



Library & Knowledge Services Annual Report: 2014-2015

Scope:

The Library & Knowledge Services (LKS) annual report is relevant to Trust stakeholders responsible for, or committed to the access and implementation of knowledge as a core element of quality patient care. The purpose of the report is to review LKS activity and achievements during 2014-5

Introduction:

LKS aims to ensure that all UHCW staff and students have access to an open learning environment that actively encourages the use of information and research based knowledge to improve healthcare provision within the Trust. This annual report highlights service performance towards this goal for 2014-2015.

Quality Standards and Evaluation

NHS Library and Knowledge Services are guided by the Health Education England NHS Library and Knowledge Services Framework published in December 2014.¹ It is the role of LKS managers to ensure that local strategy is aligned both to the framework and to principles of the national framework targeted for the West Midlands. LKS is assessed annually by the NHS Library Quality Assurance Framework (LQAF). This is a rolling programme of annual self submission and 3

¹ NHS Health Education England. (2014) *Knowledge for healthcare: a development framework for NHS library and knowledge services in England 2015 – 2020*. Available from: <http://hee.nhs.uk/wp-content/blogs.dir/321/files/2014/12/Knowledge-for-healthcare-framework.pdf> [Accessed 26/05/2015]

yearly site inspection visits. LKS scores against LQAF standards for 2014-15 are outlined below:

Domain:	Score	Standard
Strategy	5	6
Implementation Plan	10	10
Operational Management	6	6
Finance and Budgets	8	8
Staff Structure and Skill Mix	6	6
Staff Development	4	4
Information Technology	4	4
Facilities and Equipment Management	2	2
Library/Knowledge Service Space	8	8
Service Promotion and Marketing	4	4
Information Skills/Literacy Training	8	8
Library/Knowledge Services	22	22
Knowledge Management	2	2
Total	89	90

LKS reporting lines through the Trust are via the Training, Education and Research Committee and ultimate responsibility lies with the Director of Quality.

CSB Library Activity

Library & Knowledge Services (LKS) membership

Current library membership stands at 4096. Membership records held on the Library Management System are updated on a continuous basis to ensure that the figure truly reflects accurate active library usage. Coincidentally this figure remains identical to that of last year however the totals for each user group differ slightly. Nursing & Midwifery continue to be the highest user group in terms of library usage and the statistics show that the Admin & Clerical group have increased significantly by 30% which is particularly encouraging this year. Figure 1 identifies the break down per user group:

Library & Knowledge Services User Groups 2014-2015

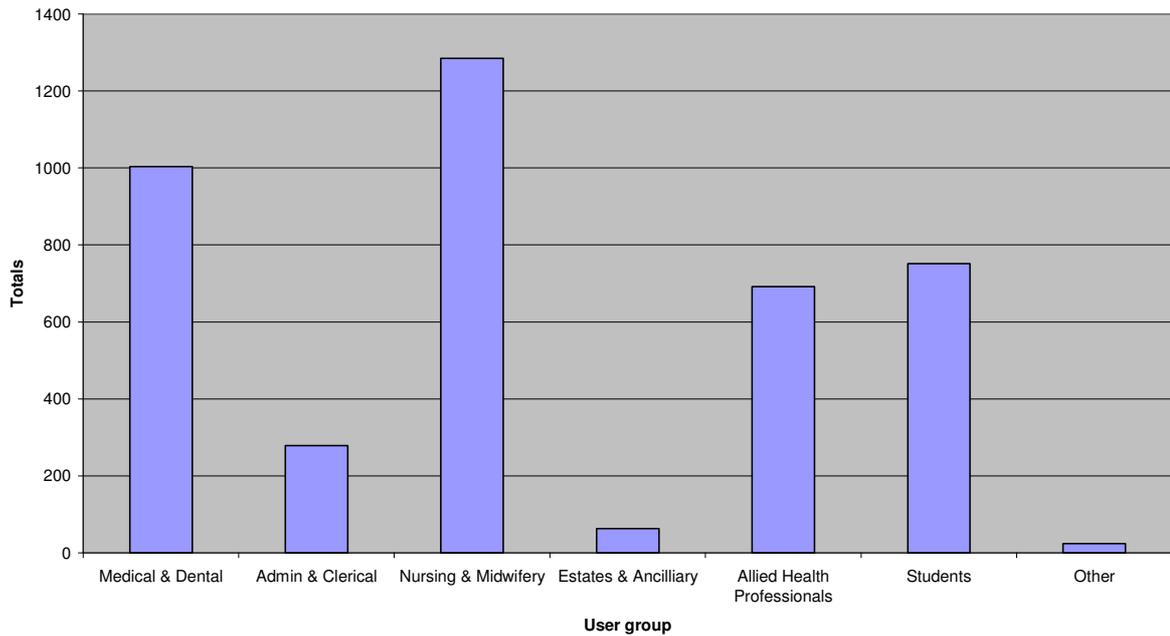


Figure 1

Use of CSB library building

Footfall

Physical usage of the library is monitored by an electronic footfall system which records both entrance and egress on an hour by hour 24/7 basis. The footfall counter has allowed us to identify specifically busy periods within each day/ week / month and staffing levels and rotas are monitored and remain reflective of these requirements. Total footfall for the year was 119,078 which is an increase of almost 4% for the year. The highest recorded levels to date were in September 2014 when 10,958 library users visited the library in a 4 week period and the service now consistently achieves in excess of 10,000 visitors per month. Figure 2 shows the breakdown of monthly figures for financial year 2014/5.

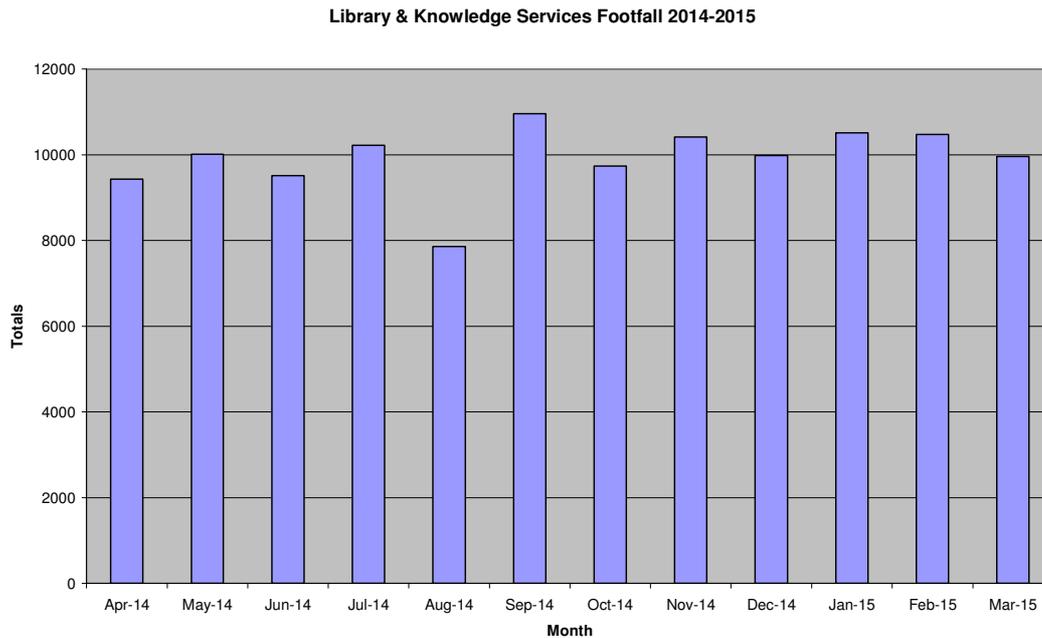


Figure 2

Induction

The Trust's formal 3-day induction process for new staff overseen by the UHCW Learning and Development Department takes place on a fortnightly basis. The library's 16 Intranet computer work stations are always heavily utilised throughout the 3 day process for e-learning purposes. Staff who are new to UHCW are given a range of information relating to library resources and services and encouraged to register for library membership. LKS staff have also provided induction talks / tours to groups and individuals on an ad-hoc basis outside of the formal process.

User induction sessions	711
1 – 1 user induction sessions	283
Group user induction sessions	28
Average time spent on delivering each session	0.5 hours
Number of library users receiving induction this year	1235

The number of library users receiving LKS induction this year has significantly increased for the third consecutive year, the total increase for 2014-5 being 43%. However, numbers have been on the decline since January following the discontinuation of LKS Induction and facilitated E-Learning within the Library.

E-Learning Zone / mandatory training

As previously mentioned there are 16 heavily used NHSnet computer work stations available within the Library, known as the E-Learning Zone and these are most often used for accessing e-learning modules for both induction and on-going mandatory training purposes. It is also possible for staff to access UHCW Trust emails from these terminals in addition to general internet access. They continue to be reserved for either individual or group sessions.

