



## Poster titles in alphabetical order

### Titles

- A Medical Librarian's Response to Representations of Race and Skin Tone in Medical Textbook Imagery
- AGMB goes to EAHIL
- ALIA/HLA Health Librarianship Competencies Review
- An instrument for evaluating searches for systematic reviews: The SRS-checklist
- Benchmarking the participation of academic librarians in Evidence-based medicine (EBM) instruction, in Undergraduate medical education (UME) programs in Canada
- Data stewardship pilot project in a Life Sciences laboratory
- Developing an ontology centered on the PICO model to support the linkage of Cochrane evidence to promote its usability and discoverability
- EAHIL makes a difference?
- Embedded in the promotion of evidence-based healthcare : experiences of information specialists involved in Joanna Briggs Institute collaborative centres
- Embedding librarian skills in a Patient Education & Empowerment research project, from design to evaluation: a complete guide
- Enhancing the impact of institutional research results
- Evaluating room booking systems for a new medical library
- Evaluation of the Teaching Course to Create Customized Medical Materials with 3D Anatomical Database for Clinicians and Faculty
- Examining the Archives – using historical Coroner's Inquest Records to develop a new model for teaching library and archive skills
- From discovery to veterinary practice: how to create intelligent solutions to find evidence on animal health in Finland
- From donations to distribution network: A story of organic growth of user and community engagement
- History matters: storytelling at the Library of Medicine in Lausanne
- How Do We Teach Clinicians Where the Resources for Best Evidence Are?
- Information support for specialists in health planning, management and economics
- Is research data management our future or a fad? An examination of job responsibilities in current health librarian positions
- Lean Library: Your library in a browser. Experiences from the University Medical Center Groningen and the University of Groningen
- Librarian support of evidence based practice for non-affiliated veterinarians using freely available resources
- Lithuanian Academic Electronic Library as a significant part of scholarly communication
- Mental Health Bridges: An interdisciplinary project of librarians and mental health professionals building an online mental health literacy tool
- Multidisciplinary Evidence-based practice course
- Path to leadership: The career journey of academic health sciences library directors
- Paving the road to success: leadership skills in an interprofessional landscape
- Preparing Health Sciences Students for Real World Information Gathering Using Teams, Cases, and Critical Pedagogy.
- Quality support during the research cycle
- Reading for resilience: Bibliotherapy lights the road to recovery for mental health patients
- Research Data Management Librarian Academy
- Searchathon: a gamified, team-based on-site teaching format on literature searching for medical students
- Seeking Best Practices in Teaching Evidence-Based Medicine: A Journey of Sharing Toward Acting
- Study guidance at the University Library Basel and for medical studies
- Survey on health information literacy in a cohort of elderly people in Pescara (IT) in 2017. Are they fully aware of the implications behind Internet search?
- Systematic reviews: Why don't researchers consider to include a medical librarian and would this collaboration have made things better?
- The birth of CASPIR – Critical Appraisal Skills Program Ireland
- Use of Academic Social Networks Sites by Medical Staff in a University Hospital: new competencies for a Medical Library
- Which databases are worth searching for systematic reviews?
- Why are systematic reviews that fail to meet PRISMA reporting requirements still being published?

### Authors

- Vanessa Kitchin
- Iris Reimann, Martina Semmler-Schmetz
- Ann Ritchie
- Pernille Skou Gaardsted, Henrik Laursen, et al.
- Zahra Premji, Kaitlin Fuller, Rebecca Raworth
- Fantin Reichler, Eliane Blumer
- Anna Last, Deirdre Beecher, Chris Mavergames, et al.
- Tiina Heino, Ana Maria Ferrinho, Katri Larmo
- Cécile Jaques, Blanche Kiszio
- Mauro Mazzocut, Chiara Cipolat Mis, Emanuela Ferrarin et al.
- Edit Gorogh, Judit Fazekas-Paragh, Gyongyi Karacsony
- Jérôme Zbinden, Alexandre Racine
- Hui-Chin Chang, Tzu-Heng Chiu, Kuo-Shu Huang, et al.
- Kirsten Mulrennan, Sinéad Keogh, Ciara Breathnach
- Raisa Iivonen, Gunilla Widén
- Christopher Michael O'Malley
- Anne Morin, Sylvie Godel, Emmanuelle Mack
- Sandra Kendall, Michelle Ryu, Chris Walsh
- Tatyana Kaigorodova, Irina Kriukova
- Glyneva Bradley-Ridout
- Robin Ottjes
- Heather K Moberly, Esther E Carrigan
- Daiva Jurksaitiene
- Leonard Levin, Zlatina Kostova, Elaine Martin, et al.
- Kirsten A. Ziesemer, Gertrud D. van Stralen, et al.
- Ricky Fought, Mitsunori Misawa
- Nicole Capdarest-Arest, Jamie Gray
- Margaret Henderson
- Regina Küfner Lein, Hilde Wedvich, Gunhild Helene et al.
- Sandy Iverson, Carolyn Ziegler, Sharon Bailey
- Jean P. Shipman, Elaine Martin
- Michael Wilde, Monika Wechsler, Alain Nordmann
- Catherine Pepper, Louann Cole, Esther Carrigan et al.
- Cornelia Eitel, Jacqueline Huber
- Paola De Castro, Gaetana Cognetti, Ilaria Palazzasi, et al.
- Krizia Tuand, Magdalena Jans, Thomas Vandendriessche et al.
- Isabelle Yvette Delaunois, Siobhan Mary Egan
- Mar Gonzalez-Cantalejo
- Sabine D. Klein, Martina A. Gosteli-Peter
- Shelley de Kock, Steven Duffy, Lisa Stirk, et al.

