

January/February 2018
Issue 103

The Swimming Pool

Newsletter for the
SWIMS Network



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Editorial

Welcome to this themed edition of Swimming Pool, this month we focus on MEOK and the first thing that needs to be said is that it is now MEK – Managing Evidence and Knowledge, showing that organisational knowledge is not the only kind of knowledge that needs to be managed.

In what I believe to be a first for Swimming Pool, we have invited Joanne Phizacklea from Morecambe Bay Hospitals NHS FT to write for us outlining a very particular experience of knowledge management.

We also have information about upcoming events supporting MEK and “Knowvember” alongside recent posts to the KfH blog. In addition to which, amongst other things, we have Dorset County Hospital informing us about their Knowvember event, a general review of KM projects from East Dorset, plus the recent #ukmedlibs chat covering institutional repositories.

The editors

Mobilising Evidence and Organising Knowledge

In March 2017, I was invited to attend a meeting at Senate House in London about the mysterious subject of “Mobilising Evidence and Organising Knowledge” ...also known as MEOK!

As a new Library Manager, I thought it would be good to try and understand this strange concept and I duly arrived for the day very keen. By the end of the day, I felt quite overwhelmed by the whole subject, how I would take it back to my own library and staff in Exeter and what it all meant for our future?

However, two of the friendly faces at the meeting were Sue Robertson and Alison Day, which was my first and greatest stroke of luck. I was very pleased to be working with them on this project.

We met and discussed the challenge of translating the strategy of MEOK into something more practical and understandable for Library Managers and their teams. Our plan was to help identify existing work which others were already doing and could be described as MEOK, or ways of introducing this idea into their own Trust.

We came up with a cunning plan...webinars! I had attended meetings using the technology known as WebEx but didn't really know anything about its secret inner workings. Alison, Sue, and I discussed different themes and “tools” we could use from “KfH blog KM toolkit” and we now had a plan.

We soon sorted out dates and the technology (Jaz in HEE gave me WebEx training) and then came the difficult part...what were we going to tell people?

We created a template for each webinar, with one person hosting, one person as presenter and the third person part of the webinar to help with any issues that occurred. The presenter would deliver the training which would be as interactive as possible and field any questions. Our plan began to expand beyond what we had originally thought possible – at the mention

of “webinars on MEOK” people began to email from all parts of the Health world and of England and ask if they could join in.

Like all best plans, we fought illness, technology, occasional event clash and other obstacles, but finally all the webinars were delivered, recorded for posterity, and made public. When the question is asked “what’s MEOK again?” we can direct people to the webinars and admit that it was us who created them.

<http://kfh.libraryservices.nhs.uk/knowledge-management/meok-cascade-resources/>

This project was a great learning curve for me and I thoroughly enjoyed learning about new technology, the way ahead for Library and Knowledge Services, writing my individual presentations and finding ways to make them entertaining and accessible. I hope our webinars help people and I look forward to continuing to be involved in the mysterious world of MEOK!

Carol Giles
Library and Knowledge Services Manager
Royal Devon and Exeter Hospital (EXE)

Not just for November...East Dorset Mobilising Evidence and Knowledge #Knowvember

A month comes and goes very quickly but on reflection we took part in several activities throughout the autumn of 2017 which could be classed as *Mobilising Evidence and Knowledge*. None of these has proved to be particularly time consuming or difficult to implement. It is too early to say if the actions taken have had any lasting benefits but this is something to evaluate and report back upon over the next couple of months.

Using existing tools

Most of our activity has been based around re-using what already exists. Back in the summer we shared the [Leaver’s Toolkit](#) with our Company Secretary and she thought it would act as a useful tool to work through with our Medical Director who retired in December. We started to re-circulate the Health Management Bulletin produced by Sherwood Forest and this is now regularly received by senior staff across four organisations across Dorset. Last month we started to send out the Workforce and Education bulletins produced by the JET Library and these have all been well received.

