concept in organisations; considering governance aspects, facilitating knowledge sharing; enabling the recording of knowledge, and capturing knowledge as staff depart or teams disband.

There are already numerous texts on the topic, which this particular book complements with a practical overview, and a retrospective look at how the discipline has changed over time, and some of the successes, failures and pitfalls. It nicely blends real life experiences with aspirational best practice, helping practitioners understand why things might not be working at the moment and how they can – practically – make improvements.

The style is authoritative and accessible, with the authors' own expertise evident with the vignettes of real-life examples of the issues raised, both as positive examples and also of things going wrong. The anonymised case studies are highlighted in stand-out text boxes, giving a brief overview of the topic and contextual information to bring it to life.

The introductory chapters help clearly define the concepts and give a pragmatic response to the often poorly understood or defined distinctions between knowledge management and information management – helping the reader understand when to make the distinction, but also when it makes more sense to think of them as a more holistic concept. The reality of how organisations often operate means that this distinction can be blurred or ignored altogether, and the approaches described here help give a pragmatic way through this.

Each chapter concludes with references for further reading, citing key authorities on that topic. This approach is helpful to someone new to the field needing a quick, solid overview and wanting to then explore specific topics of interest in more depth. The



*practical* **KNOWLEDGE and  
INFORMATION MANAGEMENT**

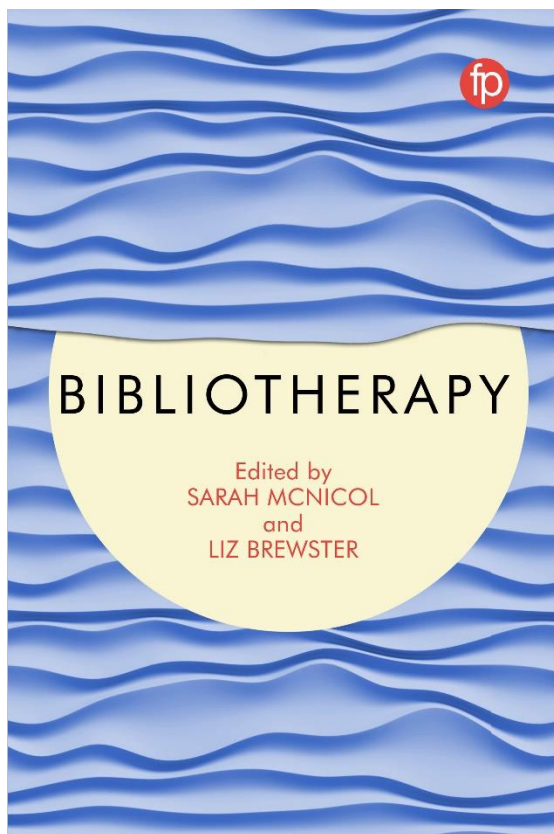
Katharine Schopflin *and* Matt Walsh



book draws out key definitions and theory, to help serve as a guide and to link some of the more theoretical literature into practical applications.

Knowledge and information management is a topic that has never ‘gone away’, but is currently the subject of renewed interest thanks to CILIP’s Information as an Asset report (itself an updated version of the 1995 Hawley Report, which is referenced in the book). KM is likely to attract the interest of senior staff in corporate organisations, and of course in healthcare, in view of the NHS Knowledge for Healthcare programme’s focus on mobilising evidence and organisational knowledge, a practical overview for practitioners seems particularly timely. It would be worth reading by practitioners seeking to move into knowledge and information management, or for those wanting a brief update or reassurance on the topic, to help ‘sell’ the idea to senior staff.

**Emily Hopkins, Knowledge Management Programme Manager**  
Health Education England



McNicol S and Brewster L (eds).

**Bibliotherapy.**

London: Facet, 2018.

ISBN 9781783303410. 190 pages. £64.95.

The title of the book suggests an exploration of the concept of “bibliotherapy”, described on in the book’s blurb as “the basic premise... is that information, guidance, wellbeing and solace can be found through reading”.