**Poster**

*Keywords:* medical education; collection development; diversity and inclusion; health sciences librarianship

**A Medical Librarian's Response to Representations of Race and Skin Tone in Medical Textbook Imagery**

**Vanessa Kitchin**

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Introduction: The implications of inherent bias found in medical education images, both in commercially published medical textbooks and open education resources (OER), is an area of emerging concern. It is also an example of content creation and information production as boundaries for health librarianship to cross. In February 2018, I was contacted by the Associate Dean of Medicine at the University of British Columbia regarding the following article:

Louie, P., & Wilkes, R. (2018). Representations of race and skin tone in medical textbook imagery. *Social Science & Medicine*, 202, 38-42. doi:10.1016/j.socscimed.2018.02.023

The study looks at the *Atlas of Human Anatomy* (2014), *Bates' Guide to Physical Examination and History Taking* (2013), *Clinically Oriented Anatomy* (2014), and *Gray's Anatomy for Students* (2015); all curricular titles in UBC's undergraduate medical education program. One striking finding was that imagery of six common cancers for people of colour or dark skin tone was non-existent in these seminal texts.

**Aim:** As a liaison librarian, I am not responsible for vetting core curricular texts but I do have a budget to develop the collection in support of undergraduate medical education. I also have a responsibility to uphold the value of diversity and inclusion in information access. I decided to investigate further on how I, and more broadly the profession of health sciences librarianship, could help remedy and create awareness about the identified lack.

**Method:** I inquired with major publishers and conducted a scan of Canadian and European medical school reading lists to see how and if they spoke to diversity and inclusion, with a focus on indigenous content for Canadian schools. I inquired with publishers via e-mail and telephone and also in person at the Charleston conference. I initially inquired with Wolters Kluwer and Elsevier as they are the publishers of the books the Louie & Wilkes (2018) article reviews. I asked how these publishers intended to respond to the lack of diversity in core medical textbooks and if they could identify titles that may exist to fill the gap.

**Conclusion:** When it comes to core texts, it's valid to say that the vetting is a product of the community of practice and not the library; demands for titles are made on the library based on the history of their use within medical practice. It's in the supplementary materials that librarians get to introduce diversity into the collection, but these remain supplementary materials. One could argue that in participation in activities that highlight reading materials as they relate to other national, and international activities, such as Science Literacy Week, International Women's Day, Black History Month, etc. we try and promote diversity across disciplines in the hopes that this would influence perspectives. The big push needs to come from within the community of practice and from major publishers. While the library has limited influence on what resource a clinical faculty member would like to use in their instruction, it is our duty to advocate for and push publishers (both commercial and open access) to produce inclusive content.



## Poster

Keywords: German Medical Library Association, medical librarianship, professional exchange, cooperation

### AGMB goes to EAHIL

**Iris Reimann<sup>1</sup>, Martina Semmler-Schmetz<sup>2</sup>**

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Introduction: The "Arbeitsgemeinschaft für Medizinisches Bibliothekswesen (AGMB) e.V.", founded in Cologne in 1970, is the association of medical libraries in the German-speaking area. Among the AGMB members are librarians and information professionals from university libraries as well as libraries at hospitals, pharmaceutical companies and medical research institutions.

Aim: The poster aims at presenting the AGMB and its objectives at the EAHIL Workshop in order to promote professional exchange and cooperation between AGMB and EAHIL members.

Method: The poster illustrates the AGMB structure, its objectives and activities.

Results:

Structure:

- 450 members
- General meeting
- Executive Board (voluntary) elected for two years
- Work groups

Objectives:

- Promotion of medical librarianship and information provision
- Support of national and international cooperation between medical libraries and initiation of joint projects
- Furnishing of expert opinions and statements

Activities:

- Annual continued education meetings with company exhibitions
- Publication of GMS – Medizin – Bibliothek – Information, an open access journal focusing on topics concerning medical librarianship and information science
- Competition "Pioneer projects in medical libraries"
- Travel cost subsidies awarded to AGMB members to attend continued education events or conferences

Conclusion:

- AGMB and EAHIL share similar objectives and interests.
- The members of both associations would benefit from a cooperation.



## Poster

Keywords: Health Librarianship, Competencies, Workforce, Education, Professional Development

### **ALIA/HLA Health Librarianship Competencies Review**

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#### Introduction

Health Libraries Australia's (HLA's) eight competencies (<https://www.alia.org.au/sites/default/files/HLA%20Competencies.pdf>) were designed during HLA's Workforce and Education Research Project (ALIA, 2011) as an adaptation of the US Medical Library Association's (MLA's) set of seven (2007). The research recommendations paved the way for a range of education initiatives, including the first steps to develop a systematic approach to education for health librarianship; establishing ALIA's first specialist, competency-based certification framework; and implementing targeted Continuing Professional Development (CPD) courses.