Initiating conversations

Most of our activity has centred around having conversations with a range of people highlighting the work we do to support teams, including preparing summarised searches of evidence and best practice, providing regular updates and facilitating knowledge sharing.

We met with the new Chair of Poole Hospital Trust and he was interested in the self-assessment board tool – this is something we will re-visit with him in 2018.

I shared the KM postcards with members of the Vanguard Project Team who are winding down projects and transferring some work to the local Accountable Care System (ACS). I

offered to facilitate a retrospect for the team (which may still happen) but they were more keen to get started on an evaluation and I am assisting with devising a survey and gathering case studies about how the programme has impacted upon patient care.

Following a conversation with the County Archivist I have prepared a paper recommending that Trust Corporate records are transferred to the Dorset History Centre – we await the outcome but signs are that this move to preserve corporate memory in a single location will go ahead.

Meeting with the Simulation Lead we discussed whether holding a peer assist may help to inform a course he is creating about human factors. He is considering this as an option but in the meantime is finding the video clip from Great Ormond Street useful as a starting point.

Meeting with leads for research at both Poole and Dorset Healthcare we plan to circulate details of publications by local authors – perhaps a first step to a local repository and are keen to work with our colleagues at D08 to establish a County-wide community of practice for researchers.

Business as Usual

Throughout November we tweeted as usual but included the #knowvember (although Su was reticent that we should not get confused with others using the same hashtag). Tweets included highlighting our weekly lunch and learn sessions, E-Learning for Health, DynaMed Plus and the TRIP database.

Our newly formed team of “named” outreach librarians forged some good connections in the autumn. Liz made contact with the ophthalmology team and is aiming to follow-up after winter pressures. Sian has contacted staff in theatres and Su had a useful conversation with the Dorset Cancer Team. Barbara has had the most success in being invited to regular meetings of the NICU team where she is now delivering a proactive search service mobilising evidence to update local policies and procedures.

What Next

We need to set more time aside as a team to learn more about mobilising evidence and knowledge by exploring the KM toolkit, case studies and viewing the webinars. There is more for us to discover here but I feel the key is really about putting some of the tools and techniques into practice within and for the organisations we provide a service for. I am keen that the whole team feel confident to offer knowledge sharing facilitation as a standard part of our service alongside summarised evidence searches, training, current awareness and of course provision of space, facilities and resources for reflection and study.

Alison Day
Lead Librarian
East Dorset Library & Knowledge Service (D01/D02)

DCH Library puts on Knowvember!

Dorset County Hospital Library organised a series of events for Knowvember 2017. The purpose of the in-house project was to offer departments the opportunity to celebrate and share their knowledge and talent. The idea was submitted in the summer to the Trust's "Bright Ideas" team who recommended we run with it. We started asking for participants in September and were delighted that so many departments wanted to take part. Some were keen to offer presentations about the work they do, others wanted a 'meet and greet' type event. The Library organised the rooms, dates and times, while the Communications team got on board and advertised the events in their weekly e-bulletins. The programme is below:



Knowvember 2017

-A celebration of knowledge-

*An opportunity to share your knowledge
and to learn more about what others do in the Trust*

