

# Quint<sup>Essential</sup>

MCMLA \* MLGSCA \* NCNMLG \* PNCMLA \* SCCMLA

Convergence & Collaboration • Denver, Colorado • October 12-16, 2014

**Abstracts of papers, Stat Talks, and Trends in Technology Panel presentations from Quintessential 2014, Denver, Colorado, October 12-16, 2014**

## **Paper session 1A, Tuesday, October 14<sup>th</sup>, 11 am- noon**

Moderator: Ellen Aaronson, MLS, AHIP. West Hills Hospital & Medical Center, West Hills, CA.

**1. Creative convergence: Conducting a systematic review project through cross-institutional, distance collaboration.** Virginia Pannabecker, MA (IRLS), MA, AHIP<sup>1</sup>; Carolyn Ching Dennison<sup>2</sup>; Alison Farrell<sup>3</sup>; Genevieve Gore<sup>4</sup>; Assako Holyoke<sup>5</sup>; Viola Machel<sup>6</sup>; Christine Marton<sup>7</sup>; Kelly O'Brien<sup>8</sup>; Stephanie Swanberg<sup>9</sup>; Mindy Thuna<sup>10</sup>. 1. University Libraries, Virginia Tech; 2. Manoa Library, University of Hawaii; 3. Health Sciences Library, Memorial University of Newfoundland; 4. Life Sciences Library, Schulich Library of Science and Engineering; 5. Medical Center Library, Saint Louis University; 6. St. Catharines Public Library; 7. University of Toronto; 8. Crawford Library of the Health Sciences; 9. Kresge Library; 10. University of Toronto Mississauga Library.

Objective: To reflect on a cross-institutional systematic review project: What are effective collaboration methods for geographically dispersed research teams?

Methods: Conduct a scoping literature review on effective methods for cross-institutional, distance research team collaboration considering: different institutional resources and policies and dispersed locations and time zones. Collect systematic review team member perspectives regarding: what worked best, what each might do differently, and recommendations for others. Identify themes from the team results and synthesize team results with literature review results for a set of recommended best practices.

Results: Medical librarians joined systematic review teams for an MLA Research Section initiative to address health librarianship research questions. Ten librarians were on our team, including a team leader, mostly from academic institutions, collaborating from Hawaii, the continental U.S., and Canada. We identified benefits including diverse perspectives, wide-ranging experience in healthcare education and librarianship, and expansive access to health sciences literature through our multiple institutions; challenges such as developing a project plan and timeline from scratch; lessons learned; and recommendations for future projects.



Conclusion: In today's healthcare environment, we strive to produce the highest quality results and to include diverse perspectives to strengthen our research. Healthcare professionals, including medical librarians, increasingly interact in online environments with geographically dispersed research teams. Find out what we learned from this project: what worked best, what we would do differently, and our recommendations for successful distance collaboration.

**2. The Value of Qualitative Research in the Health Sciences.** Karin Saric, MLIS. University of Southern California.

Objective: To discuss the value of qualitative evidence to allied health professionals, and demonstrate a systematic approach to finding qualitative evidence.

Background / Methods: Evidence-based practice emphasizes the use of quantitative evidence to inform health care decision making. However, many allied health professionals also value and incorporate the use of qualitative evidence. Qualitative evidence represents only a small portion of the published literature, and can be difficult to find. In addition, as qualitative studies seek to understand and interpret personal experiences, article titles are not always meaningful and may be inconsistently indexed even within the same database.

This paper discusses the value of incorporating qualitative evidence into the decision making process of allied health professionals. It also demonstrates how health science librarians can employ a systematic approach to finding qualitative research evidence, including: identification of qualitative terms; database selection; selection and tailoring of search terms to the scope of the database; incorporation of expert search term combinations; and the use of qualitative filters. Examples focus on occupational therapy, however the logic and approach is scalable to other allied health disciplines.

**3. Systematically assessing methods used by librarians to teach evidence-based practice: What works best?** Assako N. Holyoke, PhD, MSLIS<sup>1</sup>; Stephanie M. Swanberg, MSI, AHIP<sup>2</sup>; Genevieve Gore<sup>3</sup>; Virginia Pannabecker, MA (IRLS), MA, AHIP<sup>4</sup>; Carolyn C. Dennison, MA, MLIS, AHIP<sup>5</sup>; Christine F. Marton, PhD<sup>6</sup>; Alison D. Farrell, BA, MLIS<sup>7</sup>; Mindy Thuna, BSc, MSc, MISt<sup>8</sup>; Kelly K. O'Brien, MLIS<sup>9</sup>; Viola Machel<sup>10</sup>. 1. Saint Louis University Medical Center Library; 2. Oakland University William Beaumont School of Medicine; 3. Schulich Library of Science and Engineering; 4. Arizona State University Libraries Health Sciences Library; 5. University of Hawaii at Manoa Library; 6. University of Toronto; 7. Memorial University of Newfoundland Health Sciences Library; 8. University of Toronto Mississauga Library; 9. Crawford Library of the Health Sciences; 10. St. Catharines Public Library.

Objective: To conduct a systematic review of the literature on methods of teaching evidence-based practice (EBP) and assess which methods are most effective.

Background: This study attempts to address one of the fifteen research questions generated from a delphi study by Eldredge JD, which was part of a Medical Library Association Research Section's Research Agenda project.

Methods: A team of 10 librarians with a common interest in EBP participated in this systematic



review project. The research protocol was developed according to PRISMA standards. The research question was defined, the inclusion and exclusion criteria determined, and the base literature search strategy developed and tested on PubMed. Fourteen databases were searched through November 2013, including MEDLINE, EMBASE, LISA, and other relevant databases to the study. The retrieved citations were divided into 5 blocks after duplicates were eliminated and two librarians were allocated to each block for selection, data extraction, and critical appraisal of studies identified as research papers and final data analyzed.

Result: A total of 45,457 citations were retrieved and over 20,000 duplicates were excluded. A total of 178 studies met the inclusion/exclusion criteria based on title and abstract. Further full-text analysis identified 19 studies for data extraction, critical appraisal, and final data analysis. Most of these 19 papers concerned EBP educational efforts addressed to medical students or residents and nursing and allied health students. Six were identified as randomized controlled trial studies. Of the 19 studies, 68% concerned educational efforts using the traditional face-to-face instruction method, most of them (85%) combined with hands-on computer-assisted teaching. Over 90% assessed learning through test scores and literature searches, based on before and after intervention. Statistical analysis used to assess learning outcome included paired T-test, ANCOVA, ANOVA, Mann-Whitney U test, and Wilcoxon paired test. Although most of the studies claimed success in improving students' skill, we did not find enough studies to allow us to conduct valid statistical analysis of different teaching methods.

Conclusion: Studies comparing different teaching methods are rare, which indicates the need for future research in this area. EBP courses taught by librarians are in general integrated in medical school or other health sciences school curriculum. Such courses generally address the 'acquire' step of EBM as part of or incorporated in the existing EBM curriculum. Traditional lecture-type instruction is most common. Lecture-type instruction is generally provided in combination with hands-on computer lab instruction. Web-based courses are the next most common form of instruction. Web-based courses frequently take the form of online tutorials using tools such as WebCT/Blackboard. The pre-post format is frequently used to assess learning by using tests and literature search exercises, although validated or non-validated questionnaires, such as Berlin Questionnaire or Fresno Test have also been addressed.

## **Paper session 1B, Tuesday, October 14<sup>th</sup>, 11 am-noon**

Moderator: Margaret Hoogland, MLS. A.T. Still University, Kirkland, MO.

**1. Developing a Search Tool for Retrieving Sex and Gender-Specific Research in PubMed—A Collaborative Project.** Cheryl K. Simonsen, MLIS, Harrington Library of the Texas Tech University Health Sciences Center.

Objective: This paper will describe the development of a PubMed search tool to retrieve the most relevant sex and gender-specific research to support the practice and teaching of gender-based medicine.

Description: The importance of practicing gender-based medicine is becoming more recognized in



the medical community. Texas Tech University Health Sciences Center is a forerunner in the field of gender-based medicine. They have developed gender-based curricula and continuing education offerings for the education of students and professionals. The author, in collaboration with two TTUHSC School of Medicine professors, developed a search strategy tool to be used in the PubMed database to retrieve the most relevant published sex and gender-based research. A standard set of relevant articles in gender-based medicine was developed by another team member, a graduate student in the TTUHSC School of Biomedical Sciences. To validate the search tool, it was tested to determine how many of the relevant articles would be retrieved using this specific search strategy. The search tool was sent out to health professionals in national organizations and to professors and students in academic settings to gain feedback on its usefulness and efficacy in their literature searches.

**Outcome:** In the validation process the rate of retrieval of articles from the standard set was high, indicating that the search strategy would retrieve a small, but relevant set of articles. The feedback from the professionals who used the tool indicated that it decreased their research time and returned relevant articles.

