Public Library Improvement Fund:
Evaluation of health-related projects

Final Report

Scottish Library and Information Council

April 2017

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1. Introduction and context

Introduction

1.1 In December 2016, the Scottish Library and Information Council (SLIC) commissioned Blake Stevenson to evaluate the health-related projects funded through the Public Library Improvement Fund (PLIF). The PLIF is a Scottish Government fund administered by SLIC, and funds a range of projects which support health and wellbeing.

1.2 This report outlines the findings of our evaluation.

Context

1.3 Over 100 years after Andrew Carnegie began developing a public library network across the English-speaking world, Scotland's public libraries, comprising a network of 505 public libraries and 66 mobile libraries, play an important role in communities across Scotland.

1.4 The breadth of services and range of resources that are available from public libraries allow individuals to access opportunities for learning, support and education in a variety of ways both physically and online.

1.5 The library sector has continually developed to respond to changing needs, and the development of Scotland's first national strategy for public libraries in 2015 was an important milestone for the sector.

Public Libraries – Ambition and Opportunity: A Strategy for Public Libraries in Scotland 2015–2020

1.6 One of the key aims of the Strategy for Public Libraries is to strengthen the role of libraries in local communities, and at the same time encourage stronger partnerships that stimulate innovative practice and encourage shared learning.

1.7 This aim reflects the changing role of the public library; recognising the shift from a model that is primarily about safeguarding and lending sources of information to actively supporting citizens to improve their wellbeing.

1.8 Strategic Aim 4 of the Strategy for Public Libraries in Scotland 2015–2020 outlines that public libraries in Scotland should promote social wellbeing, tackle social isolation, inequality, disadvantage, fractured communities and ill health.

1.9   To meet these objectives public libraries are encouraged to:

- develop effective partnerships at local, regional and national levels with a variety of partners;

- share best practice on how to create effective and accessible public service or community hubs;

- build on current practice to become champions of community engagement and involvement; and

- develop guidelines on the appropriate use of volunteers to bring added value to services.

1.10   Libraries can achieve these objectives through a variety of approaches and the Public Library Innovation Fund (PLIF) has been used to support innovation in this area. It is administered by Scottish Library and Information Council on behalf of the Scottish Government.

1.11   The Public Library Improvement Fund aims to fund innovative initiatives that support the Strategic Aims of Scotland's national libraries strategy – 'Ambition & Opportunity: A Strategy for Public Libraries in Scotland 2015–2020'. PLIF's funding priorities are:

- Reading, Literacy & Learning

- Digital Inclusion

- Economic wellbeing

- Social wellbeing

- Culture & creativity

- Excellent public services.

1.12   Applications for funding can be made annually. They are assessed by the SLIC Funding Sub-committee, with final decisions being taken by the SLIC board. Applications can be submitted by individual or groups of libraries.

1.13   A particular focus of the PLIF supported projects are activities that are set in the context of an ageing population. As such, the projects provide an opportunity for public libraries to work with a range of partners to deliver activities and information that reach out to people with long-term conditions such as dementia, or may focus on preventative measures and support people to keep mentally and physically agile.

1.14   The nature of the projects funded recognises the importance of physical connection for users and helps promote the concept of the library as a community hub and, for many, the first point of contact with Scotland's public services.

1.15   The diversity of mode of delivery and purpose of the PLIF supported projects reflects the different needs of communities, as well as the different channels through which users can now access library services.

Links between public libraries and the health sector

1.16   Developments such as the Christie Commission, which calls for increased collaboration among public services, and the integration of health and social care services provide a policy driver for increased partnership working between public agencies, such as libraries and the NHS to promote health and wellbeing.

1.17   In 2015, NHS Education for Scotland (NES) and SLIC jointly commissioned a scoping study to map the current health and wellbeing activities funded by the PLIF, and to identify opportunities to strengthen links between public libraries and the health sector.

1.18   This study confirmed that public libraries offer a range of health and wellbeing activities including bibliotherapy services and reading groups, books on prescription, directories of community health information services, health information resource centres, and health promotion activities including cafes and walking groups. Some libraries work in partnership with local NHS services and voluntary agencies to offer targeted support for people with specific long term conditions including cancer and dementia.

1.19   The study notes that the role of public libraries in the health field would be strengthened by the development of a cross-sectoral strategic action plan to align and integrate the public library contribution to health and care policy priorities. To enable this, the study notes that it is crucial for public library leads to work with national NHS and voluntary agency strategic leads for public health, self-management, social care and health information.

1.20   It also notes the importance of sharing the learning arising from projects that have been tried and tested in individual library services.

Current PLIF-funded projects

1.21   Table 1.1 provides details of the ten health-related projects that form the subject of this evaluation. Nine of these projects are delivered by library services, either by a local authority or an arms-length trust. In addition, we evaluated the These Foolish Things project (delivered by the Scottish Poetry Library) which was funded by the Innovation and Development Fund but which shared some features with the PLIF-funded projects and was therefore included in this evaluation.

1.22 Eight of the projects cover a single local authority area. The two that operate across more than one local authority area are These Foolish Things, which is delivered in Perth & Kinross, Aberdeen City and South Ayrshire; and Health and Wellbeing in Libraries, which works across the NHS Ayrshire and Arran area, encompassing North, South and East Ayrshire local authority areas.

1.23 The projects cover 11 local authority areas in total, including remote rural regions with a large geographical footprint (such as Western Isles), urban areas with more concentrated centres of population (such as Dundee), and areas with a mix of rural and urban locations (including Perth & Kinross).

Table 1.1: Details of the health-related PLIF projects

Name of project	Description	Location	Amount of PLIF funding	Funding period
Dr You Western Isles Council	Working in partnership with the NHS and other health organisations to build on the range of health resources held at libraries and promote them effectively to improve the mental health and wellbeing of communities.	Western Isles	£13,746	Aug 2014 – Feb 2015
Health Pop Up Library East Dunbartonshire Leisure & Cultural Trust	Providing a pop-up library offering health information and bibliotherapeutic resources in a range of strategic locations across East Dunbartonshire.	East Dunbartonshire	£13,127	Aug 2014– Mar 2015
Health and Wellbeing in Libraries North Ayrshire Library and Information Service	Extending the Reading Well books on prescription offer to include the dementia booklist and working in partnership to promote these materials across the NHS Ayrshire and Arran area. Training of library staff so that libraries become 'Dementia Friends'. Promotion of health information buddy volunteering programme.	North, South and East Ayrshire	£7,517 (phase 3) £7,028 (phase 2)	Aug 2015 – Mar 2016 (phase 3) Jul 2014 – Mar 2015 (phase 2)
Dundee Dementia Information Service Leisure and Culture Dundee	Providing access to information, resources and group activities for people with dementia, their carers, family members and people working in dementia care in a relaxed, non-clinical library environment.	Dundee	£10,000	Jul 2014 – Mar 2015

