Collection development in a new medical school

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Agenda

- ✓ Background to BSMS
- ✓ Collection development issues
- ✓ Questions

Achievements

- ✓ Information literacy
- ✓ Use of blog and RSS
- ✓ VLE integration
- ✓ Medical humanities
- ✓ Open access/institutional repositories

New medical schools (1)

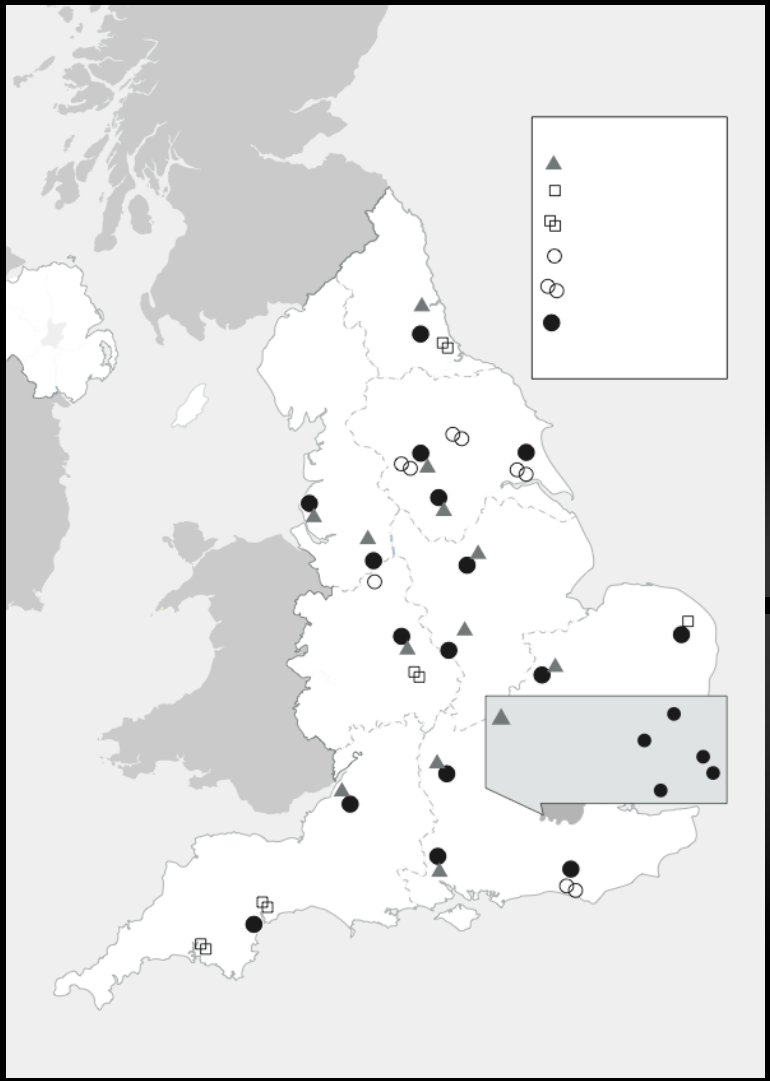
- ✓ To develop new doctors who are equipped to meet the challenge of changing health and health care needs of patients and populations into the first half of the twenty-first century.

New medical schools (2)

- ✓ To ensure that the distribution and patterns of training of students effectively increase the home supply of doctors, and meet the needs of the populations which are served by the NHS.

New medical schools (3)

- New medical schools in England:
  - Bradford
  - BSMS
  - Derby
  - Durham
  - HYMS
  - Keele
  - LWMS
  - Peninsula
  - UEA



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New medical school developments

- Birmingham review: *Evaluation of the National Expansion of Medical Schools (NEMS):*

  http://www.publichealth.bham.ac.uk/hiaru/NEMS%20Evaluation%20Intro.htm

- Medical Schools: *Delivering the Doctors of the Future* (DoH and GMC):

  http://www.dh.gov.uk/assetRoot/04/07/54/06/04075406.pdf

- Intake in 2005 was 57% above 1998 baseline

The GMC expects…

- *[Medical] graduates must "be able to gain, assess, apply and integrate new knowledge and have the ability to adapt to changing circumstances throughout their professional life"* Tomorrow's Doctors http://www.gmc-uk.org/education/undergraduate/tomorrows_doctors.asp#Outcomes

BSMS

- ✓ Intakes of c 130 students a year building to steady state, 650, in 2008
- ✓ Partnership between two HE institutions and NHS (Brighton & Sussex Universities Hospitals NHS Trust)

Why Brighton?

