The memorandum gives guidance to the provision and organization of library services at hospitals both for staff and for patients. It also draws attention to the assistance available from outside sources towards the development and maintenance of these services so hospital authorities may make the most effective use of the available facilities. Special groups of patients served include: the blind, physically handicapped, mentally ill, and the elderly. (Author/NH)
Library Services in Hospitals

Summary
This memorandum gives guidance on the provision and organisation of library services at hospitals both for staff and for patients.

Introduction
1 Advice on the organisation of hospital library services for staff and for patients has been given in H.M.(67)33, R.H.B.(50)32/H.M.C.(50)31/B.G.(50)27 and elsewhere. This memorandum consolidates previous guidance and also draws attention to the assistance available from outside sources towards the development and maintenance of these services so that hospital authorities may make the most effective use of the available facilities. Recently, the Library Association has established an advisory committee on hospital library and information services, which is available to give advice to hospital authorities at any time.

Organisation and Staffing
2 The Department does not wish to lay down any particular pattern of library services and the method of organisation that is adopted will naturally depend on local circumstances and choice.

3 It is very desirable that hospital authorities should be able to look to a chartered librarian for advice on the planning and running of library services. The arrangements for obtaining professional advice and help are essentially a matter for local decision. In some areas it may be considered preferable to employ a chartered librarian to cover a number of hospital groups. In many areas however the best course will be to arrange with a local library authority to obtain the assistance of the authority's professional staff. Advice on collaboration with the local library authority is given in paragraphs 18 to 20 below.

4 Hospitals commonly have separate libraries serving the needs of staff and of patients. Physical separation of the staff and patients' libraries is desirable; but they should be placed as close together as planning permits so that they can be administered together as part of a single library and information service. Where medical school
library facilities exist, the combining of school and hospital libraries should be considered.

5 The Department attaches importance to the development of postgraduate medical education and of training for other groups of professional staff. The staff library must play an important part in this development. The purpose of the staff library is to serve the needs of the hospital's medical, dental, nursing and other professional and administrative staff; and to provide a service for general practitioners, local authority doctors and other professional people who work in the National Health Service outside the hospital and who make use of hospital postgraduate training facilities. If the hospital contains a nurse training school a library will be required for nurses in training, and consideration should be given to the possibility of this being administered jointly with the main staff library.

6 The staff library will usually be sited in the postgraduate medical centre where one exists, and this is the best location. Whether or not such a centre is provided, the library must be conveniently sited for those who use it. The staff library should be accessible at all hours of the day. It should provide space for reading which is available at all times, and not used for lectures, discussion groups or other types of meeting or as a medical staff room.

7 It is no longer practicable for any single hospital library to attempt to carry a full range of text books. Some books will be needed for reference purposes but in general it is desirable to give priority to the provision of a good range of medical and other professional journals and an effective information service. One part of this service should be a procedure for obtaining on loan (e.g., from the National Lending Library for Science and Technology, from the medical school library, regional medical library or from a circulating library) books which the hospital library does not possess.

8 Journal articles may usually be traced through the Index Medicus, the Abstracts of World Medicine, the International Abstracts of Surgery, the Index to Dental Literature, Excerpta Medica, the International Nursing Index, or other indices. The hospital library should subscribe to the indices appropriate to its needs. More specialised enquiries may be referred to MEDLARS (the Medical Literature Analysis and Retrieval System), a service which is available to the library of any National Health Service hospital through the National Lending Library for Science and Technology and through regional officers of MEDLARS.

9 It is important that the policy of the staff library on such matters as opening times and the choice of journals and books should reflect the wishes of those who use it. This is often best achieved by establishing a committee or panel representing the users, including those working outside the hospital, to advise the hospital authority concerned. Arrangements to ensure that users' views are represented in the running of the staff library already exist in most cases where the library is part of a postgraduate medical centre.
10 The library's basic holdings on such subjects as hospital administration and hospital technical services may be supplemented as necessary by making use of the Hospital Abstracting Service of the Department of Health and Social Security Library. *Hospital Abstracts* is a monthly journal prepared in the Department's library and published by HMSO (annual subscription 107s 0d). Each issue contains summaries or notices in English of about 160 important articles, books, pamphlets and other materials published in all parts of the world. Alphabetical author and subject indices are issued annually. The summaries cover all matters relating to hospitals and hospital services apart from strictly medical and related professional matters which are adequately covered elsewhere. The Department's library has built up a cumulated classified index which enables the library staff to provide lists of references or to advise on hospital literature. Through the Abstracting Service every important publication on any aspect of hospitals or their administration can be obtained either as a photocopy or on loan.