Name of project	Description	Location	Amount of PLIF funding	Funding period
Dementia Memory Boxes Angus Alive	Establishing a range of memory boxes to stimulate memories and conversations between people with dementia and family members and carers.	Angus	£2,230	Sep 2015 – Mar 2016
These Foolish Things (Remind Me of You) Scottish Poetry Library	Training for library and care home staff to collect a 'library' of objects and learn ways of using them with poetry and stories.	Perth & Kinross, Aberdeen, South Ayrshire	£26,084	May 2016 – Apr 2017
Reminiscence Groups in Libraries Perth & Kinross Libraries and Information Service	Establishing reminiscence groups in libraries throughout Perth & Kinross to increase engagement with the library service, increase cultural participation, reduce isolation and improve sense of wellbeing.	Perth & Kinross	£4,450	Jul 2015 – Mar 2016
Braw Blether Midlothian Council	Increasing the capacity of health and social care professionals to utilise bibliotherapy approaches in their work.	Midlothian	£20,000	Jul 2015 – Mar 2016
Walk ON with Fife Libraries Fife Cultural Trust	To promote the physical and mental health benefits of walking, reading and sharing books. Creating a series of health walks beginning and ending at a library followed by an informal meeting where participants chat about books in a safe and welcoming environment.	Fife	£5,000	Jul 2015 – Mar 2016
Words for Wellbeing East Dunbartonshire Leisure and Culture Trust	Offering rural and targeted communities in East Dunbartonshire a programme of information and bibliotherapeutic activities.	East Dunbartonshire	£10,900	Jul 2015 – Oct 2015

Figure 1.1: Location of health-related PLIF projects
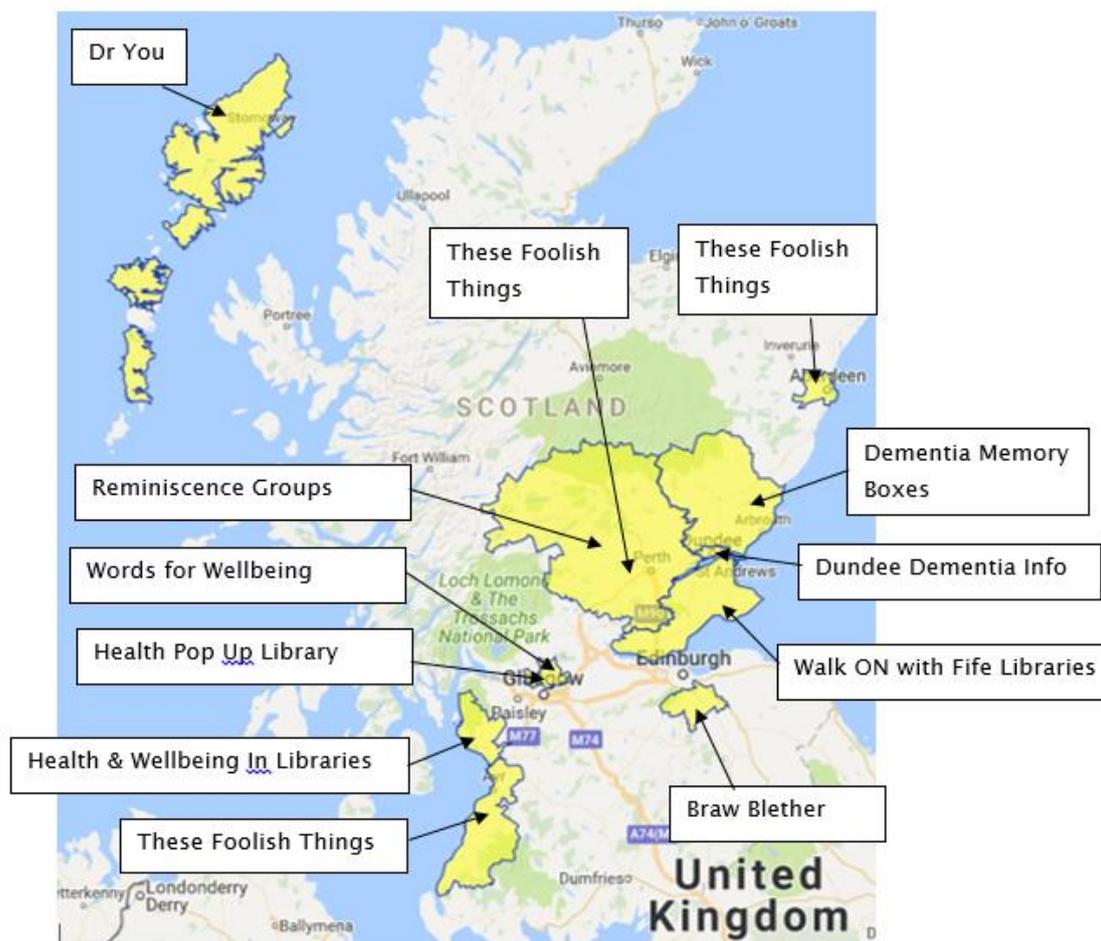
The aims of this study

1.24 The evaluation sought to assess which, if any, of the existing project delivery models best support the strategic aims of public libraries in relation to the promotion of social wellbeing and which models have the greatest potential to be scaled up or rolled out. The research was intended to evaluate the models to determine:

- if the project addresses a demonstrable gap in service;

- whether or not the project demonstrates increased efficiencies and benefits to the library sector;

- if it is evidence based and draws from known good practice;

- whether or not the model can be scaled up or rolled out;

- if the model can be sustained;

- if the model is flexible and responsive;

- if the model makes best use of resources;

- if the project represents good value for money;

- whether the model can be transferred partially or in totality to another library authority or area;

- whether project information can be or is being captured and disseminated in a useful manner; and

- whether the project has increased awareness of the public in relation to the libraries' role in supporting social wellbeing.

Evaluation methodology

1.25 The evaluation methodology we applied to undertake this research is outlined in the table below:

Table 1.1: Overview of evaluation methodology

Desk-based research
• Review of documentation related to the PLIF health-related projects (application forms, interim reports, final reports and other documentation provided by project contacts).

Primary research with PLIF projects and stakeholders
• Depth visits with 5 PLIF projects including interviews with **6** project co-ordinators (Angus Memory Boxes, These Foolish Things (x2), Braw Blethers, Dementia Information Service Dundee and Words for Wellbeing), an interview with a representative of the Scottish Poetry Library, and observation of a bibliotherapy session with 6 participants. • Telephone interviews with co-ordinators at 3 projects. • Interviews with 4 stakeholders from NHS Education for Scotland, Scottish Government, Midlothian Council and TRACS. • Event to present key findings and share learning with representatives from eight projects.

