

A county library service to the elderly, sick and disabled

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Cleveland County Libraries serve a population of 566 000 and the Hospitals and Domiciliary Department operates library services to the elderly, sick and handicapped throughout the County. In order to understand its development it is necessary to know a little of the historical background. When the new County came into being in 1974, the Department was set up as part of the new library system, with a proposed establishment of 16 staff. Only nine staff were in post when a staffing freeze was imposed later that year. Today staffing stands at ten full-time and two part-time staff.

Prior to 1974 a well-established, volunteer based, housebound readers service was in operation in one of the constituent authorities and in the other main authority a housebound service based on branch libraries had been running for a few months, serving 200 people. Sixteen hospitals in the County had trolley services organized by volunteers without any professional assistance. These two factors of insufficient staff and existing service patterns largely determined the nature and operation of the county-wide service which exists today.

The department is currently housed in a Carnegie library which was closed to the public three years ago. Seven staff are based there with another three full-time staff based at a large District General Hospital. One part-time librarian is based at another hospital and another part-time librarian was appointed last year to run the library at the local Detention Centre. There is a bookstock of approximately 40 000 volumes. Talking books are also held and a collection of jigsaw puzzles is kept for loan to the housebound.

There are three main services run from the department: the housebound readers service, the deposit collection scheme to over 80 institutions, and the library service to patients in 18 hospitals.

Housebound readers service

At the present time 1230 housebound readers are served throughout the County. Of these 250 in Hartlepool District continue to be served by the original volunteer based system. Operating from Northgate Library WRVS volunteers, who use their own transport, visit each reader every four weeks with books pre-selected by the branch librarian.

In the rest of the County 980 readers are visited at three-weekly intervals. There are 26 routes in operation, of which six are operated from the department, the rest being based on branch libraries. The service is centrally controlled by the Domiciliary Librarian and all enquiries for the service are routed to her. The librarian makes all assessment visits, compiles reader profiles, allocates readers to routes and maintains

contact with branch librarians operating routes in their districts. One of her main responsibilities is to ensure that an adequate and uniform standard of service is maintained to all users.

Applications for the service come mainly from branch libraries, social workers and home helps. The driver/assistants are also approached by potential users while out on route. All applicants are visited by the Domiciliary Librarian, or her assistant, within two weeks of receiving the application. About 250 assessment visits are made annually. After carefully ascertaining that the applicant is genuinely unable to use the nearest service point, a profile of reading interests is drawn up. Any special requirements concerning format and weight of books are noted, as are disabilities affecting communication, such as deafness and stroke. The visit lasts a minimum of 30 minutes. The reader is then allocated to a route and the branch librarian and the relevant driver/assistant are informed.

The majority of users are the elderly. A small proportion are the younger physically disabled, but generally this group attends day centres and has access to a library service there. Some users are only temporarily housebound, recovering from accident or illness, and some are only housebound during the winter. These users are assessed in the usual way and, after agreeing with the user the length of time they are likely to require the service, each person is given a specific date after which the van will cease to call. If feedback from the driver/assistant indicates that the reader will need the service beyond this date then another assessment visit is made and another date set. This ensures that the service does not become overloaded with users who no longer have a genuine need.

Each reader is visited every three weeks. Visits used to be fortnightly but had to be reduced to a three-weekly interval in order to absorb the waiting list. Many users have difficulty in remembering the three-weekly cycle, so all are provided with a marked-up calendar of visits. Each day the driver/assistant goes out from the department with the van to the branch doing a route that day. The van is loaded at the branch with books which have already been pre-selected for the reader according to the reader profile. Selection is normally made by the branch assistant who goes out on that route. There is no limit to the number of books each reader is allowed. The reader profiles are kept in loose-leaf form in route order, and this goes out on the van so that updatings and alterations to the profile can be made immediately. The branch assistant accompanies the driver/assistant on the route. Most routes are urban and there is usually more than one reader at each stop. In a block of flats or a group of bungalows there may be four or five readers and the visits are divided between the two assistants. Each visit, excluding travelling time, lasts five to ten minutes on average but there is sufficient flexibility to allow for several longer visits each day depending on need. A reader may be more incapacitated than usual, and need practical or emotional support. The length of visit is shorter than the current LA recommendation for 15 minutes. Our experience shows that a trained assistant can change over the books and get sufficient feedback on the suitability of the material chosen in five minutes in most cases. The average number of readers visited per route is 40, but varies from 35–50.

Most branch librarians, if space permits, put aside in a workroom a 'housebound

stock' from which selection is made. This contains a good proportion of large print. The majority of users can be served from this stock with forays to the main shelves for requests, non-fiction and less popular material. This stock is constantly changed and there is regular input of new books into the housebound stock, and removal of titles back into the main sequence. Problems regarding stock provision are referred to the department as a matter of course and can usually be solved by sending back-up material.

The driver/assistant is the vital link in the system. He or she is expected to update the reader profile and to be aware of the changing needs of the user. They are chosen for their empathy and ability to relate with sensitivity to the elderly and disabled and are expected to have considerable book knowledge, so that they can recommend titles and authors to a reader and can act as a substitute for browsing around the library shelves. It is not necessary for the driver/assistant to have had library experience but it is important for them to have been library users. The simple clerical routines can be easily learned, but the book knowledge they need can only be learned by having read for pleasure themselves. They must also be physically fit and be able to cope with the rigours of being out in all weathers. A sense of humour is essential.