**Conclusion:** The search tool that was developed proved effective in retrieving relevant sex and gender-based research literature in PubMed. During the development and testing process it became quite apparent that more specific indexing for this type of research is needed to facilitate the retrieval of relevant literature.

**2. The "No Book:" Turning No Into Yes at the Reference Desk. Kim Granath, MLS, AHIP. University of Montana Mansfield Library.**

**Objectives:** To develop an easy-to-use and informal method for recording user requests and feedback received at the Reference Desk, and to be able to act on this feedback.

**Methods:** Reference librarians and staff at the reference desk were asked to record interactions with patrons that had a negative outcome. All of the comments were recorded in a small spiral bound notebook kept at the desk, called the "No Book." At the end of each semester the comments in the "No Book" were analyzed, and a document was created that counted and categorized all of the comments. The entire reference department then reviewed the document and suggested ideas for turning negative outcomes into positive ones. We then acted on some of those ideas to implement changes in the library.

**Results:** Based on the analysis of the comments recorded in the "No Book," the Reference Desk has been able to implement several new services. Some examples of these include bike lock checkout, free scantron sheets and other basic office supplies, patron-driven acquisitions, and development of a family friendly group study room. The analysis also led to internal changes, most notably, the reorganization of the technical support desk. An unintended result of the "No Book" analysis was its value as a training tool for staff.

**Conclusions:** Collecting and analyzing user comments has enabled the reference desk to make positive changes in the library that are valued by students.



**3. Presto Chango: From Collection Stewards to Connection Instigators.** Christy Jarvis, MLIS, AHIP; Joan M. Gregory, MLS, AHIP; Jean P. Shipman, MSLS, AHIP, FMLA. Spencer S. Eccles Health Sciences Library, University of Utah.

**Objectives:** To meet the evolving demands of healthcare delivery, an academic Health Center is transforming at an unprecedented pace. The Health Sciences Library is supporting this transformation by inviting strategic partners to share physical space in the library. Space for new collaborative partners was made available through de-accessioning most of the print collection and employing innovative approaches to content delivery.

**Methods:** From December 2012-May 2013, the Library undertook a comprehensive analysis of the use of its print collection. Unused items were weeded and recycled or passed along to a book reseller. Heavily-used items were replaced through a combination of methods including traditional ILL, e-journal backfile purchases, and article delivery services such as Copyright Clearance Center's Get It Now and Labyrinth's ReadCube Access.

**Results:** By October 2013, Library staff had cleared space for incoming partners by weeding 90% of the print collection. By December 2013, the compact shelving units that had housed the Library's print collection had been removed, clearing the way for construction to begin on several interprofessional and collaborative facilities.

**Conclusions:** The rapidly changing needs of the health sciences community inspired the Library to explore creative solutions to the university's urgent need for physical space. By shifting the focus away from preserving a legacy print collection and giving priority to electronic content, significant space was created for strategic partners while new avenues were explored for delivering content. Shared physical space has led to increased Library interaction with new associates and has paved the way for the development of mutually beneficial partnerships and numerous opportunities for collaborating on institutional initiatives.

## **Paper session 2A, Tuesday, October 14<sup>th</sup>, 1-2:30 pm**

**Moderator:** Katie Prentice. Schusterman Library, The University of Oklahoma, Norman, OK.

1. A Collaborative Venture to Create a Case-Report Writing Workshop. Talicia Tarver, MLIS, LSU Health Shreveport Health Sciences Library; Shannon Palombo, MD, LSU Medicine-Pediatrics.

**Purpose:** This paper will discuss the collaboration between a health sciences librarian and a fourth-year medical student (MSIV) to create a case report writing workshop.

**Setting/Participants/Resources:** The Health Sciences Library is an academic library that provides services to the Schools of Medicine, Graduate Studies, and Allied Health Professions. The library also serves the university's affiliated hospital system.

**Brief description:** The digital and information services librarian, who also heads the library's Writing Consultation Service, partnered with an MSIV medical student to teach an introductory-level class



on case report writing to medical students, allied health students, and clinicians. The goal of the course was to encourage clinicians, at all stages of their careers, to contribute to the medical literature. Content included a brief overview of evidence-based medicine, the structure of a case report, writing tips, and analysis of a sample case report.

Results/Outcome: A total of 17 people (16 medical students and 1 allied health clinician) attended the workshop. The response was very positive, and paved the way for the workshop to be an ongoing seminar.

Evaluation method: All participants received an evaluation sheet on which they rated the class and provided recommendations for improvement. The MSIV student also asked her peers for their suggestions for improvement and contacted the upcoming MSIV student in charge of Students for Academic Medicine. Through this contact, the library will continue to work with the medical students to offer this workshop the next academic year.

**2. Educating Openly: Finding Open Educational Resources for International Programs.** Peace Ossom Williamson, MLS, MS, AHIP; Margarita C. Treviño, RN, PhD. University of Texas at Arlington.

Purpose: This paper describes the resources and searching methods for obtaining open educational resources (OER) for building affordable certificate and specialization programs internationally.

Brief Description: The UT Arlington College of Nursing is offering certificate and specialty programs in Latin America and China in partnership with local university partners. In order to create affordable courses with relevant content, the faculty are partnering with the library to utilize OER, including open textbooks, articles, and videos. Because of the unrestrictive copyright license, use and translation of these works do not come with fees, and the savings can be passed on to students. OER are available broadly across the internet, and the authors have created and adapted methods of searching in order to effectively find trustworthy and relevant course content.

Discussion: As education becomes increasingly expensive, librarians must be able to offer faculty support in finding more affordable options for course resources, including open textbooks and other OER, especially because there may be some positive correlation in student success rates for courses in which, for students, there are no cost barriers in accessing the assigned resources.

**3. Using a Writing Retreat to Enhance the Research and Publication Efforts of Medical Librarians: A Case Study.** Jack Bullion, MLS, AHIP, Lead Medical Librarian Texas Health Resources; Stewart Brower, MLIS, AHIP Director, Schusterman Library University of Oklahoma-Tulsa.

Objective: This paper examines the effect of an academic writing retreat on the scholarship and publication efforts of medical librarians.

Setting/Participants/Resources: The 2012 and 2013 annual meetings of the South Central Chapter of the Medical Library Association.

Brief description: This paper describes an initiative undertaken by librarians to develop a two-day



writing retreat to coincide with their chapter's 2012 and 2013 annual meetings for those members who wanted to advance research projects toward publication. The goals of the writing retreat for attendees were as follows:

- Demonstrate significant progress on manuscripts
- Apply all applicable writing and revision suggestions from peers and event facilitators
- Determine the optimal journal(s) to submit projects for publication
- Develop a plan and timeline for project beyond the retreat

The retreat provided attendees with several hours of uninterrupted writing time in a relaxed setting with ample formal and informal workshopping opportunities to receive support and encouragement on their manuscripts-in-progress from colleagues.

Results/Outcome: The writing retreat has increased interest in scholarly publishing in the chapter, and has led to the formation of a cohort that, since its inception at the 2012 meeting, has published (to date) a minimum of fifteen non-peer reviewed articles, two book chapters, and five peer-reviewed articles.

Evaluation method: A post-retreat survey questionnaire was distributed to each attendee to determine their perceptions of the writing retreat and their willingness to continue advancing their research projects toward publication.

**4. Creation of an health information literacy program: the good the bad and the ugly.** Margaret Vugrin, MSLS, AHIP. Texas Tech University Health Science Center, Preston Smith Library, Lubbock, Texas.

Question: What is the best way to teach all incoming students the basics of Information Literacy?

Settings: Texas Tech University Health Sciences Center includes the Schools of Medicine, Nursing, Allied Health and Graduate School of Biological Sciences. Primary campuses are in Lubbock, Amarillo, and Odessa, Texas. Additional sites are in Abilene, Dallas, and Midland. Many enrolled students are off-site distance-education students.

Methods: Topics were identified: Internet, Databases, Searching Skills, Evidence-Based Practice, Locating Materials, and Copyright. Electronic delivery of self-paced modules was decided to be the most efficacious. Under the coordination of a reference librarian, fourteen librarians were divided into six teams; each was given a 30-slide PowerPoint template. A style format for type, font, colors, spelling and other elements was produced to ensure consistency across all produced items. Modules were completed in two months and were uploaded for electronic access. Fifty student beta-testers tested the modules. Pre- and post-tests were administered. Peer-reviewer librarians critiqued modules after the beta-testers suggestions were incorporated.

Results: Due to the creativity of the authors, a strongly imposed structure, and a very stringent adherence to timeline, the course was finished on time. Without structure and an extraordinary amount of communication and supervision the modules would not have been completed.

Conclusions: Five of six modules were completed. Major difficulties were discovered in locating an electronic home. Continuous revisions were needed. In three years, 1,500+ students have taken the



updated modules. Evaluative results will be presented.