1.26 Appendix 1 contains our research tools.

Methodological challenges

1.27   The main methodological challenge in conducting this evaluation was reaching project users. This was due mainly to the timing of the research. Where our depth visits involved projects working directly with service users, despite efforts on all sides, the timing of the research often did not coincide with the timing of sessions, meaning that there was no opportunity to speak to service users. One of the depth visits involved a project that has not launched yet and so service users were not yet recruited. In another case, where the project trained library staff, we were unable to interview any trainees because the training has been delivered recently, and in some cases is not yet finished, so there has been little opportunity for the trainees to deliver any sessions using the skills they have learned.

1.28   We aimed to assess the impact of the projects on service users but, again due to the timing of the research, a number of project leads indicated it was too early to comment on this and noted that the impact would not be apparent until the projects had been in operation for a longer time.

The report

1.29   The remainder of this report is set out as follows:

- Chapter 2 provides an overview of our key findings;

- Chapter 3 discusses the sustainability of the PLIF projects; and

- Chapter 4 provides our conclusions and recommendations.

2.   Key findings

2.1   In this chapter we provide an analysis of the key findings from the evaluation. We explore the funded organisations' experiences of the application process; the extent to which the projects addressed a gap in services; the impact on the library sector and on project participants; the role of partnership working within the delivery models; the extent to which the projects have offered value for money; and the transferability of the projects developed. We draw on examples from our fieldwork to illustrate these findings.

Experiences of the PLIF processes

2.2   The application process was described by most applicants as straightforward and accessible, but many would have welcomed more time to develop the project idea, and explore potential partnerships in more depth ahead of the application deadline. However, whilst a formal call for applications is not made until four weeks ahead of the deadline for submission, we understand that notification is given to library heads of service in November of the year preceding an April deadline for submission of applications which should mean that there is ample time for project development. It is also a funding stream that has been available now for a number of years and should be well known. This suggests that information regarding the opportunity is perhaps not being adequately cascaded down to relevant staff early enough and this may be something to be aware of within library services in future.

2.3   In addition, a number of the project leads observed that the timescale for delivery was too short and that with a longer period of time they would have been able to deliver more without any additional funds. It should be noted, however, that the annual nature of this funding is something which is determined by Scottish Government and outwith the control of SLIC.

2.4   Challenges in delivering within the year specified was almost certainly also exacerbated in some areas by delays to project starts resulting from procurement and other challenges, which are discussed later in this chapter.

To what extent do the PLIF projects address a demonstrable gap?

2.5   The recent National Strategy for Public Libraries in Scotland indicates the contribution that libraries can make to health and wellbeing. In particular, Strategic Aim 4 within the strategy states "public libraries contribute to social wellbeing, tackling social isolation, inequality, disadvantage, fractured communities and ill health." On the back of this strategy, the Scottish Government has been looking closely at the health and wellbeing priorities within the National Libraries Strategy and considering how to drive service change in health and social care through storytelling. The Scottish Government also emphasised the growing

body of evidence showing the positive impact of reading and books on the health and wellbeing of people with dementia.

2.6   A scoping study conducted jointly by NHS Education for Scotland and SLIC in 2015 re-emphasised the important role of libraries working in partnership with the NHS to promote health and wellbeing, prevent ill-health, address inequalities and facilitate self-management.

2.7   The PLIF funding has enabled individual library services to innovate around these priorities and there is clear evidence that the PLIF funding has enabled activity to take place which has added value to the pre-existing offer in library services.

2.8   For all of the organisations funded, this enabled them to either undertake an entirely new activity (or an activity with a new group of service users), or develop existing activities in a different way. For example:

- East Dunbartonshire wanted to find a way to offer services to the high proportion of older people in the area. They recognised the benefits of ensuring good access to health information and wanted to show how libraries could contribute to health through their activities.

- For the Scottish Poetry Library, the Innovation and Development funding gave them an opportunity to systematise the work they undertook with libraries, and make a more decisive move towards enabling others to be involved in frontline delivery.

- In North Ayrshire, the need for the Health Information Buddies project and the Reading on Prescription project was specifically identified as a result of discussion at the local NHS Managed Conditions group. The group considered particularly how communities could get involved in supporting people managing long-term conditions, and the idea for the project arose from this.

- Midlothian Braw Blether had received previous PLIF funding for a part-time bibliotherapist. After the first year they identified a need to grow the service, and applied for this round of PLIF funding through SLIC to enable a bibliotherapist to be employed for an additional 18 hours per week. The post was co-funded by the Integrated Care Fund monies locally.

- On the Western Isles, library staff identified a need to expand their stock of health information and literature.

- Walk ON in Fife tested the model of walking groups based at libraries through two pilot groups.

Impact on the library sector

2.9　We identified clear evidence that the projects funded were delivering an impact on the library sector. The nature of this impact varied depending on the type of project and the local context. Below, we explore the impact on library/service users, library staff, and on resources.

Impact on library users

2.10　A number of projects told us that their PLIF-funded projects had drawn new users in to their library. Whilst this included the project participants themselves, it also included other users, such as family, friends, or others who had heard about the new activities through local advertising or word of mouth. For example:

- The bibliotherapy sessions run in East Dunbartonshire were an example of reaching people who had not used the library up until that point.

- East Dunbartonshire Pop-Up library enabled the library service to reach out to people who had not been into the library before, and who may be unlikely or reluctant to go into a library building, or who did not have a library close enough to where they lived.

- Library users across the projects gained a greater understanding of the range of services that a library can offer – i.e. that people use the library for advice, to pay bills etc., as well as to borrow books. This has developed a greater sense that the library is not just a building.

- A dementia commitment document was produced by the Health and Wellbeing Information in Libraries project in Ayrshire, which showed how libraries can support those with dementia and their carers.

- Walk ON in Fife, which delivered community walks along with informal reading groups, "attracted a different user group into libraries," including people who wanted to improve their physical fitness and those who would be reluctant to attend a more formal reading group. This project acted as "a more informal opportunity for people to come together and share reading."

- The re-design of the library space in Dundee has encouraged social workers in the area to use it as a "neutral" meeting space.

2.11　Among some of the projects, there is anecdotal evidence that the number of library users, and numbers of books being borrowed has increased as a result of the PLIF projects. However, some libraries noted that whilst the numbers of library users had grown during the lifetime of the project, their systems did not enable them to know whether this was due to the project or not. Gaps in the ways in which libraries are collecting information on their users was a common theme throughout the research which we return to later in this report.

