

Access to the evidence base from general practice: a survey of general practice staff in Northern and Yorkshire Region

P Wilson, J Droogan, J Glanville, I Watt, G Hardman

Abstract

Aim—To identify and describe current methods of making health related research evidence accessible to general practice staff in the Northern and Yorkshire Region.

Method—A postal survey questionnaire of general practice staff in the Northern and Yorkshire Region.

Results—At least one completed questionnaire was obtained from 70% of the general practices surveyed, and the individual response rate to the survey was 45%. Just under 60% of all respondents reported having no access to the NHS internet and just under 50% also reported having no access to the internet. All respondents in this survey reported greater access to paper based information than to electronic databases. However, this research provides evidence of differential access to information resources between different professions in general practice with GPs clearly having easier access than other professions to both paper based resources and electronic databases. 70% of all respondents said that they would need to be trained to use either a computer, the internet, or to search databases if the opportunity for easy access to any of these information services was available.

Conclusions—At the time of this survey, general practices seemed to be struggling to set up the infrastructure and develop the skills that are necessary to make best use of available research evidence. In addition, there is a need for further investigation into the reasons why different professions working in the same practice setting have differential access to information resources available in primary care.

(*Quality in Health Care* 2001;10:83–89)

Keywords: general practice; effectiveness; access to information; internet; databases

In keeping with developments in other health-care systems, a central theme of current UK health policy is quality.^{1–3} While quality is a term which, in relation to health services, often defies precise definition, a key component is “effectiveness”—that is, basing routine clinical practice on the best available research evidence of what does and does not work and on what provides the best value for money.

When at the end of 1998 the Department of Health in England published its White Paper

Key messages

- At the time of this survey, general practices seem to be struggling to set up the infrastructure and develop the skills that are necessary to make best use of available research evidence.
- There is a need for further investigation into the reasons why different professions working in the same practice setting have differential access to information resources available in primary care.
- An understanding of the barriers to increased and more effective use of the existing evidence base is an area that requires further investigation.

The new NHS: modern dependable, a major feature underlying the changes outlined was a commitment to deliver more consistent and higher quality care for all patients at every level of the National Health Service (NHS).¹ This commitment emphasised the need for clinical practices deemed by good research evidence to be less effective or cost effective to be replaced by those shown to be more effective. A key feature of the drive to improve the quality of health care has been the introduction of clinical governance in the NHS. Clinical governance is a framework which encompasses continuous quality improvement, evidence based health care, and accountability; all health organisations now have a statutory duty to continuously improve the quality of the health care they deliver.^{1 4}

There is currently a large volume of research evidence and guidance relevant to clinical and cost effectiveness on which health professionals can draw to inform their everyday practice. Examples include publications such as the *Effective Health Care* bulletins (box 1) and electronic databases such as the Cochrane Library. These information resources are complemented by national developments such as the pilot National electronic Library for Health (NeLH) which provides online access to important research evidence, and the National Institute of Clinical Excellence (NICE) which is developing and producing guidance to support NHS decision makers in their use of new and existing healthcare technologies.

If health professionals working in general practice are to use such information to inform evidence based health care, then they need to be informed of important resources and provided with the training required to access and interpret these resources with maximum

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Accepted 22 March 2001

- *Bandolier*

Bandolier is a print and internet journal about health care using evidence based medicine techniques to provide advice about particular treatments or diseases for healthcare professionals and consumers. It is published by Pain Research, University of Oxford. URL: <http://www.jr2.ox.ac.uk/bandolier/>

- *Drug and Therapeutics Bulletin*

Drug and Therapeutics Bulletin is a monthly bulletin giving rigorous and independent evaluations of drugs and other treatment and is aimed at GPs and pharmacists in the UK. It is published by the Consumers Association. URL: <http://www.which.net/health/dtb/main.html>

- *Effective Health Care*

Effective Health Care is a bi-monthly bulletin based on systematic reviews of the research evidence produced by the NHS Centre for Reviews and Dissemination, University of York. The bulletin aims to provide NHS decision makers with information on the effectiveness of interventions and the delivery and organisation of health care. URL: <http://www.york.ac.uk/inst/crd/ehcb.htm>