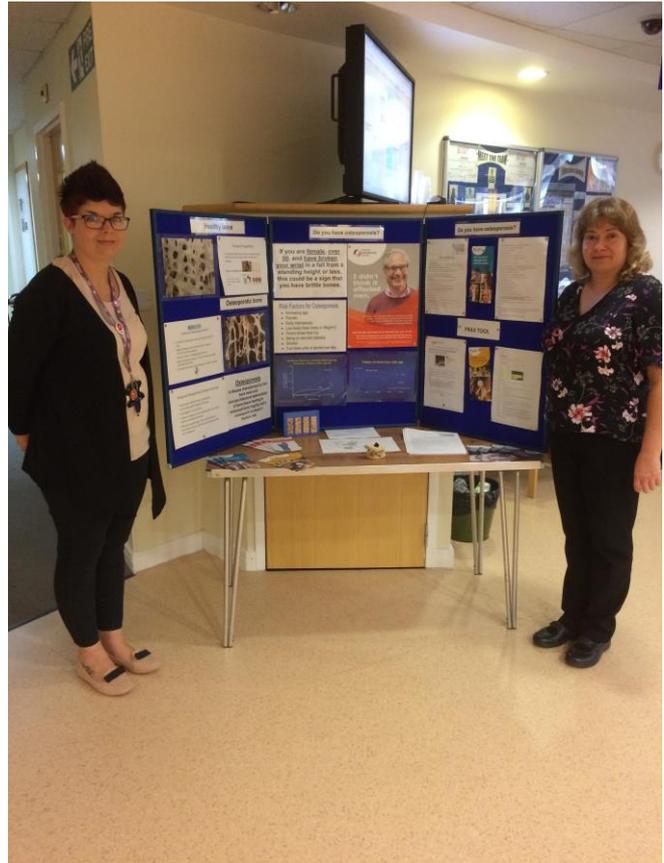
Various dates, times and locations around the Trust during the month of November

Date and time	Title of event	Location
Wednesday, 1st November 3-4pm	Meet and Greet Departments will be showcasing what they do; Including the Research and Innovation team, Microbiology and the Service Improvement team	Room 2, Education centre
Thursday, 2 nd November 2-3pm	Finding the evidence Library workshop showing you how to search for evidence without being inundated with 'stuff'!	Room 2, Education Centre
Friday, 3 rd November 11am-12pm	Come and meet the services you didn't know you had! The Fracture Prevention Team will show you how this important service saves time and money – and lives!	Room 2, Education Centre
Wednesday, 8 th November 1-2pm	Arts In Hospital Tour Alex will enlighten you with stories about the artwork surrounding our workplaces and corridors	Starting in the Education Centre
Monday, 13 th November 3-5pm	Charity Fundraising Session The DCH Charity team will talk about the role of the charity and how they can help you to get the most out of your fundraising.	Room 2, Education Centre
Tuesday, 14 th November 4-5pm	PALS team An interactive presentation	Room 2, Education centre
Friday, 17 th November 2-2.30pm	Risk management The Risk Management and Quality Assurance team would like to meet and greet you!	Room 2, Education centre
Tuesday, 28 th November 2-3pm	Meet and Greet A range of departments will be showcasing their knowledge and talents!	Room 2, Education Centre

Despite the publicity, attendance was disappointingly low. However we have some ideas on how to engage staff better in the future.

Positive outcomes include:

- Enthusiasm for the project, especially from non-clinical departments.
- Departments who previously had never communicated with others before have now made contact
- A greater appreciation of other teams and areas
- Helped departments to focus on their posters/presentations
- Some of the departments which participated have been invited to give their presentation to the wards and departments for CPD
- Some of the teams have offered the opportunity for library staff to shadow them
- From the people who took part, some would like to be part of a working group for next year's Knowvember!



Morag Evans
Librarian
Dorset County Hospital (D08)

Invited article: Managing information flows in critical times

This is based upon a presentation given by Joanne Phizacklea and Tracey Pratchett at the HLG conference 2014.

Background

In June 2013 the library was approached to join an internal project team which was being created to support the investigation into Maternity and Neonatal Services at University Hospitals of Morecambe Bay NHS FT, chaired by Dr Bill Kirkup. The internal team would manage the process within the organisation, be proactive and independent of the issues and would ensure that existing staff within the organisation were not overburdened.

We decided that we would carry out the secondment as 1wte job share. We felt that we would bring different skills to the team and that carrying out the role as a job share would be better for the library service - we were based at different library sites and this would mean that some librarian cover would still be available at both sites.

When we started in June 2013 no terms of reference had been issued and for the first 6 months we were working in the dark. Our role initially was to catalogue information already collected, to locate and identify new information as requested by the investigation team and

to manage process around evidence submission. The secondment was originally planned for six months but actually ended up being for almost two years.