Use of open access / student network

There are 37 open access / student network computer work stations available within the library and sections of these have continued to be reserved specifically for group training sessions as required. The feedback from these sessions has been very positive.

Use of library foyer / display area

Other departments within the Trust often use areas of the library foyer space to promote aspects of their work and some have had regular drop-in sessions to identify potential interest. For example, research funding proposals and intellectual property advice clinics in collaboration with the West Midlands Research Design Service (WMRDS), have been held on a regular basis. A local publications display is also updated by library staff which showcases the work published and affiliated to UHCW and its' partners.

Quiet space

Feedback from Trust staff has indicated that they welcome being able to use the library purely as a quiet space away from their busy departments. There has been a sustained increase in the positive feedback obtained from users regarding the library as a welcoming and pleasant space to work / rest in. The inclusion and development of a fiction collection as part of the Improving Working Lives initiative has also been received positively.

Library catalogue

A recent change of supplier to Koha for the Patch wide Library Management System has allowed LKS to further develop its presence on the Web which provides

improved access to a range of resources in one place. The site is administered by LKS staff and as such the updating process is faster and more effective. This was implemented in September 2014 following a tender process lead by the Head of Knowledge Services at UHCW. The system functions across the whole Patch group which includes library services at Coventry Partnership Trust, George Eliot Hospital NHS Trust and South Warwickshire Foundation Trust.

Library stock

The service currently holds 18,424 items of stock available for loan. An annual stock take is carried out in order to identify potential losses during the year. The stock is weeded each year and older stock is withdrawn in compliance with the service's Withdrawal Policy. Withdrawn items have been offered for sale and used to generate income in order to re-invest in library stock. The essential core titles are purchased in addition to titles from a variety of specialty reading lists. Suggestions for stock have also been welcomed from individual library users and in the majority of cases have been acquired.

A total of 27,635 items were borrowed from the library and 1552 new items were added to stock in the last financial year.

Expenditure and Funding

Staff WTE levels have remained constant and are in line with National recommendations related to skill mix and Library staffed hours.

Qualifications	WTE
Professionally qualified library staff (i.e. 1st degree in library information science (LIS), PG Diploma, Masters or PhD in LIS, MCLIP, FCLIP or ALA (former Library Association exams)	6.60
Para-professionally qualified library staff (i.e. ACLIP, LIS NVQ, City and Guilds)	2.95
No library qualification (include here NVQs in Customer Service, Business Administration etc.)	1.70
Total	11.25

Journal subscriptions remain the main non pay expenditure item, followed by books and databases. Suppliers of print and electronic products have to be listed on the National Institute Clinical Excellence Framework Agreement and all subscriptions are reviewed on an annual basis with regard to:

- Proof of full text need via Athens usage statistics
- Interlibrary loan statistics (for new title suggestions/current subscriptions with embargos/non subscribed titles)
- Justification of need in writing

In addition to this individual journal titles are compared for cost and access facility across:

- Publisher/s
- Publisher journal bundles
- Subscription agents (EBSCO/KLUWERS WALTER OVID)
- Aggregated services (EBSCO Medline Full Text/Proquest)
- UHCW participation of regional consortium contracts for subscription bundles and/or aggregated services

Income generation

The total income generated for this financial year is £8,071.50. This is made up from departmental account charges, fines for the late return of library material, sales of outdated material and photocopying / printing services etc.

Overall income amounted to £503,492, £ 241,096 of which from educational levies (MPET) and income generated. Total expenditure came to £512,599.00.

Clinical Evidence Based Information Service (CEBIS)



CEBIS is a unique value-added service that facilitates the implementation of research knowledge within the Trust. CEBIS Information Specialists carry out comprehensive searches of multiple international databases, produce evidence summaries and provide access to full text papers upon which clinicians are able to make evidence based decisions regarding patient care or service development. This is supported by an in-house ICT system which provides seamless, secure access to all documents, discussion forums and papers. Clinicians are also able to make CEBIS referrals directly through individual patient records demonstrating evidence based practice at the point of care.