With a wider aim than most books written for library and information professionals, this book is aimed at those who are supporting wellbeing within their community. It suggests that the authors’ aim was to highlight to “librarians, healthcare providers and arts organisations” ways that they can help enhance their community’s wellbeing

through reading. The book is edited by Sarah McNicol, a research associate, and Liz Brewster, a lecturer, both of who have research interests in supporting wellbeing and health through reading.

Divided into two parts, the first part of the book is authored by the editors, McNicol and Brewster. The first four chapters look at history, theories, narrative medicine,

and graphic medicine. It gives a general overview of the concept of bibliotherapy, history and theories surrounding bibliotherapy. This is a useful and informative set of chapters which are well written; however, they are perhaps aimed more at the academic or those with a general interest in the topic, rather than someone looking to set up a bibliotherapy service. Both McNicol and Brewster appear to be very knowledgeable on the topic and write in a way that is both engaging and accessible.

Part 2 is a series of case studies which are authored by a number of authors, all of whom have an interest in libraries, and supporting health and wellbeing through bibliotherapy. The chapters look at bibliotherapy in a range of contexts, evaluating the wide range of experiences and examples the authors provide. The authors include their insights on working with bibliotherapy in the contexts of a range of user groups, including those at risk of homelessness, carers, students, native and non-native English speakers, people with dementia, and people in Uruguay. The different chapters in Part 2 demonstrate the different models of bibliotherapy that are used in different settings, and the different influences that the reading material can have on any supplementary materials, for example photographs being brought to a follow up group (Bailey, p32).

The chapters in Part 2 of Bibliotherapy provide some practical demonstration of how bibliotherapy can be used as a therapeutic technique to support mental health and wellbeing in a wide range of settings.

The book is well referenced and appears on reading to be an authoritative text on the topic. It accomplishes its aim of educating the reader about bibliotherapy as a concept and provides useful examples of how it can be used in a practical context. Given the current interest in mental health and wellbeing amongst the public and healthcare community this is a timely book.

This book will be of interest to those who may be interested in setting up their own bibliotherapy services, as well as those interested in it from a purely academic perspective. However, it does make for a generally interesting read and confirms what many of us will already know – reading makes us feel good.

**Sarah Rudd, Clinical Librarian**

North Bristol NHS Trust



## Internet sites of interest: bacteria and bacteriology

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One of the first departments I looked after on my arrival at Leicester was the then newly formed Department of Infection Immunity and Inflammation, known as III or 3Is. One of its interests was microbiology. The department has now changed its name, although it still has some microbiologists in it. As “Microbiology” is a bit broad as a topic, I decided on bacteria (and archaea) and bacteriology, and here are some suggested sites.

As ever, notes about sites I have missed, or suggestions for topics to cover, are welcome: see end for contact details. All links were checked on **1<sup>st</sup> March 2019**.

- **Women in microbiology**

The American Society for Microbiology (see below) have videos about women in microbiology. I can't find a playlist on their YouTube channel that lists them and the page that Google finds on the ASM site has disappeared. However, here are three I did find:

Millicent Goldschmidt - <https://www.youtube.com/watch?v=PQq0ZkW1pR4>. There is also a transcript of an interview with her at <https://digitalcommons.library.tmc.edu/tmc-whp/23/>, part of the Texas Medical Center's Women's History Project.

Jo Handelsman - [https://www.youtube.com/watch?v=vNNGR0ERX\\_M](https://www.youtube.com/watch?v=vNNGR0ERX_M). Dr Handelsman is a practicing researcher and was a member of President Obama's administration.

Esther Lederberg - <https://www.youtube.com/watch?v=bgNgEu4EZO&t=46s>. Dr Lederberg was a pioneer of bacterial genetics.

- **Bacteria and bacteriology**

### **American Society for Microbiology**

<https://www.asm.org/>

As well as subscription material, the site has science material which can be browsed by topic or by intended audience. There are podcasts ([www.asm.org/podcasts](http://www.asm.org/podcasts)). The ASM Science site includes the ASM Science Visual Library (<http://www.asmscience.org/VisualLibrary>), which includes images, protocols (latest are from 2015), and “Visual media briefs”, short communications including images, animations and videos. The Science Visual Library material was formerly on MicrobeWorld.org and is free to reuse for educational purposes. The ASM YouTube channel is at

[https://www.youtube.com/channel/UCBxWzf49gVHz0Ksgw\\_N8brw/featured](https://www.youtube.com/channel/UCBxWzf49gVHz0Ksgw_N8brw/featured), and has interviews, conference presentations, lectures and how to videos.