2.12 For some participating organisations, the projects helped them to change people's perception of their library service specifically, but also of what libraries can offer more broadly. Interviewees felt that their project had delivered activities that people would not expect libraries to deliver. For instance, Walk ON in Fife noted that some participants "would never have thought something like this [walking groups] would take place in a library." In Dundee, library staff spoke of the "dementia library helping to show that libraries reflect the diversity of society."

Impact on library staff

2.13 We also identified a significant impact on library staff. This included giving them the time and opportunity to develop their own skills and knowledge. For some, this was as a result of undertaking formal training (for example in Walk ON in Fife and These Foolish Things), to enable them to take part in the project. For others, the learning was experientially based.

2.14 Interviewees observed that staff involved in PLIF projects have acquired new skills, confidence and knowledge related to working with older people and delivering services they had not been involved with previously, such as health information, community walks and reminiscence groups. For example, Walk ON in Fife noted that staff had gained new skills through taking part in community walk leader training and have become more confident in working with groups. Another example is These Foolish Things, which worked with library and care home staff to improve their skills in developing libraries of vintage objects, and to learn ways to use them together with poetry, stories and songs to improve the wellbeing of people with dementia. All participants who completed feedback forms agreed that the training had helped them become aware of ways they can use objects alongside story, poetry and song in creative and reminiscence activities. 81% feel more confident and 72% have developed skills in using objects in this way.

2.15 PLIF projects appear to have had an impact on how library staff view and approach their jobs. Some projects reported that staff are now more welcoming to library visitors, and others said that there is now greater awareness among many staff of the wider role that libraries can play in supporting health and wellbeing, and of the potential to use books not merely as objects but as levers to effect change. Interviewees told us that many staff have bought into this idea and enjoy delivering services that contribute to this aim. One project said staff were enjoying being "more engaged with their customers and feeling part of something positive" as a result.

2.16 In some cases, the PLIF funding helped the organisation to deliver a project that has had a knock-on effect on staff behaviour and/or the services delivered by the organisation. As one project co-ordinator said, "that was the great thing about PLIF funding – it led to incremental changes that we could build on." For example, the Dundee project emphasised the extent to which the project gave staff the opportunity to acquire new skills and observed tangible changes in staff behaviours. One clear example of this was staff observing changes in the appearance and behaviour of one library user. Following a

discussion with social work, this led to additional support being put in place for this particular library user.

2.17 Staff have developed relationships with counterparts in external agencies. For instance, some projects have developed links with bodies that specialise in services for people with dementia and this is helping the organisation to become more dementia-friendly.

2.18 In one project, taking part in community walks has had a personal benefit for staff, who are enjoying "being more active" and find the walks "stress-busting."

Impact on resources

2.19 The PLIF funding has had a positive impact on the participating libraries in relation to resources. There are several examples of the PLIF-funding being used to develop or purchase new resources, many of which will remain available to staff and service users beyond the lifetime of the PLIF funding. Some examples of new materials created or purchased through the funded projects include:

- new signage that makes the library more user-friendly for older people and people with dementia in particular;

- iPads to aid access to resources for use at sessions in care homes;

- purchase of books and resources suited to reminiscence work;

- purchase of books on dementia to support carers who may accompany participant;

- purchase of display furniture;

- development of 'memory boxes'; and

- development of 'libraries of objects' for library and care home staff to use in song, story and poetry sessions with older people.

2.20 A co-ordinator of a project that delivers training to library staff commented that PLIF has helped libraries to develop "resources they have that are available to go out to care homes and other community organisations."

Impact on ways of working

2.21 Taking part in PLIF has had significant impacts on the way in which some libraries work.

2.22 Firstly, it has also helped libraries (and in some cases their parent organisation) to become more dementia-friendly in general and some of the libraries participating have acquired dementia-friendly library status as a result. For example:

- The co-ordinator of Angus Memory Boxes reported that as a result of the relationship built up through this project, Alzheimer Scotland is going to deliver dementia awareness training to Angus Alive staff from libraries, museums and leisure centres,

and will also advise on ensuring that refurbishments being made to libraries in Angus are dementia-friendly.

- In Dundee, the library re-designed some space to make it more dementia-friendly and this space is now used regularly, including by social workers who use it as a neutral meeting space. Book groups also use the space and there is considerable evidence of the new library stock on dementia being used.

2.23   Secondly, the funding has helped libraries to explore new ways of working and new services that they can offer, particularly for older people. As one interviewee said, "PLIF made us more entrepreneurial. We are exploring new ways of working now. The PLIF funding has enabled this to happen." Another said that the funding had enabled libraries to "extend the kind of work they [libraries] do with elderly people." For example, Walk ON in Fife has led to community walks combined with reading groups becoming "core development work" for the libraries involved. There are also examples of PLIF funding leading to the development of new and creative ways to access books and poetry, for example the Pop-Up library created by East Dunbartonshire.

2.24   We also found that PLIF-funded work had helped to strengthen links between library services across Scotland through, for example, instances of joint training and sharing of learning and resources. TRACS, for example, has enabled partners to see where there can be gains from new ways of working arising from libraries being rolled into new trusts, together with museums, galleries and archives. It has also enabled well structured dialogue between library services and creative organisations.

2.25   The PLIF funding has helped to promote a culture of evaluation in some library services. For example, one library has become more aware of the importance of collecting evidence of their impact. Initially this library collected this evidence primarily to fulfil SLIC's requirements, but now impact information is provided routinely to their Board, and is used to inform their annual report. This library also used the evidence they gathered to inform a bid for 'live literature' funding to build on their PLIF-funded project. This use of evidence would not have happened prior to the PLIF funding. However, there is scope for more robust evidencing of impact to be undertaken in some projects and we touch on this issue later in this report when we discuss challenges faced.

Impact on project participants and the wider community

2.26   Some of the PLIF projects were able to clearly articulate and evidence a significant impact on project participants. A number of key impacts were articulated across the projects. These included having an impact on people's sense of wellbeing; addressing social isolation; improved self-confidence and self-esteem; benefiting young people at risk of exclusion from school; improved fitness levels; and increased community awareness and understanding of dementia. For example:

- In Midlothian, the library's work with young people has benefited young people at risk of exclusion. Through bibliotherapy sessions in a local high school, facilitated by an experienced English teacher, the group was able to experience unique challenges designed to address emotional wellbeing.

- In addition, Midlothian Braw Blether uses bibliotherapy to bring people together who have a history of mental health issues. The facilitated sessions have regular attendees who emphasised the importance of the light-touch facilitation and the non-judgemental environment which is encouraged. One participant spoke of "leaving their troubles at the door," and another noted how it has built his confidence and addressed his social isolation. Another participant in one of the groups referred to the group being about "restoring a sense of worth to those who may have felt downwardly affected by forms of memory impairment."