The Domiciliary Librarian and her assistant are responsible for the selection and delivery of materials to 270 readers on the six routes done from the department. This has several advantages. They get job satisfaction from the regular personal contact with users. They are familiar with problems encountered 'in the field' and there is no danger of them becoming out of touch with the day-to-day aspects of the service. Management decisions can be made confidently because all aspects are known and experienced at first hand.

Deposit collection scheme

This scheme is intended to provide library facilities to the elderly, physically handicapped, mentally ill and mentally handicapped living in institutions or attending day care centres. Eighty-six establishments are served, the majority being establishments for the elderly. Each deposit collection ranges from 100–250 books, exchanged every four months. Each collection contains a range of popular fiction, including some large print. Little non-fiction is included. Although an attempt is made to tailor each collection to the needs of users, it is not possible to do this with any degree of success, because of the small amount of material on deposit at any one time, and the fact that owing to the large number of units served it is not possible for the staff to maintain contact with readers.

It has long been recognized that the deposit collections do not meet the needs of users and that those living in institutions are offered a poor level of service. Yet those living in institutions are equally as entitled to decent library provision as are those in the community who can conveniently reach a service-point. In an attempt to improve this area of service a Community Programme Scheme is now in operation in which staff are employed to make personal contact with residents in institutions and provide for their

reading and information needs, and to organize activities. An application has also been made under the Urban Aid Programme for a mobile to serve the elderly in institutions.

Hospitals service

There are 18 hospitals in the County. Ten years ago library services in hospitals were run by the voluntary agencies British Red Cross, Toc H, and the League of Friends. They organized trolley services to the wards and provided their own bookstock, with the exception of four hospitals where the local library service provided cheap fiction. Through no fault of their own the volunteers were unable to provide an adequate service because they lacked professional assistance and resources. After discussions over many months with the health authority and the voluntary agencies, the department gradually assumed responsibility for library services to patients throughout the County. During these negotiations, which took place with each hospital individually, the library authority never lost sight of the fact that because of its own scarce staffing resources, the volunteer force was vital to the running of the hospital library service. At first the voluntary agencies looked upon the involvement of professional staff with a certain lack of enthusiasm, but gradually with the exercise of tact and persistence a good working relationship has been attained. The most immediate improvement was in the quality of the bookstock and an attractive range of material soon replaced the worn-out book club editions with which most trolleys seemed to be stocked. The trolleys themselves, home-made usually, and of ancient vintage, were replaced with modern Bristol Maid versions. The morale of the volunteers improved and a training programme was instituted.

There are now three levels of service according to the size of hospital.

1. The two district general hospitals have base libraries. North Tees Hospital (1000 beds) has three full-time staff (one qualified) with part-time assistance. The general library in the main ward block is open 15 hours a week and has a stock of 9000 volumes. A multidisciplinary library, located in the Teaching Centre, operates a service to all health service staff in the district, including medical staff, nurses, paramedics and administrative staff. The stock currently stands at 10 000 volumes and 150 periodicals are taken. It is open 43 hours a week. South Cleveland Hospital (419 beds) has a base library of 4000 volumes and is open two afternoons a week. There is a qualified, part-time librarian. In both hospitals the twice-weekly trolley service to the wards is manned by volunteers.

2. Other hospitals have trolley services only. Some are operated entirely by volunteers under the direction of the Hospitals Librarian and some operated by combined teams of volunteers and paid staff seconded from local libraries, a system which works well. Hospitals without base libraries have locked cupboards or small rooms where stock is held and trolleys parked. Books are exchanged at quarterly intervals and newly published material is added weekly.

3. A few hospitals, each of less than 50 beds, have deposit collections only, exchanged quarterly.

The Hospitals Librarian spends a great deal of time in supervising and supporting her volunteers. This is seen as vital to the operation of a good service. Volunteers must be selected, trained and supervised in order to give a good service to the patient.

There is a need for base libraries with professional staff in three hospitals where currently only trolley services are operating. One of these is a large psychiatric hospital where there is considerable potential for library use but, with the present and proposed constraints in local government and the National Health Service, there is little chance of further improvement.

Other activities

The department operates a talking book service throughout the County for those who can no longer read or handle a normal book. About 230 individuals use the service, with many more in hospitals and other establishments. Because of pressure on the service, it is for use by those who are not in receipt of any other talking book service. The shortage of popular titles on compact cassette is a problem well known to librarians working with the elderly and handicapped. There are so few useful titles (approximately 250 popular fiction and non-fiction) that even using multiple copies it is not possible to give users any real choice and 'pot luck' prevails.

Blind readers using the British Talking Book Service for the Blind are given assistance in making their choice of titles from the BTBS catalogue and, if required, problems with the service are taken up on their behalf.

Poetry and prose readings are given by the staff from time to time to groups of elderly people, but lack of time prevents more being done. Some activities – reviewing talking books on local radio, for instance, have been dropped for lack of time and passed on to voluntary groups.