### **Bacterial World**

<http://www.oum.ox.ac.uk/bacterialworld/>

Site to accompany an exhibition at the Museum of Natural History at the University of Oxford, which runs till May 2019. I don't know what will happen to the site after that... An excellent looking site covering all aspects of the subject, with short videos and a Bacterial Explorer to explore five of the most common forms of bacteria.

### **Health Protection: Infectious diseases**

<https://www.gov.uk/topic/health-protection/infectious-diseases>

Information from PHE and other agencies about various topics, including information on several infectious agents.

### **MicrobeWiki**

<https://microbewiki.kenyon.edu/index.php/MicrobeWiki>

Free resource on microbes and microbiology, authored by students, but curated by microbiologists at Kenyon College in Ohio.

### **Microbiology Society**

<https://microbiologysociety.org/>

British based membership organisation. Site includes policies and position statements, educational materials and publications. Educational materials include Microbiology Online, <http://www.microbiologyonline.org/>, for use in schools.

### **Public Health England: Standards for microbiological investigations (UK SMI)**

<https://www.gov.uk/government/collections/standards-for-microbiology-investigations-smi>

Recommended algorithms and procedures for clinical microbiology.

- **Classification of bacteria**

### **International Code of Nomenclature of Prokaryotes**

<http://www.the-icsp.org/bacterial-code>

There is an older version of this (called International Code of Nomenclature of Bacteria) on the NCBI Bookshelf, <https://www.ncbi.nlm.nih.gov/books/>.

### **Leibniz Institut: Prokaryotic Nomenclature Up To Date**

<https://www.dsmz.de/bacterial-diversity/prokaryotic-nomenclature-up-to-date.html>

Compilation of names of bacteria and archaea, validly published since 1980.

### **List of prokaryotic names with standing in nomenclature (LPSN)**

<http://www.bacterio.net/index.html>

There is an older edition of this on the NCBI Bookshelf.

- **Genetics**

**Bacterial Bioinformatics Resource Center**

<https://patricbrc.org/>

Gene and genome data for bacteria and archaea.

**Genome**

<https://www.ncbi.nlm.nih.gov/genome/microbes/>

Gene sequences.

**The Human Microbiome**

<https://learn.genetics.utah.edu/content/microbiome/>

with teaching material at <https://teach.genetics.utah.edu/content/microbiome/>

Microbiome here is the genes in all the microbes in a community.

- **Antibiotic resistance**

This could have a column to itself but here is one very recent publication:

**Parliamentary Office of Science and Technology: Research Briefing:  
Reservoirs of Antimicrobial Resistance**

<https://researchbriefings.parliament.uk/ResearchBriefing/Summary/POST-PN-0595>

Published in February 2019, evaluating the main reservoirs of resistant microbes arising from the use of antimicrobials in humans and animals.

This links to other official publications including the O'Neill review of 2016 and a recent report from the House of Commons Health and Social Care Committee.

- **Sepsis**

This does need a column to itself (see end of this column!). Good starting points are <https://www.nhs.uk/conditions/sepsis/>,

<https://www.nhsdirect.wales.nhs.uk/encyclopaedia/s/article/sepsis/>,

<https://www.nhsinform.scot/illnesses-and-conditions/blood-and-lymph/sepsis>, and

<https://www.nidirect.gov.uk/conditions/sepsis>,

depending on your location within the UK.

The UK Sepsis Trust, <https://sepsistrust.org/>, is a major campaigning organization.

**Keith Nockels**

University of Leicester Library, UK

Email: [khn5@le.ac.uk](mailto:khn5@le.ac.uk)

Please contact me if there are sites I have missed, or topics you would like covered.

It would be good to cover in more detail **sepsis** and **hospital acquired infection**. If you are in a hospital library and would like to compile a list on either topic, please let me know.