- The Dr You project in the Western Isles, which is based in a small community where it can be difficult to access public services without other people knowing, provided a route for people to access health information discretely. It also helped to develop understanding in the community of the impact of dementia and contributed to building a dementia-enabled and dementia-friendly community.

- Widening the appeal of reading by linking it to another activity through walking/reading groups delivered through the Walk ON project in Fife. This project also noted feedback from participants telling them that they had increased the range of books that they read as a result of the project.

- Some Walk ON participants were referred informally by their GP in order to increase their physical activity, and the project appears to have had a positive impact in this respect. For example, the co-ordinator told us that one participant said, "I have problems with my health but Walk ON is really helping with my walking and overall wellbeing."

2.27 However, some projects had not collected extensive data on their impact on service users. For some, this was because they were still in the early stages of working with participants/service users and so were not able to comment on impact at this stage. In some other cases, there was a lack of data collected because project staff lacked sufficient knowledge of the range of tools available to evaluate impact, and had little or no experience of applying these in their work.

2.28 Braw Blether in Midlothian provides a good example of the effective use of evaluation tools to measure impact on service users. This project has used an outcomes star (based on the Kirklees Model) to collect data every three months.

Value for money

2.29   PLIF-funded projects were mostly small-scale with modest budgets (ranging in value from just over £2,000 to £26,084), but there is evidence of this relatively small investment leading to some significant impacts on staff skills and confidence, service users' wellbeing, and libraries' resources and ways of working.

2.30   Libraries have used PLIF funding in a variety of ways. For example, some have created materials such as memory boxes at low cost and some have made changes to the physical design and environment in their libraries to make them more dementia-friendly. The development of these resources and changes in libraries' ways of working, design and staff's confidence should have a sustained lasting benefit for service users.

2.31   An added value of PLIF's approach is the use of libraries as a low cost and non-threatening environment to reach people with information and services designed to improve their health and wellbeing.

2.32   In addition, taking part in PLIF has had added value for the library services involved beyond the funding received, with several positive knock-on effects including improved staff skills and confidence, the development of new resources and services, and opportunities for networking.

2.33   For these reasons, the PLIF projects represent good value for money.

2.34   However, the conclusions that we can make about value for money are limited, given that many projects collected very little or no data about their impact on service users. As projects become more established, and as long as staff receive the support required to collect this evidence, more impact data should be available and more conclusive comments will be possible about PLIF's value for money.

Partnership working

2.35   Partnership working has underpinned most of the PLIF funded projects to greater or lesser extents. Some of these partnerships have been developed for the first time through the funded projects, while others build on partnerships that were already in place, and in some cases long-standing.

2.36   The ways in which the partnerships evolved varied across the projects. One project lead described attending the Managed Conditions Group in her local area, and took part in a discussion about how communities could get involved in supporting people to manage long-term conditions. She described this as a "lightbulb moment" in her own thinking about how libraries could become involved.

2.37   The need for a new project in Ayrshire was identified through attendance at the local NHS Self-Management Group. Although this was the first time that a formal partnership had

been developed between the three areas (North, South and East Ayrshire), the librarians involved had a good working relationship historically.

2.38   We identified some examples of very strong partnerships in place amongst the projects funded. Examples include:

- In Dundee, the project worked closely with the Dementia Centre at the University of Stirling and with Alzheimer Scotland – for example, the university provided the training for staff. They did note, however, that healthcare professionals had committed to signposting clients to their project but that this had not happened to date.

- The Dundee project organised tailored training for core staff members, and opened this training up to library staff in Fife, Angus and Dundee. As they recognised that users of the library came from many of these areas, cascading/sharing knowledge was an important component of receiving the PLIF funding.

- The co-ordinator of Angus Memory Boxes reported that the project has resulted in a valuable partnership between Angus Alive and the local Alzheimer Scotland office. Alzheimer Scotland helped the project to identify themes for the memory boxes and is helping to promote them. As a result of the relationship built up through this project, Alzheimer Scotland is going to deliver dementia awareness training to Angus Alive staff from libraries, museums and leisure centres, and will also advise on ensuring that refurbishments being made to libraries in Angus are dementia-friendly.

- Walk ON in Fife worked together with Active Fife, which delivers community walk leader training for library staff, provided advice on routes, undertook risk assessments for their walks and helped them to recruit – "a fantastic partner."

- In Midlothian, partnership is at the heart of the project's delivery model, with a steering group involving a psychological psychotherapist, CAMHS, and a joint mental health officer from the local authority.

2.39   Many interviewees commented on the importance of partnership working in PLIF-funded projects. As one interviewee said, "the focus for success is relationships – this is all about people" and another said "our project was underpinned by an enthusiastic partnership with the NHS and wouldn't have worked without that."

2.40   Where partnerships were working well, they tended to be characterised by a pre-existing relationship between staff, which was based on mutual trust and respect ("a partnership of equals"), and had backing from more senior staff in both organisations (i.e. NHS and library service).

2.41   Another characteristic of a successful partnership was where both parties gained from the arrangement. One project lead noted that, "partnerships always start with good intentions, but don't always work in practice. A shared agenda is key." Similarly, we were told that

some health promotion officers see libraries as a conduit for their public health priority issues but are not willing or able to support libraries' objectives through this work. It is not always a two-way process.

2.42 Some projects acknowledged that opportunities to develop a strong partnership had been missed. For example, one project lead thought they could and should have formed stronger working relationships with social care colleagues, as had been the case previously.

2.43 One project noted the growing interest in their work, evidenced by now being invited to speak to NHS and Social Care groups, rather than having to pursue opportunities herself as was previously the case.

2.44 Some projects encountered particular challenges in working in partnership with the NHS for the first time, noting:

- The size of the NHS can be daunting – it can be difficult to identify who to engage with, and to understand how information is cascaded. One project lead described good NHS contacts as "vital".

- The NHS is often very formal in its engagement.

- Staff and projects within the NHS change frequently and keeping track can be difficult. One project lead described their partnership as "effective, but involving a constant need to continually maintain contact to address churn in staff in the NHS."

- Resource constraints in some cases made it difficult for project staff to devote the time required to develop partnerships.

- Links to GPs proved to be particularly difficult to develop. Some interviewees were unsure about how pro-active GPs are in seeking out/offering options to patients to improve their health and wellbeing in settings like libraries.

- One project lead noted that health and social care partnerships are in their infancy and are still working out how they set priorities.

Key success factors

2.45 Interviewees identified several factors that contributed to the success of the PLIF projects:

- For Midlothian, the social model was the key to success and using creativity to adapt the model for different needs. Based in a library setting but with therapeutic context is key (library has the benefit of being a neutral setting, and not requiring participants to attend a medical setting), as has been the partnership with health, social work and mental health colleagues. Because it is situated in the local library, it is on people's doorsteps and they do not have to travel far to get to it. They were careful not just to use library staff to deliver the sessions – they recognised the need for a specific skills set.

