

Developing Electronic Information Resources in London

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The development of electronic information resources in the UK National Health Service had until recently been essentially hospital-based, although wider partnerships had developed with education consortia. Nevertheless the development was patchy, did not provide equitable access to all staff, and did not provide the best value for money.

The government's Information for Health strategy made it clear that "fast, easy access to local and national knowledge bases" (IfH 1.38) was essential, and that "every NHS professional is to have on-line access to ... evidence on treatment" (IfH 1.48).

The aims of the electronic resources project are to provide electronic access to library and information resources for every health care worker in London on a 24 hours a day / 7 days a week basis; and to ensure equitable access to resources regardless of professional group and place of work.

The development of clinical governance and evidence-based healthcare requires health professionals and managers to have access to the latest evidence. There is a consequent demand to extend the use of library resources outside the walls of the physical library.

Current electronic library projects, however, only cover small areas, and rely on non-recurrent funding. There is not equitable access for all staff.

The supra-regional Knowledge Access project (KA24) is a coherent response across two NHS regions to demonstrated demand. It aims to encourage and facilitate the uptake of evidence-based practice and underpins the principles of clinical governance by extending library services to NHS staff who have not previously used them. It builds on and extends existing projects, and will be available over the Internet from anywhere at any time. It will comprise bibliographic databases covering medicine, nursing, mental health, health care management, and allied medicine, together with full text journals relevant to British health care workers of any profession, with easy-to-use links from reference to full text at article level.

Implementation involves the development of publicity and training materials, and the organisation of training sessions. It also needs system support and the useful presentation of management data. The role of local health care libraries and librarians will be as publicisers and trainers, providing local administration and being the first port of call for users who need help. KA24 will be complementary to their existing roles.