MLA's Competencies were revised in 2017; detailed performance indicators and basic/advanced levels of practice were articulated.

CILIP/Health Education England's (2014) Professional Knowledge and Skills Base (PKSB) built on CILIP's generic PKSB competencies.

The Australian healthcare system provides a changing workforce context for the health information professions. The Australian Digital Health Agency (ADHA), was established in 2016 to lead the development of the recently released National Digital Health Strategy (2018). The 'Workforce and Education' section document refers to health and public librarians in regard to training the health/medical workforce; the health information workforce census; and consumer health literacy and digital inclusion. This is a 'framework for action' to 2022, and it is critical that health librarians have the digital, e-health and data science knowledge and skills base to contribute effectively to the Strategy.

Formed in 2017 as a forum for sharing and advocating for the health information workforce in Australia, the Health Information Workforce Alliance (HIWA) comprises five professional groups representing health librarians, health information managers, clinical coders, and various groups of health informatics/systems practitioners. Mapping the competencies and developing a capability framework is underway.

#### Aim

The main purpose of the Project is to update the HLA competencies in line with the changing health services environment and to inform strategic workforce planning, post-graduate education and professional development for the profession.

#### Objective of the review

To learn from and incorporate the experiences of colleagues in professional associations (e.g. USA and UK) regarding competencies and evolving roles for health library and information professionals.

#### Benefits

The updated competencies will:

1. guide health library/information services managers in formulating job descriptions with a view to basic and advanced scopes of practice;
2. assist employers and managers in planning their future workforce, appraising and developing their current staff;
3. support health library and information practitioners in designing their own professional and career development;
4. support LIS educators' course development with a view to making graduates prepared for careers in the health sector;
5. provide the basis for a description of the complementary competency-based skill sets of all the health information professions in Australia.

#### Method

1. International literature review;
2. Comparison of HLA Competencies with international and national equivalents;
3. Consultations with and feedback from practitioners.

#### Results

The findings of the review will be presented as:

1. Comparisons of the competency sets;
2. Analysis of the detail of the revised HLA competencies.

#### Conclusion

Implications for workforce planning and education for health librarianship will be suggested.



## Poster

Keywords: systematic review, research evaluation, Cochrane review, reproducibility, literature searching

### **An instrument for evaluating searches for systematic reviews: The SRS-checklist**

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**Introduction:** The purpose of systematic reviews is to keep health care professionals up to date with the latest evidence in their field and guide clinical practice, and should therefore strive to identify all relevant evidence. Performing a systematic search of the literature is necessary to identify relevant studies and is the starting point for nearly all systematic reviews. The search strategy should be reproducible and visible to the readers in order for them to be able to judge the quality of the search and thereby the credibility of the results.

**Aim:** To create a checklist for evaluating the reproducibility and quality of search strategies in systematic reviews, and to validate the checklist. Other checklists deal with methodological quality and the search strategy, but none go into detail regarding the documentation of the search strategies. We consider the search strategy of such vital importance to the credibility of the results that an evaluation instrument needs to address all important elements concerning both reproducibility and quality to avoid bias. We call our evaluation instrument the Systematic Review Search checklist or the SRS-checklist for short

**Method:** The SRS-checklist for evaluating search strategies in systematic reviews was compiled from several other lists (e.g. Cochrane Handbook, PRISMA, PRESS). Several elements were grouped and sometimes merged together and some were rephrased or removed completely. The checklist consists of 23 questions, equivalent to 23 binary variables, with nine pertaining to reproducibility and fourteen pertaining to the quality of the search strategy. All questions regarding reproducibility require information about the search to be explicitly stated or directly visible. Scores for the individual systematic reviews were calculated as two-dimensional, aggregated indicators of reproducibility and quality respectively. Each of the two indicators were calculated as a relative, rescaled index where 0 is fixed and the maximum score is 100. As a result, the two indicators are reported on a pseudo-similar scale despite variation in the number of elements in each.

The checklist was validated through an empirical test of 100 random systematic reviews from the "Medicine, General & Internal" Web of Science category term published in 2013 against a reference of 25 Cochrane reviews.

**Results:** The checklist strongly discerns between the reproducibility and quality of systematic reviews in the test sample and the Cochrane sample. The search strategies in the test sample had a mean reproducibility score of 51.9 and a mean quality score of 32.7, versus 82.2 and 68.6 respectively for the Cochrane sample. The documentation of search queries was found to be a decisive factor for the quality of systematic reviews, as was the inclusion of a search specialist.

**Conclusion:** Authors conducting a systematic review should use the SRS-checklist for elaboration on documenting the search strategy. Furthermore, the SRS-checklist can be used as an evaluation instrument for scoring search strategies for systematic reviews which facilitates comparison between individual systematic reviews or between larger samples.