- Partners' strengths:
  - University of Brighton: history of educating health professionals
  - University of Sussex: strong life sciences base
  - NHS: strong clinical base and local health economy

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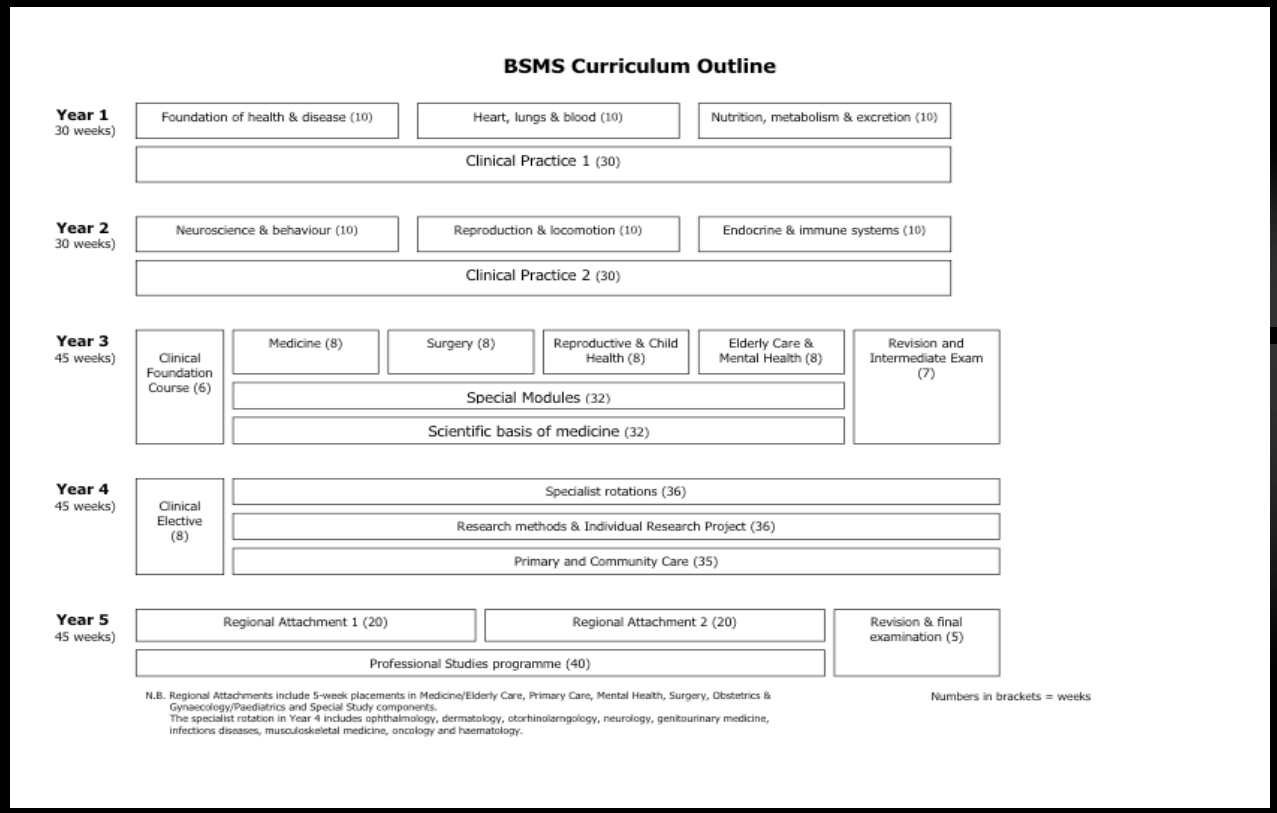
The BSMS curriculum



Dramatis personae

- ✓ Undergraduates
- ✓ Researchers
- ✓ Module leaders and module teams
- ✓ Discipline leaders
- ✓ 200 teachers from HE/NHS and elsewhere
- ✓ Information Services Group
- ✓ Rank and file library and computing staff
- ✓ ICT project manager and Information Resources Development Coordinator

No dedicated “medical library”

- BSMS staff and students are full members of both universities, have access rights in the NHS and are triply blessed:
  - Three print collections
  - Two electronic collections, integrated with BSMS-only resources
  - HE libraries use same LMS, including reading list tool

Types of resources

- ✓ Print books and journals
- ✓ E-journals, databases
- ✓ Audio-visual materials
- ✓ Software: Netter's Anatomy (PDAs), applications deployed through a thin-client (Citrix)

Which resources?

- ✓ Membership of Curriculum Development Group
- ✓ Faculty recommendations
- ✓ Core lists (MIWP, Brandon-Hill)
- ✓ Librarians' subject knowledge
- ✓ Publishers

Core and periphery

- Core texts: stocked on a 1:8 copy to student ratio
- Distributed according to:
  - 1. the location of teaching for that subject
  - 2. student distribution between residences and other social factors

Budgets

- ✓ C£160,000 p.a
- ✓ Central and devolved expenditure

Supporting research

- Information needs analysis
  - Highly specific and disparate resource needs
  - Information literacy needs
- IR/RAE

Some issues

- Student-selected components
- Our seams were on show
- The licensing jungle:
  - Perceived asymmetry
  - BSMS model not understood by publishers/JISC
- NHS-HE divide
- Goodwill
- Communication with faculty

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