Contributing Librarians:

Barbara Ballew, Joseph Blackburn, Corina Bustillos, Lillian Carl, Carrie Gassett, Peggy Edwards, Dawn Field, Travis Real, Milagros De Jesus Rivera, Stephanie Shippey, Cheryl Simonson, Candia Thew, JoAnn VanSchaik, and Yumi Yamaguchi.

5. Stat Talk: Streamlining Service Requests Using Microsoft SharePoint. Kristen R. DeSanto, MSLS, MS, RD, AHIP, Marie R. St. Pierre, MLIS, AHIP. Children's Hospital Colorado, Clinical and Research Library.

Purpose: This Stat talk will inform librarians about the use of Microsoft SharePoint for the streamlining of service requests.

Setting/Participants: The Children's Hospital Colorado Clinical and Research Library staff worked with hospital information technology (IT) staff to create SharePoint forms for library service requests. Service requests include literature searches, interlibrary loan, and library resource training and orientation. Service requests may be submitted by any hospital employee.

Description: Library patrons previously submitted service requests via paper or online forms, which generated notification emails that were sent to the library inbox. This system had potential for errors and duplication of work. Some patrons submitted incomplete contact information, requiring library staff to take time to call or email the patron or look up the information in the hospital staff directory. Some requests were submitted with only a first name and no phone number or email address, so the patron could not be identified and the request could not be completed. Once a request was received, library staff then took time to manually transfer the request information from the paper form or notification email into a tracking spreadsheet.

In the fall of 2013, the request forms were converted by IT staff to SharePoint forms, and made accessible on the library website on the hospital intranet beginning January 2014. As long as a patron is logged in to the hospital network using his or her employee identification number, the SharePoint form will auto-populate their name, email address, department, job title, and date requested, so the patron needs only enter a description of the request. The submitted SharePoint forms are uploaded to an online work list, where library staff can assign requests to themselves. Previously there was no way to tell how many active requests were assigned to a particular library staff member, except by asking the staff. Now library staff can view the status of all requests. If a patron calls asking for an update on a request, any library staff member can readily see who has been assigned to that request. Some requests are time-sensitive, so auto-alert messages were set up to be sent to the library inbox, to notify library staff whenever a particular type of request is submitted. Completed requests can be exported into Excel, and used to demonstrate library service usage.

Results: This has improved completeness and accuracy of patron contact information and made it easier for library staff to monitor workload and compile usage statistics by department, job title, and location. It has saved time for hospital staff (mostly physicians and nurses) by not needing to fill in contact information. Since SharePoint can export data into Excel format, this has eliminated time previously spent by library staff manually entering requests into a tracking spreadsheet.



**6. Stat Talk: Developing and Customizing Information Literacy Courses for Health Professionals.** Gwen Wilson, Washburn University.

**Objective:** In the digital age it is becoming essential for health professionals to be information literate.

**Methods:** An information literacy course teaches students what information literacy is, the role it has in evidence based practice, skills to be information literate, and how to be a life-long learner. In this talk I will outline how I developed two courses including the learning outcomes and assignments that make the courses relevant to future health professionals.

**Results:** By offering a for credit information literacy course designated for health professionals, the Health Sciences Librarian has seen an increase in faculty interest in the role of the library and librarian in instructing students.

**Conclusion:** For credit information literacy courses specific for health professionals is a way to bring the importance of the library and the Health Sciences Librarian to the attention of students, faculty, and administration.

**Paper session 2B, Tuesday, October 14<sup>th</sup>, 1-2:30 pm**

Moderator: Jerry Carlson. University of Colorado Health, Denver, CO.

**1. Immersion in a Workshop with Nursing Professionals: Collaboration through learning at the Joanna Briggs Institute Comprehensive Systematic Review Training Course.** Margaret J. Foster, Medical Sciences Library, Texas A&M University; Ahlam A. Saleh, Arizona Health Sciences Library, University of Arizona.

**Objective:** This paper will report on the experience of two academic health sciences librarians attending a recent five day systematic review intensive training certification course offered by the Joanna Briggs Institute.

**Methods:** In June 2014, a Joanna Briggs Collaboration Systematic Review Training course was offered through the Indiana Center for Evidence Based Nursing Practice located at Purdue University Calumet College of Nursing. The target audience was primarily nursing professionals but the course was open to information science professionals as well. The workshop provided instruction on protocol preparation and systematic review development for both quantitative and qualitative research. The course included didactic and hands on practice sessions.

**Results:** The opportunity to network and assist nursing professionals with their searches for class activity protocol development provided a platform for demonstrating the value information professionals can provide to faculty and students in the nursing profession. Additional outcomes from the workshop included development of a preliminary Joanna Briggs Institute (JBI) protocol, obtaining certification as a JBI Reviewer, and establishing a network of collaborators from the class cohort.



Conclusions: Attending the JBI Comprehensive Systematic Review Training Program was a great experience for building skill sets in systematic review development and for cultivating relationships with nursing professionals.

2. Lean Out: The Rounding Librarian. Claire Hamasu<sup>1</sup>; Robert Millsap<sup>1</sup>; Debra Simmons<sup>2</sup>; Kencee Graves<sup>2</sup>.  
1. University of Utah; 2. University of Utah Health Care.

Objective: Hospital CEOs frequently come from the business sector. It is, therefore, useful for librarians to show their value to the institution in financial terms. The authors used the Lean process to develop a pilot to determine the financial impact of a librarian responding to patient care questions generated on clinical rounds. The hypothesis being that net costs would be lower with a librarian's involvement.

Methods:

- A librarian was added to four internal medicine round teams at an academic medical center. The librarian searched for answers to questions generated on rounds.
- A survey was distributed to all healthcare provider team members. It collected data on the average time team members spent on searching for information and the use and usefulness of the librarian's search results.
- Estimated salary and benefits were used to calculate avoidance costs for physician search time.
- Using two of the round questions, two scenarios were developed. The possible impact of the information provided by the librarian was determined by physician authors. This was translated into cost savings using HHS HRQ Data by the MBA author.

Results:

- Calculations for cost avoidance of one FTE rounding librarian based on save 5 hours of physician and post grad search or physician or time/day = \$29,000-\$94,000 (approx.) net annual savings.
- In each patient scenario, data indicates that savings of several thousand dollars might be realized.

Conclusions: A librarian embedded on rounds can:

- Impact patient care.
- Result in cost avoidance due to physician time spent on searches.
- Result in cost savings in patient care.

3. How a Health Sciences Librarian Creates a Different Approach to Embedded Librarianship. Gwen Wilson, Washburn University.

Objective: To demonstrate how a single Health Sciences Librarian in a University Library goes beyond the one-shot library instruction by being embedded in the course learning management system.

Methods: Traditionally the library is introduced during one class period, sometimes in less time than an entire class period. The concept of being an embedded librarian goes beyond the one-shot library instruction. There are multiple ways to be an embedded librarian. One way is to be physically embedded in the face-to-face class. The second way is to combine the face-to-face library instruction and an online presence in the learning management system. A third way provides online



library instruction and an online presence in the learning management system. This paper will discuss in more detail the process a Health Sciences Librarian took to provide these services and the challenges and benefits of providing these services to Nursing and Allied Health courses.

Results: By going beyond the one-shot library instruction as an embedded librarian, the Health Sciences Librarian has seen an increase in student success in relation to research-based assignments. The Health Sciences Librarian experienced more students seeking help through face-to-face meetings, e-mail, phone calls, and a discussion forum within the course in the learning management system.

Conclusion: The additional contact with students after the library one-shot, through the learning management system, reminds students how the Health Sciences Librarian can assist them and students responded by asking for assistance through a variation of formats.

**4. Going Inside To Get The Word Out: Improving Health Literacy With Inmates. Gail Kouame, MLIS, University of Washington.**

Objectives: This project's goal was to improve the health literacy, self-care management skills, and personal health care decision making of inmates during and after incarceration in a county detention center. Hoped-for outcomes were: Increased awareness of resources for quality health information and services; improved ability to process, understand, and communicate basic health information; and better ability to understand and manage health issues and concerns.

Methods: An outreach librarian collaborated with a multidisciplinary community-based team to develop twelve health information modules and other health-related resources to be presented to inmates in a rural county detention center. Because inmates do not have access to the Internet, an offline system was developed for use by trainers and inmates during the time of incarceration. Selected topics covered in training sessions included: mental health issues and stress, tobacco use and prevention, addictive behaviors, nutrition and weight management, preventive care and community library resources and services available upon release.

Results: Fifty-five inmates were qualified to participate in the project, and 39 completed both pre- and post-training questionnaires after completing all 12 modules of instruction. The evaluation revealed that even with the small total number of 39 in this study, the results were encouraging.

Conclusions: The most effective strategy in implementing the project was the "Internet-in-a-box" offline system. One strategy that would not be used again was scheduling the classes to run over a two-week period as first started in this project due to drop-out rates. Discussion between inmates and volunteer health professionals after each session is recommended.