Poster

Keywords: Evidence-based Medicine, Instruction, Academic Medical Librarians, Information Literacy, Canada

**Benchmarking the participation of academic librarians in Evidence-based medicine (EBM) instruction, in Undergraduate medical education (UME) programs in Canada**

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Introduction: Academic librarians are involved in information literacy instruction in various ways and to varying extents. In particular, academic medical librarians are often involved in teaching Evidence-based medicine (EBM) within the Undergraduate Medical Education (UME) curriculum. The extent of involvement of librarians in teaching EBM may be different at each institution. There have been a few reports in the literature on the extent to which medical librarians are involved in EBM instruction. A 2014 review, that focused on how medical students were being trained to locate biomedical literature for EBM, showed that librarians were involved in the instructional activities in 9 of the 12 studies reported (Maggio & Kung, 2014). However, none of the studies identified in that review were from Canada; hence showing the lack of published literature about Canadian medical librarians on this topic. To our knowledge, there are no recent studies that focus solely on Canadian librarian involvement in EBM instruction. As such, our study may help other Canadian librarians understand what their counterparts at other Canadian medical schools are doing, and hopefully inform their practice. New academic librarians can benefit from knowing the extent of involvement of their counterparts at other UME programs in Canada. Additionally, understanding the trends in terms of what is being taught, and how it is being taught, would also be useful to both new and experienced librarians involved within UME programs in Canada.

Aim: This study hopes to benchmark the roles that Canadian librarians involved in Undergraduate Medical Education play in teaching EBM to their students. Additionally, through this study, we hope to identify trends in EBM instruction in Undergraduate Medical Education programs in Canada and to highlight any similarities and differences.

Method: This study used an internet-based survey to gather data. Various types of data were collected including quantitative, qualitative and demographic data. The survey was sent out to relevant email Listservs in Canada. Additionally, the link to the survey was also emailed to the general email addresses of health sciences libraries at Canadian medical education institutions, where available. This project was approved by the relevant ethics boards at the institutions of the three researchers.

Results: Our survey had a 59% response rate. The data demonstrates trends in information literacy skills being taught by librarians. Additionally, the data highlighted which resources were being introduced to students, and which of the five EBM steps were covered during instruction by Canadian academic medical librarians. The results also showed which educational strategies were being used, where this instruction takes place, and whether an assessment component is included in the librarian-led instruction sessions.

Conclusion: Our data illustrated the embedded nature of EBM instruction in undergraduate medical education programs in Canada. It also showed that librarians are involved in EBM instruction beyond the step of searching the literature. Librarians are embedded in their roles, often co-creating and co-delivering content with medical school faculty, and being present on course committees.

References:

Maggio & Kung. (2014). Journal of the Medical Library Association, 102(3), 184



## Poster

Keywords: data management, data stewardship, support services

### Data stewardship pilot project in a Life Sciences laboratory

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#### Introduction

At the Swiss Federal Institute of Technology of Lausanne (EPFL), Switzerland, the EPFL Library started reflecting on Research Data Management (RDM) issues back in 2012. An internal RDM team has worked to comply with researcher's needs and funder's requirements ever since, from raising RDM good practices awareness at first, to direct data support & data curation more recently. With the idea to adapt to researcher's needs, the EPFL Library, conjointly with TU Delft and Cambridge University, launched a survey to get an overview of each university RDM practices and needs. One important result showed an explicit need for "guidance for clearing and managing data in the laboratory".

#### Aim

With that in mind, the EPFL Library started thinking of creating direct support in its institution's laboratories. On the one hand, to help labs to assess their RDM level. On the other hand, to support them in building services, tools and guidelines tailored to their needs. One of the aims for the EPFL Library goal was to create new expertise and to build new tools regarding data stewardship. By completing this pilot project, the Library was also able to promote its position as main competence center for RDM. As a next step, the Library was looking for a laboratory willing to host such a pilot project. A couple of laboratories resigned before the project even started, but finally a Life Sciences laboratory expressed its interest in March 2018.

#### Method

First, the team needed to create an interview grid based on similar questionnaires by different institutions such as ANDS, Purdue University and Monash University Library. The idea was to interview the entire lab team, which consisted in 10 interviews of 20 minutes each. Once we processed those data, two assessments were performed : a quantitative assessment with closed questions (e.g. "What data volume do you handle?") and a qualitative assessment with open questions (e.g. "What are your main problems regarding RDM in your daily work?"). After the analysis, tailored service proposals were drawn, based on the results. Those results were then presented and discussed with the whole laboratory team.

#### Results

We created an efficient toolbox (interview grid, audio recording protocol, quantitative & qualitative analysis protocol) that was very useful for this pilot project and for further similar experiences. The plan was to conduct analyses, to discuss the implementation modalities with the lab members and finally to implement them in collaboration with the lab. Unfortunately, after discussion with the Library's RDM team, the lab chose to do the implementation on their own.

#### Conclusion

Despite this refusal, the RDM team does not consider this pilot project as a failure. The team almost finished it, built a reusable toolbox and saw what improvements they will need to include in further data stewardship projects.



## Poster

Keywords: Ontologies, Vocabularies, Metadata

### **Developing an ontology centred on the PICO model to support the linkage of Cochrane evidence to promote its usability and discoverability**

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#### Introduction

Cochrane has vastly rich content and data stores that are not utilised to their full potential locked away in data silos and static presentation formats. The Cochrane Linked Data Project is focused on the adoption of linked data technologies to provide the structured flexibility needed to support a more effective way for the finding, sharing and use of all Cochrane content. An ontology is one such linked data technology. An ontology defines a common vocabulary within a domain, a formal description of concepts; their properties and the relations among them. This provides a shared common understanding of a domain enabling the opening up of the data. Given the nature of the content and data, no existing vocabulary was a suitable reflection of the work of Cochrane, therefore the Cochrane Ontology was developed as part of the project.