- *Effectiveness Matters*

Effectiveness Matters provides updates on the effectiveness of important health interventions for practitioners and decision makers in the NHS and is produced by the NHS Centre for Reviews and Dissemination, University of York. It covers topics in a short and journalistic style, summarising the results of high quality systematic reviews. URL: <http://www.york.ac.uk/inst/crd/em.htm>

- *Evidence Based Medicine*

Published bi-monthly, *Evidence Based Medicine* surveys a wide range of international medical journals to identify the key research papers that are scientifically valid and relevant to practice. The journal comprises critical appraisals of primary research and systematic reviews, with a commentary from a clinical expert. URL: <http://www.bmjpg.com>

- *Evidence Based Nursing*

Published quarterly, *Evidence Based Nursing* surveys a wide range of international journals to identify key research papers that are scientifically valid and relevant to nursing practice. Commentaries by experts put every article into a clinical context and draw out the key research findings. URL: <http://www.bmjpg.com>

Box 1 Publications on effectiveness

efficiency. The degree to which these professionals have the resources, time, or skills to enable them to do this is unclear.

Against this background, this study was commissioned by the NHSE Region of Northern and Yorkshire (in England the NHS is divided into eight geographical regions of broadly similar populations for administrative purposes). Its aim was to identify and describe current methods of making health related

research evidence accessible to general practice staff in the Northern and Yorkshire Region. The findings of this survey were intended to help inform the development of future information strategies for primary care groups (PCGs) within the Northern and Yorkshire Region.*

Method

A postal survey questionnaire was designed using questions contained in existing survey instruments (appendix).^{5,6} Topic areas covered in the questionnaire included background information on the health professionals responding and their general practice; access to information resources; training and support mechanisms; self-reported use of available resources and facilities. The questionnaire was developed by the project team and took account of comments from the project steering group. The questionnaire was piloted in two GP practices in the Trent Region, following which minor amendments were made.

General practices in the Northern and Yorkshire Region were identified using an electronic database.⁷ Three copies of the questionnaire and three copies of the letter of instruction were posted directly to every Practice Manager in the Region. The Practice Manager was asked in a covering letter to distribute the questionnaires to one GP, one practice nurse (or community nurse), and one other member of the primary health care team (PHCT) in the practice.

Each questionnaire was issued with a freepost envelope to encourage response and respondents were asked to return the questionnaire in the envelope provided. This was to ensure minimum administration by the Practice Manager. Questionnaires and letters were distributed during May 1999. A prize draw, involving book vouchers of £100, £50 and £25, was offered to practices as an incentive for them to respond to the survey. To gain entry to the prize draw all three questionnaires had to be completed and returned.

Four reminder letters were distributed to practices where no response was evident. In addition, two more specific reminder letters were distributed to those practices where only one or two replies had been received.

Data were entered onto a spreadsheet and analysed using SPSS 9. Simple descriptive statistics were used to summarise respondent reported awareness, access to and use of a number of information resources. Free text answers given by respondents to open ended questions were categorised according to subject and the frequencies calculated. Particular attention was given to describing levels of access to electronic and paper sources of health related research findings and describing barriers to their use.

* Primary care groups are local area groups which were established in 1999 by GPs and other primary care health professionals to plan and commission health services for their local communities, a role previously carried out by health authorities in England.

Table 1 Access to electronic databases in general practice (all respondents)

Database	Easy access*	Less easy*	Not easy*	No access	Don't know	No response
Medline	132 (9%)	101 (7%)	117 (8%)	714 (51%)	150 (11%)	192 (14%)
Cinahl	9 (<1%)	14 (1%)	63 (4%)	808 (57%)	287 (20%)	225 (16%)
PsycLit	3 (<1%)	7 (<1%)	39 (3%)	815 (58%)	303 (22%)	239 (17%)
Cochrane Library	69 (5%)	52 (4%)	97 (7%)	766 (54%)	210 (15%)	212 (15%)
Best Evidence	31 (2%)	32 (2%)	54 (4%)	774 (55%)	269 (19%)	246 (17%)
Electronic MIMS	305 (22%)	111 (8%)	87 (6%)	551 (39%)	163 (12%)	189 (13%)
Electronic BNF	141 (10%)	56 (4%)	54 (4%)	770 (55%)	173 (12%)	212 (15%)
National Research Register	11 (<1%)	15 (1%)	44 (3%)	805 (57%)	282 (20%)	249 (18%)

*Easy access = in own office/consulting room; less easy = shared access with other staff; not easy = not in the building but available elsewhere e.g. local NHS library.