The service was a featured case study in the new Health Education England NHS Library and Knowledge Services Framework “CEBIS exemplifies the beneficial impact of proactive customer-focused knowledge services on therapeutic decisions and patient outcomes, patient experience and safety and cost savings.” CEBIS Specialists and the Head of Knowledge Services have continued to be invited to speak at national meetings for the Chartered Institute of Library & Information Professionals (CILIP) Health Libraries Group², the North West Health Librarian Network³ and the Scottish Health Information Network⁴. The production of a CEBIS video with patient involvement has been a successful tool for demonstrating the service internally and externally.

² 2014 CILIP Health Libraries Group Conference: *CEBIS: Integrating knowledge acquisition and dissemination to clinicians and patients.* [presentation] / Anna Brown, Jacqui LeMay, Kathryn Butler, Amber Dunlop, Mandeep Heer. [online] available from: <http://www.cilip.org.uk/health-libraries-group/events-conferences-and-seminars/conferences/hlg-conference-2014/hlg>

³ 2014 North West Health Librarian Network Managers Meeting: *CEBIS: the development of an ICT system to optimise point of care service management.* [Presentation] / Jacqui LeMay. [online] available from http://www.lihnn.nhs.uk/images/Documents/HCLU/Library_Managers/Mar_2014/CEBIS_M14.pdf

⁴ 2014 Scottish Health Information Network. Measuring impact study day: *Measuring the impact of CEBIS (Clinical evidence based information service)* [Presentation] / Jacqui LeMay. [online] available from http://www.shinelib.org.uk/assets/0000/1749/Jacqui_Lemay_presentation.pdf

Trust staff submitted 540 referrals to CEBIS, 65 of which were via CRRS, our patient management system. The table below shows the variability in time spent in dealing with these referrals.

Time	No. referrals;
< 1hr	40
< 2hrs	95
< 3hrs	20
< 4hrs	202
> 4hrs	183

In August 2014 CEBIS launched an online survey to capture service outcomes. Staff rated their overall experience of the service as 9.5 out of 10.

The majority of referrals submitted continue to be complex and in areas where research evidence is poor. CEBIS Evidence in Practice Groups (EPGs) are now embedded in several Specialties. The aim of an EPG is to review, discuss

and draw conclusions from the evidence located. This can result in a change in practice, confirm current practice, demonstrate the need for a guideline, audit, patient information or research.

In the past year several referrals have resulted in case report publications and conference paper/poster presentations, ensuring external access to knowledge acquired in the Trust.

Examples of referral cases and impact can be found in **Appendix A**.

Using CEBIS on this occasion:	
Provided new knowledge to me	77%
Provided new knowledge to my Specialty/Department	70%
Resulted in a better informed clinical decision	46%
Resulted in a better informed patient consultation	44%
Resulted in the development/revision of a guideline/pathway	16%
Resulted in the development/revision of a clinical service	9%
Resulted in a research proposal	7%
Resulted in a conference paper/poster submission	11%
Confirmed limited research evidence available in this area	18%
Confirmed current practice is best practice	21%
Saved time	37%
How did CEBIS change patient care as a result of the information given on this occasion?	
Advice given to patient or family	38%
Treatment (medication, therapy or procedure)	46%
Did you handle this situation differently as a result of the information CEBIS gave you?	
Definitely yes	34%
Probably yes	43%
What adverse events did using CEBIS avoid on this occasion?	
Patient misunderstanding of disease or treatment	25%
Additional testing or procedures	7%
Misdiagnosis	5%
Patient morbidity	4%

Electronic Resources and Services

E-Journals

Journal subscriptions (not including titles in regional consortium package deals):

	2015	2014
No. of unique journal titles received by subscription	119	122
No. of unique journal titles received as print only titles	19	19
No. of unique journal titles received in electronic format only	78	81
No. of unique journal titles received in both print and electronic format	22	22

Online Journals purchased Jan-Dec 2014 in partnership with regional consortium package deals:

- ProQuest Hospital Collection (>3,780 journals plus >20,000 nursing & allied health dissertations - subscription Jan 2014 - March 2015)
- Oxford Journals Medicine (80 journals) (discontinued Dec 2014 and replaced with Elsevier ClinicalKey in Jan 2015)
- Ovid WM27 Journals (27 journals)
- Ovid JAMA Journals (6 journals)
- Ebsco Medline with Full Text (>1,470 journals) has been upgraded to Medline Complete (>2,400 journals)

New subscription for Jan-Dec 2015

- Elsevier ClinicalKey (>600 journals plus >1100 online textbooks) - this provides the first significant collection of online books for several years. It includes many of the popular specialty texts for junior doctors and significant reference works on a number of key topics. Books are regularly updated by the publisher to ensure the latest editions are available. The ClinicalKey subscription includes a licence to use the images, videos and illustrations contained within it for educational presentations within the Trust. Clinical Key replaces and augments the journal subscriptions that used to be on ScienceDirect.