#### Aim

The construction of a custom ontology, specifically designed for the Cochrane domain, to enable the open production, publication, dissemination and usability of Cochrane data and content.

#### Method

The PICO model was chosen as the foundation for the Cochrane Ontology, owing to the intrinsic nature of the content and data. These four concepts; Patient, Population or Problem; Intervention; Comparison and Outcome therefore required description.

For reasons of standardisation and interoperability, where applicable the creation of a new classification system should be based upon existing terminologies. The decision was to focus on the controlled vocabularies which form part of the Unified Medical Language System (UMLS). The individual vocabularies were assessed against the Cochrane content and data in terms of suitability. In some instances the vocabularies fit the needs of Cochrane without much alteration required, in other cases existing vocabularies needed to be merged and extended to provide the subject coverage required. A suitable classification for Outcomes was not found, therefore a collaboration between Cochrane and Care Outcomes Measures in Effectiveness Trials (COMET) initiative was created to develop this vocabulary. This will be of value to the entire health care linked data community.

The PICO model provided the essential conceptual structure for the modelling of the multiple, independently developed vocabularies into a single coherent classification system.

#### Results

At present the Cochrane Ontology is used for PICO annotation of Cochrane systematic reviews which in the future will be searchable via a PICO search tool (prototype in development at present). The use of the ontology for other projects within Cochrane is also under discussion e.g. to help structure data for RevMan in future development phases of this tool.

#### Conclusions

The development of an ontology is an iterative process. Since the development of the initial Cochrane Ontology, there have been many changes within the model, to incorporate new areas of the domain alongside alterations to reflect emerging functionality requirements.

An evaluation of the Cochrane Ontology will be carried out in January 2019, the conclusions of which will be reported at EAHIL.



## Poster

Keywords: cooperation, networking, professional development, sharing, collaboration

### **EAHIL makes a difference?**

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#### Introduction

EAHIL is a powerful network for connecting and inspiring health information professionals internationally. In this poster, we want to show what this means to us in practice.

#### Aim

This is a case report to make visible and show concretely the importance of our organization EAHIL. We are three authors and our relationship has developed to a friendship, which is also one reason to point out the importance of EAHIL and make this poster together.

#### Method

There are many more examples than the ones picked here, but here we have selected some recent ones that we have been personally involved in: cooperation and collaboration based on the relationships established in EAHIL network. There are many more examples, like Nordic cooperation Transfer of Knowledge (continuing education for health librarians and information professionals in the Baltic countries and Russia). We are grateful for all the opportunities based on EAHIL cooperation.

Benchmarking and networking are crucial and important when establishing new services, new ways to work, professional development, study visits – as a whole set of a professional identity. Also, our own workplaces play a big role, their attitude is significant as well as their possibility to support international cooperation and networking.

#### Results

- Benchmarking: Study visits in the new Terkko Health Hub: the University of South East of Norway, UMCG Groningen vice versa
- Mentoring: systematic information retrieval
- Invited to be a resource speaker at the 30th MAHLAP conference in The Philippines
- Very fruitful cooperation with our vendors: in our sessions to our customers we get user experience we share with the vendors and for our teaching sessions, we get study tools (e.g. EBM clinical cases) from them.
- Workshops for colleagues: collaborating on educating faculty on publishing strategies.
- Sharing ideas: continuously in our daily work exchanging emails, messaging, skyping etc.

#### Conclusion

EAHIL does make a difference!

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## Poster

*Keywords:* Evidence-based healthcare, Librarian's role, Systematic reviews, Interprofessional Relations

### **Embedded in the promotion of evidence-based healthcare : experiences of information specialists involved in Joanna Briggs Institute collaborative centres**

**Cécile Jaques<sup>1,3</sup>, Blanche Kiszio<sup>2,3</sup>**

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**Introduction :** The Joanna Briggs Institute (JBI) is an international non-profit research and development organization part of the Faculty of Health and Medical Sciences at the University of Adelaide, South Australia. The institute and its 70 affiliated centres all over the world promote and support the synthesis, transfer and implementation of the best available evidence with the aim of improving healthcare delivery and health outcomes.

In Switzerland, the JBI centre of excellence, Bureau d'Échange des Savoirs pour des praTiques exemplaires de soins (BEST), is based in Lausanne and results from a collaboration between two tertiary schools in health (HESAV and HEdS-La Source), one university (University of Lausanne) and one university hospital (CHUV). The Centre contributes to the production of Systematic Reviews and to the transfer and utilization of evidence to clinical practice. Two librarians attached to two collaborative institutions are now affiliated members of the centre and are participating in the activities.

**Aim :** To highlight the opportunities for librarians of bringing their expertise outside the library and to examine the benefice of building strong working relationships with research teams within their institutions.

**Method :** We will contact the information specialists across the Joanna Briggs collaboration through the JBI Information Science Network mailing list. We will collect information about the kind of partnership, level of involvement and contributions of librarians in activities such as participation in systematic reviews, teaching and support for evidence-based information retrieval.