- Supportive managers enabling staff to take time away from work to undertake training or participate in networking events.

- Effective partnership working. For example, Walk ON in Fife feels that partnership working with Active Fife was "key – we couldn't have delivered walks" without it.

- Thinking creatively about resourcing activities. For example, the Angus Dementia Memory Boxes project posted requests for donations of objects on the Angus Council intranet.

- A project delivering training to library staff found that areas where there were already examples of library staff working with older people and in partnership with care homes resulted in "fertile ground", but in other areas staff are "more nervous and less willing."

Challenges

2.46   We explored with the funded projects whether they had experienced any challenges in delivering their PLIF-funded projects. Whilst no projects described challenges to us that were insurmountable, a number of challenges did arise, including issues related to working with the NHS, project management challenges, staff churn, procurement issues, and use of volunteers for project delivery.

Working in partnership

2.47   The most commonly identified challenges were those related to working with the NHS. Some stakeholders spoke of the lack of recognition (described by one as "minimal") in the health sector of the contribution of public libraries to health and wellbeing outcomes. The policy connection is not as strong as it needs to be.

2.48   Consequently, many projects reported difficulties in gaining buy-in from some areas of the NHS, particularly GPs. A few interviewees reported that it was very difficult to move beyond project-based discussions and on to exploration of opportunities for more sustainable long-term joint working with NHS Boards. Others told us that there is so much change going on in the health sector just now, with the integration of health and social care and the development of community health trusts, that it can be hard to find a way in.

2.49   In addition, some projects found it challenging to find the time needed to establish and develop partnerships with other organisations. The short timescales available for developing their PLIF applications were one factor in this, but limited capacity within library services were also cited as an issue.

Sharing good practice

2.50   There is a need to learn more lessons about engaging the health sector from approaches elsewhere. One project lead spoke highly, for example, of a partnership project between

the NHS and a library in Norfolk related to preventing falls and promoting warm living, but noted that she had found out about this on her own and would welcome more information about other initiatives, especially ones like this that could be rolled out nationally.

Dealing with local authority procedures

2.51   Some projects involved recruiting new staff, and at least one of these noted the challenges they had in navigating local authority recruitment processes, which were described as "lengthy and cumbersome." This has a negative impact on the project's ability to start delivery quickly.

2.52   Procurement processes in local authorities were also cited as a significant barrier. A number of the projects had to procure items such as dementia friendly furniture, and the pop-up library equipment. Their experiences were overwhelmingly negative – citing lengthy and complicated processes to enable them to procure these items.

Staffing

2.53   Some projects experienced challenges with staff turnover, which meant that training had to be repeated for new staff.

2.54   Some projects also experienced challenges related to finding the time for staff to firstly attend training, and then apply learning points in their work. There were "problems releasing staff" to attend training – even where training is provided for free, there is still a cost to library services in funding cover for the staff involved. Similarly, some staff found it challenging to apply their learning once back in the library service due to a lack of time. As one training participant said, "involvement of library staff brings operational challenges."

2.55   The use of volunteers was a challenge in some cases. A few projects aimed to have volunteers take control of activities but that did not always happen as expected. In South Ayrshire, for example, the project model was based on recruiting volunteers as health buddies. Despite significant marketing, they only managed to recruit two people to the role, one of whom quickly moved on to a paid post. Given that the training for the role was intensive, project staff became reluctant to use volunteers for this role again and were considering a different approach, recognising that not having the volunteers in place would limit the reach of the project.

Evidencing impact

2.56   As noted above, some projects were unsure of how to go about gathering evidence of their impact, especially related to softer outcomes (such as improved wellbeing), and reach. One project lead emphasised the need to think about "how to measure the soft stuff" and thought further support with this would be valuable.

2.57   One project noted that they do not currently monitor the borrowing rates of "health on prescription" books, but could do so as a measure of impact in future.

2.58   Evidencing the impact of their work is crucial, and it was clear throughout this evaluation that there are still some key weaknesses in some library services in this respect. More sharing of good practice, and support to develop evaluation frameworks may be necessary in future.

2.59   Some of the projects we visited were more experienced in evaluation. Midlothian Braw Blether, for example, used an Outcomes Star evaluation tool to measure the impact of their bibliotherapy intervention. The ten-point star that they used originated from the Kirklees Bibliotherapy Toolkit. In addition, Midlothian commissioned a PhD student to undertake an external evaluation of their project, to enable them to learn for future implementation. In Dundee they were working with Alzheimer Scotland to gather evaluation data.

Logistics

2.60   The East Dunbartonshire Pop-Up library resulted in some logistical challenges, which had not been predicted at the outset. The size of the unit they purchased required a removal company to move the unit to wherever they were locating it, at a cost. The size of the unit also restricted where they were able to locate the unit, and meant that it was only worth locating the unit somewhere that it could stay for a significant period of time. In addition, the unit needs a data point to operate some of its functions and where connectivity was inadequate, this limited what they were able to offer through the pop-up unit. They also emphasised that the greatest value was gained from the pop-up unit when a "human" is there to guide people to the resource and provide assistance.

Transferability of projects

2.61   All projects were consulted about the opportunities to transfer their model/new ways of working to other library services, and to other settings. All were confident that there is potential to replicate their projects in other areas, albeit with adaptations to suit local circumstances.

2.62   However, some of the funded projects seem to be more transferable than others. Following a networking event facilitated by SLIC, one project noted that one of the other projects that had been showcased was really interesting, but would not be suited to a three-local authority model in a region with no cities.

2.63   We identified a need for projects to further share their experiences (positive and negative) to enable others to fully understand their project model. More opportunities to share learning at a national level could support this happening. Whilst there appear to be many examples of effective and successful local projects, library services would benefit from sharing learning with each other in order to promote replication of projects beyond local authority boundaries where appropriate.

3. Sustaining projects beyond the lifetime of the PLIF funding

3.1   Sustaining activity beyond the lifetime of the PLIF grant is a key concern for the projects. All noted the challenging funding environment within which they work, and within the library sector more widely, there are ongoing concerns about services being cut.

3.2   As noted in the previous chapter, many of the projects have developed resources and activities that can continue to be used in the longer term for little or no cost, albeit perhaps not at the same capacity as delivered during the funding period.

3.3   Ensuring that stock is kept up to date and relevant is key to the success of some of the projects. Some have dealt with the issue of sustaining relevant stock at the end of the PLIF funding period by funding this through core budgets. Other projects had stocks of marketing materials left over at the end of the PLIF funding and so will be able to continue to use these for some time yet.