**5. Stat Talk: Game on! Using Active Learning to Enhance Instruction. Kristy Steigerwalt, Clinical Medical Librarian, MLS, University of Missouri-Kansas City.**

Engaging students and medical professionals can be challenging. Busy employees and students can become easily distracted and one-shot library instruction sessions provide limited opportunity to reach objectives. How can you grab listener's attention without consuming too much precious instruction time? Bring on the games!



This presentation will provide you with a collection of freely available games, active learning exercises, and other activities designed to encourage participation in the classroom. From determining what you would like to accomplish, to choosing an appropriate game for your audience you will come away with practical activities for a diverse population of listeners. These ideas have been collected from a variety of exceptional instructors who have found creative ways to engage students in information literacy in dynamic and entertaining ways.

**6. Stat Talk: Flipping for health: hands-on library research sessions.** Virginia Pannabecker, MA (IRLS), MA, AHIP, Life Science & Scholarly Communication Librarian<sup>1</sup>; Cristina S. Barroso, DrPH, Associate Professor<sup>2</sup>; Jessica Lehmann, Instructor<sup>3</sup>. 1. Virginia Tech; 2. University of Tennessee, Dept. of Public Health; 3. School of Nutrition & Health Promotion, Arizona State University.

In Spring 2014, a health sciences librarian planned five library research sessions for undergraduate and graduate courses, using the flipped classroom method. This lightning talk will summarize the sessions and present example materials related to pre-session activities, in-class activities, and assessments.

**Objective:** To increase class time for hands-on, active learning of research skills directly related to course and assignment-specific learning goals.

**Methods:** Each course library session included a pre-library session activity that students completed on their own. This pre-library session activity was packaged in an online, course-specific Library Guide and included practice activities and/or assessments. During each in-person library session, students applied their learning in hands-on activities. For one course, senior level Nutrition, the librarian worked closely with two faculty members to plan and implement the pre-library sessions, pre- and post-testing, and the hands-on activity.

**Results:** Feedback from the library guide optional feedback forms indicated the usefulness of pre-library session activities for all the courses where they were used, as they allowed students to work through the material at their own pace and at times that were convenient for them. The pre- and post- tests and in-class session experience for the senior nutrition course indicated that the hands-on learning approach resulted in students having the appropriate research skills to work on their group projects in the class without an in-person demonstration of searching strategies.

**Conclusion:** The extended searching time during in-class sessions made it possible for the librarian and instructors to facilitate individual or group work during classes and address unique, in-depth questions as students conducted research. Responding to questions in class and group in-class work also increased peer-to-peer learning opportunities.

## **Paper session 3A, Wednesday, October 15<sup>th</sup>, 10:30 am-noon**

**Moderator:** Jackie Davis, MLIS. Sharp Memorial Hospital, San Diego, CA.

**1. HINARI – A Global Perspective on the Convergence of Local Needs.** Karin Saric, MLIS, University of Southern California.

**Objective:** To explain the MLA Librarians Without Borders HINARI Initiative, and share findings



drawn from instruction of HINARI workshops in the Balkans (Bosnia and Herzegovina and Montenegro) in April, 2014.

Background / Methods: HINARI Access to Research in Health Programme is a public-private partnership sponsored by the World Health Organization. Together with major publishers and other organizations, the program provides free or low cost access to major, peer-reviewed, biomedical journals to not-for-profit institutions in developing countries. Supported by a grant from the Elsevier Foundation, Lenny Rhine, FMLA, has conducted HINARI Training Workshops in over 50 countries. These workshops focus on how to search for information and use HINARI resources to access high quality evidence.

As a co-instructor in two recent workshops in the Balkans, the author gained insights into how health disparities and information needs have converged on a global level. In this presentation, the author will describe her findings, as well as the content and demographics of HINARI workshops. Suggestions to addressing global health needs, by incorporating HINARI into local environments, will then be discussed.

**2. Cross Boundaries, Cross Cultural: the UNM Health Sciences Library and Informatics Center's Native American Health Information Services: A Descriptive Overview Update. Patricia Bradley, MLS, AHIP. University of New Mexico Health Sciences Library and Informatics Center.**

Objectives: This paper provides an accounting of the University of New Mexico Health Sciences Library and Informatics Center's signature program--Native American Health Information Services 2004-2014.

Methods: The descriptive overview is based upon a review of project and activity reports. The overview includes National Library of Medicine-supported outreach activities involving Native peoples in New Mexico and the Four Corners region--Arizona, Colorado, New Mexico, and Utah, as well as activities conducted by the Native and Distance Services Librarian.

Results: The projects/activities resulted in health information outreach training to public/tribal libraries, a tribal health department, Community Health Representatives, tribal health educators, a tribal health board, Native American Research Centers for Health, and to practitioners who provide medical services to native peoples.

Conclusions: Health information outreach to Native communities requires careful planning, flexibility, and ongoing evaluation to optimize project results and balance the priorities of both the health sciences library and the tribal communities and organizations.

**3. Looking for indigenous health information? Indigenous health information: databases, hedges, & international options. Kathy Murray, BA, MLS. Univ. of Alaska Anchorage.**

Purpose: This paper will describe strategies for finding indigenous health information from various resources available in the US, Canada and across the circumpolar north countries.

Setting/Participants/Resources: Withheld Library has worked with the National Library of Medicine to create a website for health information for individuals living in the far north. Work on how to search PubMed to find indigenous health information has been done by librarians in the US and



Canada and their discoveries will be shared.

**Brief Description:** While the website began as a way to improve access to quality health information for Alaska Natives, it has since grown to include publication and research databases, multimedia, climate change, and traditional healing. Content has expanded beyond Alaska and now covers the circumpolar north. Finding published and gray literature for indigenous peoples is made more difficult by the lack of good indexing terms in PubMed. This paper will describe: databases from New Mexico to Alberta and across the globe to Norway which should be considered when looking for health information for indigenous groups and others living in the far north, hedges used to pull information from PubMed, and why the Arctic Council should be added to your list of great resources. Future opportunities for librarian involvement with the Arctic Council will be shared.

**Results/Outcome:** The growth of this website from local information to both national and international content makes this a good starting point when looking for health information for individuals living in the circumpolar north.

**4. Stat Talk: Tractors, Trailers & Stethoscopes: Information Needs of Health Professionals in Rural Areas.**  
Megan Bell, Louisiana State University.

**Objectives:** Josephine Dorsch published a paper in the Bulletin of the Medical Library Association (v.88, i.4 October 2000) entitled, "Information needs of rural health professionals: a review of the literature." This article described the search methods as well as the barriers faced by rural health professionals in satisfying their information needs. This talk will briefly describe a preliminary review of the literature on whether there has been a change in behavior since Dorsch's paper was published.

**Methods:** ISI Web of Science Citation Index was used to find articles which cited Dorsch's paper. This search retrieved 37 articles. The abstracts of all 37 articles were reviewed and articles which contained information on topics such as "information seeking behavior", "information needs" and "primary care physicians" were selected. Three literature reviews, one Cochrane review and three original research papers were selected.

**Results:** Of the papers reviewed the most common information needs were related to diagnoses, drug(s) and treatment/therapy. Lack of time is still the most common barrier to acquiring knowledge based information. In addition, colleagues remain the preferred information resource; yet the use of electronic resources for knowledge based information needs has increased.

**Conclusion:** Although health professionals continue to consult colleagues for clinical information needs, there has been an increase in the use of electronic resources such as clinical information systems (CISs) to meet their knowledge based information needs. Mobile devices such as mobile phones may be a solution to meeting the immediate clinical information needs of health professionals in rural areas. On the other hand, if a knowledge-based information need requires a more thorough search (e.g. evidence based medicine review) a medical librarian is a possible solution.



5. Stat Talk: Librarians in the Field: Reaching Underserved Populations. Ana M. Macías, MLIS, MPH, AHIP, Kaiser Permanente.

As librarians we have a unique skill set which affords us the opportunity to educate and provide health literacy information to our patrons, typically clinical /non-clinical professionals with advance education. Using our skills as information professionals outside the library is a satisfying experience. Community outreach activities conducted at various events, targeting a diverse group of underserved people required adjusting to a different work environment, creativity, patience and a willingness to serve. Their health information needs were as varied as their ability to receive it. This experience created a greater awareness of the existing health illiteracy in our communities.

6. Stat Talk: Health-e-Readers, offering e-readers to oncology patients. Holly E. Henderson, MA; Shelley M. White. Mercy Hospital Springfield, Missouri.

Objective: Pilot project offering e-readers to oncology patients for use during infusion therapy. Use knowledge gained to expand program to other cancer treatment areas throughout the hospital.