**Results :** We will examine the different roles librarians play and we will detail the corresponding tasks and responsibilities assumed by the librarians within the context of their attachment to the centres. The results are unconsolidated for the moment but they will be available at the time of the conference.

**Conclusion :** The involvement of the librarians in the Swiss centre gave the participating libraries a more important role in the activities of the centre on the one hand and highlighted the expertise of the library services on the other hand. Reported at the JBI network scale, we will have to see what conclusions can be drawn.



Poster

Keywords: Professional Roadmap, Patient Library, Patient Education, Embedded Librarian, Librarian skills

**Embedding librarian skills in a Patient Education & Empowerment research project, from design to evaluation: a complete guide**

**Mauro Mazzocut, Chiara Cipolat Mis, Emanuela Ferrarin, Nicolas Guarin, Laura Ciof, Nancy Michilin, Paolo De Paoli, Silvia Franceschi, Ivana Truccolo**

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INTRODUCTION: At the Centro di Riferimento Oncologico of Aviano (CRO), the Scientific and Patient Library has been appointed since 2010 as the technical co-ordinator of an institutional Patient Education & Empowerment Program. This program aims to enhance the patients' involvement in the information and communication activities but also in some organizational and research topics. CRO Aviano is now leading an advanced research project funded by the Italian Ministry of Health named "Changing the future: can we effectively improve Patient Education and its effectiveness in cancer care?". This project aims to address some of the current weaknesses in patient centred cancer care by the use of a patient education and empowerment approach. To realize this aim, the project will validate tools to measure and enhance the quality of written and oral cancer information resources in Italian language (health literacy topic). Furthermore the project aims to improve independent information services for patient on anticancer drugs and to modify clinical pathways using patient reported outcome measures and pharmacovigilance data. The results of the project may be used to operationalize patient empowerment tools, to improve patient centeredness in clinical pathways and to test the validity of a cancer care model potentially usable at country level.

CRO Scientific and Patient Library plays a pivotal role in the design and management of this project.

AIM: draw a map of librarians hard and soft skills necessary for the design and management of a Patient Education & Empowerment research project

METHOD: we are going to draw a step by step map of librarians roles and competencies exploited during the different phases of a research project: design, writing, planning, implementation and management, conclusion and evaluation. The map will include a list of health professionals that interact with librarians. Expertise will be taken from several international (MLA) and Italian (Bibliosan) standard classifications of professional competencies. Emerging soft and crossover skills will come from current literature.

RESULTS: Along with the traditional librarians expertise (such as: bibliographic research; information literacy; health information to consumers; cataloguing and indexing; metadata curation; health literacy) new soft skills are emerging. Among these: implementation of web application for management of clinical data (RedCap); editing & editorial graphics; pharmaceutical counselling; health information quality evaluation; health information resources plain language writing; empowerment ability; impact assessment & benchmarking.

CONCLUSIONS: Librarians' hard skills are used throughout the project. Soft skills are the interface with other professionals to better embed librarians in projects that impact on the healthcare organization.



## Poster

Keywords: Open Science, institutional assessment, Academic Profiles

### Enhancing the impact of institutional research results

**Edit Gorogh, Judit Fazekas-Paragh, Gyongyi Karacsony**

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#### Introduction

Open Science opens up new ways in which research is undertaken, archived, disseminated, and assessed. As discussions on Open Science practices, such as alternative dissemination and impact measurement, increasingly become part of the scholarly communication discourse both on a global and on national and institutional levels, their impact inevitably affect institutional dissemination and evaluation processes.

#### Aim

In 2015, the University of Debrecen in Hungary, in line of the EC vision on Open Science, issued a revised Copyright and Publishing Guidelines, which included rules on open access publishing of institutional outputs. The primary goals of the guidelines are to increase the number of open access publications in the institutional repository in order to provide free availability of scholarly outputs of our researchers, and to enhance the visibility and wide dissemination of the university's scientific results. The implementation of this code of conduct relies on the available and developing institutional infrastructure, such as repository and research information database, in order to support researchers' compliance. The awareness raising, support and monitoring functions connected to these guidelines were delegated to the University Library of Debrecen, since they are in charge of the infrastructural components.

#### Method

The Library is dedicated to ensure the wide uptake of open access principles and increase the availability and impact of the institution's scholarly results. As a result of continuous training, awareness raising, and consultation with researchers and publishers, more than 9500 documents in the institutional repository have become openly available. The content of the repository is channeled to the website of the University Academic Profiles (<https://tudoster.idea.unideb.hu/en>) in order to provide wide visibility of and easy access to the open access documents at the University. The profile and research database, developed by the University Library, offers up-to-date information about the researchers' academic achievements and scientific work including data on teaching activities, publication list and scientometrics related to publications.

#### Results

The recently published EUA Roadmap calls for new approaches to research assessment at all levels (e.g. of research publications and projects, of researchers, and of laboratories and universities) reflecting the new paradigm of Open Science which is based on principles of sharing and collaboration. Following such emerging principles, the University Academic Profiles provide a valuable supplement to impact measurement based on the dominant journal impact factor. On the one hand the Profiles introduce research projects and their outputs of the university units and allow for browsing among the research fields, subjects and researchers connected to them, and on the other hand they develop a social forum for scientists enhancing the cooperation among various disciplines. Furthermore, they function as electronic calling cards for our scientists providing a comprehensive portfolio about the researchers' scholarly activities with easy access bibliometric indicators (e.g. list of citations connected to the publication list entries).