Results

Of the 1029 general practices identified in the Northern and Yorkshire Region, 718 (70%) returned questionnaires; 253 responding practices returned all three questionnaires completed while 434 responding practices returned one or two questionnaires completed. The remaining 31 practices returned the questionnaires and said that they did not want to participate in the survey.

A total of 3087 individuals were invited through their general practices to reply to the questionnaire, of whom 1406 (45%) responded. Of the 1406 respondents, 502 (36%) were GPs, 343 (24%) were practice nurses, 241 (17%) were community nurses, 229 (16%) were practice managers, and the remaining 91 (7%) were other members of the PHCT.

ACCESS TO COMPUTER EQUIPMENT

Respondents were asked to state whether they had any access to a PC with a CD-ROM attached in their general practice/health centre; 297 (59%) GPs, 135 (39%) practice nurses, and 61 (25%) community nurses stated that they had easy access (defined as in own office/consulting room). Practice managers had the highest levels of easy access (71%; n=163).

ACCESS TO THE INTERNET AND NHS-NET

Six hundred and sixty six (47%) of all respondents reported having no access to the internet, while 209 (15%) said they had easy access. GPs reported the highest levels of easy access to the internet (n=113, 22%). Reported easy access to the NHS-net (internet access for the NHS) by all respondents was 9% (n=134), the majority (59%; n=835) reported having no access. Practice managers (15%; n=35) and GPs (12%; n=61) reported the highest levels of easy access.

ACCESS TO ELECTRONIC DATABASES

Table 1 shows reported access to electronic databases by all respondents. GPs had the highest levels of reported easy access to Medline (18%; n=89) while 48 GPs (9%), seven practice nurses (2%), five community nurses (2%), and eight practice managers (3%) stated that they had easy access to the Cochrane Library.

TRAINING NEEDS OF HEALTH PROFESSIONALS

A total of 983 respondents (70%) said that they would need to be trained to use either a computer, the internet, or to search databases if the opportunity for easy access to any of these information services were available. Less than 1% (n=11) of all respondents indicated that they had no desire to be trained in the use of

any of the information services mentioned in the questionnaire.

ACCESS TO AND USE OF LIBRARY SERVICES

Seven hundred and forty four respondents (53%) reported having access to a librarian (or other professional) who could undertake literature searches on request; 296 GPs (59%), 169 practice nurses (49%), and 175 community nurses (73%) stated they had access to such a service. Five hundred and sixty six of the respondents (76%) who indicated that they had access to a librarian stated that their local hospital was their main library location while a further 69 (9%) indicated that the health authority was their main library location. GPs (n=246), practice nurses (n=69), and community nurses (n=131) all identified the local hospital as the main source of access.

ACCESS TO EVIDENCE BASED JOURNALS AT WORK OR HOME

GPs reported the highest levels of access to *Bandolier* (71%; n=359), refereed journals (90%; n=452), *Effective Health Care* bulletins (61%; n=305), and the *Drug & Therapeutics Bulletin* (94%; n=473). Just over one third of GPs also stated that they had access to both *Effectiveness Matters* (38%; n=191) and *Evidence Based Medicine* (34%; n=171). As a test of questionnaire response validity, a fictitious publication was included in the list of evidence based journals; 74 GPs (15%) stated that they had access to the fictitious publication *Effective Medicine Today*. Table 2 shows those publications actually read by all respondents.

JOURNALS USED TO INFORM CLINICAL PRACTICE

Table 3 highlights the use of selected information sources to inform clinical practice by all respondents; 290 GPs (58%), 106 practice nurses (31%), and 76 community nurses (31%) stated that they had definitely used refereed journals to inform their clinical practice. A majority of GPs (55%; n=276) also claimed to have used *Drug & Therapeutics Bulletin* to inform their clinical practice.