Methods: Van K. Smith Community Health Library, Mercy Hospital, in Springfield, Missouri , was awarded a grant to purchase e-readers for use by oncology patients in January 2014. The first pilot project began in June 2014 and involved supplying Nook e-readers within an outpatient oncology infusion center. 10 certified pre-owned Nook HD + e-readers were purchased through the local Barnes & Noble (BN) storefront. BN content management option was selected. With this option BN pushes the same content to all e-readers upon request of the customer. Content cannot be added or deleted by individual users. Individual e-readers can be disabled by BN if lost or stolen. All purchases are invoiced to the institution. The e-readers were stocked with book titles on a variety of cancer topics, inspirational reading, games and apps. Wifi was available for use on the devices. Earbuds were purchased in bulk to be given away as needed. Clear screen protectors were purchased in bulk to be replaced as needed. 7 of the 10 devices were housed in the outpatient oncology infusion center and stored in a plastic container with a handle for easy transport and storage. The check-out procedure was simply signing a name, date, and time on a sign-out sheet. This sign-out sheet also served to track usage.

Results: 5 uses recorded during the first 6 weeks. Infusion Center staff reported being very busy, a lack of time to direct patients to devices, and forgetting the devices were available. Following these first results, the community health librarian created signage to be posted within the infusion center advertising the devices and reached out to the clinic and nurse managers to assist in further encouraging staff to make devices available.

Conclusions: Usage of the e-readers to date has not been at the levels anticipated and several logistical issues have also made it difficult to get the project running. A needs assessment was not conducted prior to developing the idea and applying for the grant. Results to date demonstrate the benefits of conducting such an assessment before implementing a project. Plans remain to expand the project to a women's oncology clinic, pediatric oncology clinic, and inpatient oncology unit in the hospital.



**7. Stat Talk: From Hospital Medical Library to Learning Hub: Re-branding to save the library.** Pamella Z. Asquith, Intermountain Healthcare, St George, Utah.

In early 2013, after about 2 years of planning, the Intermountain Healthcare Hospital Medical Library in St George, Utah (services and resources for clinicians only and located in a corner of the basement away from patient areas) was rebranded as the LiVe Well Learning Hub/ Community Health Information Center, and relocated in a very public & well trafficked space. The Librarian took on a new role as Community Health Educator after getting the MLA-CHIS Level 2 certification and a certificate in Clinical Coaching from the Dartmouth Institute. The Librarian also took over the Physician Referral Help Line to connect community members in need of a Primary Care Physician or Specialist with a provider. Because the clinical resource collection transitioned to 99% electronic (maintained by Intermountain Healthcare's Corporate Headquarters, not locally), the Librarian no longer had to maintain and circulate print resources; this freed up time for the other duties. Volunteers co-supervised by the Hospital Volunteer Department and the Librarian assist with certain functions. An Internship Program is planned with the local state university whereby students will be trained to help guide the Public to credible online information about health and wellness.

The Learning Hub is a lively place with activities such as wellness classes by clinicians, support groups and a weekly public lecture series with presenters from the Alzheimer's Association, the National Alliance for Mental Illness, the SW Utah Public Health Department, and in-house presenters in conjunction with services offered by the Hospital. The Learning Hub also sponsors Yoga sessions and has future plans for Tai Chi and possibly weekly distribution of fresh fruit and vegetables to promote healthy eating habits. There is an ergonomically-designed treadmill work station where employees can come and do routine work while walking on the treadmill. There are educational displays such as small bottles containing the amounts of sugar in soft drinks and the amount of fat in fast food meals. Medical models such as a skeleton, heart, brain, stomach, kidney & eye attract passersby to enter the space. The Learning Hub has been so well-received that there are plans for a Satellite in another well-trafficked location.

The Learning Hub Concept is a way to save Hospital Libraries from being closed completely. New duties, functions and activities have proven very enjoyable to the Librarian. Vision, planning and support from Administration are crucial but there will be surprises and a need for improvisation as the project unfolds.

**8. Stat Talk: Essential threshold concepts: Teaching scholarship is a conversation.** Xan Goodman, University of Nevada, Las Vegas.

This stat talk will describe implementing threshold concept one, scholarship is a conversation, as part of a one-shot instruction session to a group of first year students enrolled in a health sciences course. I will discuss how a lecture on the information cycle utilized threshold concept pedagogy to teach the information literacy concept that scholarship is conversation. I will also discuss how in class assessment, student assessment and guided practice were implemented within the framework of threshold concepts.



## Paper session 3B, Wednesday, October 15<sup>th</sup>, 10:30 am- noon

Moderator: Margaret Peloquin. Eastview Campus Library, Austin Community College, Austin, TX.

**1. Convergence and Collaboration in the Year of the Affordable Care Act (ACA): The UT Health Science Center Libraries' Outreach to Communities in South Texas and the Story of Laredo.** Pegeen A. Seger, MA, MLIS. Dolph Briscoe Jr. Library, the University of Texas Health Science Center at San Antonio.

**Objective:** It all started with such good intentions. In August of 2013, the UT Health Science Center Libraries began planning for the ACA and the beginning enrollment starting on October 1st. Our objective was to have our librarians and library staff ready to provide ACA information through the Briscoe Library in San Antonio, the Ramirez Library in Harlingen, and the Regional Campus Library in Laredo.

**Methods:** We started by gathering information and trying to decide on the role we would assume. We kept up (mostly) with the many great resources coming out from the NN/LM SCR. We ultimately reached out to community partners as ACA Champions for Coverage.

**Results:** We found, however, that our opportunities varied in each of our three geographic areas depending on a number of factors. (Enrollment and ACA controversy in Texas proved to be complicated.) Despite our initial expectations, we ended up with different levels of involvement and with different types of community and campus partners. In Laredo, we experienced the most direct contact with local community enrollment due to the level of outreach through the Mid Rio Grande Valley (MRGV) Area Health Education Center (AHEC) and the Congressional office of Representative Henry Cuellar.

**Conclusions:** Just as all politics are local, we found that the role played by each of our Libraries was determined by the convergence of local conditions. Not surprisingly, a lesson learned was to plan as thoroughly as you can and then capitalize on the opportunities that arise through the powers of collaboration.

**2. Converging Spaces with Innovation Initiatives Leads to Beneficial Collaboration.** Tallie Casucci, MLIS; Jean P. Shipman, MSLS, AHIP, FMLA; John T. Langell, MD, PhD, MPh, MBA; Roger Altizer, PhD; Christy Jarvis, MLIS; Nancy T. Lombardo, MLS, AHIP; Jeanne Le Ber, MLIS, AHIP; Erin Wimmer, MLIS, MA, AHIP; Megan McIntyre. University of Utah.

**Objective:** This presentation illustrates the contributions librarians have made to a university's innovation initiatives, such as medical devices, games, and apps. The results of a collaborative partnership between a health sciences library and an innovation center will be shared (e.g. digital repository of intellectual content), along with lessons learned from converting part of a library into an innovation accelerator.

**Methods:** A needs assessment determined desired components of the innovation accelerator. Stakeholder meetings identified types of space, equipment, and furniture needed. For the digital repository, meetings specified desired metadata for describing products and their contributors. A strategy for collecting identified metadata and the project's associated documentation was



developed. Various mechanisms of support for competitive events and product development were offered in response to requests by leaders and teams.

Results: This partnership fostered the inclusion of evidence-based knowledge of the created devices, games, and apps and preservation of idea development documents, intellectual property contributions, and associated visuals. Other benefits included locating a receptive home for one of the university's newer departments, connecting local industry to fresh ideas and student ingenuity, providing students with access to experts, and recognizing financial gains for the health system.

Conclusions: Librarians have become relevant to an even broader constituency of users and have learned new subject areas. As more universities implement innovation as a critical mission, it is important for librarians to accept new opportunities and challenges associated with supporting creativity. Library buildings can be revitalized to host innovative personnel, as knowledge creation is a common theme between innovation and information.

**3. Creating a Culture of Compliance through Interprofessional & Interagency Collaborations. Jessie Casella, MLIS; Susan Steelman, MLIS. University of Arkansas for Medical Sciences.**

Objective: To share lessons learned and review evolving clarifications from NIH regarding problematic citations and to describe the librarians' activities and impact on compliance with the NIH Public Access Policy.

Methods: When the NIH Public Access Policy became mandatory in April, 2008, the authors' Library offered assistance in publicizing the Policy, but the campus Office of Research had primary responsibility for implementation and compliance. In January 2010, nationwide compliance rates for journal deposits in PMC averaged about 65%. At that time, the authors' library, with support of the Vice Chancellor of Research Office, joined the NIH pilot project to track and improve compliance. Since then the authors have worked with various departments and colleges on campus to create a culture of compliance regarding the policy. Interprofessional collaborations have been utilized as the authors have assisted researchers in understanding the nuances of the policy and obtaining compliance. The authors identified librarian impact on campus compliance by analyzing grant dollar amounts tied to the non-compliant articles.

