Response to the Department of Health Commissioning Framework

1. Partnership for Patients

Partnership for Patients is pleased to have the opportunity to respond to this consultation and to note the references to the public library service in the document. The Partnership for Patients Project, more detail on which is provided in Appendix 1, is working across government and the public sector in ten pilot library areas to explore the role of the public library service in supporting Patient Choice. The Framework refers to libraries as a sources of information on employment as a means of improving well-being and sources of support and comparative information to enable patients to choose providers. The Partnership welcomes these references but feels that libraries are capable of a lot more on health and well-being and tackling health inequalities, building on current work as detailed below.

2. The Infrastructure of Public Libraries

There are over 3000 public libraries in England forming part of staffed by more than 21000 library staff. Across this service there are 30,000 broadband enabled computers, the People's Network, free at the point of use in most cases, with staff trained to support the public in its use. 58.**%** of the population is a registered user of a public library, of which 48% are regular users. Further details about the public library service and the profile of users is attached at <u>Appendix 2.</u>   Distribution of libraries during 2005/2006 is shown in the **Table below**.

Coverage of local libraries for the population (2005/2006)		
Authority type	**% Household within**	
	1 mile	**2 miles**
Inner London	98.9	
Outer London	95.6	
Metropolitan	89.6	99.3
County		84.2
Unitary	82.2	95.2

2.1 The People's Network - Libraries and the Digital Divide

Supported internet access has already proved a draw for more diverse population groups to use the library.

- ▪ ***Young People:*** 16% of over 16 year olds have used the People's Network (up from 3% in 2001[1])

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[1] MORI survey for the *National Audit Office 2004*

- **Disabled People**: Some libraries have taken steps to cater for people with a disability or those with low levels of literacy, with different software packages installed for blind or partially sighted users and those with learning difficulties or low levels of literacy.
- **Marginalised groups**: Case studies suggest that the People's Network is attracting new kinds of users to public libraries including people from groups categorised as socially or digitally excluded – unemployed people, asylum seekers, refugees, BME groups and people with a disability.
- **Older People:** people aged 50-70 many of whom lack IT competence are increasingly using the People's Network although precise figures are not provided
- **Rural populations**: in rural areas, 68% of the population is within 4 Km of a public library and therefore of internet access, although this is bound to vary widely depending on how sparse the population is, reducing to 28% in remote villages[2] In some parts of the country, mobile libraries also offer internet access.

These comments from participants in the Evaluation of the People's Network by the New Opportunities Fund sum up how the Network could enhance social inclusion and accessibility of online citizen activity and life style choices:

- *I suffer from Dyslexia. Using the Internet has opened up a whole new world of information for me - so thank you for the free access and tuition*."
  People's Network user, Knowsley
- *"I've got the Internet in the office, but I can never find what I want. It needs a librarian to get to the right place*."
  People's Network user, Worcestershire
- *"The library is our only access to the Internet, something I could never afford.. The service you provide is excellent*". People's Network user Liverpool

3. Libraries and Health

A clear role for libraries in health and well-being has been emerging for many years, created by public demand to which the library service has responded. In 2005 the Laser Foundation was commissioned to evaluate libraries.

One respondent to the resulting Libraries Impact Report summed up the impact of the role of the public library service on health: *'Sometimes information from the library can allay concerns and unnecessary visits to the doctors with alternative methods, unless the symptoms persist'* (Gateshead Library user). The figures from Gateshead library provide further evidence of the public's use of the library for health related queries as 48% of 196 respondents to a random survey over a week used the library to access health related material. The breakdown was as follows:

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[2] *The State of the Countryside* 2005 The Countryside Agency

Breakdown of Health Material Obtained by a 48% of a Random Sample of Gateshead Library Users over a Week			
Babies and Children's Health Books	17%	Medical Dictionaries	33%
Men's Health	18%	Women's Health Books	48%
Guides to Prescription Drugs	21%	Mental Health Books	12%
Self Help Books about a specific condition	33%	Alternative Health Books	33%
Books about Healthy Living (exercise, sport	38%	Food & Diet Books	53%

Gateshead Council now has a 'vitality index' for individual neighbourhoods, which it will use to identify libraries located in 'health hotspots' where additional investment in health stock should be considered. This is an example of an approach that could be supported through a Joint Strategic Needs Assessment.