Respondents were asked to provide examples of their use of these information sources to inform practice. Examples included the prescribing of statins (n=28), the management of wound care (n=31), and diabetes (n=48). A full list of these examples is available elsewhere.⁸

DEVELOPING LOCAL INFORMATION SERVICES

When asked if their own general practice/health centre had developed a service (in the last 5 years) that helped make access to research information easier, just over 16% (n=225) of

Table 2 Publications actually read by all respondents

Publication	Every issue	Occasionally	Not read	No response
<i>Bandolier</i>	231 (16%)	274 (20%)	569 (41%)	328 (23%)
Refereed journals (e.g. <i>BMJ</i>)	440 (31%)	599 (43%)	224 (16%)	141 (10%)
<i>Effective Health Care</i>	175 (12%)	322 (22%)	567 (40%)	341 (24%)
<i>Drug & Therapeutics</i>	439 (31%)	409 (29%)	337 (24%)	220 (15%)
<i>Effective Medicine Today</i> *	27 (2%)	129 (9%)	815 (58%)	434 (31%)
<i>Effectiveness Matters</i>	99 (7%)	180 (13%)	721 (51%)	405 (29%)
<i>Evidence Based Medicine</i>	67 (5%)	223 (16%)	724 (51%)	391 (28%)
<i>Evidence Based Nursing</i>	54 (4%)	180 (13%)	765 (54%)	406 (28%)
<i>Bacteria</i>	34 (2%)	68 (5%)	828 (59%)	475 (34%)

**Effective Medicine Today* is a fictitious publication.

Table 3 Respondents' use of selected information sources to inform clinical practice in the previous 2 years

Publication	Yes, definitely	Yes, maybe	No	Don't know	No response
<i>Bandolier</i>	201 (14%)	158 (11%)	301 (21%)	430 (31%)	316 (23%)
Refereed journals (e.g. <i>BMJ</i>)	522 (37%)	297 (21%)	131 (9%)	303 (22%)	153 (11%)
<i>Effective Health Care</i>	144 (10%)	155 (11%)	286 (20%)	461 (33%)	360 (26%)
<i>Drug & Therapeutics</i>	395 (28%)	239 (17%)	170 (12%)	361 (26%)	241 (17%)
<i>Effective Medicine Today</i> *	30 (2%)	69 (5%)	369 (26%)	514 (37%)	424 (30%)
<i>Effectiveness Matters</i>	62 (4%)	75 (5%)	339 (24%)	518 (37%)	412 (29%)
<i>Evidence Based Medicine</i>	80 (6%)	126 (9%)	334 (24%)	495 (35%)	371 (26%)
<i>Evidence Based Nursing</i>	75 (5%)	94 (7%)	349 (25%)	490 (35%)	397 (28%)

**Effective Medicine Today* is a fictitious publication.

all respondents replied positively while the majority (61%; n=865) didn't know. When asked to provide short descriptions of these developments, respondents provided examples including: a practice with research room, research assistant and internet access; a practice networked desktop access to electronic information sources in all GP consulting rooms; practices with networked desktop access to electronic information sources in all consulting rooms for all the PHCT; a practice with a library for shared use by the PHCT; and a practice using internet resources to search for evidence. A full list of these examples is available elsewhere.⁸

Discussion

This postal survey of general practice staff in the Northern and Yorkshire Region suggests that many practices are struggling to set up the infrastructure and develop the skills that are necessary to make best use of available research evidence. This raises a number of interesting issues.

Although the individual response rate to the questionnaire was only 45%, at least one completed questionnaire was obtained from 70% of all the general practices surveyed. This suggests that the survey may provide a reasonable insight into the levels and types of information provision currently available to general practice staff in the Northern and Yorkshire Region.

In view of the response rate and the types of groups who responded to this particular survey, it is worth noting some of the inherent problems associated with self-reported questionnaires. No matter how clearly respondents are guided with definitions of terms used in questions, at every stage people will still apply their own interpretations and definitions to questions. For example, what a nurse may consider as representing easy access to a particular information resource may not be classed as

such by a GP working in the same practice setting, even when clear definitions are given in the questionnaire.

In addition, there is the potential of self-reporting bias in any survey. This was borne out in this particular survey by the number of respondents who claimed to have access to the fictitious publication *Effective Medicine Today*. Just over 11% of all respondents claimed to have read the publication while 7% stated that they had actually used it to inform their own clinical practice in the last 2 years. It may be that with so many "evidence based" and "effectiveness" publications currently available, some health professionals have difficulty in identifying those they have read and used with any certainty.

