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The Reading Agency and Society of Chief Librarians

Reading Well Books on Prescription Evaluation 2014-15

October 2015





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1. Executive Summary

This evaluation explores the reach and impact of the second year of The Reading Agency and Society of Chief Librarian's Reading Well Books on Prescription programme. The scheme is funded nationally by Arts Council England and is part of the Society of Chief Librarian's Health offer, one of four universal offers also including Reading, Digital and Information.

Reading Well Books on Prescription helps individuals manage their mental health and wellbeing by providing access to accredited self-help reading through English public libraries. Books can be recommended by GPs or other health professionals but are also available as self-referral for anybody to borrow from the open shelves. The programme is currently operating across two schemes, one focusing on common mental health conditions launched in June 2013 and one focusing on dementia launched in January 2015, which seeks to support people worried about their memory, with a diagnosis of dementia or caring for someone with the condition.

In order to establish the impact of the programme on those borrowing and reading the books a user survey postcard was sent to selected libraries and inserted in the books between March and July 2015. An online survey was also sent to participating library authorities to explore their experiences of the programme. A further survey was sent to 'prescribing partners'; i.e. health practitioners who have registered their interest in the programme or have an active partnership with their local library authority. We also explored sales and lending data of the listed titles and conducted qualitative interviews with a small number of library staff and health care professionals to explore their experiences of the programme in greater depth. The user survey data relates to year two of the common mental health conditions scheme (the results of year one were summarised in a previous evaluation report

<http://readingagency.org.uk/adults/impact/research/reading-well-books-on-prescription.html>) and the first six months of the dementia scheme.

1.1 Overall Reach

- Overall, Reading Well Books on Prescription is available in 97% of library authorities in England, 93% of all library authorities are running the common mental health conditions scheme and 89% are running the dementia scheme
- In its second year Reading Well Books on Prescription has been used by 170,000 users. The programme has reached nearly half a million users since it was launched in June 2013
- Borrowing of the titles for the common mental health conditions scheme has increased by 97% since it was launched, although borrowing of these titles has decreased by 16% in the past year.
- Borrowing of the dementia scheme core list has increased by 346% in the first two months compared to the same time last year
- In the past year features have appeared in national and local media with a combined circulation of 2.2million
- The majority of users of both schemes are self-referring, rather than being signposted by a health professional, although a higher proportion than previously (27%) are

being referred. This route has increased since year one (20%).

- Following the peak in common mental health conditions users in the launch year, uptake has steadied in year two. This means that there has been a drop in the overall number of users compared to year one (from 275,000 to 130,000). The dementia scheme has reached 40,000 new users in its first six months and will continue to be monitored

1.2 User impact for common mental health conditions

- 90% of users of the common mental health conditions scheme surveyed found the books helpful for understanding more about their condition
- 85% found that reading the books made them feel more confident about managing their symptoms
- 55% reported that their symptoms had reduced as a result of reading the books
- Each of these areas of impact has increased compared to year one of the programme
- The proportion of prescriber referrals to the scheme has increased from 20% to 27%, potentially indicating strengthening partnerships between library services and healthcare providers at a local level

1.3 User impact for dementia

- Those replying to the dementia scheme survey were more likely to be carers or family members of someone with dementia.
- 92% overall found the scheme helpful
- 79% found reading the books helpful for caring with someone with dementia
- 73% found it useful for understanding more about the condition
- 67% found the books helpful for increasing their knowledge of other sources of help and support
- The vast majority of those using both schemes are existing library members

1.4 Prescriber and health partner impact

- Across England there are an estimated 4,082 prescribing partnerships in place for the common mental health scheme and 2,325 for the dementia scheme, making a total of 6,407 prescribers using the scheme.

- 74% of survey respondents were either IAPT¹ therapists (35%), psychological wellbeing workers (22%), or Psychologists (18%)
- There has so far been a lower uptake of the dementia scheme amongst the health professionals responding to this survey, although this is likely due to the scheme being in the early stages of adoption
- 50% of health partners use the scheme monthly or more often, frequency of use amongst health providers has declined since year one
- Those using the scheme mostly do so to provide patients with general information and advice and as part of a supported treatment programme. Few are using it as a one off or stand-alone treatment option
- Those using the dementia scheme are directing it more towards carers and families than towards patients themselves
- Echoing the reports of programme users themselves, the prescribers see the main benefits as increasing patient understanding of their conditions (89%) and helping them to manage their symptoms (83%)

¹ IAPT stands for 'Improving Access to Psychological Therapies'. It is a national NHS service targeting all adults seeking first-line treatment for depression and anxiety (<http://www.iapt.nhs.uk/about-iapt/>)

- Prescribers see the main benefits in the programme for increasing the range of support on offer for people with common mental health conditions and dementia, as well as for carers, and as providing a source of support for people outside of NHS consultation time
- Prescribers also reported that they value the role of libraries in promoting health in the community

1.5 Library impact

- The main benefits reported by libraries are that the programme has helped them to develop new health partnerships, helped them to support the health and wellbeing of people in the community and raised the profile of public library services
- 79% of library services running the common mental health conditions scheme and 78% of those running the dementia scheme are working with their Local Authority Public Health teams in order to promote the programme, a significant increase from year one where 47% of libraries had partnerships in place
- 55% of those running the common mental health conditions scheme are working with their local IAPT service
- 64% of those running the dementia scheme are working with local third sector organisations

- Across those responding to the survey, £107,204 has been raised in earned income to support the programme. 31% of library services running the common mental health conditions scheme have secured funding from external sources (an average of £706 per service), with 37% of libraries securing funding for the dementia scheme
- 73% of libraries report that support from The Reading Agency is good or excellent
- Libraries are generally very positive about the scheme and see it complementing the library offer currently and in the future

1.6 Conclusions and recommendations

- The Reading Well Books on Prescription programme continues to have a successful impact for users, prescribers and libraries. There is much praise for the scheme among health professionals and libraries, and many responded that they appreciate its simplicity and effectiveness
- The launch of the dementia scheme in January 2015 has diversified the original aims, seeking to reach carers and family members, as well as individuals with the condition, and this appears to be having a strong and important impact on those engaging with scheme
- Both libraries and prescribers have described the programme as very effective in showing the key role that

libraries play in promoting public health and contributing to the growing need for effective mental health services in the community

- Those using the common mental health conditions scheme have reported higher impact scores across all categories - understanding conditions, confidence in managing symptoms and in actual symptom reduction. This indicates that while overall reach has decreased this year, impact has improved
- Most users are benefiting by accessing information and understanding more about their conditions. This should be considered in how the programme is marketed and targeted to ensure that it can have the broadest appeal to library members and non-members
- The use of physical prescriptions is not common across either the common mental health conditions or dementia schemes and the rates of self-referral in the user survey are high. This indicates that users are accessing information about the scheme and participating, but that whilst prescription levels are increasing, the formal process of issuing a prescription is not being used across most prescribers or users
- There is potential for libraries to promote the schemes in a more diverse range of local settings, including places where those seeking information and support, rather than treatment, may be located. There is also a need to follow-

up with health settings once promotional material has been distributed to ensure it is being used

- Further research and evaluation is required to better understand the impact of the programme on users
- The Reading Agency and Society of Chief Librarians may also wish to consider how all programme strands can continue to be promoted at a national level to ensure those who may benefit outside of library and health settings are enabled to do so

2. Introduction

This evaluation presents findings from the second year of the Reading Well Books on Prescription programme. The programme was launched in June 2013 to enable people to manage their mental health and wellbeing by providing access to accredited self-help reading through English public libraries. The programme is split into two schemes; common mental health conditions (common mental health conditions) and a newer dementia scheme, launched in January 2015.

The programme is delivered by The Reading Agency, in partnership with the Society of Chief Librarians, with funding from Arts Council England. It is a core component of the Public Library Universal Health Offer, a strategy which focuses on the public library contribution to the positive health and well-being of communities. It includes a commitment to provide a range of services including public health information and promotion, sign posting and referrals as well as creative and social reading activity.

This year builds from a successful first year of the programme which saw 91% of library authorities in England participating and over 275,000 users. The programme seeks to establish local partnerships between health and social care providers and libraries to signpost individuals to library services and 'prescribe' books from the two core reading lists (one each for common mental health conditions and dementia)². Users and library members can also self-refer to the programme, either signposted by publicity material in the community, media coverage of the programme, or through library promotion of the schemes.

² Full book lists can be accessed on the Reading Well website at <http://readingagency.org.uk/adults/quick-guides/reading-well/>

This report presents data and findings from a range of sources seeking to establish the ongoing impact of the programme, as well as how it can best be developed to achieve greater impact in the future.

The report is split into four main sections; user reach and impact, which explores the overall reach of the programme and self-reported impact from users from each scheme separately; prescriber and health partner impact, which explores the main benefits and challenges experienced by those engaging in the programme as 'prescribers' and referrers, 'prescribing partnerships' which explores the extent of more formal partnerships between libraries and health providers and; library service impact, which explores the perspectives of participating library authorities. While much of the data is survey-based, this has been complemented by qualitative interviews with prescribers and libraries to illustrate some of the findings from the quantitative surveys in greater depth.

The final section of the report presents conclusions and recommendations to develop the programme in its next phase. Appendix 1 outlines the methodological approach of the evaluation and appendix 2 presents survey analysis from all user postcards collected since the launch of the programme.

