## Getting the Library Ready for Medical Students at Lancaster University

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At the end of February 2006, after many years of planning, the Cumbria and Lancashire Medical and Dental Consortium heard that the Higher Education Funding Council for England (HEFCE) and the NHS had given the go-ahead to plans to start training medical students at Lancaster University. The first intake was to be in September 2006, in six months' time. This article will explain the background to the development and set out how we have gone about ensuring the library and information resources the students will need are in place.

Medical education at Lancaster has grown out of the overall need for more doctors in the UK. Further expansion of the existing medical schools in the North-West – Manchester and Liverpool - is not desirable, because those institutions are already very large and find it hard to find enough clinical placements within easy reach. Cumbria and North Lancashire hospitals, GP surgeries and clinics can find it hard to recruit enough doctors, and the hope is that if more people spend time in this area during their training, they will want to stay here once they are qualified. With our pattern of small towns and rural communities, we can provide a counterbalance to the heavily urban experience offered by Manchester and Liverpool.

The Cumbria and Lancashire Medical and Dental Consortium comprises Liverpool University, the University of Central Lancashire, the St Martin's University College (soon to be the University of Cumbria), Lancaster University and the University Hospitals of Morecambe Bay Trust (Royal Lancaster Infirmary, Furness General Hospital in Barrow, Westmorland General Hospital in Kendal). Liverpool University's curriculum is being used to set up training for doctors in Lancaster, for dentists in Preston (UCLAN) and for PAMs through St Martin's. In late August, six second-year students arrived – they have volunteered to move to Lancaster for the year, to "buddy" the new first-years. And then fifty first-year medical students arrived in Lancaster in late September, selected for the most part from students who had very nearly got into Liverpool Medical School.

Once the provision of medical education at Lancaster University was confirmed, library and information provision had to be organised. Liverpool University Library staff had provided lists of essential books, and Lancaster's acquisitions team immediately began ordering multiple copies of many texts. In May, I was appointed to be the Subject Librarian for Health and Medicine, and as I was already working in the library I was able to start officially on 1 June. Until mid-September, I combined the Health and Medicine post with running our Interlending and Document Supply service. (This also meant I had a desk and a PC, as there was no office available until September). In the early weeks, I spent a lot of time learning about the new course, and in particular trying to understand how problem-based learning (PBL) works. One of my first priorities was to meet up with the NHS Librarians from Morecambe Bay – I had an advantage here as I was the Medical Librarian at the Royal Lancaster Infirmary for 18 months some years ago. It was good to see the new Education Centre

at the RLI, and the generous provision of computers, books and journals now! I also spent a day in Liverpool meeting the team covering the Medical School and getting the feel of a large, well-established medical school library.

I should not wish to give the impression that I was starting from a blank sheet in Lancaster – in fact there was already a useful amount of material here. We have a postgraduate Institute of Health Research, which has particular interests in learning disability, in health service organisation and mental health. They run several masters' courses, and have many research students. IHR also runs a Clinical Psychology course. The Centre for Medical Statistics means Lancaster has collected material on health statistics and epidemiology for many years, and there are people here in various departments working on genetics, medical ethics, and medical law. We also provide books and journals for researchers in Biochemistry and Biology working on medical topics such as cancer and Parkinson's Disease. Therefore, in the early weeks, I had to "weed" Lancaster's existing collection of health and medical books, and supervise moving the remaining stock to new shelving in another part of the library. Fortunately our library software was able to update all the location records very quickly. Since then, I have spent many hours working on building a balanced collection. Liverpool University reading lists and the "Additional Resources" provided for each PBL Unit provided a basis. I also requested similar lists from Manchester University and bought their recommended texts too. Often students just don't get on with their lecturers' preferred texts, and it is helpful to give them options. – it is important to provide students with a textbooks that use a different approach which perhaps matches a student's learning style better. I have worked through the 2006 "Core Collection" item-by-item, identifying the books we already held and then looking up those we did not to see if they were likely to be suitable for our undergraduates. I also signed up to the BMJ Bookshop weekly lists, and to the newsletters of various publishers such as OUP and Jessica Kingsley.

We have not subscribed to any additional journals in paper form for the Centre for Medical Education. We already take many journals in print form, including the *BMJ*, *JAMA*, *NEJM* and *The Lancet*. Thanks to the MRI, I was able to fill gaps in our back holdings of the *BMJ* and *The Lancet*. We have subscribed to the BMJ Journals Online Collection, and expanded our full-text subscriptions to Science Direct. With our existing subscriptions to packages such as Academic Search Premier, PsycArticles and Wiley we can offer the full-text of many journals which will be useful to the medical students. At present we have not subscribed to any additional databases for MBCHB students – they can access AMED, CINAHL and EMED through Liverpool University. This may change later though.

As well as selecting books for purchase, I have had to get used to the Bliss classification scheme as it applies to health and medicine. I do not do the cataloguing and classification – my colleagues in Resources do this – but we often have to discuss how to adapt Bliss to cope with modern medicine. The additional money the library has been given to support medical education has paid for an additional half-time post in Resources. Also, we have had to look at the practicalities of medical textbooks, and have bought new book trolleys that can cope with large thick tomes rather than ordinary textbooks

The students studying in Lancaster have a joint registration with Liverpool and Lancaster universities. This means they can access eresources held by either institution. Unfortunately their Athens usernames and passwords for the two universities differ, and most of them will add in NHS Athens passwords too. We foresee endless complications here, particularly when our students try to access Lancaster resources from behind NHS firewalls. We expect that their requirements for books will be met through Lancaster University Library, although they are entitled to borrow from Liverpool too. This may become more important once they are on placement.

As the students are studying the Liverpool curriculum, they observe Liverpool term dates. As medical students have longer terms than other undergraduates, Lancaster may have to alter some of its services. For instance, we had to open our Short Loan collection a week early at the beginning of term so they could easily access the books there. Fortunately we offer late-night opening throughout the year, including the summer vacations, so their extended terms should not prove a problem then.

I have spent some time updating the library's health and medicine guides and webpages. I am now briefing my colleagues in the library on the medical students and their library and information needs. I hope to go on and revise the information available about health and medical statistics soon.

For me, one of the most important jobs I have to tackle now is upgrading my own knowledge of databases and literature searching in health and medicine. I have attended a number of LIHNN courses already, and hope to do more next year. In January the students have to tackle their first "Student-Selected Module" (SSM) and many will need to work on databases. So I am working on training sessions for them – making use of presentations lent to me by colleagues in Liverpool where possible. (I don't believe in reinventing the wheel!).

It is probably too early to evaluate the health and medicine collection, to ask how well we are meeting the students' needs. Our library software allows us to monitor demand for individual books and buy extra copies as required – so far we have only had to make emergency purchases of one book, which turned out to be essential reading for a biochemistry course as well as for the first year students. They seem to be accessing journal articles electronically without difficulty. The first real test will come next term, when they go "off reading list" in tackling SSM1.

There has been tremendous support for setting up the Centre for Medical Education from within Lancaster University, from Liverpool University, and from Morecambe Bay Hospitals. Support in terms of finance, staffing, time and goodwill. It has been good to be in at the beginning of this project!

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