Results: The Library's leadership for compliance has resulted in a current compliance rate of 94%. An analysis of grant dollars impacted will be shared.

Conclusion: This is an ongoing project and the authors' Library has become a converging force and valuable partner to the researchers and the campus grants office. The benefits to the authors and their Library have been numerous including recognition by the campus chancellor and appreciation from NIH/NCBI for their continuing efforts. The authors will share best practices of hard-learned lessons.

**4. Librarians' Success in Collaborating with Nursing Faculty on an eTextbook Project. Alice I. Weber, MLS, AHIP; Erin N. Wimmer, MLIS, MA, AHIP. University of Utah Spencer S. Eccles Health Sciences Library.**

Objective: A convergence of needs of a PhD nursing distance class led to collaboration between nursing faculty and librarians. Challenges included: no appropriate extant textbook; need for an



iterative method for students to process their research on interacting with diverse and vulnerable populations; need for a permanent and accessible platform for newly created knowledge. Authors will share experiences, successes, and challenges.

Methods: Librarians collaborated with the instructor of the course to create an eTextbook. Drawing on librarians' expertise in digital and scholarly publishing, a platform was selected which addressed the needs for permanence, editing, peer review, publication, and use in future sections of the course. Copyright concerns were identified and addressed. Education services were directed to both the instructor and the students including: sharing appropriate platforms, databases, and resources; proactively identifying solutions to potential problems, providing in-class orientation, sharing links to related resources, and solving access-related issues.

Results: Librarians' contributions improved instructor and student experiences, and were essential to the completion of the objectives through: creation of a lasting and meaningful eTextbook available for future sections of the class, opportunity for student publication, and a role model for future collaborations between faculty and librarians.

Conclusions: This was an excellent experience for all involved. There are plans to expand this model.

**5. Stat Talk: An Embedded Librarian Program, Seven Years On.** Gary Freiburger; Sandra Kramer; Jennifer Martine; Annabelle Nuñez; Mari Stoddard. Arizona Health Sciences Library.

Purpose: To report on the development, progress and results of a program to house librarians in the colleges on an academic health sciences campus

Setting/Participants/Resources: The Arizona Health Sciences Library serves the Colleges of Medicine, Nursing, Pharmacy and Public Health as well as the main campus of the University of Arizona. In 2007 some librarians were relocated to offices in three of the colleges.

Brief Description: Four librarians have offices in three of the health sciences colleges. This embedded model has created the opportunity for more interaction between librarians, faculty members and students.

Results/Outcome: Faculty members and students are receiving more in-depth and targeted assistance because of this program. Faculty members have a better understanding of the variety of library services and a better appreciation of the librarians' knowledgebase. Library sessions are now a formal part of multiple classes in the colleges. Library online modules are now included in the class management systems in the colleges. Students are receiving customized help instead of a cursory orientation at the beginning of the semester. Librarians are being written into grants and are co-authors with faculty members on articles.

Evaluation Method: Evaluation has been primarily anecdotal. A quantitative assessment is in the planning stages.



6. Stat Talk: Changing Role of Librarians: What I Did Between Jobs. Lisa A. Marks, MLS, AHIP. Mayo Clinic in Arizona, Scottsdale, AZ.

This 5-minute Stat Talk will discuss what happened between jobs using medical librarian skills including some consulting work with a CME (Continuing Medical Education) provider, an EBP (Evidence Based Practice) presentation to a group of PhD PT/OT students as well as some work in a Public Library system all while looking and applying for a new position.

## **Paper session 4A, Wednesday, October 15<sup>th</sup>, 1:30-2:35 pm**

Moderator: Claire Sharifi, MLIS. University of San Francisco, San Francisco, CA.

1. Deep Commitment to Collaboration for Positive Change: A Case Study of an Academic Health Sciences Library's Engagement in a Community-Campus Partnership. Gerald J. Perry, MLS, AHIP. University of Colorado Health Sciences Library.

Purpose: This case study describes a “deep collaboration” between an academic health sciences campus and a highly diverse collation of neighboring community-based organizations, highlighting the role of the campus’ library. The overarching goal of the collaboration is to develop long-term partnerships for illness prevention, health improvement and economic development, with the partnership serving as a hub for building relationships between the campus and community groups.

Setting/Participants/Resources: The Health Sciences Library at the University of Colorado, whose Director serves on the Authority Board for the Community-Campus Partnership. Community-based organizations engaged in the partnership include city agencies, neighborhood health and development organizations. Campus partners include a wellness center, schools of public health, pharmacy, nursing, medicine, the campus’ translational sciences program, and the Library.

Brief Description: This presentation focuses on the rationale and value proposition for the Library in deeply engaging in the partnership, and includes an over-view of how the collaboration was established, how it is governed, the nature of the Library’s engagement, recent and anticipated outcomes resulting from the Library’s involvement, and how libraries (and their staff) can become involved in meaningful, transformational change in their communities targeting health disparities, workforce development and overall economic well-being.

2. Digital Libraries for Public Health (PHIA): An Enterprise Approach to Collaboration, Data Collection, and Resource Management. Karen H. Dahlen, MLS; Elaine Martin, Director. NN/LM, New England Region.

Introduction/Objective: State Public Health Departments (PHDs) continue to lose staff, budget, and libraries. Many remain disconnected to licensed, full-text information needed to improve knowledge and skills related to campaigns, research, and practice. The intent of this project is to identify core, useful resources to facilitate evidence-based practice yet comply with national public health initiatives and competencies. Collecting and managing information from each and all PHDs in the study is tantamount to an improved, sustainable business model.



Methods: Preliminary meetings are held to validate project interest, provide insight to the public health culture, and identify core team. Digital Library templates are distributed, moved to the intranet and tested. Resources, accessible through IP authentication, reside on each intranet and are immediately accessible to the public health workforce. Training begins with an understanding of why evidence is important to practice, demonstrates relationship of resources to work initiative, and outlines alternative article delivery provided by library partners. Trainers include vendors, PHD experts, and experienced librarians representing their respective state and the NN/NLM library network. Data and Information, gathered from each and all PHDs, comprise the basis for evaluation.

Results: Eighteen (18) digital libraries now provide access to PubMed (via linkout) and to full-text licensed resources. Digital libraries provide resource content and functionality related to public health work initiatives: from infectious disease, lab, and legal decisions to specific health care interventions. More than 40 trainings have been held for 770 diversified public health professionals using expertise of 25 librarians. An enterprise approach to licensing, training, and resource management is cost efficient, reinforces core content and provides data related to interest and costs. E-books, full-text journals, and databases of primary interest to public health have been identified. IoM reports are searchable with e-texts through STAT!Ref; systematic reviews are available through Cochrane; and CLSI provides standards for laboratorians. High use e-journals include: Clinical Infectious Disease, Pediatrics, Maternal & Child Health, American Journal of Epidemiology, Foodborne Pathogens and Schizophrenia Bulletin.

Conclusion: Digital libraries reside on PHD intranets using existing technology and designed to have the look and feel of existing pages promoting a feeling of ownership. On-site spokesperson and team provide coordination of activities related to the project. Cultural insight is being achieved related to work, resource need, and organizational change. Onsite training provides hands-on experience in search and save techniques and reinforces national and state public health priorities. Library partners support instruction and provide alternative article delivery. Data model includes minutes of "Introductory Meetings," baseline data, resource metrics, pre-post training surveys, and results of year-end interviews/focus group sessions. Ongoing evaluation reveals that library resources are used to improve workforce initiatives, knowledge, and practice. Collaborations with two NN/LM regional programs provide additional project support.

**3. You Are Important: An Intra-professional project to meet the needs of staff, parents and kids visiting an MICU.** Jackie Davis, MLIS, Sharp HealthCare.

Objective: As a Planetree designated hospital with a commitment to patient family centered care, Sharp Memorial in San Diego realized that there was a gap in support services for visiting children. Children who came to see their critically ill loved ones in the Medical Intensive Care Unit (MICU) were often confused by the specialized equipment that they saw & heard in the unit. Additionally, they often were frightened when first coming into the room of their loved one and seeing them hooked up to a variety of very unfamiliar machinery. There were no activities or structures for these young people and it would not be unusual to see children running down the hall, playing on the floor of the room and making loud noise. Many of the clinical staff did not welcome the disruptive, and often unsafe, visits from children and did not feel that they were adequately prepared to address their needs.

Methods: In an effort to address these needs, the clinical social worker initiated a literature review on children visiting in the ICU. The consensus from the research concluded that it was beneficial for



children to visit their loved ones in MICU. However, these same authors wrote that preparation for the visits was critical for a successful experience for the patients, youngsters, parents and staff. With the goal of creating a useful resource, an intra-professional team consisting of the consumer health librarian, the clinical social worker and her intern, as well as a hospital volunteer artist from the “Arts for Healing” program, developed an interactive children’s booklet called You Are Welcome. This children’s booklet was designed to be interactive and not just for reading. The pages included simple explanations for the unit itself; the people & machinery that they might see; the importance of hand-washing & speaking quietly while visiting; and also opportunities to color, draw pictures and write a letter to the patient.