11 It is becoming more and more frequent for scientific information to be made available in micro-text form; a micro-text reader is therefore a desirable item of equipment in a hospital library. If the hospital library has access to photocopying facilities, used within copyright requirements, books and journals will be rendered more widely available.

12 Earlier guidance stressed the importance of developing the library service for patients to a high standard. A survey of patients' libraries in November 1963 showed that 1,910 of 2,536 hospitals provided a service, although there were great variations in scale and in the agents employed for the supply of books, staff and services. In January 1965, Regional Hospital Boards were sent summaries of the returns of this survey and were asked to review, with Hospital Management Committees, their current arrangements for patients' libraries with a view to improving them as far as was practicable.

13 It is not possible to lay down a generally applicable standard ratio of books per patient. The survey referred to in paragraph 12 above showed that in 1963 those hospitals which possessed patients' libraries had about 5 books per occupied bed. More important than numbers is the quality of the books, and the availability of fresh supplies of books and of expert guidance. All this can often be provided by the local library authority (see paragraph 18 below).

14 Guidance on library service for special groups of patients is given in Appendix I to this memorandum.

15 An efficient trolley service visiting each ward at sufficiently frequent intervals to enable the service to be used properly is required for patients who cannot leave the ward. Patients who can do so should be encouraged to visit the library and make their own selection from the shelves; this and a readers' advisory service is particularly important in long-stay hospitals.
Voluntary Service

16 The Order of St John and the British Red Cross Society have been prominent in hospital library work for many years. Leagues of Hospital Friends have long been active in this field and the Women's Royal Voluntary Service and other organisations and individuals also play a considerable part. However closely the local authorities may co-operate in the provision and management of hospital libraries, it is likely that patients' libraries will continue to be dependent on the voluntary and paid workers of voluntary societies, especially to assist professional library staff in issuing books on loan and in running ward trolley services. In this way, members of these voluntary organisations and other volunteers will be able to maintain a link between the patients and the general community which has always been an invaluable part of the library work they have undertaken in hospitals.

Prevention of Infection

17 For the prevention of infection, the ward sister or nurse in charge should be consulted about the loan of library books to any patient with a communicable disease who is being kept in isolation.

Local Library Authority

18 Local authorities have a duty under the Public Libraries and Museums Act 1964 to provide a free library service to all who live or work within their boundaries, although a charge may be made for special services. Local library authorities can provide full or part-time professional staff for hospital libraries, supply books and advise on the planning and maintenance of libraries. The systematic editing of book stocks and the maintenance and refreshment of balanced collections of literature are matters in which professional advice is particularly valuable. The initial approach must be from the hospital authority to its own local library authority; hospital authorities who have not already done so are urged to make this approach.

19 There is no standard from of contract between the hospital authority and the local library authority. In some cases long standing arrangements which work well already exist. In other cases arrangements will have to be made, taking local circumstances into account. When the local authority provides a librarian, it is usual for the hospital to refund all or part of his or her salary. Most of the cost of books in patients' libraries is frequently borne by the local authority, but a grant from the hospital towards the initial stock may be expected if a new library is being set up. Books and journals for the staff library are usually paid for by the hospital authority.

20 Even where a hospital does not need the help of the local library authority in providing its library service, the hospital librarian should be in contact with the local authority librarian. He should also get to know other organisation providing library facilities locally, such as universities, colleges, professional bodies and firms, as well as the National Lending Library for Science and Technology.