3. User reach and impact

3.1 Reach

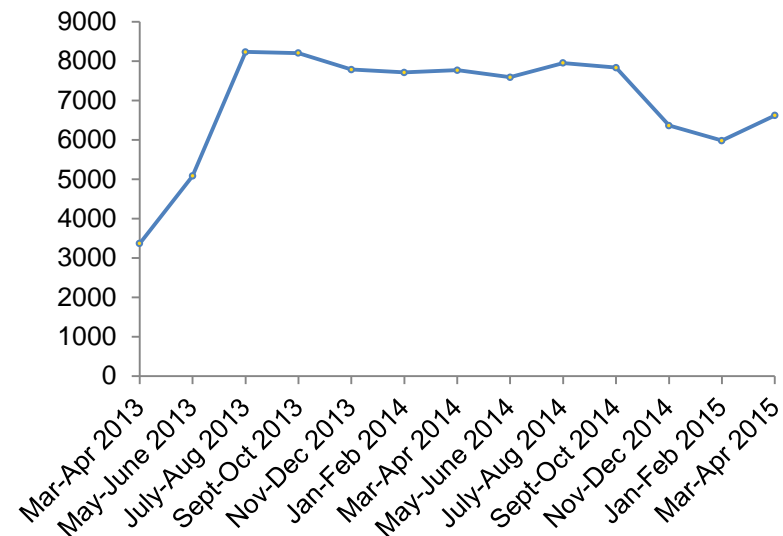
The Reading Well Books on Prescription programme is available in 97% of library authorities (147 of 151). The common mental health conditions scheme is available in 140 library authorities (93%) and the dementia scheme is available in 135 (89%). This is an increase from 92% of library authorities running the common mental health conditions scheme in year one. In the second year of the Reading Well Books on Prescription scheme, 170,000 people were reached across England (this figure represents combined users of the common mental health conditions and dementia schemes). Individually, the mental health scheme reached 130,000 people in the last year and the dementia scheme reached 40,000 people in its first 6 months.

Since the launch of the Reading Well Books on Prescription programme in June 2013 approximately 445,000 individual readers have been reached in total. There has been a decrease in the number of people using the common mental health conditions scheme compared to year one, but this may be expected given the high degree of publicity and initial energy at the launch of the scheme. Ongoing monitoring of the dementia scheme will indicate the patterns of uptake. As with the common mental health conditions scheme there has been a high degree of publicity in the initial stages, but also the embedding of partnerships which may yield greater user numbers and stronger impact over time.

Based on data provided by the Public Lending Right (PLR) service which tracks lending patterns across a sample of UK libraries, since the beginning of the scheme there has been a 97% increase in library loans of the core list titles for the common mental health conditions scheme, although this has dropped by 16% in the second year of the scheme

between July 2014 and April 2015. There may have been a 'bounce' effect of the launch of the dementia scheme as there was a rise in lending of the common mental health condition titles in the first quarter of 2015 (as seen in figure 1).

Figure 1 - PLR borrowing trends for the common mental health conditions list (May 2013-April 2015)

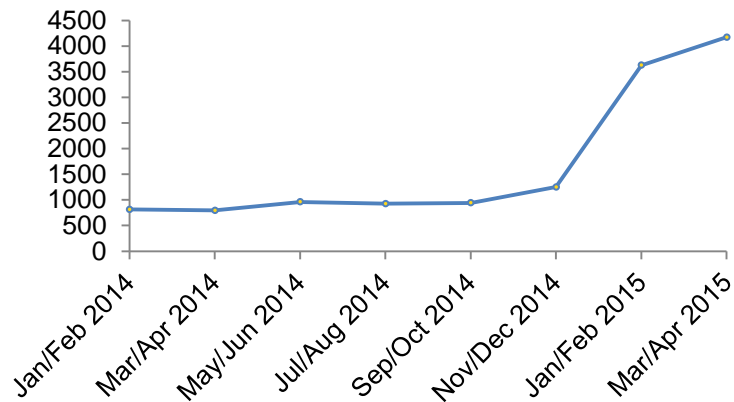


The titles with the greatest increase in loans since the beginning of the common mental health conditions scheme are *The Worry Cure: Stop Worrying and Start Living* by Robert L Leahy, *Overcoming Depression and Low Mood: A Five Areas Approach* (third edition) by Chris Williams, *Overcoming Anxiety, Stress and Panic: A Five Areas Approach* by Chris Williams, *How to Stop Worrying* by Frank Tallis and *The Relaxation and Stress Reduction Workbook* by Martha Davis. Titles focusing on binge eating and phobias have seen minor increases in

borrowing and have lower rates overall. This is consistent with prevalence figures reported by the latest household survey of psychiatric morbidity in England which showed that 9.7% of the adult population is experiencing combination stress and anxiety symptoms, 2.6% phobias, and 1.6% eating disorders³.

For the dementia scheme titles, based on PLR data, borrowing has trebled (i.e. has increased by 346%) in March/April 2015 compared to the same period in 2014 (and covering just the first four months of the scheme). The titles with the greatest increase in loans in the same period are *Still Alice* by Lisa Genova, *Grandma* by Jessica Shepherd, *Coping with Memory Problems* by Sallie Baxendale and *The Little Girl in the Radiator: Mum, Alzheimer's and Me* by Martin Slevin. The overall trend can be seen in figure 2.

Figure 2 - PLR borrowing trends for the dementia list (January 2014 - April 2015)



³ Adult Psychiatric Morbidity in England: A household study (2007) Health and Social Care Information Centre <http://www.hscic.gov.uk/pubs/psychiatricmorbidity07>

As depicted in figure 2, we can see a dramatic increase in borrowing of the dementia titles in the first quarter of 2015 compared to the entire previous year. Borrowing of *Still Alice* was markedly higher than the other titles in April, potentially due to the release of the motion picture based on the novel in March 2015. However, the significant rise in borrowing across all titles to the end of February 2015 indicates that the scheme has had a strong impact on borrowing levels despite this additional effect. The titles indicate a preference for fiction and personal accounts of dementia at this stage of the scheme. This will be interesting to monitor as the scheme matures in order to understand how readers are using the books.

Sales figures from the Publishers Association show a similar trend, with total sales of titles from the common mental health conditions list numbering 89,529 (August 2014-May 2015), and total sales of the dementia scheme titles numbering 16,887 (August 2014-May 2015). 13,000 of the sales of the dementia list took place between October and December 2014, which likely indicates libraries buying in stock for the launch of the scheme.

For the common mental health conditions scheme there were spikes in sales in February 2015 and April 2015 (13,000 and 12,000 respectively compared to a monthly average of 9,000), which may indicate the purchase of library stock as financial year budgets are being spent-down and reallocated in the new financial year. Since we cannot disaggregate individual from organisational sales data, based on borrowing and sales figures alone it is difficult to determine how many individual purchasers may be engaging with the scheme, although it may be that individual sales within the common mental health conditions scheme are higher as most libraries would have established their collections in year one. In the future The Reading Agency may wish to consider ways to explore levels of engagement in the scheme from individual purchasers as a potentially 'hidden' user and beneficiary

group.

3.1.1 Media and web coverage

Media coverage in 2014/15 is one contributing factor to reach. Both the common mental health conditions scheme and the dementia scheme have attracted significant local and national media profile. By far the greatest amount of coverage has been in local press, with individual libraries and authorities featuring in many local news stories, both at the launch of the dementia scheme and when tied in to other local events across both Reading Well schemes. Since September 2014 stories and articles featuring the Reading Well schemes have appeared in media outlets with a total circulation of 2.2million. If we assume 50% readership, coverage of the scheme is likely to have reached 1.1million individuals. While the depth of coverage varies greatly it is likely that this has motivated people to investigate further, both in libraries and as individual purchasers.

In the year June 2014-May 2015 there were 16,000 unique visitors to Reading Well webpage on The Reading Agency website⁴. Nine thousand of these were since the launch of the dementia scheme in January 2015 which has influenced a doubling of visits to the site (an average of 2,000 visits per month compared to 1,000 per month before the launch). The 'bounce rate', which indicates what proportion of visitors are only viewing one page and then navigating away from the site, was 55% for the main The Reading Agency Reading Well page. This indicates that around 45% of visitors are exploring other pages, potentially for further information. This is an average bounce rate across similar information sharing websites. There were 4,399 unique views of the news story launching the dementia scheme, but also a 'bounce rate' of 75%, which could suggest that clear and relevant links

⁴ <http://readingagency.org.uk/adults/quick-guides/reading-well/>

to further content could be better embedded within news pages relating to the Reading Well programme if an aim is to engage readers in further information. The standalone Reading Well website⁵, launched in January to coincide with and promote the dementia scheme, has had 9,745 unique visits between January and July and a bounce rate of 65%. Around a quarter of users are returning visitors, and the most popular pages were those relating to the dementia scheme, with twice as many visits as those with information on the common mental health conditions scheme.