Results: A pre- and post-survey was given to MICU staff to indicate whether the You Are Important booklet would meet the need for introducing children to the unit.

In the pre-survey, 28% felt either well-equipped and/or satisfied with the resources they then had to prepare children for visiting their loved one in the MICU. In contrast, the post-survey, taken after the first 90 days of using the booklet, established that 86% of the staff were more positive and felt adequately equipped having the booklet as a resource.

Conclusions: The activity booklet You Are Welcome, was created by an informed intra-professional team that brought varying perspectives from their respective disciplines to the project. The booklet provided parents a constructive way to prepare children for their visit to the MICU. The booklet was tailored to offer positive and practical activities geared toward visiting youngsters. Furthermore, the booklet served the staff as a constructive resource in order to welcome and guide children and thus be able to welcome them into the unit and widen the scope of patient-family centered care offered at the hospital.

**4. Stat Talk: Information Security for Librarians.** Jason Bengtson, MLIS, MA, University of Oklahoma Health Sciences Center; Jon Goodell, MA, AHIP, Houston Academy of Medicine - Texas Medical Center Library.

Background: Digital and online security provide unique challenges for information professionals. This lightning session will provide a brief overview of the information security environment in libraries.

Methods: This lightning session is an overview of information security issues in libraries.

Results: Although patron borrowing records and electronic resource passwords are not as monetarily valuable of a target as banking or medical records, libraries have an obligation to protect sensitive information for their patrons and to uphold electronic licensing agreements.

Conclusions: Greater awareness of vulnerabilities in online catalog settings which may automatically retain check out records, EZproxy supported authentication, and weaknesses in the Transport Security Layer model used for online security will assist librarians in safeguarding resources and patron information.



## Paper session 4B, Wednesday, October 15<sup>th</sup>, 1:30-2:35 pm

Moderator: Laura Cullerton, MLIS, AHIP. Platt College, Aurora, CO.

### 1. Moqups: An easy way to create and share mockups online without having to know code. Vivienne L. Houghton, MLIS. Health Sciences Library, University of Colorado Anschutz Medical Campus.

Moqups (<https://moqups.com/>) is an online tool for creating mockups, aka wireframes or prototypes, without having to know code. This is a huge timesaver for web librarians and developers since they do not have to dedicate the time to coding concept pages on test servers.

Because Moqups is cloud-based, you can access your projects from anywhere. You can also choose to make your projects public or private. Because each project has its own URL, you can easily share your designs with reviewers. Reviewers can even add comments.

Moqups has three features that enable you to quickly and easily build prototypes:

1. You can choose from a selection of user interface objects called “stencils”, e.g. buttons, text boxes, scroll bars, etc., that you can drag and drop onto a page. The stencils are editable and customizable to suit your design.
2. You can upload images such as screenshots and photos and drag and drop them onto a page as part of your design.
3. You can have multiple pages per project. For example, if you are trying to compare three versions of a new feature on your homepage, the three pages can be part of one project with one URL. The reviewer can then flip from one page to the next with one click.

I have used Moqups to present "before and after" designs to both our Web Working Group and the staff. Most recently, I used Moqups to ask the staff to vote on the location of a new feature on the library's homepage. The staff was able to easily compare features and I was able to quickly create iterations and make changes to the design.

### 2. Flying Blind: Lessons Learned from Migrating to LibGuides Version 2. Peace Ossom Williamson, MLS, MS, AHIP. University of Texas at Arlington.

**Objective:** This paper will describe the methods and efforts of the UT Arlington liaison librarians' migration of all LibGuide content to Springshare's version two (v2) during the summer. With over 600 guides pre-migration, a small group within the library instituted a schedule for a three-month transition, including all preparation and cleanup.

**Method:** This group, the Teaching and Learning Advisory Group (TLAG) then oversaw the migration of the first Libguides instance to Springshare's new Libguides Platform. TLAG provides consensus-based recommendations pertaining to user education services from library liaisons, and, because LibGuides are seen as a teaching tool, TLAG facilitated the necessary updates and improvements to the guides post-migration. Some steps included running reports of unsupported boxes, manually deleting guides stipulated on liaisons' lists, replacing the database A-Z list and tagging subjects for each database. Steps also included replacing boxes' code and utilizing assets for keeping up with databases, links, tutorials, widgets, and documents across guides. Guide owners were presented



with regular updates through emails and recorded hands-on workshops, and all of the content was organized onto a Migration LibGuide at <http://libguides.uta.edu/migration>.

Results: Although Springshare was also working to complete many features of the new platform and the tasks of updating tabbed boxes and updating links were cumbersome as librarians also worked on a number of library strategic initiatives, LibGuides v2 were able to go live on August 3, 2014. The majority of guides are up-to-date with new requirements and updates needed for seamless use and for uniformity with the other guides. Ultimately, a large number of outdated guides had been either deleted or updated; therefore, the migration also improved the overall quality of the LibGuides being offered by UT Arlington Libraries.

Conclusion: Migrating to a new platform was difficult, as the platform provider was still working on many of the features. The librarians learned to figure out steps on their own as the Springshare LibGuide with instructions had only the preparation stage portion completed. Ultimately, Springshare has been quick to add more features and respond to user input. These features make the managing and updating of LibGuides quicker and easier and can lead to more useful guides for users.

**3. Transforming an Academic Medical Center Library into a Digital Library and Learning Center. Kelly R Gonzalez, MSIS, MBA, AHIP. University of Texas Southwestern Medical Center.**

Purpose: This paper will explore the removal of a 265,000 volume collection to the University of Texas/Texas A&M Joint Library Facility to create the core medical library collection for UT and A&M affiliated universities while maintaining and building an extensive electronic resource collection and reallocating physical spaces for student learning activities.

Setting/Participants/Resources: Health Sciences Digital Library and Learning Center of UT Southwestern Medical Center (UTSW), formed a partnership with the University of Texas/Texas A&M Joint Library Facility (JLF) as well as with the Senior Associate Dean for Strategic Development for UT Southwestern Medical School.

Brief Description: This project was partially funded through the University of Texas System Reserve Allocation for Library, Equipment, Repair and Rehabilitation (LERR) in fiscal year 2014. This funding allowed for options to be considered for the removal of the Library's print collection. This paper describes the planning process, challenges encountered, and collaboration and partnerships formed to transform the Library into a digital library and learning center.

Results/Outcome: The partnerships that formed between the UTSW Health Sciences Digital Library and Learning Center, JLF, and UTSW Medical School improved access to both print and electronic resources as well as providing dedicated learning spaces for UTSW.

**4. Stat Talk: Systematic Reviews as a Service: Lessons Learned. Lynn Kysh; Robert E. Johnson. Norris Medical Library, University of Southern California.**

An overview of how an academic medical library established a systematic review consultation service, formalizing the process in which librarians work with researchers to create systematic reviews. Two librarians act as primary contacts. The process includes a preliminary request form and an in-person worksheet establishing a working agreement between librarians and researchers.



Formalizing this service exposed librarians to deficiencies needing attention: describing the differences between systematic reviews and literature reviews to researchers, generating a comprehensive search for researchers, establishing a fee-based service model to access Embase, effectively communicating with researchers, and the benefits of a structured process over makeshift solutions.

## **Trends in Technology Panel, Thursday, October 16<sup>th</sup>, 10:30 am-12:15 pm**

Moderator: Lynne Fox, AMLS, MA, AHIP. University of Colorado Denver Health Sciences Libraries.

### **1. Zombie Emergency!: A Tool To Increase Engagement With Health Information Sources Through Gamification.** Jason Bengtson, MLIS, MA. University of Oklahoma.

Background: Compared to other presenters, Health Sciences Libraries often have difficulty attracting visitors to their booths at health fairs. Visitors usually prefer booths offering free testing, or the opportunity to be exposed to interesting devices. Recognizing this fact, the University of Oklahoma's Robert M Bird Health Sciences Library included a novel addition to their 2014 NN/LM Outreach grant application; equipment to be used for running a game designed by its Head of Computing. This game was intended to reinforce improved information seeking habits, while entertaining visitors to the library's booth at health fairs and other events. Tapping into the meme of zombies, which has already been used as a promotional tool by the CDC, *Zombie Emergency!* promotes NLM resources by making it difficult to win the game without users consulting an information pane containing faux Medline Plus and PubMed abstracts.

Methods: The game was built using client-side web technologies, including HTML5, CSS3, Javascript, AJAX, JSON, jQuery and jQuery UI. A paper questionnaire was generated for purposes of assessment at outreach venues. After conducting training on the game with reference faculty, the Head of Computing made changes to the game to incorporate their suggestions.