The Report concluded: *"Libraries make a clear contribution to shared priorities. In the course of our work, we found evidence of a clear and measurable contribution made by libraries to wider priorities at both local and national level. We believe that this evidence forms part of the case for the continued and meaningful involvement of libraries in these policy areas. The quantitative and qualitative data collected by the pilot authorities in using the measures highlight a significant contribution, in line with government priorities. The data demonstrate a clear contribution to government objectives on patient and public involvement in health."*

These quotes from library users surveyed by Laser show what that contribution can mean in practice for people's health and well-being:

- *'Access to information can set your mind at rest. Also find reading v relaxing - a bit of escapism.*
- *Enjoy reading and have access to a large variety of books which I would be unlikely to buy.*
- *Excellent resource in terms of all media products allowing me to feel up to date with the world. Provides a very safe environment for myself and children. Books freely available from the library of course allow me to either lose myself in a novel or find myself in self help/new skills etc. Staff are very cheerful and helpful - they help me to feel like part of the community and yet I am not someone who integrates well with people socially. I feel completely comfortable in a library.*
- *It gives me a place to visit, which motivates me out of the house and feel better, just to have said hello to another human being.*
- *It is an oasis of sanity in a desert of madness. It is one of the most civilized parts of our society. It is a big part of my life.*
- *Relaxing, friendly, informal place to visit. Helps me to wind down. Talking Books help me to sleep.*

The potential for public libraries to contribute to health through information and access to choice and Choose and Book is clear. They can also contribute to healthy lifestyles and in some cases, to actual treatment of patients:

- Book Start and Book Start plus;
- Children's Books in GP surgeries.
- Community Centre co-located with a GP surgery.
- Multi-cultural development session with other mainstream services.
- Walking groups so that people can undertake exercise and develop social contact
- Book prescription Scheme with extra stock paid for by PCT, supporting patients with mild to moderate mental health problems.

There may be potential for libraries to offer computerised Cognitive Behavioural Therapy, recommended by NICE, through the People's Network with appropriate training for staff and if privacy needs can be met.

4. Libraries and Health Inequalities

Libraries have a reach which is second to none and have their own targets on inequalities, which have synergy with the health sector's targets for inclusion. The library service conducts outreach to care homes, housebound readers, prisons, schools and hospitals. In addition, they have contact with large numbers of community groups. The Welcome to your Library project, piloted by the London Libraries Development Agency and now rolled out nationally, provides an example of this reach in practice.

Welcome to your Library was a pilot project set up in five London boroughs to develop activities and approaches to increase the accessibility and engagement of asylum seekers refugees in public library services. The Evaluation identified the following benefits for these library users, many of which could apply to other excluded groups:

- *'Information providers: libraries should and do act as sources of information on a range of relevant issues such as jobs, health promotion, GPs, sports resources, new skills, e.g. DIY*
- *Training and education: libraries should provide or broker access to training in relevant skills. A critical skill is English language acquisition, particularly in the light of citizenship requirements. Included in training should be supplementary education (e.g. after school homework clubs) for school-age children*
- *Premises: Many library branches have the potential to make space available for community activities, and should bring different communities together under one roof*