3.2 User impact - Common Mental Health Conditions

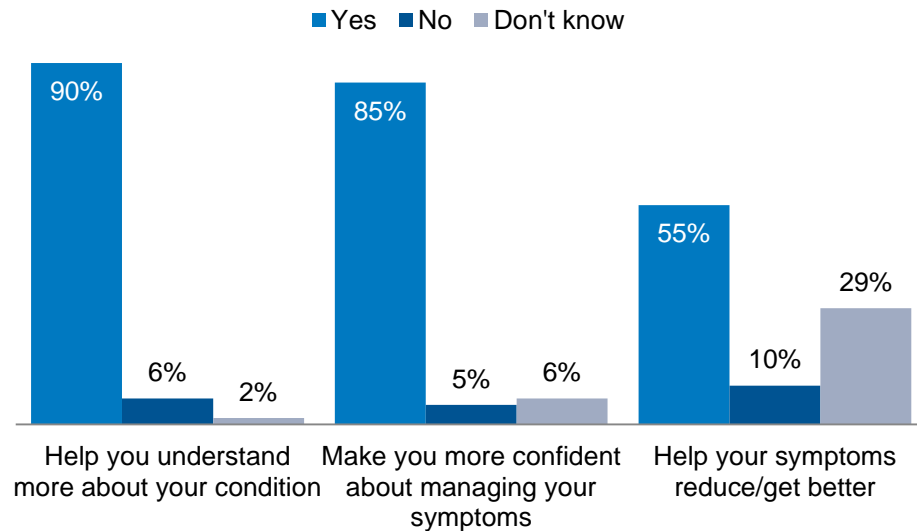
A full description of the methodology for user surveys is provided in Appendix 1. There were 64 respondents to the common mental health conditions user survey for the year two period (between June 2013 and August 2015), a further appendix presenting user data from years one and two is provided in appendix 2. While this is a relatively small sample and should not be taken to represent the views and perspectives of all users of the scheme, it remains useful as an indication of impact. 66% of respondents were female and 85% were White British. 37% were aged 45-54, 29% were aged 25-44 and 25% were aged 65-74. Fewer responses were received from those aged over 75 (3%) and under 25 (6%). The latter being expected as Reading Well Books on Prescription is currently adult focused (those aged 16 to 25 may benefit from the children and young people scheme being launched in 2016). The vast majority of respondents skipped the question asking whether they identified as 'someone with experience of a common mental health condition', suggesting this may be a problematic way of asking users to self-identify. However, the majority of users also listed the title of the self-help book they had read, which suggests that they were engaging in the scheme seeking health

⁵ <http://reading-well.org.uk/>

benefits.

While 27% of respondents accessed the scheme through a recommendation from a health professional, the majority (73%) self-referred. This is a lower number of self-referrals compared to year one (80%) which may indicate strengthening partnerships between libraries and health providers. 66% of respondents read all of the book, with a further 34% reading relevant sections.

Figure 3 - Ways in which the book was helpful - common mental health conditions (n=62)



Overall 77% of users found the book helpful or very helpful, with 18% responding that they didn't know, and just 5% responding that they found it unhelpful. We can see in figure 3 that users found the books most helpful for understanding more about their condition (90%) and

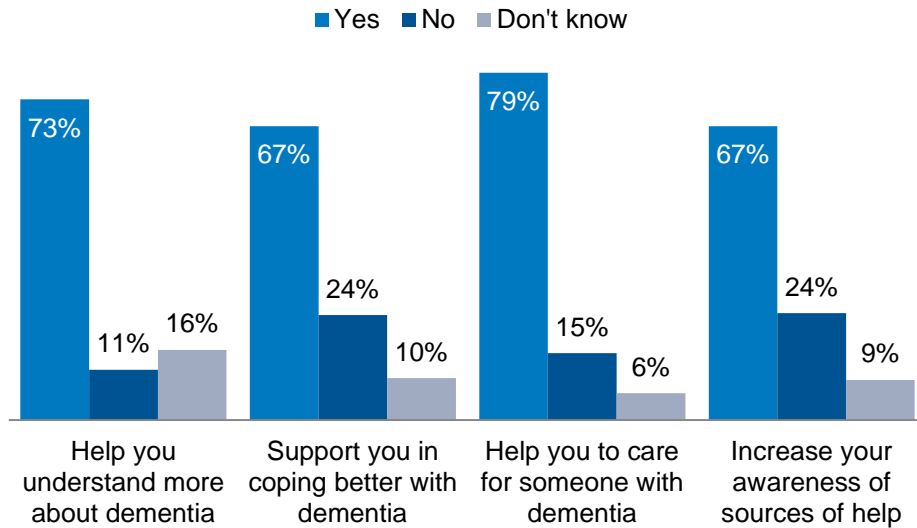
making them feel more confident in managing their symptoms (85%). A smaller proportion, although still a majority felt that the book had helped their symptoms reduce (55%). Each of these categories have increased significantly compared to year one of the scheme, where 79% reported that the books had helped them understand more about their condition, 74% said they felt more confident about managing their symptoms and 37% reported a positive change in symptoms. While both samples are small, this does suggest that the programme has had a stronger impact in year two.

Of respondents, 90% were already members of their local library. Of those who were not, 5 out of 13 (38%) joined the library in order to take part in the scheme. Due to the small numbers in the survey this finding should be considered as indicative, but it does suggest that some users could be motivated to join the library through engaging with the programme.

3.3 User impact - Dementia

There were also a small number of survey postcards returned in relation to the dementia scheme which limits the representativeness and generalisability of the findings, however the findings remain useful as an indication of responses to the scheme at this early stage in its development. Of the 44 respondents to the dementia scheme user survey, two respondents reported that they had dementia, 30 that they were caring for someone with dementia, and a further 12 that they were neither. Of those in the 'other' category, one person replied that they were 'forgetful', and another that they were 'preparing for the future', while the others reported a professional or general interest in dementia. 45% of respondents were aged 45-64, 29% were aged 25-34, 14% aged 65-74 and 12% aged over 75.

Figure 4 - Ways in which the book was helpful - Dementia (n=44)



This indicates that most of the sample are caring for someone with dementia or seeking further information on the condition, which is a different demographic from respondents to the common mental health conditions scheme. Respondents were overwhelmingly female (90%) and exclusively White British. There was disproportionate representation from Wiltshire Library Authority (27%), with 64% of the overall sample coming from the South West Region, which was used as a sample region for the survey.

All respondents were already members of their local library, which may indicate that they were likely to come across the scheme through interactions within the library rather than through a health provider. Only one respondent reported that their title was recommended by a health

professional (someone caring for a person with dementia). All the others accessed the titles directly through their library. 84% of readers read the whole book, with the other 16% reading relevant sections.

Overall, 92% of readers found the books helpful (37% 'very helpful' and 55% 'helpful', just 5% did not find it helpful). The overall effects reported of reading the dementia titles was positive. As seen in figure 4, the most positively reported dimension was in helping to care for someone with dementia (80%). The second most positive effect reported was in helping readers to understand more about dementia (73% reporting that the title did so), however this was also the largest category of inconclusive response, with 16% reporting 'don't know'. With a further 67% reporting that the book increased their awareness of sources of help.

Summary

- In its second year of operation the scheme has reached 170,000 users and nearly half a million since its launch in 2013.
- Borrowing of the core list titles for the common mental health conditions scheme has increased by 97% since it was launched, although borrowing rates in year two compared to year one have dipped slightly.
- Borrowing of the dementia scheme core list has increased by 346% compared to the same time last year
- In the past year features have appeared in national and local media with a combined circulation of 2.2million
- The majority of users of both schemes are self-referring, rather than being signposted by a health professional, although a significant proportion (27%) are being referred

- and this level has increased since last year when it was 20%
- 90% of users of the common mental health conditions scheme found the books helpful for understanding more about their condition, 85% found that reading the books made them feel more confident about managing their symptoms, and 55% reported that their symptoms had reduced as a result of reading the books
 - Those using the dementia scheme were more likely to be carers or family members of someone with dementia. 92% overall found the scheme helpful. 79% found reading the books helpful for caring with someone with dementia, 73% found it useful for understanding more about the condition, and 67% found the books helpful for increasing their knowledge of other sources of help and support
 - The vast majority of those using the scheme are existing library members

4. Prescriber and health partner impact

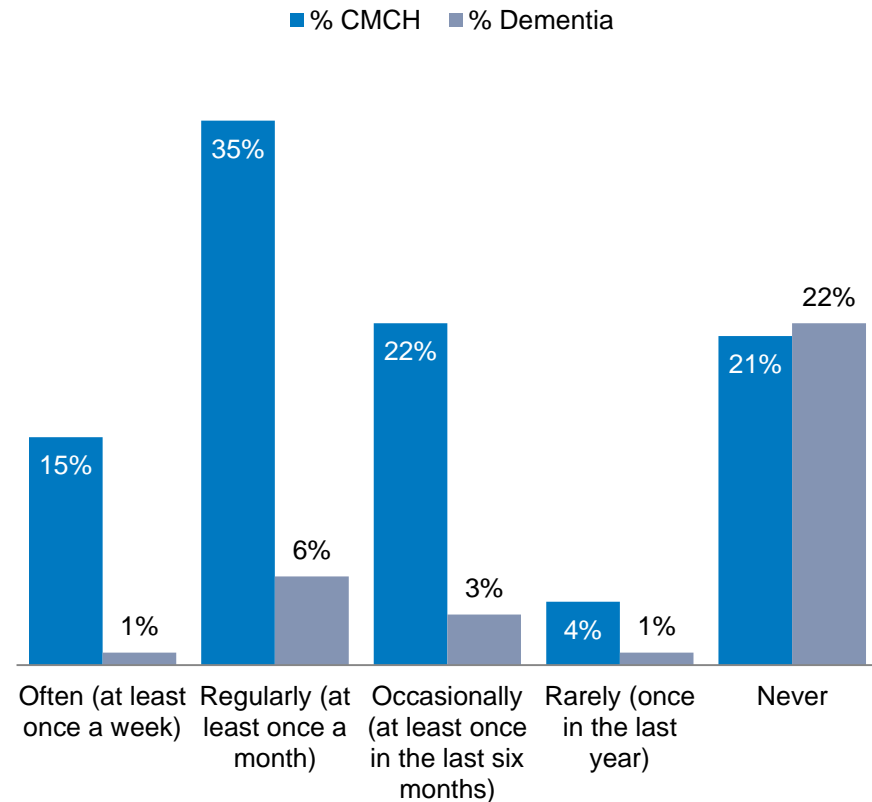
Table 1 - Breakdown of prescriber responses