At the outset of the project we used the MAP¹ project planning templates to provide a brief overview of the project and key phases which evolved over the course of the project. Firstly we had to manage the information already gathered in response to several former investigations, and there appeared initially to be no audit trail of what had been collected, in fact this turned up some 8 months later!

We wanted to make sense of what we already had and create a database to manage the collection. On paper we planned and tested a data capture template which included various fields and controlled vocabulary. We met with our IT department about creating a database for us, but after looking at our needs it was decided to use the Heritage LMS. Heritage provided us with a blank dataset to attach to our existing system; this was entirely separate from the main library catalogue and was password protected as we had to restrict access to the information due to its confidential nature. We then tested the system, tweaked a few fields to make it work for us and catalogued all the information we had. At the end of the project the data was extracted from Heritage and a searchable front end put on it by IT.

This task was more than just cataloguing documents but making sense of them, trying to understand the information, the systems and the processes so we could anticipate future requests. The publication of the terms of reference gave us more of a steer, but before we had a formal request we visited various departments to look at physical collections, and archives of information. At times it was a challenge to stop people offloading rubbish on us. We carried out information audits in some departments and reviewed online resources. We were given access to relevant shared document drives such as the Women and Children's Division and Trust HQ. We started to collect information we considered would be relevant such as minutes of meetings, reports etc.

We met with the evidence specialists from Dr Kirkup's team to discuss how information would be supplied. We were able to build a good working relationship and come up with methods that worked for all concerned. The decision was made to provide mainly electronic versions of information sent securely using a cloud data transfer system, although patient notes would be supplied as photocopies. Confidentiality and data protection issues were discussed with our Information Governance Team. As the evidence requests were received they were tracked via an action plan and monitored via weekly meetings. We wrote standard operating procedures and developed a sign off sheet so that all submissions could be signed off by the Assistant Chief Executive. Process notes were submitted with each request outlining any issues encountered. It is important to maintain a good audit trail and corporate memory based on learning from the start and we also wanted to leave things in good order.

Challenges

There was no cover for us in the library so we were juggling priorities constantly which had an impact on the number of literature searches carried out; training and other library services. There was also an impact on the rest of the library team – reduced senior librarian support; other members of staff have had to take on extra tasks.

This organisation, like many others I'm sure, needed an information audit. People are scared to throw things away. For example, we found 18 copies of one key letter in different drafts! There were inconsistent approaches across the organisation and a reliance on individuals and what they know.

Organisational memory – getting information out of people could be difficult. A high turnover of staff sometimes means the information is lost once they leave.

Obtaining medical records was difficult. We had three medical records departments on three hospital sites. We came across errors, inconsistencies, missing notes, some on microfilm, some archived, and some being held in departments. This proved to be one of the most challenging aspects of the project.

Records management – training is needed regarding document storage and management across the organisation. What to keep, how to keep it, storage methods, formats, file naming, protocols, and taxonomies – even just the importance of naming and dating and deleting documents!

Positives

We made a good team – we hadn't had the opportunity to work this closely together and we each brought different skills which complemented each other.

Ourselves, and the library service, have raised our profile within the Trust including with the executive teams – this has had an impact on search requests, the perception of library staff, and how we can contribute to the organisation.

We obtained an insight into organisational systems and processes that we didn't have. We now have a greater understanding, which helps when providing information and support to executive teams and directors.

We have demonstrated that library skills are transferable outside the library. Information and knowledge management skills are vital within the organisation and we have an important role to play.

January 2018

The report² into the investigation was published in the spring of 2015 and although the secondment ended the requests for support and information did not. Several smaller investigations have taken place since and requests are received to track down and supply documents regularly, most recently in late 2017. These requests have been satisfied partly due to the cataloguing system and audit trail we created, but also due to the knowledge and experiences gained whilst working for the project team.