The titles in the above bundles may be accessed either via the provider websites or via EBSCO A-to-Z with LinkSource.

A-to-Z with LinkSource continues to be the main online access point for full text. By the end of March 2015 approximately 225,000 titles were listed on A-to-Z, compared with 170,000 in March 2014. LinkSource enables direct access to full text articles from other online resources without having to log in separately to A-to-Z and search for the required title. The numbers of A-to-Z searches, page views and title accesses have fallen in 2014-15 compared with 2013-14; however, direct full text accesses via LinkSource more than doubled during the same period, showing the effectiveness of enabling LinkSource links in as many resources as possible and promoting their use. The trend is for users to want seamless access to full text from whatever online source they are using, rather than having to open up a separate resource to search for it.

EBSCO A-to-Z - Direct access to the A-to-Z website to look for journals 1 April 2014 - 31 March 2015

Total logins: **6001** (2013-2014 = 6244)
Total searches: **18,988** (2013-2014 = 21,576)
Total page views **35,333** (2013-2014 = 37,471)
Total titles accessed: **8158** (2013-2014 = 8231)

EBSCO LINKSOURCE - Links in to full text articles from top 5 resources 1 April 2014 - 31 March 2015

Total full text accesses: **5238** (2013-2014 = 2240) up 133%
Access via PubMed: **2526** (2013-2014 = 519) up 386%
Access via Google Scholar: **615** (2013-2014 = 176) up 249%
Access via Ovid journals & databases: **423** (2013-2014 = 151) up 180%
Access via ProQuest: **76** (2013-2014 = 83) down 8%
Access via Elsevier products **42** (2013-2014 no LinkSource linking)

Mobile Apps

Elsevier's ScienceDirect mobile App was discontinued in 2014; however, Elsevier's new ClinicalKey website is mobile-friendly and requires no separate App. All subscribed Ovid journals are available to iPad users on a new App, OvidToday. Since LKS started offering OvidToday in January 2015, there have been 218 journal article downloads by library members. Ebsco updated its DynaMed App, making it easier to install and use on Android and Apple devices. 722 users used the NICE British National Formulary and BNF for Children for mobile devices during 2014-15. The new library catalogue and website are mobile-friendly, rendering BookMyne obsolete. LKS provides information about other relevant mobile resources via the Mobile Apps page of the library website.

The Electronic Systems and Resources Librarian (ESRL) is actively involved in the Midlands regional mobile devices group and attends regular group meetings and mobile-related events, including working in a small group on a mobile devices survey and literature review, culminating in a poster presentation at the 2014 CILIP Health Libraries Group Conference: *The use of mobile technology in health libraries: a report on a UK based survey* [poster] / David Chamberlain, Martin Elcock, Preeti Puligari, Helga Perry, Karen Wight. DOI: 10.13140/RG.2.1.1683.8560

Current Awareness

LKS continues to use various methods of current awareness, including Netvibes dashboard websites, news feed on the new library website and e-mail alerting linked to subject searches on all the major databases.

Social Networking

The LKS @UHCWlibrary Twitter account is maintained by the ESRL. It is used mainly for publicity and promotion of library resources and events and keeping in touch with relevant organisations.

Athens

All UHCW staff are eligible for a free Athens account to enable them to access online resources purchased locally at UHCW or nationally via the NHS national core content agreement and NICE. All Athens accounts are valid off-site as well as within the Trust.

Total UHCW Athens accounts on the system as of 31/3/15: 2230 (the total as of 31/3/14 was 2199)

Total Athens Logins to all available resources April 2014- March 2015: 38,316 (the total for 2013-2014 was 24,728)

Top 6 Athens resources accessed Apr 2014-Mar 2015 (previous year's total in brackets):

- | | |
|---|--|
| 1. EBSCO A-to-Z | 6549 (6244 - 1st) |
| 2. OVID (all) | 4681 (3362 - 2nd) |
| 3. UpToDate | 4627 (2552 - 4th) |
| 4. Elsevier (ScienceDirect/ClinicalKey) | 4360 (2103 - 6th - ScienceDirect alone) |
| 5. EBSCOHost Databases (all) | 3687 (2907 - 3rd) |
| 6. ProQuest | 1943 (NICE Evidence 2386 - 5th) |

The subscription to UpToDate is provided by Medical Education.

suitable material for publication without having to pay article processing fees. 7 articles were published by UHCW staff and/or Warwick medical students based at

UHCW during 2014-15, with a further 4 submitted and awaiting a decision on publication.