Profession	%	N
Other IAPT therapist	34.5	40
Psychological wellbeing practitioner	21.6	25
Psychologist	18.1	21
Independent counsellor/therapist	10.3	12
GP	5.2	6
Community mental health nurse	2.6	3
Dementia support worker	2.6	3
Psychiatrist	1.7	2
Admiral nurse	0.9	1
Residential care worker	0.9	1
Community support worker	0.9	1
Alzheimer's Society professional	0.9	1
Memory clinic worker	0.0	0
Other (please specify)		21

We received 135 responses to the prescriber survey. The largest proportion of respondents were IAPT (Improving Access to Psychological Therapies) therapists (35%), followed by Psychological wellbeing practitioners (22%), Psychologists (18%) and Independent therapists (10%); 5% of respondents were GPs. In the 'other' category respondents mostly described themselves as therapists of some specific form or another (e.g. CBT therapist, occupational therapist).

Sixty four per cent of respondents were using the common mental health conditions scheme only, just 4% were using the dementia only, 7% used both and 25% reported that they used neither. This group therefore did not answer questions relating to experiences of using the scheme and are not reported in these findings.

Figure 5 - Prescriber frequency of use (n=135)



When asked how often they used the scheme, around 50% of prescribers were using the common mental health conditions scheme at least monthly, with a further 22% using it at least every six months. Reasons to have not used the scheme included that they had not come across it, did not have full information on how the scheme could be used, or it was not appropriate for their client group (e.g. they don't

work with dementia patients or carers). This is a lower proportion of prescribers regularly using the programme than in year one, where 72% reported that they used the (common mental health conditions) scheme at least monthly.

As shown in figure 6, the most frequent use of the common mental health conditions scheme was for general information and advice (75%), although it was also frequently used as part of a supported treatment programme (67%).

Less common, although still reported by more than half the respondents was using the Books on Prescription scheme to support a patient while on a waiting list (57%) and as post-treatment support (57%). Fewer respondents used the scheme as a targeted one-off self-help intervention (48%) or to support a carer/family member (30%), although these are still substantial proportions overall. There has also been a decline in those reporting that they use the scheme as a one-off targeted intervention (69% in year one and 48% in year two). This is consistent with findings from users indicating that the scheme is most useful for helping them to understand more about their condition, rather than as a stand-alone treatment option.

As the dementia scheme is in its early stages, just 15 respondents reported using it. Ten of the 15 (67%) used the scheme to provide general information and advice, and 11 of the 15 (73%) used the scheme to support a carer or family member. As with the user findings above, this indicates that the dementia scheme likely has a different function from the common mental health conditions scheme, which should be considered in future developments of the programme.

Figure 7 shows prescribers reported that the main benefits of the common mental health conditions scheme was to help people to understand more about their condition (89% agreed or strongly agreed), helping patients to

feel more confident about managing their symptoms (83% agreed or strongly agreed). A lower, but still majority proportion (72%) agreed or strongly agreed that the scheme helps to reduce presenting symptoms, and a minority of respondents (45%) think the scheme has helped a carer for someone with a common mental health condition.

Again, the responses for the dementia scheme were too low to be reliably reported, with most respondents indicating that they 'don't know' its effects at this early stage. The largest proportion agreed or strongly agreed to statements that they thought it would help patients understand more about the condition and would increase awareness and information on sources of support.

The strongest benefits cited by the prescribers, seen in figure 8, were increasing the range of support/resources they can offer (97% agreed or strongly agreed), followed by helping to support patients outside of formal consultation time (94% agreed or strongly agreed). Other key benefits of the scheme were in raising the awareness of health resources in libraries (88%) and in raising awareness of relevant books and reading materials (86%). A third of prescribers (35%) agreed that the scheme helps to prevent a 'step-up' to further care for patients, with a further 36% claiming that they don't know if the scheme is useful in this way.

As with the previous findings, the number of responses of those using the dementia scheme were too minimal to be converted into proportions. Nevertheless the strongest agreements stated were that the dementia scheme helps to support people outside of formal consultation time, and has increased the range of support and resources on offer.

The Prescriber Perspective: General Practitioner, Manchester

We spoke to health care providers involved in the scheme to explore their perceptions in a little more depth.

The GP in Manchester we spoke to discussed how he would use the common mental health conditions scheme to help patients while they were put on the waiting list for talking therapies, as an approach that is accessible and 'has no side effects'. He described how the simplicity of the concept has 'clicked with him' and tends to make sense to patients too. Although some patients can be reticent, and others not interested, the majority are open to the idea of reading a book to better understand their condition and attempt it as a form of complementary treatment. Interestingly he promotes the scheme equally with patients who are seeking medication and those who are avoiding medication in their treatment.

From a procedural side the GP mentioned that he is not aware of any direct contact between the surgery and the library, although he does encourage patients to access the scheme through the library, recognising the opportunity for them to be introduced to other services and benefits. He also warned that libraries and The Reading Agency should continue to promote the scheme carefully as he often experiences 'programme fatigue', where he and other GPs are inundated with new programmes and initiatives from local and national health development bodies and agencies and they do not have the capacity to engage with them all - despite being potentially useful.

Overall he found the scheme very helpful and felt the resources and

the way it functions was appropriate to his needs as a practitioner. Although he would rarely write prescriptions for books, he thinks the 'branding' of the scheme in this way is useful to communicate the concept. In the future he would like to see how the scheme can be developed to include those with poor literacy and access to audio-book versions which he thinks would particularly appeal to some of his younger adult patients.

Figure 6 - Prescriber reasons for use (n=93)

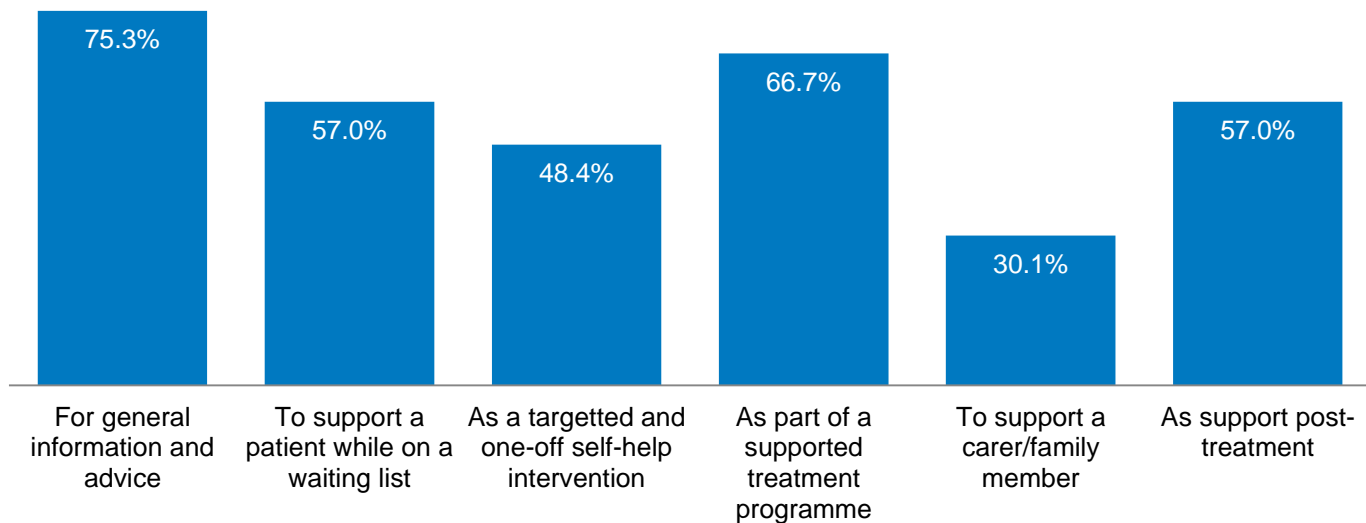


Figure 7 - Prescribers main effects of common mental health conditions scheme (N=92)