There is some suggestion within this survey of differential access to information resources between different professions in primary care. GPs clearly still have far easier reported access than other professions to both paper based resources and electronic databases. This finding is similar to that reported in an evaluation of the Primary Care Sharing the Evidence (PRISE) project in Anglia and Oxford which also revealed some evidence of unequal access to and use of information services across disciplines.⁹ This evaluation found that, in terms of network access to the databases offered by PRISE, GPs who formed less than 20% of total target users made up 85% of total link usage.⁹

As such, there is a need for further investigation into the reasons why different professions working in the same practice setting have differential access to information resources available in primary care.

This survey reports similar findings to previous studies in terms of restricted access to the internet within the NHS in England.¹⁰ Levels of access in the Northern and Yorkshire Region, as reported in this survey, also appear to be very low. Just under 60% of all respondents reported having no access to the NHS-net and just under 50% also reported having no access to the internet. This compares with a recent survey of general practices in Scotland where 99% of general practices are connected to the NHS-net and 56% of practices reported using the NHS-net at least once a week (the GP in 47% of cases).¹¹

The NHS-net offers the potential of electronic access to information resources for primary care professionals across the NHS. The recent *NHS Plan* has reiterated the target of connecting all general practices to the NHS-net by 2002.³ However, the Scottish survey found that few practices provided desktop access for all practice staff.¹¹ Without desktop access the suggestion, within this survey, of differential access to online information resources experienced by certain professional groups may continue.

All respondents in this survey reported greater access to paper based information than to electronic databases. This is a similar finding to those reported in previous studies for GPs and for trust medical directors.^{5 6 12} Indeed, the majority of information sources listed by respondents as having been used to inform

their practice were paper based publications. Paper based publications (and especially summaries of research findings) may still represent the most convenient media for disseminating messages within the primary care setting.

Health professionals perceive a real skill gap with less than 1% of all survey respondents saying that they had no desire to be trained in the use of any of the services mentioned in the questionnaire. Training primary care team members in skills such as internet searching, finding the evidence, and critical appraisal may help to ensure that available information resources are exploited more effectively. However, despite the perceived importance of training, the nature of work in primary care means that training can be difficult to organise for a variety of reasons including busy timetables, inadequate training facilities, and other competing priorities. There would, of course, also be significant resources implications in developing and delivering a skills training programme to health professionals in primary care.

It should also be noted that it is still not clear just how much of a priority information skills training really is or should be for primary care professionals. We still do not really know whether the perceived importance of such training is connected to a belief that such skills would help professionals to practise evidence based health care, and whether training will eventually lead to improvements in the quality of patient care delivered. Given that more than half the respondents stated that they have access to a librarian, it may be that greater promotion of the information support services

these individuals can offer may be a more feasible alternative to training. An understanding of the barriers to increased and more effective use of the existing evidence base and suggestions as to how these may be overcome is an area that requires further investigation.

The authors would like to thank responding practices for participating in this survey and also Anne Fletcher, Peter Campion, and Brian Ferguson for their extremely helpful input and assistance. This study was funded by NHSE Northern & Yorkshire Region.

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Appendix: Postal Survey Questionnaire

_____ / _____ / _____

The University of Exeter
 NHS CENTRE FOR REVIEWS AND DISSEMINATION
 Access to the Evidence Base from General Practice
 Questionnaire

1 What is your job title? (please print)

2 Which of the following best describe your current role? (please tick one box)

General Practitioner	<input type="checkbox"/>	Practice Manager	<input type="checkbox"/>
Practice Nurse	<input type="checkbox"/>	District Nurse	<input type="checkbox"/>
Health Visitor	<input type="checkbox"/>	Physiotherapist	<input type="checkbox"/>
Occupational Therapist	<input type="checkbox"/>	Speech & Language Therapist	<input type="checkbox"/>
Community Psychiatric Nurse	<input type="checkbox"/>	Other	<input type="checkbox"/>

(If other please specify in box below)

3 How long have you worked in your current post? (please specify in words and years)

I have worked in this General Practice/Health Centre for _____ (years)

4 How many partners are there in the General Practice(s) within which you work? (Please tick a job share would count as one partner) (please print number)

Single handed	<input type="checkbox"/>	Two	<input type="checkbox"/>
Three	<input type="checkbox"/>	Four	<input type="checkbox"/>
Five	<input type="checkbox"/>	Six	<input type="checkbox"/>
Seven	<input type="checkbox"/>	Eight	<input type="checkbox"/>
Nine	<input type="checkbox"/>	Ten	<input type="checkbox"/>