3.4   We identified some innovative approaches to sustaining elements of projects, including one library which works with a social enterprise that sells on old books donated to them by the library. Revenue generated from this is invested in purchasing new stock on health and wellbeing for the library. This library also supports the NHS library in a mental health treatment centre, and supports the NHS staff library, which is a way of them continuing to develop their focus on health and wellbeing.

3.5   The health buddy volunteer role in South Ayrshire could be re–instated, but the project lead emphasised that they would prefer to do so following reconsideration of the aims with partners in the NHS and local authority to determine what is really required in the area.

3.6   In East Dunbartonshire the library has committed to the annual cost of upkeep of the Pop–Up library and to maintaining the technology. The library has also continued to meet the costs of removal etc. each time the pop–up is used, but they are very careful about how often and how they use it.

3.7   The Words for Wellbeing project in East Dunbartonshire is exploring opportunities for sustaining the bibliotherapy sessions it ran through the PLIF funding. One approach has been to trial giving groups resources and support to operate without the input of the paid facilitator. However, they believe that facilitation is a key component of the success of the model and are considering training volunteers to take on this role.

3.8   In Dundee, the activity previously funded by PLIF has now been mainstreamed. The library continues to refresh stock to include new books related to dementia, and the re–designed space continues to be used regularly by groups. The project also led to them establishing a new way to catalogue resources, which has impacted positively on the rest of the library.

3.9   Midlothian is exploring developing the model to focus further on young people and to introduce an element of creative writing to the model. They are also considering adapting the model for use with people with autism. They have received subsequent funding from their local health and social care partnership for a part-time bibliotherapist. Midlothian considered using volunteers to take forward delivery of sessions, but do not think it is appropriate. They are trying to build sustainability through training other professionals instead. They have also consulted Surestart about involving parents in delivery, and are developing a set of tools.

3.10   The Scottish Poetry Library is continuing the work it started with PLIF funding and trying to find ways to enable the project to be offered in more care homes. They believe there is the potential for this model to be offered in every care home in the country, but clearly there is a lack of funding to pay for it. The SPL believe that costing the service, making this information available to care homes, and encouraging them to seek local philanthropy to retain/introduce the service may be the most realistic way of growing and sustaining the service. This project is also in discussion with NHS Education for Scotland about the potential to expand into healthcare settings.

3.11   Some projects noted that sustaining project activities would be challenging due to a lack of capacity amongst library staff to share information and cultivate new contacts. As staff capacity reduces in library services, staff in some library services are under pressure to deliver more within their working day and they reported that this is limiting opportunities for development, networking and partnership working. This is a real threat to the continuing success of some of the projects we consulted, but essential to tapping into future opportunities for development.

4. Conclusions and recommendations

Conclusions

4.1 Our evaluation has found clear evidence that the Public Library Improvement Fund has achieved what it set out to through the library-based, health-related projects described in this report. With relatively small investment, these projects have achieved positive outcomes for libraries, staff and service users. Libraries have attracted new users, established beneficial new partnerships, developed innovative ways of working, developed new dementia-friendly resources, and demonstrated the contribution they can make to health and wellbeing outcomes. Staff have gained new skills and confidence in working with older people and in leading new types of activities, and there is evidence that the projects have enhanced service users' wellbeing.

4.2 The projects have demonstrated interesting new ways of working, many of which are transferable to other settings, however it is unclear whether sufficient opportunities across the libraries sector for learning about effective models in individual library services currently exist.

4.3 Those projects which have been most successful have had a strong local partnerships at their core – Midlothian Braw Blether, which has developed a strong, strategic partnership with local health partners, and Angus Memory Boxes, which has been based around a partnership between Angus Live and Alzheimer Scotland, are particularly good examples of this.

4.4 Some of the projects encountered challenges during their implementation, and whilst these did not ultimately detract from the impact of the projects, they are important to be aware of in funding future programmes of this nature in libraries.

4.5 Many projects were unable to gather data on their impact on service users, either because they had not been established long enough to measure this, or because staff were unsure or unaware of how to gather this data. This is a key area for future development, and one which we understand is being jointly explored by SLIC and Carnegie UK Trust currently.

4.6 There are some challenges related to sustaining projects/services in the longer term, but this is being looked at creatively by some of the organisations involved. It is fair to say that many of the services and resources developed by the PLIF projects, such as memory boxes and community walks, will be able to be sustained in the longer-term with little or no cost.

4.7 Other challenges encountered by these projects related to staffing issues included staff turnover, which is likely to result in the skills and know-how to deliver a project being lost and having to be replaced, and problems in finding cover for staff to enable them to attend training events and/or work on developing new projects. Another key project management

issue related to complex and lengthy procurement processes having to be navigated to acquire relatively low–cost items, which caused delays to project delivery.

4.8   While partnership working has been key to the success of many of the PLIF projects, these partnerships were not all easy to establish, and stakeholders felt that these projects needed to become more visible to external stakeholders, especially the NHS and Scottish Government. A major challenge encountered by many projects was gaining buy–in from the NHS. SLIC has a key role to play in developing stronger ties with health and social care policy leads in the Scottish Government, as well as contacts in the NHS, to ensure that libraries are aligned with national health and wellbeing priorities and are seen as credible and valuable partners by these bodies in promoting health and wellbeing.

4.9   There is a strong sense from stakeholders that, while these projects are largely small–scale examples of successful local activity, they would benefit from scaling up and replication in other areas. To enable this, there needs to be more sharing of learning among library services so that they can find out about projects from other areas that could be replicated.

Recommendations

Project development

- Library services to ensure that information regarding opportunities for funding are shared widely amongst staff at the earliest possible opportunity to ensure sufficient time is available ahead of funding application deadlines to develop project ideas and to approach partner organisations.

- Library services to share learning from the PLIF–funded projects with other library services to enable good practice to be replicated elsewhere.

Overcoming procurement and staffing challenges

- SLIC to continue to explore ways of addressing challenges with procurement processes with library services, and share learning from PLIF projects' experiences with others to inform planning for future projects.

- SLIC to explore with library services alternative approaches to staff training and development, to avoid challenges related to staff cover which arose for some of the current PLIF–funded projects.

Skills development for projects

- SLIC to continue to work with Heads of Service and external organisations (such as Carnegie UK Trust as they are currently) to explore opportunities to develop project management and leadership skills in library services.

- SLIC to identify opportunities to improve impact measurement approaches and skills within library services.

- Library services to develop impact measurement frameworks to ensure that the impact of core service delivery, and of one-off interventions such as those funded by PLIF, can be demonstrated.