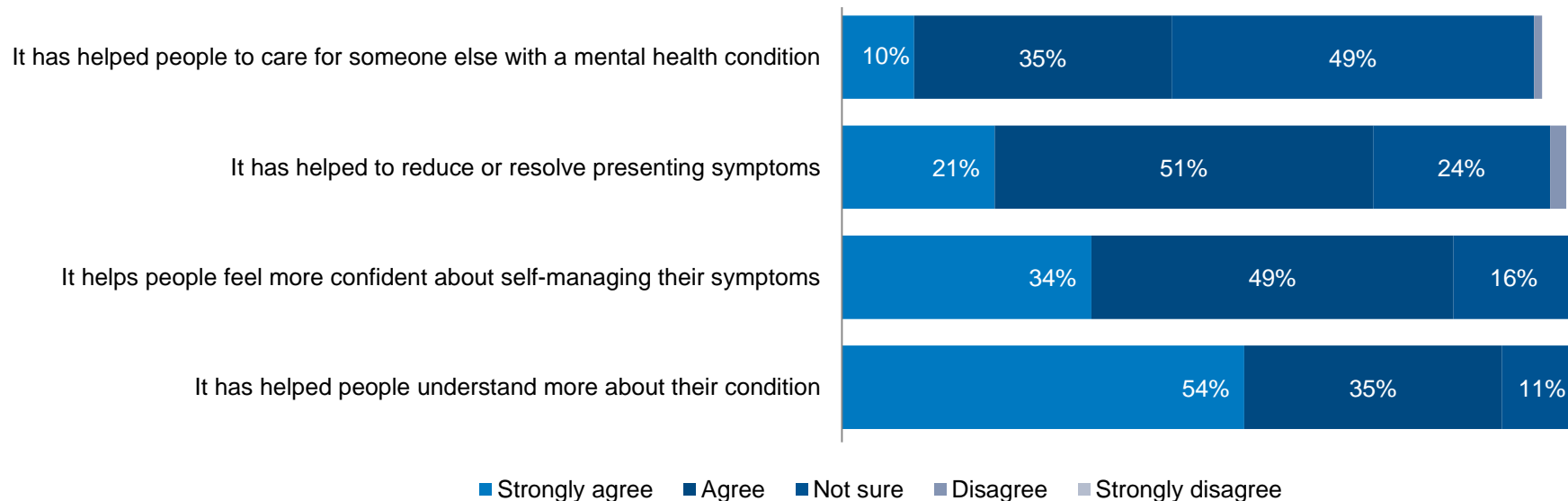
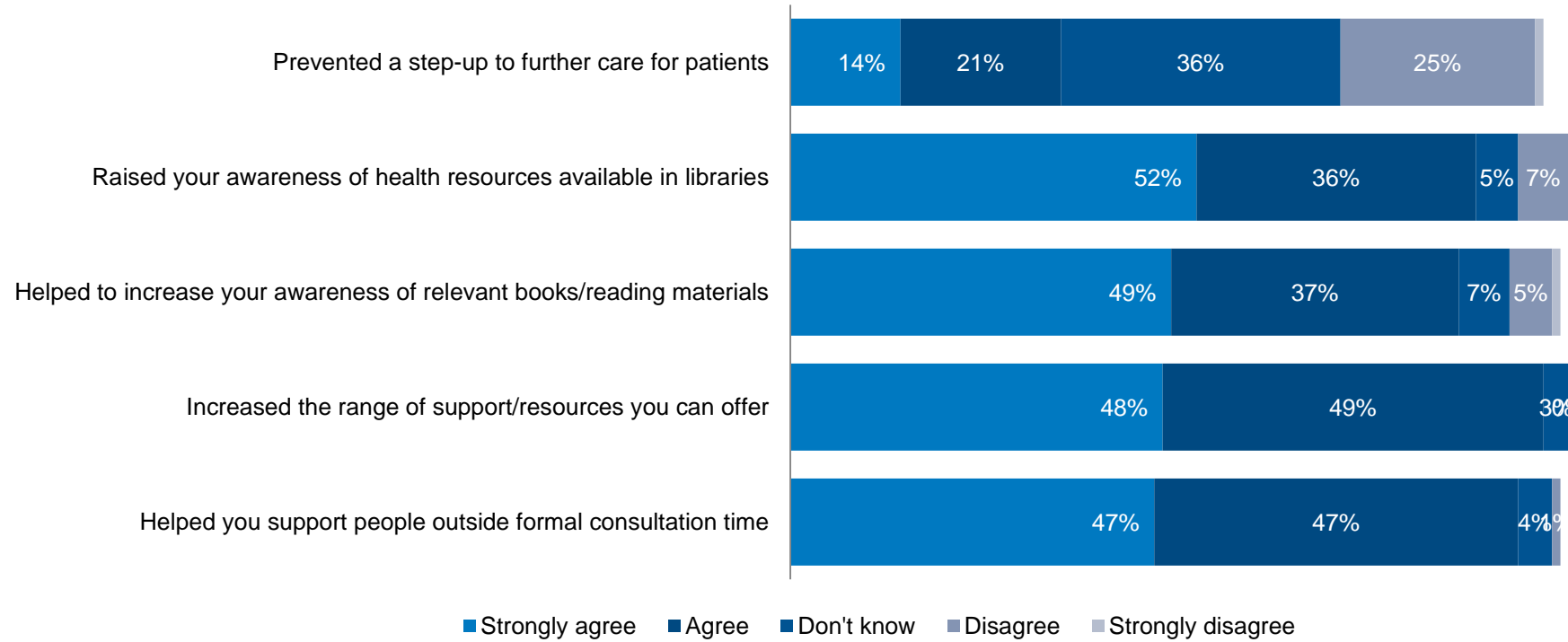


Figure 8 - Prescriber benefits of common mental health conditions scheme



For those running the common mental health conditions scheme the most popular resources being used were the user leaflet (55%), the prescriber leaflet (52%) and the recommended reading form (50%). Fewer prescribers were using the guide to the core list (21%), the digital user leaflet (11%) or the digital prescriber toolkit (4%)

When asked if they had received user or prescriber leaflets from their local library service 34% replied that they had, 40% replied that they hadn't and a further 27% replied that they didn't know. This was followed by a further 47% reporting that they would like to receive more leaflets. 70% of prescribers suggested that they would be interested in learning more about the children and young person scheme. 27% of respondents suggested that they would not, although this may be because they are specialist providers who do not cover this age range.

Prescribers listed a range of other conditions that the scheme could be extended to include, the most common were: mindfulness, perinatal mental health, chronic health conditions (e.g. diabetes, HIV) and bereavement/grief. Respondents also listed many conditions already covered by the common mental health conditions list, which suggests that the full range of titles already covered could be better promoted to prescribers. Overall, respondents were very positive about the scheme and would like to see it increasingly promoted across a full range of health services.

The Prescriber Perspective: Psychiatrist, London

We spoke to a psychiatrist in London, specialising in dementia, who was familiar with the scheme.

She discussed how there were fantastic opportunities for the dementia scheme to become embedded in local public health

provision, for patients, carers and families. She discussed how there appeared to be strong partnerships in place between the third sector (e.g. Alzheimer's Society, Age UK) and the public sector, but that this needs to keep evolving to respond to changing funding structures across dementia provision. An understanding of the role of the NHS at a local level should also be considered clearly by libraries if the scheme is to succeed. She described an upcoming 'dementia awareness day' in the borough, but wasn't sure that the library would be represented. This highlighted the need for knowledge brokering about these types of activities at a local level. She also discussed how local authority social services are often involved in dementia cases and are always looking for initiatives that can help, but may not have featured strongly in this programme so far and may be worth targeting.

From a patient benefit side, our respondent described how reading the books on the dementia list can be very comforting for families and carers of people with dementia, as they can demystify complex topics as well as providing reassurance that other people have gone through something similar. She mentioned that there are potential social benefits for the programme being library-based, as it provides a safe and accessible space in the community for interaction and socializing.

For patients themselves, she described how crucial reading can be to create a pleasurable moment in time. Whether looking at and reading books alone or with family and carers, the process can create a positive emotional response. Since many people with dementia can find communication difficult at certain stages, the books, whether poems, short stories, or picture books, can provide respite from unpleasant and frustrating emotional states.

Summary

- There has so far been a lower uptake of the dementia scheme amongst the health professionals responding to this survey, although the scheme had only been available for four months to the point at which this survey was conducted.
- 50% of prescribers use the scheme monthly or more often, a decrease since year one, and 25% responding to this survey reported that they 'never' use the scheme. This may suggest a need for further promotion among a diverse and representative range of health providers
- Those using the scheme mostly do so to provide patients with general information and advice and as part of a supported treatment programme. Few are using it as a one off or stand-alone treatment option
- Those using the dementia scheme are directing it more towards carers and families than towards patients themselves
- Echoing the reports of programme users themselves, the prescribers see the main benefits as increasing patient understanding of their conditions and helping them to manage their symptoms
- Prescribers see benefits in the programme for increasing the range of support on offer for people with common mental health conditions, dementia, and their carers, and as providing a source of support outside of official consultation time. They also see the programme as adding value in highlighting the role of libraries in health promotion.

5. Prescribing partnerships

In the survey with library services we asked about prescribing partnerships they had in place with local health providers in order to understand the scale and nature of partnership working between the sectors. Prescribing partnerships are those where a library service has a direct relationship with a particular health setting in the community and both are aware of their roles and responsibilities in referring users to the programme.