If more than eight please specify _____

If you work for more than one General Practice please tell us:

How many General Practices you work for (specify number) _____

How many GP partners there are in each (specify number) _____

5 Do you have access to any of the following within your general practice/health centre? Please tick the following definitions: [Easy access is defined as either in your office/consulting room or in another part of the building. Access (or easy) is when it is shared with other staff. Access not easy is defined as NOT in the building within which you work.] (Please tick one box for each item)

Access to:	Yes easy	Yes not easy	Yes not easy	No	Don't know
a PC with CD ROM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS net	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psych	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cochrane Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best Evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cdrom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BNP (CD ROM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NHS (Internet/CD ROM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify) _____

6 If you ticked YES for any of the above answers please tell us your arrangements for access (Please tick one box for each answer)

	Other staff access to service (if any)	Easy access	Access not easy (see page 2)	I don't need to log on
a PC with CD ROM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS net	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psych	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cochrane Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best Evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cdrom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BNP (CD ROM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NHS (Internet/CD ROM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If other staff access the service for you please tell us who they are:

Whose role is it within the practice/health centre to keep up-to-date on the research evidence?

7 Please tell us what your training needs would be if the opportunity for easy access to any of the services mentioned in the previous questions were available? (Please tick one box for each statement)

	Yes	No
I would need to be trained to use a computer	<input type="checkbox"/>	<input type="checkbox"/>
I would need to be trained to access the Internet/BNP Net	<input type="checkbox"/>	<input type="checkbox"/>
I would need to be trained to access one or several of the services mentioned	<input type="checkbox"/>	<input type="checkbox"/>
I have no desire to be trained in the use of computers	<input type="checkbox"/>	<input type="checkbox"/>

8 Do you have access to a Librarian (or other professional) who can undertake literature searches for you? (please print name)

Yes	No	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If other professional please specify _____

If you have answered Yes to this question please tell us where the Librarian (or other professional) is located: (please print name)

Local Hospital/Trust	<input type="checkbox"/>
Health Centre	<input type="checkbox"/>
Health Authority	<input type="checkbox"/>
University	<input type="checkbox"/>
Other	<input type="checkbox"/> (Please specify): _____

9 Do you have access to any of the following at work or at home? (Please tick one box for each journal)

	Yes	No	Don't know
Basilevier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference journals (BMJ, Journal of Advanced Nursing, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Health Care Institute	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug and Therapeutics Bulletin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Medicine Today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EVIDENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify) _____

10 Please tell us which of the journals you read (Please tick one box for each journal)

	Yes (every issue)	Yes (occasionally)	No
Basilevier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference journals (BMJ, Journal of Advanced Nursing, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Health Care Institute	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug and Therapeutics Bulletin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Medicine Today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EVIDENCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify) _____

11 Please tell us if information from any of the sources mentioned below have been used to inform clinical practice, within the general practice/health centre, in the last 3 years? (Please tick one box for each source)

	Yes (definitely)	Yes (I think so)	No	Don't know
Handover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference journals (BMJ, Journal of Advanced Nursing, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective Health Care bulletins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug and Therapeutics bulletins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective Medicines Today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness Matters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence Based Nursing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify) _____

If yes, can you provide us with an example

12 Has your General Practice/Health Centre ever developed a service within the last 3 years which has helped to make your access to the research information easier? (please tick one box)

Yes No Don't know

If Yes, please tell us about this in more detail (please use additional paper if necessary and where possible if you have any literature on this please enclose it with the questionnaire).

13 Evidence based health care uses a great deal of technical jargon. The following are a list of terms used in papers about evidence based health care. (Please tick one box to indicate how you feel)

	I would not be happy to use this term	I don't understand how to include it	I don't understand what it means	I've understood what it means but don't use it
relative risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
absolute risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
systematic review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
randomised controlled trial (RCT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cost-benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
meta-analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
clinical effectiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
number needed to treat (NNT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
confidence interval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
publication bias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14 What outside resources do you use on a regular basis to help you access research information? (please tick one box for each resource)

	Yes	No	Sometimes
BMA Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OSD Information Service, University of York	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BMJ library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BCGP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other, please specify _____

Thank you for taking the time to complete this questionnaire.