## Diary of events

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### 4-7 June 2019

CHLA-ABSC Conference 2019

Ottawa, Ontario

[https://www.chla-absc.ca/annual\\_conference.php](https://www.chla-absc.ca/annual_conference.php)

Range of package options

### 3-5 June 2019

Introduction to Systematic Reviews and Critical Appraisal

Centre for Reviews & Dissemination, University of York

<https://www.york.ac.uk/crd/training-services/introduction-to-systematic-reviews/#tab-5>

£750

### 15-19 June 2019

EBLIP10: 10th International Evidence Based Librarian and Information Practice Conference

Conference: 17-19 June 2019

Pre-conference workshops: 15-16 June 2019

University of Strathclyde, Glasgow, Scotland

<https://eblip10.org/>

Range of package options.

### 15-19 June 2019

HTAi 2019 Annual Meeting: HTA beyond 2020: Ready for the New Decade?

Cologne, Germany

<http://htai2019.org/>

Range of package options

### 17-20 June 2019

EAHIL 2019

Basel, Switzerland

<https://eahil2019.net/>

Range of package options

### 18-21 June 2019

Nottingham Systematic Review Course 2019

University of Nottingham

<https://www.nottingham.ac.uk/research/groups/cebhs/nottingham-systematic-review-course/>

Early Bird registration £800 before 31 March 2019. Later registration £895

CILIP Health Libraries Group Newsletter, 36(1) Spring 2019

[https://www.cilip.org.uk/members/group\\_content\\_view.asp?group=200697&id=686518](https://www.cilip.org.uk/members/group_content_view.asp?group=200697&id=686518)

**3-4 July 2019**

CILIP Conference 2019

Manchester

<http://cilipconference.org.uk/>

Range of package options

**9 July 2019**

Introduction to critical appraisal workshop

National Guideline Centre (NCG), Royal College of Physicians, 11 St Andrews Place, London

<https://www.rcplondon.ac.uk/ngc-training-courses>

£300

**10 July 2019**

Systematic review and meta-analysis in action workshop

National Guideline Centre (NCG), Royal College of Physicians, 11 St Andrews Place, London

<https://www.rcplondon.ac.uk/ngc-training-courses>

£300

**24-30 August 2019**

World Library and Information Congress 85th IFLA General Conference and Assembly

Athens, Greece

<https://2019.ifla.org>

Early registration until 15 May 2019. Range of package options

**24 September 2019**

Advanced Search Techniques for Systematic Reviews, HTA and Guidelines

Search Strategies for HTA and Systematic Reviews: an Introduction

YHEC, University of York

<https://www.yhec.co.uk/training/advanced-search-techniques/>

Earlybird registration £200 (+£40 VAT)

**25 September 2019**

Advanced Search Strategy Design for Complex Topics: Strategy Development, Text

Analytics and Text Mining Training Day

YHEC, University of York

<https://www.yhec.co.uk/training/advanced-search-strategy-design/>

Earlybird registration £200 (+£40 VAT)

**4 November 2019**

Introduction to critical appraisal workshop

CILIP Health Libraries Group Newsletter, 36(1) Spring 2019

[https://www.cilip.org.uk/members/group\\_content\\_view.asp?group=200697&id=686518](https://www.cilip.org.uk/members/group_content_view.asp?group=200697&id=686518)

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£300

**Julia Garthwaite, Deputy Librarian**

Cruciform Library, UCL

*Contributions should be sent to [j.garthwaite@ucl.ac.uk](mailto:j.garthwaite@ucl.ac.uk)*



## Newsletter editorial notes

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CILIP is the UK's professional body for library and information professionals and includes the Health Libraries Group (HLG) as one of its special interest groups.

The HLG Newsletter gives readers a space to publish, share and access the latest news, best practice, research, current awareness information and conference/course updates. You can also keep up to date with our regular features, book reviews and relevant internet sites.

We're keen to receive contributions from readers, so whether you want to share an impact case study, or reflect on a new service development, or share your experience of attending an event, course or conference, get in touch.

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### Next copy dates:

2019 Issues	Deadline for content
Summer 36 (2)	Friday 31 May 2019
Autumn 36 (3)	Friday 30 August 2019
Winter 36 (4)	Friday 29 November 2019

### HLG Members email discussion list

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