Based on responses to the survey there are a larger proportion of prescribing partnerships in place for the common mental health conditions scheme (50% of libraries reporting active partnerships and 31% reporting that they were not sure) than for the dementia scheme (32% reporting active partnerships and 37% reporting that they weren't sure).

Table 2 - Number of prescribing partnerships in place (common mental health conditions)

Common mental health conditions	Response Average	Response Total
GPs	14	791
Local IAPT service	3	134
Community mental health nurses	1	55
Independent counsellors/therapists	1	31
Mental health trusts/services	1	23
Charities/third-sector agencies	3	137
Other	14	405
Total		1,576

Table 3 - Number of prescribing partnerships in place (Dementia)

Dementia	Response Average	Response Total
GPs	11	499
Independent counsellors/therapists	2	50
Charities/third-sector agencies	2	92
Care homes	4	138
Community nursing providers	1	21
Memory clinics/memory service providers	1	36
Other	4	123
Total		959

Libraries reported a total of 1,576 prescribing partnerships in place for the common mental health conditions scheme, and 959 for the dementia scheme. The largest number of prescribing partnerships are in place with GPs, with an average of 14 prescribing partnerships in place per library for the common mental health conditions scheme, and 11 per library for the dementia scheme. If we project these figures to include those authorities which are running the scheme but did not respond to the survey, across England there are an estimated 4,082 prescribing partnerships in place for the common mental health scheme and 2,325 for the dementia scheme⁶. Each of these partnerships may involve several individual health professionals, therefore the true scale of involvement from health practitioners is likely to be greater than the number of partnerships reported.

Around half of the libraries have received prescriptions or referral leaflets in relation to the common mental health conditions scheme and around a fifth of libraries have received prescriptions or referral leaflets in relation to the dementia scheme. In total, libraries reported around

⁶ The projection calculation is included in Appendix 1.

700 prescriptions or leaflets have been returned in relation to the common mental health conditions scheme and around 100 for the dementia scheme.

Across both schemes libraries reported that they believe this is because users are self-referring and appreciate the anonymity of the scheme. Around half the libraries surveyed also felt that local health services are not fully engaged in promoting the scheme, which may be limiting the number of physical prescriptions being received.

Some further stated reasons for the low numbers of prescriptions include:

Simply the lack of prescriptions coming into the library. I have sent the information about the scheme to all organisations but they have not taken it up. I feel they may signpost clients to the library but are not using the forms. They have been sent details of where to obtain both hard copy and digital forms.

We believe there is a lot of informal prescribing / signposting happening from local health professionals and they don't necessarily promote it through the hard copy materials, but rather through electronic information

We have taken a conscious decision not to present the user leaflets as 'prescriptions' for the dementia scheme, as we felt it would present a barrier to carers and people with dementia.

In relation to the dementia scheme, I have spoken to people about the scheme and recommended titles. People are using the leaflets more as a booklist than a prescription.

6. Library service impact

We received a total of 87 responses to the library survey. 94% of respondents were taking part in both the dementia and common mental health conditions schemes, with a further 6% only taking part in the common mental health conditions scheme.

As may be expected given the longer time that the scheme has been running, the common mental health conditions titles are available in more libraries than the dementia titles, with 59% of respondents reporting that the former are available in every library, and just 38% reporting this for the dementia titles. Of those few respondents running prison libraries (n=8), 100% were stocking common mental health conditions titles, with 38% stocking dementia titles.

66% of respondents did not have any community-run libraries in their authority. Of those who did have community-run libraries in the authority around a third were running the scheme, around a third were not, and the remaining third did not know if it was being run in these libraries or not.

Table 4 - Additional library services for scheme users

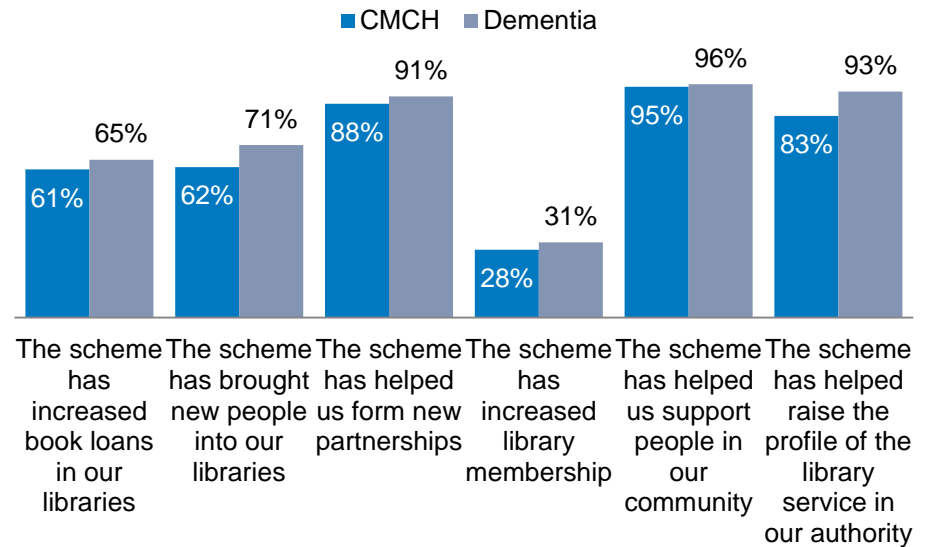
	Yes	No
Extended loan periods for core-list titles	37%	62%
Simplified library joining for people borrowing core-list titles	64%	36%
No overdue fines for core-list titles	30%	66%
Free reservations for core-list titles	87%	12%

Across both schemes Table 4 shows that 37% of libraries offered extended loan periods for core titles, 64% offered simplified joining for people borrowing the core titles (although the user survey suggests this

is not really required as most users are existing members), 30% offered no overdue fines for those borrowing core titles, and 87% offered free reservation for core-titles.

63% of respondents had used the digital resources available on the Reading Well Books on Prescription website, with 28% reporting that they hadn't, and a further 10% reporting that they couldn't remember. 78% found the Reading Agency website useful, and 91% found the public-facing Reading Well website useful. Suggestions on how the sites could be improved included fuller descriptions of the common mental health conditions books, and materials that would allow libraries to promote the scheme and advocate for it at a local level.

Figure 9 - Library benefits of Reading Well Books on Prescription (% agree or strongly agree)



The majority of respondents agreed that both schemes have increased book loans and are bringing new people into the library. A larger proportion of respondents (88% of common mental health conditions scheme and 91% of the dementia scheme) agreed that the schemes have helped them to develop new partnerships and are valuable for supporting people in the community (95% common mental health conditions and 96% dementia). A large majority of respondents also agreed that the schemes have helped to raise the profile of the library service within the local authority. A minority agreed that the schemes have led to increases in library membership, which is reflective of the findings from the user surveys which showed that those using the scheme tended to be existing members.

A minority of respondents reported that the scheme was being included in their local health or wellbeing strategy to their knowledge (15% for the common mental health conditions scheme and 16% for the dementia scheme). This suggests that there is further work to do to embed the programme at a local policy level.

The majority of library respondents have either already secured funding for the schemes (31% for common mental health conditions and 37% for dementia) or have not yet applied (41%). Just 14% of respondents had not been successful in securing funding across both schemes, which indicates that those yet to apply are more likely than not to secure funding.

The average amount of funding received for the common mental health conditions scheme is £706 (range £200 to £6,000), and the average for the dementia scheme is £1,656 (range £500 to £20,000). The total amount of earned income reported for those who have secured funding for common mental health conditions is £31,066, and for the dementia scheme is £76,179. This may be a reflection on the fact that the dementia scheme is more recent and therefore been more likely to

secure start-up funding. This means that the scheme has levered into the library sector at least £107,204 in the past year.

Most of the funding across both schemes has come from Local Authority Public Health budgets, with a few other contributions from the Clinical Commissioning Group, IAPT service and mental health trusts. Other sources reported include Local Authority Adult Services and Social Care departments.

The majority of those who have secured funding across both schemes have used the money to buy leaflets and/or book stock, with lower numbers using the funds for staffing or events. There are currently 2 million leaflets in circulation promoting the scheme within libraries and across health and social care settings. These are likely to be the main source of self-referral for the majority of users using the scheme. The range of settings receiving leaflets with information for potential users is outlined in table 5.

Table 5 - Library use of leaflets for common mental health conditions and Dementia schemes

User Leaflets	CMCH (%)	Dementia (%)
Made available in libraries stocking core-list titles	95	85
Given to local GP practices	86	65
Given to local IAPT services	60	26
Distributed via Public Health	55	46
Given to the Clinical Commissioning Group	40	33
Given to our local authority Health and Wellbeing Board	40	35
Given to memory clinics/memory service providers	21	50
Given to care homes	13	32
Given to third sector agencies (e.g. Alzheimer's Society)	31	67
Given to community nursing providers (e.g. Admiral Nurses)	14	18

For the common mental health conditions scheme larger proportions of respondents have provided leaflets to the libraries stocking the titles (95%) and to local GP practices (86%). A majority have also provided leaflets to local IAPT services (60%) and distributed to Public Health (55%). Fewer have distributed them to the local Clinical Commissioning Group (40%), local Health and Wellbeing Board (40%) or third sector agencies (31%). Few have distributed leaflets to memory clinics (21%), care homes (13%) or community nursing providers (12%).