Results: *Zombie Emergency!* provides a platform which may hold great promise for wider deployment and expanded development. Created under a Creative Commons Attribution-NonCommerical-ShareAlike 3.0 Unported License, *Zombie Emergency!* may be used and built upon by other institutions. This source code is available upon request. Collection of statistics upon deployment will help Bird Library ascertain the effectiveness of the game as an education and engagement strategy.

Conclusions: Assessment needs to be conducted to ascertain the effectiveness of this approach. Additionally, refactoring of the source code needs to take place at regular intervals to optimize the game and incorporate improvements based upon user and presenter feedback. Bird Library is in the process of considering other ways in which the game may be utilized.



**2. Guide on the Side: Engaging Students with Interactive Tutorials.** Ben Harnke, MLIS; Vivienne Houghton, MLIS. University of Colorado Health Sciences Library.

Guide on the Side (GotS) is an award-winning, open-source tutorial software developed by the University of Arizona's Libraries. GotS is based on the principles of authentic and active learning.

GotS allows librarians to quickly and easily create web-based interactive tutorials without having to know HTML or coding. GotS allows users to easily follow steps outlined on the left side of a computer screen (the guide on the side) while simultaneously interacting with a live website on the right.

The advantages of GotS over traditional video and static screenshot tutorials are:

- **Interactivity and engagement:** Users can directly interact with the live website while following the tutorial. This increases student engagement and learning.
- **Ease of updating:** Since the tutorials feature live websites, unlike static video tutorials and screenshots, GotS is as easy to update as a Word document.
- **Open-source:** GotS is open-source and free. Users are free to participate in community development of the software.

We are currently using GotS to modify our K-12 instructional material and will gradually convert our health science video tutorials to this interactive format. Since our implementation of Guide on the Side, we have seen an increase in student engagement. GotS has allowed us to move away from the standard lecture format to one where students can take control of their own learning.

GotS also allows instructors to ask open-ended and multiple-choice questions with the option of a final quiz with results emailed to a central email address. Instructors can gather formative and summative assessment information with these options.

**3. The Big Crunch: Reference Services Converge with New Technology Infrastructure to Support Traditional, Modern and Future Patron Encounters.** John D Jones Jr, MSIS, Librarian; Ruby Nugent, Education & Reference Support Specialist; Hanna Schmillen, Graduate Intern; Mandi King, Graduate Intern. Health Sciences Library | University of Colorado Anschutz Medical Campus.

To present an overview of the Springshare LibAnswers software adopted in 2013 to combine our different reference modalities (email, chat, texting, phone calls, walk-ins, consultations and search requests) into a more cohesive singularity to better track and distribute questions and request. Capturing statistics via the integrated product should make reviewing and reporting statistics easier and quicker for on the fly requests. Better aggregated statistics should improve our ability to understand our users, user's needs and ways to improve our services.

With this new technology we can login from anywhere on the internet to provide email, texting & chat support as well as document and review phone calls and walk-ins. The software provides a basic form for reference/consultation requests but almost any outside form (or clandestine emails) can be forwarded into the system to be tracked, answered and captured statistically. The software also provides for a Frequently Asked Questions database where you can easily create original content or reuse actual patron questions to populate customized answers. The system provides for multiple chat queues or personalized individual chat boxes (like office hours chats). The On-Call



Librarian can triage requests to appropriate departments and experts but also learn from their answers for future questions.

Login/password controlled staff-side consoles and easily generated statistics will be demonstrated. Positives and potential negatives will be presented. How to integrate more across departmental lines will be considered. Highlights of how the product might be used across departments in the hospital setting or departments and schools in the academic setting will be revealed.

**4. How to engage users by harnessing technology and pop culture.** Monica L Rogers, MLIS. National Network of Libraries of Medicine, MidContinental Region.

The use of videos and screen-capture technology is a growing trend for library video tutorials and other strictly educational uses. However, even as many health sciences libraries have social media pages, very rarely do they offer videos, gifs or other moving and engaging media. As social media use has solidified from a trend into an accepted method for communicating health information, libraries continue to underutilize technology and social media channels to engage their patrons. Optimized use of these two technologies would employ use of screen-capture software to create health-related videos that can then be shared over social media channels. These videos can be created from popular TV shows and be used for health education and promoting libraries. This can impact library user engagement, as well as offer a way to increase health literacy through the use of popular culture.

Fair use and copyright will be briefly addressed. Screen-capture software as well as an avenue for hosting content will be demonstrated.

**5. Literature Surveillance Tools.** Maureen (Molly) Knapp, MA, AHIP. Tulane University.

In the olden days, one tracked developments in professional research by browsing the current tables of contents in the periodicals print stacks. As print subscriptions and library space dwindle, how does the modern health professional keep up? One solution is a table of contents monitoring app for smartphone or tablet. Instead of receiving 15 monthly emails from 15 different academic journals, or setting up a clumsy RSS feed to be forgotten or ignored, health professionals can now download an app and monitor their favorite academic journals on their mobile device. A number of these literature surveillance tools have recently emerged on the smartphone market, including Qx Read, DocPhin, DocWise and Browzine. Using an iPad with preloaded apps, this fast-paced presentation will walk through each one, discussing the benefits, challenges, and options available. Major benefits of literature surveillance apps include: notifications when new content is available, the ability to view, download and save subscription research articles on a mobile device, bibliographic management import options, keyword search features, open access content, simple authentication methods, and a free or low cost. Participants will leave the presentation with an idea of how these apps display and function on a tablet, device availability (various apps are available for Android, iOS, and Kindle Fire) and ultimately, a better answer the question, “When the print journals go away, how do I keep up?”

**6. Tools for Data Analysis and Visualization.** Jin Wu, MSIS. University of Southern California - Norris Medical Library.

Big data is coming to our world faster than we expect. Big data affects medical libraries in many



ways. Librarians can use big data techniques to analyze large data sets and help faculty incorporate big data into their research. With the explosion of big data, data analytic tools have been developed to cope with the challenge of managing and analyzing data. Data analysis tools are typically used to sort through data in order to identify patterns and establish relationships. Just as we've seen the shift to "DIY" data collection platforms, such as Google Analytics, we're also seeing the development of a whole new class of self-service data exploration and visualization tools. These are not necessarily replacements for SPSS, SAS and other traditional analytical suites. However, in many ways these newer entrants, such as Many Eyes, Tableau Public, etc., enable users who aren't statisticians or data geeks to do data analysis. For example, with Many Eyes, users just need to copy and paste plain text data into the web interface and press a button to visualize it. These tools are less expensive (in many cases free), more flexible, easier to use, and are built with the needs of a variety of users in mind.

These tools should have a large impact on libraries. As one small example, in a recent study, my colleagues and I surveyed medical librarians across the nation to learn more about the state of web-based discovery tool. We used Tableau (<http://www.tableausoftware.com/>) to help us created a geomap of the participants to show the geographic distribution of the survey respondents. In a larger context, medical librarians have been gathering data from collections, circulation, gate counts, library instruction, etc. Some massive data sets, which previously were out of reach because of software and hardware constraints, can now be more easily visualized and analyzed. Librarians should be gathering data to help make data-driven decisions about collection development, updating public spaces, or tracking use of library materials through the learning management system, and these new data tools provide medical librarians with new opportunities for analyzing the data.

**7. Zaption: An Online Tool for the Flipped Classroom.** Lynn Kysh, MLIS. University of Southern California - Norris Medical Library.

Zaption is a tool that can potentially play a role in libraries that seek to implement a flipped classroom curriculum. The flipped classroom format requires students to complete individual study and introduction to new material outside the classroom, thereby freeing in class time to more engaging group work and review. This model can be helpful by allowing librarians to allow for more monitored hands-on practice rather than one-sided lectures introducing library patrons to information literacy concepts.

Zaption allows users to upload their own video content or pull video content from other video hosting websites (such as YouTube, National Geographic, PBS, etc.). The selected video content then becomes a "tour" in Zaption. Instructors are able to make basic edits to the video, including cuts. Slides of text and images can then be added to the video wherever the instructor finds it to be appropriate.

The most powerful feature of Zaption is the ability to make video content more interactive. The instructor is able to add elements that pause the video and require the viewer to respond. The format of these elements include open, numerical, multiple choice question, check box and drawn responses. Instructors can also include a discussion feature to the tour. Answers to elements and analytics are then captured and are made available to the instructor. Analytics include viewers by date, average viewing time, completed questions, number of unique users, and average number of skips forwards and backwards, and rankings of the tour. Answers to elements are available to



download in CSV format. This data potentially allows for reflection on whether or not students have learned the information presented and how best to move forward with the in person portion of the flipped classroom curriculum.

Zaption is available in both a free and subscription version. The subscription version of the site allows for more features and more tours to be created, managed and saved. A series of examples are available on their homepage: <http://www.zaption.com/showcase>.