Knowledge Skills Training

Knowledge skills training delivered by the Knowledge Skills Librarian (KSL) has seen a growth in demand for skills tuition and mentoring. There are 16 knowledge skills courses covering information resources, literature searching and critical appraisal. These are delivered in a variety of formats from large group induction presentations to 1-to-1 sessions. The average time for a training session remains 1.5 hours.

1-2-1 Sessions by Staff Group

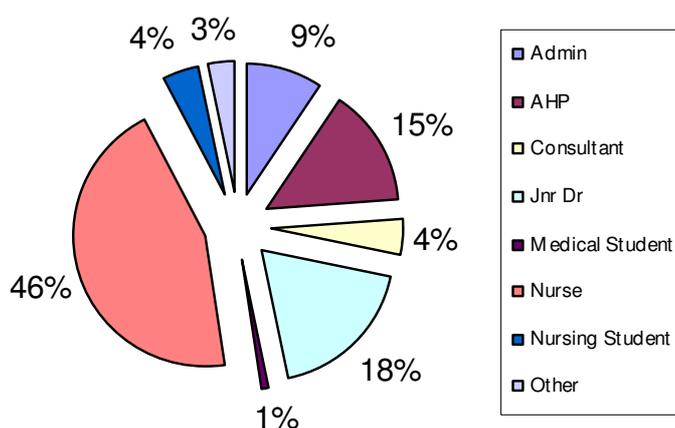


Figure 3

The largest increase has been for tailored individual or group sessions relevant to either topic or staff group. As shown in figure 3, nursing staff continue to be the most proactive cohort in seeking knowledge skills training.

Demand has remained consistent for embedded training sessions for educational courses provided by the Trust such as the Band 5 Nursing Leaders Course and postgraduate training. Feedback from attendees has continued to be positive (**see Appendix B**) resulting in word of mouth marketing and repeat Specialty training linked to medical rotations.

Details	2013-14	2014-15	% increase
1-2-1 Session	190	248	30%
Group session held	20	38	90%

Staff attending Group Session	339	652	92%
% of WTE UHCW staff who received KSL training	8.6%	10.2%	1.6%

The top resource for 1-to-1 sessions remains the Cumulative Index of Nursing and Allied Health Literature (CINAHL), followed by Medline (PubMed) and Critical Appraisal. The number of group requests for tailored critical appraisal sessions has seen the largest increase. This tailored approach has resulted in several groups forming journal clubs.

There has been some difficulty in delivering hands on training sessions in the Library due to the age of the training laptops and an unreliable WIFI access. This has now been resolved with new laptops and a change in WIFI connection changed from UHPUBLIC to W4L5GR4V3102.

**Information Consultancy – information searches and enquiries:
(inclusive of CEBIS)**

The Knowledge team have seen an increase in the number of search requests for corporate business. This has included work related to the 'Together Towards World Class' programme, the Care Quality Commission reporting of large acute Trusts and/or Trauma Centres, shared care pathways, business cases and research submissions. The team have continued working closely with the Clinical Guidance Governance Group and are reviewing work flows to facilitate the implementation of research evidence into in-house guideline development and revision.

The table below shows the breakdown of search workload over the last three years.

	2012-12	2013-14	2014-5
Total number of mediated literature searches	1119	1239	1191
No. of mediated searches taking between 10 minutes but less than 1 hour	126	60	90
No. of mediated searches taking 1 but less than 2 hours	268	526	285
No. of mediated searches taking 2 but less than 3 hours	172	166	237
No. of mediated searches taking 3 but less than 4 hours	283	254	332
No. of mediated searches taking more than 4 hours	270	233	247
Number of procedural/directional enquiries	3828	4057	4789
Number of information resource related enquiries	2376	2052	4248

LKS Profile: Awareness, Marketing and Partnership working:

User surveys have demonstrated that awareness of LKS services and resources is an area that could be improved. The Head of Knowledge Services is currently working with UHCW Communications to develop a marketing strategy.