- ▪ ***Cultural identity****: library resources can help people recognise and celebrate their cultural identity*
- ▪ ***Brokering access to services****: libraries can facilitate access to training, employment, leisure opportunities, ICT etc, which will have wider social effects, e.g. keeping teenagers engaged in meaningful activity*
- ▪ ***Providing identity****: libraries provide a sense of social identity/belonging for ASRs. A library card is often the first formal document an individual can obtain that formally demonstrates their membership of a UK institution*
- ▪ ***A safe place****: many unaccompanied teenage asylum seekers are housed in hostel or B & B accommodation – libraries therefore represent a safe, neutral space to spend time in*
- ▪ ***Mirroring experience*** *- stock choices should not be limited to selecting texts in relevant languages – content is also important. In other words, ASRs are interested in books about the refugee experience*
- ▪ ***Supplementing schools****: public libraries can supplement schools' educational role and in-house library facilities. Young people introduced to books or ideas at school can pursue their interests in public libraries, and may be able to engage family members at the same time*
- ▪ ***Promoting integration:*** *libraries have a key role in promoting integration, i.e. assisting individuals in their transition to the 'mainstream'. A key method of doing this is sharing cultural resources with the wider world – art and culture can bring different communities together.'*[3]

5. Libraries and the Determinants of Health

Libraries make a significant contribution to supporting the public with the social factors with which they grapple – the determinants of their health, as the examples below illustrate.

- ▪ **Housing** – in Hackney and Haringey public libraries support tenants with choice-based lettings, using the People's Network
- ▪ **Basic Skills** – The Vital Link is a programme for building libraries' capacity to support the Skills for Life, offering adult learners reading skills. Pilots were run in Bedfordshire and Essex. The national evaluation of the Vital Link found more than half of participants identified a positive impact on their health or well-being and over a third an increase in knowledge and understanding and a greater sense of social inclusion. [4]
- ▪ **IT skills:** '*As I have never used a typewriter or word processor this course has enabled me to start using a computer and changed my attitude towards computer work in general, as until I began this course I felt that it was all too*

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[3] *Welcome to Your Library: An Evaluation Report by the Advice Development Project* May 2004
[4] *Confidence All Round - The Impact on Emergent Adult Readers of Reading for Pleasure through Libraries* November 2005 Morris Hargreaves and McIntyre

advanced and beyond my capability. I now feel sufficiently confident to progress further.[5]'

▪ **Social isolation:** many libraries run reading groups which provide social contact for their participants. '*My mother finds the library a lifesaver as (she) meets friends here as well as borrowing books.*'

▪ **Unemployment –** Wood Green library provides support sessions for lone parents wishing to move into employment, and advice surgeries for those on incapacity benefits.

▪ **Disability:** Lewisham and libraries have installed specialist software for disabled users of People's Network computers as well as hearing loops at counters.

6. Matching solutions to problems – The Commissioning Potential

The diversity of library activity, initiated in response to local need, suggests that the type of partnership working which is appropriate is best determined locally, with collaborative strategic direction set nationally. The public library service is staffed by information professionals with detailed local knowledge and access to a vast range of written materials as well as internet access, and the skills to support the public in using both. In some libraries the information function of library staff is well developed. In Wood Green Central Library for example, there are 65 PCs for use at no charge by the public. With automated book issue and return, staff are freed up to support the public.   In addition to the provision of information, libraries have already demonstrated their role in actually providing services, as demonstrated above.

7. Commissioning Considerations

Partnership for Patients was successful in demonstrating the alignment of strategic objectives of the various partners as the incentive for pooling funding and objectives. This is an approach which could successfully incentivise effective local joint working. For example, libraries have targets to raise their visitor numbers. If they can provide health related services this will increase visitor numbers and support the objectives of the PCT and prompt effective joint working and investment.

7.1 Governance: Some understanding of the governance and performance standards of the library service is necessary for commissioners to work with the library service. The Museums, Libraries and Archives Council is the national strategic body for libraries and has nine autonomous regional MLAs. Chief Librarians are the accountable officers for libraries in their area, based in local authorities. Libraries are currently guided by the Public Library Service Standards. it is very important that the contribution that libraries make the health and well-being can be separately measured in any further development of performance indicators. These include targets on the percentage of households within 1 mile of a static public

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[5] Library User Laser Foundation Libraries Impact Report 2005

library, evening and weekend opening, stock, and user satisfaction. Each year usage information and user satisfaction are collected by through the Public Library User Survey.