#### Conclusion

The poster showcases the functions and services of the University Academic Profiles webpage which plays an important role in increasing awareness on the transforming impact measurement landscape and on the strengthening Open Science practices at the University of Debrecen.



## Poster

*Keywords:* Technology, software, study room, self-service, reservation

### **Evaluating room booking systems for a new medical library**

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#### Introduction

Study rooms in academic libraries can be rare, highly requested resources. Access to these rooms on a first-come first-served basis can sometimes lead to unfair and suboptimal use of such limited space. Room booking systems (RBS) aim at avoiding such caveats by enabling users to book study rooms by themselves, usually via a web interface or mobile application. RBS can offer different features such as quota-based policies, integration with identity management systems and reporting.

In 2019 the Lausanne University Medical Library (Lausanne University Hospital – CHUV) is moving to a new building, where the number of rooms has decreased from 12 individual boxes to 3 group study rooms. The adoption of an RBS is hence considered to replace the current first-come first-served policy.

#### Aim

Compare features of a selection of room booking systems in view of equipping the study rooms in the new building of the Lausanne University Medical Library.

#### Method

We have extracted the list of requirements from the particular needs of the Lausanne University Medical Library.

We have compiled a non-exhaustive list of popular RBS used in some other medical libraries, as well as reservation systems readily available within our institution. We have enriched this list with well-ranked matching results returned by Google for specific related terms.

We have then evaluated the collected requirements against each selected solution, based on information accompanying the solution (software documentation, website) or by testing the solution itself. The fitness of each solution to each requirement is categorized in 3 main categories: “not suitable for our needs”, “not completely suitable but close”, “available and suitable”.

#### Results

A comparison matrix showing the features of selected room booking systems and their evaluated alignment with the needs of the Lausanne University Medical Library.

#### Conclusion

The results of the study have enabled the identification and recommendation of three potential solution for the implementation of a room booking system in the new building of the Lausanne University Medical Library.



**ID: 156**

**Poster**

*Keywords:* medical library, 3D anatomical database, continue medical education(CME), hands-on workshop

## **Evaluation of the Teaching Course to Create Customized Medical Materials with 3D Anatomical Database for Clinicians and Faculty**

**Hui-Chin Chang<sup>1,2</sup>, Tzu-Heng Chiu<sup>3,4</sup>, Kuo-Shu Huang<sup>5</sup>, Hui-Ying Low<sup>6</sup>, Kevin Sheng-Kai Ma<sup>7,8</sup>**

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**Introduction:**

An on-site anatomy education workshop with hands-on session for faculty members working in medical centers was offered. The innovation of the continuing medical education initiated by medical library was the first one in Taiwan to facilitate faculties of basic and clinical science with practical implementation in lecture plans, ultimately aiming to improve medical education for students and patients with library resources, especially 3D Anatomical Database.

**Aim:**

To evaluate the efficiency of a library-launched CME workshop for introducing 3D anatomy database for educational purpose.

**Method:**

Lectures were delivered to participants with one personal computer per individual and projectors in computer classrooms with screen-sharing and remote-access. Three-dimensional (3D) anatomical visualization systems and medical imaging software for photo editing were offered, along with questionnaires issued before and after the workshop. Faculty members were divided into groups by affiliated department for designing teaching materials in clinically based contexts, and instructors were assigned to each group. The objectives were to assess participant performance outcome, capability of creating customized materials from relevant content of the 3D anatomy database, perception of cooperating and supporting team members to complete the assignment in the hands-on session. Analysis of pre-/ post-test was assessed by two-sample t-test for paired data, and the effect of demographic information on the helpfulness of the workshop was evaluated by two sample t-test or ANOVA.

**Results:**

The most commonly used electronic devices for teaching material design were notebook computers, followed by desktop computers. Quantitative and qualitative perception surveys revealed that specifically, only the existence of supportive institution library ( $P < 0.05$ ), but not gender (47% male; 53% female), seniority in the workplace (varied from 3 to 20 years), healthcare professions, hospital classification levels, the habit of using anatomy visualization software in the past, or satisfaction levels of participants, contributed to significant improvement in terms of the performance ( $P < 0.05$ ), perceptions ( $P < 0.05$ ), and capability ( $P < 0.05$ ) after attending the hands-on workshop. This fact emphasizes the role of library as an effective continuing medical education (CME) provider. The results suggest that once platforms for resource utilization are established in libraries, faculty members have higher perception, adaptation and acceptance of novel educational technologies ( $P < 0.05$ ). Hence, translation of clearer anatomy concepts and pictures toward patient and student education practice could be expected.

**Conclusion:**

Such large-scale hands-on workshop is the first one in central Taiwan, thus we collected data before and after the test for evaluation. Previously, we launched a workshop only with lectures, and did not observe significance improvement in participant performance. Hence, such hands-on workshop would be an innovative form of library CME, providing an informative platform for libraries to assist both faculties from basic and clinical science to design teaching materials. In addition to sharing education experiences, individuals are also allowed to familiarize database operation and preparing novel teaching materials through practical implementation.