For the dementia scheme larger proportions have provided leaflets to libraries stocking the titles (85%), local GPs (65%) and third sector organisations (67%). Fewer respondents have provided leaflets to memory clinics (50%), Public Health services (46%), Health and

Wellbeing Boards (35%), Clinical Commissioning Groups (33%), care homes (32%), IAPT services (26%), and community nursing providers (18%).

Across both schemes it seems that more leaflets could be provided to NHS services and broader settings where those seeking help and information are likely to access. While most are distributing leaflets in libraries and GP surgeries, further thought may be required about how to promote the scheme amongst potential users who do not frequent these settings. Libraries may wish to consider their leaflet distribution strategies recognising its clear role in keeping the scheme in the public eye. There is, however, a budget issue for consideration in future funding proposals.

Table 6 - Library distribution of prescriber leaflets

Prescriber leaflets	Common mental health conditions (%)	Dementia (%)
Given to local GP practices	89	68
Given to local IAPT services	58	28
Distributed via Public Health	56	52
Given to the Clinical Commissioning Group	37	31
Given to our local authority Health and Wellbeing Board	23	24
Given to memory clinics/memory service providers	20	42
Given to care homes	8	11
Given to third sector agencies (e.g. Alzheimer's Society)	28	52
Given to community nursing providers (e.g. Admiral Nurses)	8	14

A similar pattern emerges with the distribution of the prescriber leaflets.

For those participating in the common mental health conditions scheme 89% have distributed leaflets to local GP practices, with far fewer reporting distributing leaflets to memory clinics, care homes or community nursing providers (although these are more relevant settings for the dementia scheme). For those promoting the dementia scheme, prescriber leaflets have been distributed primarily in GP practices (68%) with other large proportions distributing them to Public Health teams (52%) and third sector agencies (52%). Fewer reported distributing leaflets to care homes (11%) and community nursing providers (14%).

Table 7 - Promotional partnerships established by participating libraries

Partnerships Established	Common mental health conditions (%)	Dementia (%)
Local Authority Public Health	79	78
Health and wellbeing board	28	26
Clinical Commissioning Group	29	36
Local IAPT service	55	16
Mental health trust	21	7
Charities/third sector agencies	48	64
Care homes	9	26
Community nursing providers	9	12
Memory clinics/memory service providers	10	45

The majority of respondents operating both schemes reported promotional partnerships with Local Authority Public Health teams (79% for common mental health conditions and 78% for dementia). The majority of those running the common mental health conditions scheme also had a partnership with the IAPT service (55%), and the majority of

those running the dementia scheme reported a partnership with third sector agencies (64%).

Around a third of respondents across both schemes reported partnerships with the local Health and Wellbeing Boards and Clinical Commissioning Groups, this may be a potential area of focus for promoting and extending both schemes with partners that are likely interested in the universal nature of Reading Well, rather than partners are likely more specific for one scheme over the other.

Since year one there has been increasing engagement with GPs, although further work is required to establish traction in the programme over and above sharing promotional material. This is complemented by a sharp rise in the number of partnerships with Local Authority Public Health departments (47% in 2013/14 to 79% in 2014/15). Partnerships with clinical commissioning groups and health and wellbeing boards have increased slightly but could still be developed further.

85% of surveyed libraries also stock mood-boosting books to complement the scheme. The main ways these are promoted are through book displays, promotion at relevant local events (e.g. Mental Health Awareness Week, Macmillan coffee mornings).

Just 16% of libraries were promoting the scheme among their local book groups, although it was not clear whether this was due to a lack of opportunities or a lack of inclination. Other approaches to promoting the scheme included aligning with local health promotion events, ensuring displays were prominent and up to date, and hosting author visits and 'spotlight on health' type events.

73% of libraries rate the support for the scheme from The Reading Agency as good (60%) or excellent (13%), a quarter of respondents cited the support as acceptable. The main suggestions for how the role

of The Reading Agency could be improved related to increased national promotion and advocacy, particularly with health partners, as well as providing longer lead in times for promotional drives or the introduction of new schemes. A few respondents recommended that The Reading Agency could be more responsive to email and phone queries regarding the scheme.

Respondents generally feel very positive about the scheme, with many describing it as 'excellent', 'timely' and 'useful', the latter particularly in regard to the development of local public health and dementia strategies and integrated local authority services and outcomes. The major limitations related to a lack of time within individuals' roles, where they are being given responsibilities around health and other services within an already stretched role within the library. Other comments related to a lack of engagement in the scheme from local GPs, and that the promotional materials, while informative and engaging, could potentially be revised for people with dementia if they remain a key target user.

70% of respondents indicated that they would be interested in joining the Books on Prescription scheme for children and young people being launched in 2016. The other 30% indicated that they were unsure.

Summary

- The main benefits reported by libraries are that the programme has helped them to develop new health partnerships, helped them to support the health and wellbeing of people in the community and raised the profile of public library services
- 79% of library services running the common mental health conditions scheme and 78% of those running the dementia scheme are working with their Local Authority Public

Health teams in order to promote the programme, a significant increase from year one

- 55% of those running the common mental health conditions scheme are working with their local IAPT service
- 64% of those running the dementia scheme are working with local third sector organisations
- Across those responding to the survey, £107,204 has been raised in earned income to support the programme. 31% of library services running the common mental health conditions scheme have secured funding from external sources (an average of £706 per service), with 37% of libraries securing funding for the dementia scheme (an average of £1,656 per service)
- 73% of libraries report that support from The Reading Agency is good or excellent
- Libraries are generally very positive about the scheme and see it complementing the library offer currently and in the future

The Library Perspective: Library Service, South West

We spoke to the development officer of a library authority who had been involved in Reading Well Books on Prescription and predecessor programmes for around 10 years. They work very closely with the local authority public health team to promote the scheme within every library in the county.

Our interviewee saw the role and function of the common mental health conditions and dementia schemes as quite distinct under the umbrella brand of Reading Well Books on Prescription. They found the dementia scheme easier to define, and in some ways to promote, than the common mental health conditions scheme which they saw as a more crowded 'market' with various agencies and providers seeking to promote interventions. This 'market' includes potential library partners who are seeking to treat people in the community according to their own targets.

For the library staff in the county the schemes are very well received and they find it a natural extension of their and the library's role in the community. The interviewee also discussed how funding partnerships with public health to buy core titles has been crucial to the programme's success.

They acknowledged that despite sending prescriber and user leaflets to every GP in the county, the message doesn't always get through. To overcome this they also try to have a presence at GP events (e.g. meetings, conferences and sharing days) to speak to them directly and highlight some of the local successes of the schemes. For the dementia scheme in particular they have focused on partnering with the local branch of the Alzheimer's society, where

they can each target individuals who have been referred from public health.

The interviewee felt that many of the library authorities running the scheme were quite locally focused and that there is an opportunity to bring people together more to share good practice at a regional or national level. They also suggested that there could be greater advocacy for both schemes at a national level and that there could be value in promoting the scheme on a local level if people can see how it fits into a national initiative.

The Library Perspective: Library Service, North West

We also spoke to a Service Development Manager working for a local authority with responsibility for 13 libraries. They have also been involved in variations of the scheme for many years, and have welcomed the recent dementia scheme as a natural extension of the programme.

This library service has recently been merged with public health which our interviewee sees as a way of strengthening the existing partnership between the two departments. They also suggested that the embedding of library services within public health would alleviate some of the budget constraints they have had in the Reading Well programme in the past, as the public health value of the programme is now clear.

The interviewee described how there is absolute buy-in to the programme at all levels within the library, from senior management to staff in each setting. All librarians have recently been trained as 'dementia friends' which they reported as very useful and the role feels like a natural fit. Despite this, they are still having some challenges in engaging directly with GPs and other health professionals in the borough.

They described that some GPs are resistant to the scheme in general, citing a lack of time to refer and to understand the mechanics of the programme. This interviewee has found the dementia scheme easier to promote to referrers as they are often in the third sector and more familiar with working with these types of partnership programmes.

The interviewee described how the majority of the users are self-referring, and that they see very few actual prescriptions or leaflets, but a significant response to onsite promotion. They also suggested that some users might find the physical prescription process as off-putting, mixing contexts, and potentially associated with stigma.

Overall the interviewee found the scheme was fitting well with a more holistic offer from libraries around health and culture. They are involved as part of an Arts Council England funded cultural hub and have found they can integrate activities meaningfully, introducing performances and discussions with mental health content and meeting the aims of their new role. However, they also understand how they need to continue to be outwards-looking and engaging with new partners and initiatives to expand their user base and remain relevant to the communities in which they are based.

At a national level they saw a continuing role for The Reading Agency to be promoting the scheme and working with national health partners to keep it on the agenda. They also saw an opportunity, potentially alongside Arts Council England, to engage more with authors and publishers. They have had a very successful event with one of the core list authors which has led to an ongoing dialogue and promotional opportunities and suggested this may be replicable in other contexts around the country.

7. Conclusion and Recommendations

This report shows that the Reading Well Books on Prescription programme continues to have a successful impact for users, prescribers and libraries. There is much praise for the scheme among health professionals and libraries, and many responded that they appreciate its simplicity and apparent effectiveness.