- 1) MAP Community. Available from: <https://maptoolkit.wordpress.com/> (accessed 2.2.18)
- 2) Kirkup, B (2015) The Report of the Morecambe Bay Investigation. Available from: <https://www.gov.uk/government/publications/morecambe-bay-investigation-report> (accessed 2.2.18)

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#UKMedLibs chat on Institutional Repositories

The recent #ukmedlibs chat on Tuesday 20th January could not have happened at a better time as it fits very neatly with the current theme of Swimming Pool. Those involved in a recent HEE senior leadership course project looking at Institutional Repositories wanted to know more about how LKS staff worked with repositories.

They asked, amongst other questions; how do we define “repository”, what are the benefits of said resource, and how do we promote it. This proved to be yet another fascinating #ukmedlibs chat with interest from people at different points in their repository journey. There were a few people like @suzwilson who said “Hi all, Suzanne from @NTWLibrary dipping in and out tonight. No repository to speak of but keen to hear from others. #ukmedlibs”

So, the first question was; what is your definition of a repository?

- @cate_newell For me an IR is a place to gather and store information and/or assets. Knowledge Management at it's best : -) #ukmedlibs
- @ricpaul Good question #1 – my definition of a repository for our Trusts is rather different to that for our Uni. Uni wants to record all publications and wherever possible keep a copy of the document #ukmedlibs

The second was; what are the potential benefits to the organisation of having a repository?

- @andrewbrown234 sharing learning & methodology – a repository of dissertations for example can help other students working on theirs #ukmedlibs
- @cate_newell To showcase research outputs, and in our case it saved the R&D dept “weeks of time” in collating the publications data for them on a regular basis and in a format which was easy to export. #ukmedlibs

The third question; how would you use a repository in your organisation i.e. what materials would you include?

- @ricpaul but for our Trusts (particularly b/c we're at v beginning of the process) I would be happy to just record details of publications. Storing document is probably for the future #ukmedlibs
- @bethrawsono3 Use SherpaRomeo. I've not put links on ours. Where copyright allows, I've uploaded the publishers PDF, or authors post or pre print version. If SherpaRomeo says no, I've just uploaded the citation and abstract. #ukmedlibs

The fourth question; which options are you using or have you looked at? Dedicated solution, free solution, or adapt something you already have?

- @cate_newell Q4 We have a bespoke system but the software is being discontinued as of Nov this year...supplier is coming up with a similar offering, so hopefully we can transfer but may need to shop around! #ukmedlibs
- @farragher A4 Hi from Ireland. Our national health repository Lenus www.lenus.ie also runs on Open Repository, others on Eprints. #ukmedlibs

The fifth one; what are the barriers to implementing a repository? What would help you to implement?

- 🐦 @ambombolo In a research active Trust with limited resources and manual data input, the backlog seems endless #ukmedlibs
- 🐦 @bethrawson3 You need technical support. I've had massive headaches around copyright too. #ukmedlibs
- 🐦 @cate_newell Q5 barriers include: cost, time, getting buy-in/support from other depts. (e.g. IT!), staffing, copyright...but don't let it put you off! : -) #ukmedlibs

And the sixth and final question; how would you promote it to staff in the organisation?

- 🐦 @farragher A6 Look for success stories. Use key docs that are popular & heavily accessed to show the value of showcasing the Org's research #ukmedlibs
- 🐦 @andrewbrown234 Q6 Give it a name that means something to the target audience #ukmedlibs
- 🐦 @sueK4H We will be posting publicity examples we found in our toolkit soon. From straplines to emails to posters #ukmedlibs

With a few extra comments that the conversation brought to light:

- 🐦 @cate_newell plus getting the full-text of articles from authors is like pulling teeth, in my experience... #ukmedlibs
- 🐦 @rbht_library Clinicians are happy to share their work because it's to support patient care #ukmedlibs as well as seeing the satisfaction of their work being of use to others.
- 🐦 @cate_newell Q5 what helped us to implement an IR was spotting a need from R&D and a question of tenacity, they didn't 'get it' at first till we showed them what other Trusts do and how it could save them time AND make research outputs visible = sold #ukmedlibs
- 🐦 @ukmedlibs Sold indeed! All that hard work eventually comes to fruition! So essentially, never give up!! #ukmedlibs

During the chat it became obvious to me that the person to contact is @cate_newell who said: "Good night and thanks for the chat, time for my supper now! Happy to be contacted if people have questions about how our IR works, big fan of 'do one and share' (pinching) ; -) #ukmedlibs"

Otherwise you can find out more by looking at the toolkit available on the KfH blog <http://kfh.libraryservices.nhs.uk/knowledge-management/institutional-repository-toolkit/>

I am aware that I by selecting a few tweets per question I have barely covered the breadth of the chat on the night, so please do visit the ukmedlibs blog and access the transcript of the chat which is held on symplur.

To find out more about the next chat on 20th February, which offers an opportunity to contribute to CILIP's Big Conversation reviewing the ethical principles for the professional body, simply visit the #ukmedlibs blog – ukmedlibs.wordpress.com I'd encourage you to take

part whether or not you are a member of CILIP as the Twitter chats are usually fun and often produce food for thought!

Sam Burgess

Library Service Manager

Hampshire Healthcare Library Service (H04/H05/H07/H11/H16/H18/H34/H38)

How an institutional repository can add value and enable organisational knowledge to be shared

Every year the information analyst in our Research & Development (R&D) department would spend weeks combing through PubMed, searching for Trust authored publications, assembling incredibly long and complicated search strings, comparing results against spreadsheets of names of Trust researchers... then assembling a publications report to attach as an appendix to the annual R&D report to the Trust board, or a spreadsheet of figures to send off to funding bodies. Reports which would then disappear into filing cabinets, or creaky hard drives, never to see the light of day again...

Until R&D and the Library worked together to launch the institutional repository!

The repository serves a dual purpose:

Firstly, the publications data is collected, checked and added to the repository on a regular basis (by library staff), saving the R&D department literally “weeks of time” (direct quote from a very happy information analyst).

Secondly, the publication details are made freely available online – showcasing all the research that takes place in the Trust.

This data was already being collected, but placing it in the institutional repository added value to it by making it:

- ✓ **Visible, searchable, discoverable**
- ✓ **Organised** - by division, specialty or department
- ✓ **Shareable** – easy to Tweet about new articles, embed RSS feeds of new articles into subject resource hubs/intranet
- ✓ **Connected** – linking research articles to research projects on the Trust’s research information systems
- ✓ **Open Access** – including full-text versions of articles within publisher’s permissions, or linking to articles on publisher’s sites.
- ✓ **Promotable** – ability to create researcher profile pages listing publications (good for CVs!)
- ✓ **Patient engaging** – research participants can see what has been published in the studies they have been a part of

Institutional repositories don’t have to be limited to just published journal articles, they can also include other organisational assets such as patient information leaflets, Trust reports and publications, conference posters, innovations...the possibilities are endless! Your IR can either be

internal or external facing depending on the content (your innovations may be protected by intellectual property for example).

You don't necessarily need fancy technology to put together an institutional repository – it can be something as simple as a spreadsheet or a blog – any tool or mechanism you can use to capture and organise knowledge. If you're thinking about starting an institutional repository, see the [Knowledge for Healthcare Institutional Repository Toolkit](#) for ideas, tips & hints and [case studies](#).

Organising and mobilising knowledge is what we information professionals do best and institutional repositories are a great opportunity to develop and strengthen relationships with other departments in our organisations (we're certainly working closer with R&D now!) and to demonstrate our skills and value, so go for it!