Premises and Equipment

21 The size of the hospital library will vary according to the size and type of hospital and the numbers of persons likely to be using the different libraries at any one time. A broad assessment should be made of the numbers of staff, student nurses or patients using the different libraries. In the case of the staff library, this should include potential
users of different professions inside and outside the hospital. When a new library is being provided, or an existing one improved, it is essential that consultations should take place between the hospital planning authority, architects, an experienced qualified librarian and the library committee or panel.

22 Appendix III to this memorandum contains some basic data on accommodation and equipment. A list of publications is given in Appendix II.

23 Where the patients’ library service is provided by the Joint Committee of the Order of St John and the British Red Cross Society, payments of 15s 6d per occupied bed per annum may be made. The level of payment is at present under review; any change will be later notified to hospital authorities. As has been stated in paragraphs 18 to 20 above, local library authorities may make charges when they provide a service for hospitals and when this goes beyond their normal services. A financial arrangement with a local authority or with voluntary bodies does not preclude a simultaneous arrangement with another organisation. A hospital authority may for instance make an agreement with the local authority for the supply of books and the general supervision of hospital libraries, whilst at the same time arranging with a voluntary organisation for the use of its equipment and the service of its workers.

To: Regional Hospital Boards, Hospital Management Committees, Boards of Governors.

R.H.B.(50)32/H.M.C.(50)31/B.G.(50)27
H.M.(60)96.
APPENDIX I to H.M.(70)23

LIBRARY SERVICES FOR SPECIAL GROUPS OF PATIENTS

The Blind

1 The National Library for the Blind, 35, Great Smith Street, London SW1 (tel: 01-222 2725) provides a free postal loan service of books in Braille and Moon for the blind. Hospital librarians should obtain copies of NLB catalogues. The NLB main library in London makes provision for all England and Wales except the six northern counties which are served by the NLB Manchester branch. The NLB service to hospitals is free.

2 The Royal National Institute for the Blind, 224 Great Portland Street London W1 (tel: 01-580 8962) publishes a variety of books and periodicals in Braille and Moon; it also publishes a Braille edition of the Radio Times free to the blind on application. The RNIB in conjunction with St Dunstan’s provides the British Talking Book Service for the Blind. In this system tape cassette players provide talking books. The playback machine weighs only 10½ lbs. Each cassette weighs 6½ ozs, is made of plastic, and can be posted in any pillarbox. In 1966 the library stock was 1,200 titles, with 250 more being added each year. The library service is free but an annual rental charge of £3 is made for the hire of the machine; for hospital in-patients, this charge should be met by the hospital unless the patient’s local authority has assumed responsibility for it. The RNIB also has a large collection of Braille material for students and a Students’ Tape Library connected with the British Talking Book Service for the Blind.

Those with Reduced Vision

3 The Ulverscroft series of large print books has been devised to make reading easier for those with reduced vision. In these, the print is twice as large as in a normal book each page is $8\frac{3}{4} \times 5\frac{3}{4}$, jet black ink is used and to prevent the books being too heavy for elderly people they are printed on lightweight paper. Over 200 titles are available. Ulverscroft large print books are not generally available through the normal book-selling channels and the sale of these books is usually restricted to public libraries, hospital libraries, welfare departments, schools and institutes for the blind. They may be obtained from F. A. Thorpe (Publishing) Ltd, Station Road, Glenfield, Leicester (tel: Leicester 871552). A lending service of books, called the Austin books, in enlarged type arranged by the National Library for the Blind complements the Ulverscroft series with standard and modern classics. These books are available on loan free, through local authority libraries.

The Physically Handicapped

4 Many physically handicapped patients will be able to make use of ordinary books available from the hospital library, although lightweight paper-backs may be especially appreciated. Some may prefer the enlarged type Ulverscroft series. For certain patients provision of reading aids may be required, such as prismatic spectacles for those who must read in a supine position, electric page-turners or simple page-turners such as a wand gripped between the teeth or fastened to a headband. These devices encourage patients to activity.
Occupational Therapists can be of great assistance to the librarian when arranging aids for the physically handicapped. Some patients may prefer to listen to taped recordings for hospital patients. It is also possible that some may like to be read to, and selected volunteers should be recruited for this purpose. The National Fund for Research into Crippling Diseases, Vincent House, Vincent Square, London SW1 (tel: 01-834 7001) has produced an illustrated index of equipment such as writing and reading aids for the disabled.