7.2 Communication: partnership building at local level is an important part of joint commissioning. Different terminology and cultures means that careful attention is required to communication with front line staff and service users in each sector, both to test out commissioning proposals and monitor their implementation.

7.3 Cost: The national targets on library availability range from 100% of households in inner London to be within 1 mile of a static public libraries to 72% in sparse areas to be within 2 miles. Each library authority is legally obliged to provide printed material at no charge. However, this ban in charging does not apply to use of the internet and although most libraries are offering this service at no charge, there is an emerging trend towards charging. Most libraries already charge for printing material out by the page from the internet, which may prove a significant barrier to some. in some cases, exceptions can be made for particular user groups such as children or, in the case of this project, patients referred by their GPs. These variations mean that commissioners must consider local circumstances in deciding what services could usefully be commissioned inclusively in the locality.

Joint Commissioning: the Joint Strategic Needs Assessment should involve the Chief Librarian so that the value that libraries can add to addressing health needs locally can be understood and services that are already part of the libraries 'day job' are not are not inadvertently duplicated.

7. A solid foundation to contribute to health and well-being

The public library service has built a solid foundation for supporting all sections of the population in promoting their own health and well-being, from prisoners to the educated middle classes. Prisoners are unable to access any of the resources available to mainstream society, even though their needs, particularly in mental health, are at least as great. Educated middle class people may find it easy to make sense of health information but are not exposed to it if they do not need to use health services currently. Various local library projects have demonstrated how this range of needs can be met. The time is ripe for proper co-ordinated strategic action at national level. However, this must be a managed and collaborative process. We welcome the references to the contribution of the public library service in the Framework. However, the aspirations it sets out for partnership with libraries will not be delivered without sustained partnership work at national, regional and local level.

Partnership for Patients is demonstrating through this pilot, what can be achieved by the right mix of national collaboration, local partnership and a strategic

approach to commissioning these services. Above all, it is the public who have led this development with the use that they have made of their public library service. The approach the Partnership has initiated and which we recommend in this response goes with the grain of the behaviour of the public behaviour who are increasingly choosing libraries as a means of improving their health and well-being.

The Partnership for Patients Project was formally launched on the 13th November 2006, building on the work of the Health Link and the London Libraries Development Agency which began in early 2005. The Partnership is led by Health Link, a social enterprise working on patient involvement, and comprises the Department of Health, the Museums Libraries and Archives Council (MLA), the London Libraries Development Agency (LLDA), London Health Libraries and the Department for the Environment, Food and Rural Affairs (DEFRA) working with the following 10 pilot library authorities: Bromley, Derbyshire County, Gloucestershire, Greenwich, Hackney, Haringey, Newham, Southwark, Suffolk and Waltham Forest.

In addition to these 16 organisations collaborating nationally and pooling funding, there are now 10 local partnerships comprising a further 50 organisations: 10 PCTs, 10 acute Trusts, 30 branch libraries as well as one 'super mobile' in Derbyshire. 462 GP practices have been invited to participate in the pilots. The project is being evaluated by Loughborough University with funding form the Department of Health and the Museums, Libraries and Archives Council. Pilots are running for six months from the 15th March 2007. The Partnership has so far trained 203 library staff in the Choice and the use of Choose and Book. The health libraries in 10 acute Trusts are acting as 'buddies' to the local pilot branches in their support role to patients in choice. Overall the Partnership for Patients project comprises 66 organisations engaging with 462 GPs to support patients in choice.

Background to the Project

In 2005, Health Link proposed a role for public libraries in supporting patients in Choice and was commissioned by the Department of Health to conduct a Feasibility Study. The Report (www.health-link.org.uk/publications) concluded: '*Public library librarians are information professionals well placed to act as community navigators for patients, using approaches targeted to their local communities. All the evidence indicates that libraries have a crucial part to play in turning the opportunity of choice into the reality of choice, for all patients*.' The Partnership is now testing that feasibility in reality, by piloting the role. The commitment of the public library service to this type of new role is demonstrated by the individual financial contributions from the 10 library authorities concerned.