(Editor's note: this article has already been published on the KfH blog – you can sign up to the blog to get alerts of blog posts - <http://kfh.libraryservices.nhs.uk/>)

Cate Newell

**Reader Services Librarian and RD&E Research Repository Manager
Royal Devon & Exeter NHS Foundation Trust (EXE)**

Want To Know More about Knowledge Management?

Get to grips with Knowledge Management in a safe and friendly environment.

Groups from the 2017-18 HEE/CILIP Leadership Development Programme are organising and facilitating four events on Knowledge Management.

These will be held across England during the month of September 2018 and are free to attend.

Events planned:

- Finding out what Knowledge Management is and why it is important
- Case studies from people who have applied Knowledge Management in the work place
- Knowvember 2018
- Randomised Coffee Trials
- Networking with colleagues

Dates, booking details and conference agenda soon to be confirmed and will be advertised in Swimming Pool.

Contact:

Natalie Gabe

Librarian for Hampshire Healthcare Library Service

Natalie.Gabe@southernhealth.nhs.uk / Natalie.Gabe@hhft.nhs.uk

Library Assistants' Webinar

Thursday 8th March 11.30am - 12.30pm

This is the first of a series of online webinars designed especially for library assistants. The hour long webinars will run every other month, enabling staff to meet and discuss topics with their peers whilst avoiding the need to travel.

No 1: *Demonstrating Value and Impact*

Host – Chloe George, Senior Library Assistant, GRH

Presenter – John Loy, NHS South CPD Lead

In 2017 LQAF, the Library Quality Assurance Framework, focussed on five key criteria when assessing NHS library and knowledge services. This inaugural webinar will explore criteria around one of the five.....

1.3c - *The positive impact of LKS can be demonstrated.*

Library users are often very good at providing feedback, and we will be looking at ways of helping turn that feedback into ways of demonstrating value and impact.

Real-life examples will be provided, the range of freely-available tools to help capture impact will be highlighted, and those attending will be encouraged to share examples from their own services. Attendees will be able to compare notes and experiences, and talk about any challenges they may have encountered in capturing examples of impact.

BOOKING

Just e-mail gwh.alis@nhs.net with "CPD – Value Webinar" as the heading. Please include your contact details and library code.

For further Information contact Chloe George chloe.george@nhs.net Tel 0300 4226495

NHS libraries go global

When I was about six year old I won a fancy dress competition dressed as a penguin, which was undoubtedly the beginning of a lifelong love of and fascination with these glorious creatures. To quote a punchline from the wonderful Channel 4 sketch show Smack the Pony, "You can never have too many penguins".

So this year, after many years of pondering it and 3 or 4 of seriously thinking about it (and saving my pennies), I finally took the trip of a lifetime and visited Antarctica. It's not an easy place to get to, 14 hour flight to Buenos Aires, followed by a 4 hour flight south to Ushuaia the capital of Tierra del Fuego – in layperson's terms the pointy bit at the bottom of Argentina. There was some compensation in that I had a far easier journey than my brother-in-law from Sydney who joined me, as we can fly direct to Buenos Aires from the UK while the Aussies take a longer route.

You then board a ship and have the joy of 36-48 hours crossing the Drake Passage. This is where the Atlantic, Pacific, and Southern oceans converge, and because the currents here meet no resistance from any nearby landmass they are free to get as turbulent as they like. I'm told we had a very good crossing but fair to say I am not a good sailor on the open seas, and I'll leave it at that. Very pleased to say that when you arrive on the Antarctic Peninsula it is absolutely worth the effort, and a couple of days later we crossed the Antarctic Circle itself.

Anyway, having gone all that way I was not going to miss out on a perfect photo opportunity to resurrect the "SWICE bag challenge". These hessian bags were promotional tools we had in the South West a few years back, sparking a semi-regular feature in the Swimming Pool whereby folks submitted photos of bags put to unusual uses or in far flung places.

I would like to claim the SWICE bag challenge crown, for this shot of a Gentoo penguin on Cuverville Island 21st January 2018. It's been quite the hit on Twitter too.