5 An attractive hospital patients' library easily accessible and with a welcoming, informal atmosphere can make an effective contribution towards the treatment of patients with mental illness. Modern methods of treatment are reducing the numbers of those who require prolonged periods of hospital treatment for mental disorders, and hospital programmes are geared to fitting psychiatric patients for return to home life wherever possible. Whilst patients are in hospital, every attempt must be made to assist them to keep in touch with the community outside and current affairs. Illustrated daily papers and magazines should be available in the library; these may attract patients to visit the library who might not come for books alone. For long-stay patients it is particularly important that the stock of books should be renewed frequently; this will be practicable only through the co-operation of the local library authority. The library services might also include the maintenance of a stock of gramophone records and the provision of sets of plays for play reading.

6 Selected patients may be given work in the library as a therapeutic measure.

7 In hospitals with mentally handicapped patients it will be necessary to provide material for a wide range of ages and reading abilities. Many of the children will be non-readers for whom it is best to provide bright and attractive picture books and pre-reading material of a type provided for young normal children. For others who are beginning to read advice on the selection of books may be obtained from the school department within the hospital, where this exists, from the local education authority and from the public library authority. Books are now available which require low reading attainments but cover a variety of subjects which are both useful and interesting to adolescents and young adults. The needs of patients who are working outside the hospital, or who are about to be discharged from hospital, should be kept in mind. Lists of books can be obtained from the National Society for Mentally Handicapped Children, 86 Newman Street, London W1 (tel: 01-636 2861). The Institute for Research in Mental Retardation and the College of Special Education are both at this address and produce periodic lists of books. There will also be a number of normal readers among the adolescents and adults who should have access to the usual range of library books.

8 Where a hospital for mentally handicapped patients includes educational staff they should have access to books on methods of teaching, and on new trends in education and play. Such publications
can be obtained through the National Society for Mentally Handicapped Children or the National Association for Mental Health. 39 Queen Anne Street, London W1 (tel: 01-935 1272). Literature is also available on loan from the local public library service.

9 For old people with poor eyesight the Ulverscroft large type books are very useful. There is high incidence of blindness amongst old people but it may be difficult for the elderly to learn Braille and Moon, and for these taped recording for hospital patients may be particularly helpful. Reading to elderly patients also offers considerable opportunities for voluntary effort.
<table>
<thead>
<tr>
<th>No.</th>
<th>Reference</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Library Association, Medical Section. Medical libraries in hospitals: notes for secretary/librarians and others. <em>Library Association</em>, 1966 (obtainable from Miss W M Gallagher, St Mary's Hospital Medical School Library, London W2).</td>
<td>A guide to elementary medical library work for those with little or no practical experience.</td>
</tr>
<tr>
<td>10</td>
<td>Library supplement. <em>Postgraduate Medical Journal</em>, 1968, Jan, vol 44.</td>
<td>This special supplement includes items 3, 5, 6, 27, 28 from this list.</td>
</tr>
</tbody>
</table>
A short and authoritative guide to arrangement in the library, chief sources of information, practical use of bibliographic sources, the location of medical literature, compilation of bibliographies, periodicals and abstracting services.

Intended to serve the same purpose as item 9.

A plan for hospital medical libraries in a region, with detailed recommendations on the running of such libraries at varying levels.

A basic list of books and journals for use in community hospital libraries in the USA which can be used as a guide to establishing similar medical libraries in British hospitals.


Explains how the Department of Health and Social Security Library can help hospital librarians with the literature on hospital administration in all its branches.


A guide to all aspects of the patients' library and its work, with contributions by experts.