The Library Choice Support Model: the model being piloted consists of the following process
Step 1 The GP offers the patient a choice of providers.
Step 2 if the appointment is not booked on the spot, the GP gives the patients the Appointment Request, with details of location and opening hours of the local library
Step 3 The Patient may go to the library and use the People's Network to research hospitals on offer, with support from the librarian if they are not IT literate. Pages can be printed out so they can consider their choices further at home.
Step 4 The patient may book their appointment online for direct booking, with support from the librarian if necessary. Alternatively, they may book on the telephone from home if they have access to a telephone.

Limits of the library role: training has been provided to staff in the pilot areas and the appropriate response to queries from patients which are outside the library remit are clearly defined. This matches the libraries' own professional boundaries as they see their role as 'providing information not advice.' In defining any new role for libraries, it is very important to define these boundaries between the different professionals. If a patient wants the sort of information that an informed patient would find useful, such as the causes and complications of their condition in general, this could be provided through the library service. If they want advice on their particular condition or treatment, they must be referred back to their GP or health professional.

In addition, some aspects of the patient's relationship with the NHS must be imported into the library role, to protect the patient's interest. Patient confidentiality is one of the most important examples encountered so far.

Evaluation: the independent evaluation will determine the benefits to patients of this model together with the operational, capacity and cost implications for the library service and for GPs.

LIBRARY FACTS ENGLAND

ITEM	DATA
INFRASTRUCTURE	
No. of Public Libraries (excluding those open < 10 hrs) [1]	3,041
Mobile libraries	433
% Libraries open more than 29 hours per week	63%
No. of visits (2003/04 4.3% increase) [2]	274 million
Annual Budget	£1.13 billion
Staff Nos.	21,690
People's Network for public use (broadband enabled PCs)	30,000
Enquiries dealt with per year	58.5 million
Nos. of housebound readers (i.e. receiving a service at home)	94,787
% Libraries with assistive technology installed for disabled PC users	72%
% Libraries where staff trained to support disabled people	72%
Provision of large print or audio for visually impaired	c.99%
Existing Referral systems with GPs (Books on Prescription) [3]	50% (by end 2006)
LIBRARY USER PROFILE	
Population per public library	14419
Housebound Readers	113,000
Males as % of users [4]	41.1%
Females as % of users [5]	58.9%
Older people (all > 55) as % of users [6]	47.3%
Older people (55-64) as % of users	16.3%
Older people (65-74) as % of users	18.7%
Older people (> 75) as % of users	12.3%
Retired People as % of users [7]	36.7%
USER SATISFACTION	
% Rating library good/ very good in Public Library User Survey	93%
PERCENTAGE OF LIBRARY USERS[8] IN POPULATION SUBGROUPS	
% population (all) who are registered to use the library	58% (34,350,906)
% Population (all) who are actual library users [9]	48.2%
% Minority Ethnic population (all)	56.8%
% White population	47.4%
% Asian or British Asian People [10]	54%
% Black or British Black People [11]	52%
% People in Chinese or other ethnic groups [12]	49%
% People with Mixed Ethnicity [13]	42%
% Those with no Disability or Illness	50.3%
% Those with Non-limiting Disability or Illness	46.4%
% Those with Limiting Disability or Illness	42.4%
% Unemployed people using libraries	54.3%
% From Higher Socio Economic Group	52.1%
% From Lower Socio Economic Group	40.9%

[1] CIPFA Public Library Actuals 2004 -2005
[2] CIPFA 2002/03
[3] Where a GP issues a 'prescription' for people with mild to moderate mental health problems to access designated self help books at the public library.
[4] CIPFA UK 2001-2002
[5] CIPFA UK 2001-2002
[6] CIPFA UK 2001-2002
[7] IPF 2001-2002
[8] Attended a library at least once in past 12 months
[9] DCMS 2006
[10-13] Snapshot data over a 12 month period. 2003 (Bridgwood et al.)