Shared skills

- SLIC to continue to explore ways of facilitating the sharing of skills and learning across libraries more, to enable opportunities for collaboration and adaptation of projects to be further exploited.

Working with the NHS

- SLIC to continue to lead strategic conversations with the NHS to clarify the role libraries can play in delivering health outcomes, explore the potential for more joint setting of local outcomes, and to explore opportunities for joint working between the NHS, local authorities and libraries.

APPENDIX 1 – RESEARCH TOOLS

Interview questions for project co-ordinators

Introduction

The Scottish Library & Information Council has commissioned Blake Stevenson to evaluate the health related projects that it funds with the Public Library Involvement Fund.

Your views as a member of library staff involved in the bidding for funds / delivery of the project are crucial to this process and we are grateful for your time.

Your participation is voluntary and our report will not attribute comments to any individuals and if you have any questions as we go along please let me know.

 (NB QUESTIONS WILL NEED TAILORED IF INTERVIEWING PARTNERS INVOLVED IN DELIVERY)
Group / Interview with

Name: Name:
Title: Title:

Name: Name:
Title: Title:

Interview Location:
Time:

RQ	QUESTION	Prompt/ follow ups/aim	ANSWER
	Can you tell me about your position as [job title] in [name of project]	Warm up question to establish if they were involved in determining need / pitch for funding / delivery / in-house evaluation	
	Can you tell me how you found out about the PLIF funding? (if involved in pitch for funding etc)	Did they find out via informal or formal channels? What is their view of the funding process Was the amount of funding pitched properly? Did they feel confident that their bid would be accepted?	
	Does project address a gap in service		
	Can you tell me about the aims of [project name]		
	Can you tell how the idea for the project originates? *Ask above if involved in determining need / pulling together the proposal	How did they determine need etc Did they work in partnership?	
	Partnership working		
	Who was involved in the partnership?	Was this first time partners had worked together?	
	Were there any challenges in setting up the partnership	*Here we want to establish what actions / conditions are required to make a successful partnership or what can hinder partnership working*	

	What worked well in getting the partnership up and running	
	Can you tell me about how the partnership worked once the project was up and running	Would they change anything? What worked well? What didn't?
	Should/could any other partners have been involved?	What difference would this make?
	Demographic profile / reaching users	
	Replay back aims of project – understanding of target audience	
	Did you reach the people you thought you would	If yes – how do they know? If not – why not?
		How did the project reach potential users?
	Did you experience difficulties in engaging with your target audiences	What would they do differently now? Would they engage differently? Would they change scope to different audience? *Need to ascertain if the project considered diversity of potential users at outset and what steps taken to ensure project was inclusive.*

	Impact / data capture/ public perceptions		
	Did the project have a positive Impact?		
	Can you explain to me the benefits for the participants	How do they know – what evidence did they capture? And How.	
Tailor to project	Can you describe to me the benefits (if any) for the staff /volunteers involved in delivery?	As above	
	Was there an impact on the day to day running of the library	Did it impact on resources (enhance? / detract?) Did it attract new library users?	
	Was there an impact for the partner organisations [name these]	Establish nature of impact – how they know etc.	
	Do you think this project has changed public perceptions of the role of the library (in connection to social wellbeing)	How do they know? Is awareness wider than those who have accessed the service? Have library users asked for other health related projects?	
	How was the evidence captured during the project used	EG was it primarily for returns to SLIC or was it used internally? Did evidence reach beyond the partners – e.g. to wider Local Authority or NHS Board? *This question is to establish involvement of leadership*	
	Did they proactively disseminate information about the project to other Library areas – or have they been approached for information?	How easy is to extract and disseminate information? EG: Do they have a '1 pager' that describes the services impact for others?	
	Sustainability		
	Overall would you say that the running of the project – Represented value for money – Added value to the library service? – Added value to partners	*Why, what makes them say this – capture indicators*	

For current projects	Do you intend to continue the project once funding has ended	How will you do this – Will it continue on same model – What is contribution from partners (funding / resource /??) Does it require allocation of core resource (if staff try to ascertain FTE time)	
For completed projects	Did you continue activity once the funding period ended	If NO find out why – was it a resource or demand (or other) issue – probe on this as interesting to see if leadership a factor. IF YES – establish if this was a long term commitment – i.e. is activity ongoing and expected to continue.	
For all	Was sustainability discussed at the outset – when bidding for funds?	What was intended to happen at the end of the funding period? What has happened in practice?	
	Knowledge Transfer		
	Do they think other library areas could replicate their model?	Establish what conditions are required – is this project particularly suited to rural / urban etc	
		What changes would they recommend to others considering a similar approach?	
	Project specific		
	To be added by interviewer		
	Anything else to add that you feel we haven't covered?	*Good opportunity for interviewee to summarise their main points*	

Interview questions for stakeholders

Introduction

The Scottish Library & Information Council has commissioned Blake Stevenson to evaluate the health related projects that it funds with the Public Library Involvement Fund.

Your views as a strategic stakeholder are crucial to this process and we are grateful for your time.

Your participation is voluntary and our report will not attribute comments to any individuals and if you have any questions as we go along please let me know.

Interview with

Name:

Title:

Interview Location:

Time:

RQ	QUESTION	Prompt/ follow ups/aim	ANSWER
	Can you tell me about your involvement in the Public Library Improvement Fund	Was it nature of job / did they have an interest / did they have involvement in policy area etc?	
	Can you tell me how involvement with SLIC and the PLIF supports policy in your area	Need to understand reason for involvement	
	Do you think that the projects funded by PLIF have supported delivery of your policy objectives?	If yes – how do they know? If Not – why do they think this is ? – or do they not know – what would they need to have a view?	
Data capture	In your view did you get the evidence you expected from the projects	Was the format appropriate / helpful? Any observations – e.g. consistency of approach	
Cascading of information	Is their organisation aware of the outcomes of the PLIF funded activity	To what extent is knowledge shared? Is level of awareness a problem? Do more people need to know to support sustainability / scaling up?	
	Have the PLIF funded projects resulted in any changes ?	Ie New policy directions Better evidence Changes in planning?	

	Partnership working		
*remember that in NHS settings partnership working has a different meaning so be clear about it being about the collaboration with SLIC etc	I'd like to understand a bit more about the partnership working involved	At a national level – what worked well What didn't work well Do you have any observations about the partnership arrangements at a delivery level?	
	Has the involvement in the health related PLIF projects changed perceptions in your organisation (Locally/nationally) of the role of libraries	What makes them say this? If Yes, has it led to other opportunities for partnership working nationally?	
VFM	From your perspective do you think the PLIF investment represented value for money	Why? What makes them think this	
	Sustainability		
	Do you think the projects that the PLIF supported are sustainable?	If so, why? If not, why not?	
	Anything else to add?		