23 Lewis M J. Library service to handicapped readers. Library Association Record, 1968, May vol 70, no 5, pp 120-123.


Liaison with Local Libraries


Premises and Equipment


General Considerations

1. The location, design and size of patients, staff, and nurse training centre libraries and their inter-relationship will vary in different hospitals. Paragraph 21 of this circular emphasises the need for consultations between the hospital planning authority, architects, an experienced qualified librarian and the library committee or panel before a new hospital library is designed or an existing one altered. Matters to be considered include:
   a. Types of service to be provided (lending, reference, reading, research etc) also possible future needs, conversion and the degree of flexibility.
   b. Finance (capital, operational and maintenance costs).
   c. Pattern of use. Numbers and types of users, times of opening and closing, and any peak periods with consequent problems of heating and lighting, etc.
   d. Library material. Types, sizes and quantities of books, periodicals, pamphlets, micro-texts, newspapers, reading aids etc. and the associated problems of display and storage.
   e. Staffing. The numbers of library staff to be employed.
   f. Space requirements.

2. The following information on space requirements reflects contemporary thought and amplifies the guidance in Hospital Building Note 18 which may later be revised. Further information will be found in the publications listed at items 1, 2 and 29-33 of Appendix II.

Shelving

For patients' libraries, tiers of shelves should be five shelves high, the bottom shelf 450 mm (1ft 6 in) from the floor to allow easier access to ambulant patients or those in wheelchairs. The overall height of the shelving should be 2m (6ft 6in). Shelves should be 900 mm (3 ft) wide and 200 mm (8 in) deep. On average 10 fiction or general non-fiction books take up to 300 mm (12 in) of shelf space. Shelves should be of standard length to facilitate interchange. Shelf units should be at least 2 m (6 ft 6 in) from centre to centre to allow passage of trolleys and wheelchairs.

For the staff libraries, shelves in seven tiers can be provided, to a greater overall height. A 300 mm run of shelf will on average accommodate 5 medical books or bound periodicals.

Reading and Study Areas

Patients' libraries should provide space for reading and browsing, including an informal grouping of comfortable chairs and also low tables for magazines and periodicals. 1.5m² to 1.8m² (17 to 20 sq ft) per reader will be required.

In staff libraries space to allow serious reading and study will be required. The University Grants Committee recommends 2.3m² (25 sq ft) per work place, of which one in eight should be study carrels each at 3.2m² (35 sq ft).
Experience has shown the following proportions represent the potential maximum number of users at any one time of staff and nurse training centre libraries.

**UNDERGRADUATE AND TRAINEES**
- Undergraduate and trainees: 1:4
- Student nurses: 1:8
- Pupil nurses: 1:8
- Student midwives: 1:8
- Technicians in training: 1:8

**GRADUATES AND TRAINED STAFF**
- Consultants and other hospital medical staff (including teaching staff): 1:6
- General practitioners: 1:20
- Dental surgeons: 1:20
- Graduate nurses: 1:20
- Midwives: 1:20
- Other professional and technical: 1:20
- Trained technicians: 1:10

**Staff Working Areas**
The space requirements of administration will include issue desk, registration and loan records, and catalogue cabinets etc, a separate office for the chief librarian; a separate work room or rooms for unpacking and processing books, minor repairs, binding and reprography, etc. Approximately 7m² to 9m² (75 to 100 sq ft) should be allowed for common working areas for each member of the staff.

**Storage**
Space for storage, and the degree of separation of different storage requirements will depend on the size and type of the library but the following possible needs should be borne in mind:
- Storage for older books in less use than current library stock.
- Space for reading aids including micro-text readers, page-turners, talking books etc.
- Storage for slides, tapes, teaching machines etc.
- Parking place for trolleys.

**Trolleys**
The average trolley is 1m high, 1m long and 450mm wide. Lightness and manoeuvrability are important; tilted troughs are advisable for hospital ward-rounds so that titles are clearly visible to patients in bed.

**Cloakrooms**
Adequate facilities for users and library staff should be available nearby.

**General Circulation Space**
This will depend on the number of people who are likely to use the library at any one time, the type of use they will make of it, and their special requirements eg wheelchair patients, and on the extent of the working activities of the library staff.

**Environment**
The advice of architects and engineers should be sought on problems of ventilation, heating, lighting, noise control and the types of finishes of walls, partitions, floors, tiling, carpets and ceilings. Lighting is especially important.