The launch of the dementia scheme in January 2015 has diversified the original aims, seeking to reach carers and family members, as well as individuals with the condition. This appears to be having a strong and important impact on those engaging with scheme. Both libraries and prescribers have described the programme as very effective in showing the key role that libraries play in promoting public health and contributing strongly to the growing need for effective mental health services in the community. Partnerships between health providers and libraries appear to be strengthening across the programme, and the programme is being promoted in a range of innovative ways at a local level.

7.1 User reach and impact

Since year one user figures have decreased by around 100,000 individuals, but this may be the result of a different, and more accurate system of measurement. Overall borrowing trends have also decreased slightly but are still nearly 100% higher than before the programme was introduced for the titles on the common mental health conditions list. Both observations are also likely given the lower levels of publicity of the programme since the launch year. There have been upward trends in the establishment of local promotional partnerships and a lower self-referral rate which indicates that the programme is likely becoming more embedded at a local level.

In terms of user impact, this year's survey has recorded higher scores

across all categories - understanding conditions, confidence in managing symptoms and in actual symptom reduction. This may indicate that while reach has decreased, impact has improved.

Based on this small sample, it would seem that there is a greater number of users within the dementia scheme caring for someone with dementia or seeking further information on the condition. This should be considered in the promotion and targeting of the scheme across both library and health providers in the community, with due consideration as to where these populations may access the materials.

As both year's evaluation data and the accounts of prescribers suggests, users are most often accessing titles to better understand their conditions, rather than as a treatment option in its own right, and this may influence how future promotional material and activities are developed. The programme could be targeted as a way of accessing information about and better understanding common mental health conditions and dementia, rather than as a treatment option. The finding that common mental health conditions users were unwilling to identify as 'someone with a mental health condition' in their survey responses also suggests that the programme requires sensitive targeting to engage all of those who may benefit from participation.

7.2 Promotion and partnership in diverse settings

There is a potential to expand the range and deepen the nature of local prescribing partnerships supporting the scheme. As a broader range of partnerships are developed there is potential to widen the user base and encourage more non-library members to use and benefit from library services. This will likely take renewed efforts to engage with local community groups, community nurses, care homes, and other environments where users could benefit but do not seem to be accessing the service.

Health providers reported lower levels of receiving promotional material compared to year one, although libraries report that they have distributed material broadly within their localities. This may indicate the need to follow-up with health services once promotional material has been distributed to support and encourage them to engage in the programme.

Consideration may also be given as to whether the programme needs 'reframed' in light of the, soon to be three, strands (i.e including children and young people) and the evolving nature of the health offer from libraries. New promotional material may be required that provides overarching signposting to the different elements of the programme, who is targeted, and how they may be able to participate.

Further consideration could be given to the role and function of the digital element of information exchange, prescription and promotion. There remains generally low take-up of the digital resources within the health providers surveyed, who were largely therapists. Further research could be conducted on how this broad range of health providers use and access digital resources. The role of digital in promoting the dementia scheme to families and carers could also be considered, as these are likely to access information and support outside of prescribing environments. Digital promotion may also be a key tool in launching the new children and young person strand.

7.3 The role of The Reading Agency and Society of Chief Librarians

Based on overall user numbers and borrowing trends, The Reading Agency and Society of Chief Librarians may wish to consider whether a coordinated 'top-up' publicity drive locally and nationally may increase engagement in the common mental health conditions scheme in the next year. There may also be an issue about libraries retaining sufficient levels of promotional materials

to keep the more established strands of the programme in the public eye.

Respondents suggested there is a role for The Reading Agency, Society of Chief Librarians, Arts Council England and the supporting health partners to promote and advocate for the scheme at a national level, as well as to use their data and networks to support local brokering between partners. There is also potential to support knowledge exchange between library authorities in order that best practice can be shared and common challenges overcome.

While 70% of libraries and prescribers are eager to be involved in the new children and young person scheme, it is important to consider why the remaining 30% are reluctant and whether this is to do with budget issues and capacity across the library and health sectors. Respondents suggested that considerate lead-in time to the launch of the new scheme, as well as a consultative approach to its implementation, will be central to the new scheme's success.

7.4 Future research and evaluation

The evaluation of the programme could be improved with a clearer focus on establishing user rates and impact on those encountering the scheme but not accessing it through their libraries ('individual purchasers'), as well as a methodology that can engage more deeply with library users. Due to the nature of the programme and current resourcing levels it is difficult to access user perspectives beyond the survey postcard in the current evaluation design.

The Reading Agency and Society of Chief Librarians may also wish to consider raising funds, to conduct a randomised control trial, or other experimental design study, which compares the impact of the scheme on users, compared with other or no interventions. Alternatively, smaller studies on specific populations (e.g. individuals with specific mental health

conditions, or prison populations) may allow for a stronger empirical exploration of user impact.

Appendix 1 - Methodology

This evaluation is based on multiple methods and data from a range of sources.

User reach is based on England-wide projections of actual borrowing levels across 5 library authorities in the South West representing around one million people. These actual borrowing figures are then aggregated and multiplied by the total number of library authorities and weighted to account for variations in size, to represent the scale of borrowing across all participating libraries in England. Borrowing figures were also collected from 50 library authorities as a check to this approach. Borrowing trends are provided by Public Lending Right, a division of the British Library who track the borrowing levels of titles across a sample of libraries in England in order to ensure that authors are recompensed for their works. Sales data has been collected from publishers by the Publisher's Association.

Postcard surveys were distributed to users of the common mental health condition scheme and the dementia scheme, most commonly as inserts into the books within libraries, but also made available as an online survey for those visiting the Reading Well webpage. These consisted of six questions exploring their use of the scheme and their perceptions of its impact⁷. It should be noted that due to the small sample sizes in relation to the total projected user numbers, these findings cannot be said to be representative of those using the programme nationally and are indicative of impact.

⁷ Sample surveys can be accessed here: Mental health user survey: <https://www.surveymonkey.com/r/2JX8MJD>, Dementia user survey: <https://www.surveymonkey.com/r/2R6CC28>

Online surveys were distributed to all participating library authorities and prescribers who had registered with the Reading Well distribution list. Libraries were also encouraged to send the surveys to their promotion and prescribing partners and were promoted through the mailing lists of the Society of Chief Librarians and The British Association of Behavioural and Cognitive Therapies. Surveys were open to responses between April and July 2015.

Quantitative analysis involved exploring frequencies of response across the surveys, and the exploration of trends since year one. Sample sizes were too low and the questionnaires relatively brief to conduct any meaningful multi-variate analysis.

The number of prescribing partnerships in place was projected based on the total number of participating library authorities (140 for common mental health conditions and 135 for dementia) multiplied by the average number of partnerships in place (36 for common mental health conditions and 25 for dementia) by those who responded to the survey. This was weighted by the proportion that reported that they had no prescribing partnerships in place (19% of those running the common mental health conditions scheme, and 31% of those running the dementia scheme).

Qualitative phone interviews were conducted with four respondents, two health providers and two library services. These were based on a semi-structured topic guide seeking to explore key questions from the surveys in greater depth. Responses were recorded in note form and respondents were assured of anonymity. Due to the relatively small amount of data recorded, full thematic analysis was not conducted, and the qualitative interviews are provided as topical and illustrative case studies rather than fully interpretative findings of particular sub samples.

Appendix 2 - Years one and two combined common mental health conditions survey data

In order to compare findings from year one, the sample of common mental health condition users reported in the main evaluation were those taking part in the second year of the programme. However, given the small sample sizes responding to the user survey in both years one and two we also present an analysis of the aggregated data of both years to explore overall trends since the launch of the programme.

The combined sample size is 113, which is still not a large enough sample to be representative of all users, but does increase the confidence with which we can make claims about the impact.

62% of respondents were female, and 38% male, which is reflective of the higher prevalence of common mental health conditions amongst women in the general population, but also indicates that a substantial proportion of users are male. Also reflecting the times of life at which common mental health conditions are most prevalent⁸, 36% of users were aged 45-64 and 32% were aged 25-44, 20% were aged 65-74 with far lower proportions of those aged 74 and over (5%), or under 24 (7%).

76% of users self-referred to the scheme with the remaining 24% being referred by a health professional. 57% of respondents read the entire book and the remaining 43% read relevant sections. 94% of respondents were existing library members when taking part in the scheme, there is little evidence that the scheme is encouraging library membership on a large scale.

⁸ Mental Health Foundation (2007) 'Fundamental Facts'
<http://www.mentalhealth.org.uk/publications/fundamental-facts/>

Overall 73% reported that they found the programme 'helpful' (30%) or 'very helpful' (43%). 86% of respondents reported that the programme had helped them to understand more about their condition, 82% reported that it made them more confident about managing their symptoms and 49% reported that it helped their symptoms improve. A fifth of respondents reported that they were not sure if the scheme was helpful or not, but just 6% reported that they did not find it helpful.

The larger sample combining users from years one and two of the programme indicates a strong level of self-reported positive impact. However further research is required across a sample representative of users of the scheme nationally to fully establish impact. Research which allows a consideration of whether certain titles are proving more effective than others, or if the programme is better suited to some conditions over others, would also be helpful for establishing the efficacy of the scheme and developing it further. This would require substantial funding but, based on the positive emergent findings of the current evaluation, may be something The Reading Agency and Society of Chief Librarians wish to explore with national health partners and funders in the future.