External Working Partnerships

The Library team continue to actively participate in the development of LKS services at regional level in relation to:

- *Mobile Devices*
- *Regional Trainers Group*
- *E-Resources Procurement*
- *West Midlands Health Library Strategic Management Group*
- *Warwick Medical School Information Group*
- *Coventry and Warwickshire PATCH Library Group*
- *Chair of CILIP Career Development Group West Midlands Division, including chairing committee meetings & AGM, attending national meetings, helping organise events, attended CDG national conference as helper.*

Overall Summary:

This annual report shows an overall increase in the use of LKS services in both the physical and electronic environment. Our value-added knowledge services continue to demonstrate their importance in the delivery of quality research informed healthcare and in educating our workforce in knowledge skills. The LKS team can be proud of their achievements and their on-going commitment to improving service experience for staff, students and patients alike.

Key Strategic Work Objectives for 2015-2016:

LKS OBJECTIVES	Deliverables	Timescale
<p>LKS General</p> <ul style="list-style-type: none"> Finalise LKS Strategy for review and approval 	Signed off strategy	By December 2015
<p>CSB Library</p> <ul style="list-style-type: none"> Undertake a review of Library security systems including Self Issue to replace the current old failing system. Investigate with TER & RD&I capacity for the development of the UHCW Knowledge Hub 	<p>New security system in place and new self- issue machine working</p> <p>Option appraisal and feasibility study competed</p>	<p>By December 2015</p> <p>On-going</p>
<p>Knowledge Consultancy General</p> <ul style="list-style-type: none"> Finalise policy in collaboration with CGGG for evidence based in-house guideline development and review Actively promote benchmarking, horizon scanning and current awareness services for corporate business in addition to clinical services 	<p>New policy in place and implemented</p> <p>New service areas reported for annual report 2016</p>	<p>October 2015</p> <p>March 2016</p>
<p>CEBIS</p> <ul style="list-style-type: none"> CEBIS System contract review and option appraisal for future system development in collaboration with EPR project team Further integration of CEBIS and EPGs within the Trust towards a research based culture 	<p>New development plan initiated</p> <p>Number of contact points and EPGs. Outcome impact data</p>	<p>On-going</p> <p>On-going</p>

<p>E-resources & Systems</p> <ul style="list-style-type: none"> • Development of LKS e-journal to promote and showcase how knowledge skills and services impact on healthcare • Development of bibliometric services to measure the impact of Trust published research • Review of Discovery platforms for resource access and potential links to EPR project 	<p>Publication of E-journal</p> <p>Service launch publicity and activity statistics</p> <p>West Midlands E-procurement consortium decision. Research implication of preferred product to Trust EPR plans.</p>	<p>February 2016</p> <p>March 2016</p> <p>January 2016</p>
<p>Knowledge Skills</p> <ul style="list-style-type: none"> • Annual knowledge skills training calendar produced to identify capacity for more shared integrated learning within the Trust • Hold quarterly staff CPD problem literature searching led and rotated by LKS professional team 	<p>Calendar populated and stakeholder discussions held with Education and Learning and Development to identify courses/training that may be appropriate to integrate knowledge skills training</p> <p>Present a problem case by email on a quarterly basis for individual searching, followed by discussion and debate for joint learning</p>	<p>January 2016</p> <p>October 2015</p>

Report by : Jacqui LeMay and Denise King

October 2015

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Title of Group/Department/Specialty:	Quality and Training Education & Research

Version	Consultation Committees/Meetings/Forums etc <i>List all Trust Committees/Forums/Bodies/Groups where this version of the CBR has been consulted on during the development/review stages.</i>	Date
	<i>(This table must be complete or the CBR will be returned to the author)</i>	
	Library & Knowledge Services Management Team	June 2015
	Library & Knowledge Services Team Brief	27/08/2015
	Training, Education & Research Committee	10/12/2015

Appendices:

Appendix A: Examples of CEBIS Impact:

Referral	Outcome / impact
Is there a link between Harlequin ichthyosis and juvenile idiopathic arthritis or any other arthritis?	Resulted in better informed clinical decision and patient consultation. "This was invaluable and will be used to hopefully publish a review article in the field."
Jamaican optic neuropathy: any information about this obscure disease	"CEBIS helped a lot with the patient consultation. This is a remarkable example on how a fast CEBIS service response turned around an unhappy patient who had lodged a complaint into a happy patient who shook hands at the end of the consultation. As a professional, I have learnt something about an obscure condition and did not look like a lost soul with the patient that was sent to me to pacify. The turnaround time from Friday to Monday PM to be up to scratch with up to date clinical knowledge was remarkably short but up to the challenge to CEBIS"
Sympathetic ophthalmia in vitreoretinal surgery	Improved information for consenting patients, improved awareness amongst clinicians of the importance of scrutinising the non-operated eye postoperatively
Is barrier laser advocated for the treatment of progressive retinoschisis?	Treatment is rarely advocated and can cause complications; unnecessary treatment and risk avoided. Anxious patient better informed; patient information leaflet will be produced.
1616: What is the current evidence base for the use of hypertonic saline nebulisers in infants with bronchiolitis? Revised Query: Is 3% nebulised hypertonic saline effective in relieving symptoms in infants with severe bronchiolitis to decrease admissions to ICU/HDU? <i>This has been recommended by a Cochrane review in 2008 and is standard practise in the Birmingham Children's Hospital. Our current policy is not to use hypertonic saline. This review will be presented to senior staff and may result in a change of practice</i>	Cochrane papers reviewed. Full EPG delivered. Results found to be irrelevant to UHCW clinical setting. Further multicentre UK study confirmed this treatment to be ineffective. <i>Comment from Dr Simmonds: Dear All, I think we can now put this particular question "to bed". The most recent publication (SABRE study) in Thorax reports the outcome from a multicentre UK trial. I am struggling to access the full article presently but am pleased that it vindicates our position that nebulised hypertonic saline does not have a role in the routine management of bronchiolitis.</i>
2083: What is the best treatment for acute MCPJ (metacarpophalangeal joint) radial collateral ligament injury of the finger? Different operative techniques available vs conservative Would be interested to see any papers that appear about chronic injury and reconstruction too please <i>interested primarily in different operative techniques (e.g. approach to the joint) as patient coming for surgery on Friday. NOT interested in THUMB also information about conservative and long-term treatment for chronic condition though this is less urgent.</i>	<i>Miss Whalley's response: I will be consenting the patient for dorsal and volar incisions on their hand as the evidence suggests that you can need both and I could have ended up doing a suboptimal repair through one.</i> CEBIS referral impact: Provided new knowledge to me, Resulted in a better informed clinical decision, Resulted in a better informed patient consultation Advice given to patient or family, Treatment (medication, therapy or procedure), Post hospital care or treatment
1829: What evidence is there of a link between prophylactic treatment with cotrimoxazole and hypoglycaemia in a child with	Following an extensive search and further correspondence with the clinician, a drug not mentioned was identified as the cause (6-mercaptopurine and maintenance therapy.) <i>Dr Neuling's response:</i>

normal kidney function

Child with leukaemia on cotrimoxazole prophylaxis having episodes of hypoglycaemia. These are happening most frequently on Monday mornings and the cotrimoxazole is given twice a day on Saturdays and Sundays and then not for the rest of the week. I have seen papers regarding hypoglycaemia with high dose cotrimoxazole in HIV patients who also have kidney problems but would like to know if there is evidence of it happening in other patient groups at lower doses with normal kidney function.

*Thanks Amber - this has been so useful, for this patient and also to explain 2 other patients like this I have had in the past. None of the papers seem to be UK based so I am keen to try and pull this together to present it possibly at the RCPCH annual meeting haem onc session - I will let you know if it gets that far
Dr Laura Roe: I am one of the paediatric registrars. I have been doing some work on the information you found on hypoglycaemia in children with ALL for Dr Neuling. It has been accepted for a poster at the RCPCH conference in Birmingham. I wanted to let you know and also check you were happy to be put on as a contributing author?*

Appendix B: Knowledge Skills Training Testimonials:

Feedback from a Senior Radiographer

I just want to thank you for the help you gave me last month training me how to carry out a literature search for the Masters module I was undertaking. I have just received the results from Warwick Medical School and am thrilled to have been awarded a Grade A with really nice feedback saying that I had submitted an excellent piece of work with good critical appraisal. I couldn't have done it without your comprehensive training session – so a BIG thank you!

From a Dermatology Registrar

A really useful session! We do not get enough teaching on critical appraisal and it is a very important skill for everyday practice and interview preparations. Excellent presentation and step by step guide was really easy to follow making it easier to understand the important points.

From a Senior Radiographer

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From a nurse in a group CINAHL session

*Great session. Particularly liked the handouts and the way Petra went through examples with us.
Thanks*