(Editor's note: does anyone still have a bag or another promotional item, and can challenge for the crown!?)

John Loy
Library & Knowledge Services Manager,
North Bristol NHS Trust. (SMD)

Network News

Farewell to Jake - AWP's Graduate Trainee Library Assistant

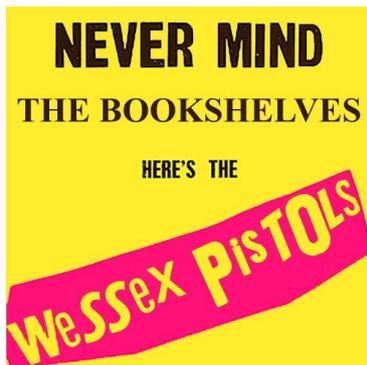
Jake Procter, our Library Assistant, has left us to take up his first professional post at a Law firm in Bristol. Jake joined us in 2014 and has played a key role in the Library and Knowledge Services team. During his three years in post he has been a member of three SWIMS groups, including the Systems Group. He has also achieved a professional Library and Information Studies qualification through studies with the University of the West of England. We wish Jake all the best and every success with his future career.

Helen Watts
Library Manager
Avon and Wiltshire Mental Health Partnership (AWP)



Bye then....

Over Christmas, RCH said goodbye to Chris Johns, who first joined us in 1995 (interviewed by Anne Brown) as a cataloguer on a fixed term contract. Chris arrived fresh from the Guardian newspaper, and he still has the Guardian mug to prove it. He has gone to Plymouth University to work as an Information Specialist in Medicine and Dentistry. Rumour has it he has bought a new shirt for the occasion. Thanks to all who sent kind thoughts and wishes, they were all included in his card. Many of you said you would miss his knowledge, willingness to help, and sense of humour. Amongst other leaving gifts, he is now proud owner of a framed section of carpet from the old Postgrad Library, some LP picture frames complete with fake album covers, a knitted likeness made by Silvia our cleaner, and a bespoke Cornwall Health Library mug which we expect him to keep for at least another 22 years. Good luck from all of us Chris!



New library assistant at TAU

Natalie Parsley is the newest member to the Library service at TAU joining in January 2018. She has eleven years' previous experience locating books for customers, school account sales, running a fiction book-group, and ordering stock for Waterstones Bookstores



She has a background as a Fine artist, writes an art blog in her spare time and has exhibited widely around Somerset including showing her work as part of the hospital's art and design programme, *Art for Life*. You can read her blog here:

<http://www.spannerintheworkz.blogspot.co.uk>

Her role will include; supplying book and article requests and queries from library users on the enquiries desk, by phone and by email.

Natalie says: "I am really excited to have joined the highly experienced team at Taunton and to be working in an environment where I am constantly learning new things about research. I look forward to working with staff and students at Musgrove and the Somerset Partnership."

News from Bath (W14)

Congratulations to Caroline Wilson (Library Assistant) and husband Richie on the birth of their son, James, at the end of November. Although he was a few weeks early James is doing well and went home with Caroline fairly soon after the birth.

We welcome Lisa Hirst (Librarian) and Liz Pope (Library Assistant – fixed term covering Caroline's maternity leave) who have joined the team. Lisa's most recent post has been as a school librarian and Liz has previously worked in public libraries.

Jason Ovens
Head of Library & Knowledge Services
W14

New Starter at Torbay (TOR)

Hello, my name is William and I am the new Graduate Trainee at the Torbay hospital library. As I'm writing this it's still only my third day so I'm busy getting to grips with all the different procedures and trying to remember which site does what!

I'm originally from Shropshire and my background is in Medieval History so this is quite a big departure for me but I'm sure I'll get the hang of it. I've also had great support from all the team here at Torbay while I get settled.

I'm really looking forward to learning as much as I can from this posting in preparation for a postgraduate course.

William Johnson
Graduate Trainee
Torbay Hospital (TOR)

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