## Poster

Keywords: Coroners records, medical archive, data linkage, text markup

### Examining the Archives – using historical Coroner’s Inquest Records to develop a new model for teaching library and archive skills

**Kirsten Mulrennan<sup>1</sup>, Sinéad Keogh<sup>1</sup>, Ciara Breathnach<sup>2</sup>**

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Introduction: Much of the role of the health services librarian is spent supporting the student, researcher and medical professional in finding up-to-date information to aid in understanding or executing critical decisions. However, apart from landmark studies, historical material is less well used in library instruction but offers huge potential for teaching students not just about medicine and healthcare but how to perform research, mine texts and manage data.

The University of Limerick offers undergraduate students the opportunity to take modules across the disciplines, regardless of faculty affiliation, and one that attracts a mix of humanities, social science and health science students is offered by the Department of History – Health, State and Irish Medical Care, 1837-1948. This module aims to provide students with an insight into the social history of medicine in Ireland during that time frame, and to encourage critical thinking and practice-based learning. It is a component of a project entitled Death and Burial Data, 1864-1922 (2018-2022) funded by the Irish Research Council Laureate Awards 2017/2018. For the Autumn semester 2018, the course director requested input from the library to enhance the student experience with an introduction to working with archives and digital humanities techniques.

Aim: The Special Collections and Archives Department of the library already delivers hands-on archive literacy classes as part of some courses, but having an archivist with a knowledge of medical archives and with the addition of text markup, TEI (Text Encoding Initiative) metadata encoding and linked data library skills, we saw the potential to create a new model for the teaching offered by the library.

Method: The module runs for one semester, dealing with many aspects of healthcare in Ireland and the library section involved working with digitised historic records from the Irish Coroner’s Court held in the National Archives of Ireland. The students worked in groups to produce verbatim archival transcriptions of five records, encoding important elements and highlighting linked data that they felt would be most beneficial for future research (such as names, places and organisations).

Results: The output from the module demonstrated a high level of student engagement with the process, and feedback from both the faculty and students at the end of the module was incredibly favourable. As a result, this module design will be further developed for the Autumn semester 2019. The library has also used this experience to increase the teaching profile within the university, as well as establishing lasting links with the Department of History.

Conclusion: Overall, this project illustrates the diverse ways in which academic libraries can work with faculty to grow undergraduate information literacies and skills, creatively using developing technologies and tools to get both staff and students engaged with historic medical sources regardless of discipline, and ultimately, that the increasing integration of rare books and archival material into the curriculum allows for the continued development of unique academic programmes at the university.



## Poster

**Keywords:** Evidence-based veterinary medicine, Practice-based research, Continuing professional development, Information seeking behavior, Veterinarians

### **From discovery to veterinary practice: how to create intelligent solutions to find evidence on animal health in Finland**

**Raisa Iivonen<sup>1</sup>, Gunilla Widén<sup>2</sup>**

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#### Introduction

Evidence-based veterinary medicine (EVM) is defined as “the use of best relevant evidence in conjunction with clinical expertise to make best possible decision about a veterinary patient. The circumstances of each patient, and the circumstances and values of the owner/ carer, must also be considered when making an evidence-based decision”. For a busy practitioner in human medicine, the evidence-based process is aided by the summaries of best available evidence, such as guidelines derived from the Cochrane Collection. However, in veterinary medicine the amount of good quality studies is insufficient to create a similar procedure. In order to develop better information search tools, the temporal dimension to study information seeking behaviour of clinical veterinarians is needed.

#### Aim

The aim of this project is to deepen the previous knowledge of veterinarians' information seeking behavior as the basis for developing ontologies in the Semantic Web. That is required for a better findability by refining search tools and will serve both academic research and practicing fields of the veterinary business. Though a relatively good accessibility of scientific information in Finland, it is of no use if not discoverable.

#### Method

The information seeking behavior of practicing veterinary has been studied and the results are reported in recent articles forming a solid basis for future studies. It is reasonable to ask similar research questions as done earlier to have compatible data from Finland, too.

A semi-structured interview is done during the Annual Veterinary Fair in November 2018 in Helsinki, Finland. The target group consists of veterinarians starting their careers in private practices, as well working in large animal practice. Time factor and practice-based research are included in the research questions on information seeking behavior.

#### Results

The expected results describe the information seeking behavior of practicing veterinarians in Finland and how they can provide recent discoveries in the academic research institutions to apply in everyday practice. The information could be expected to flow in two ways – the practitioners have the opportunity to collect and analyse primary care clinical data to answer questions relevant to primary care practitioners. The practice-based research is research involving client-owned animals and conducted by non institutionally-based veterinary practitioners who might not normally be involved with research.

#### Conclusion

Successful decision making based on high quality evidence – accessed rapidly – is required in contemporary clinical practice. Helping the busy vets in their literature search processes by creating solid and trustful literature research systems is the task of information specialists. The help of ontologies tailored to special user groups adds value to the great collection work information providers do. It is not possible to practice on evidence basis if evidence is not acquired. Availability is necessary, but without findability it is of no use. According to the key ideas of One Health Initiative the veterinarians should be able to share their responsibility to prevent the global threats. Reliable evidence helps specialists make better decisions and hence bring health and wealth to All Creatures Great and Small, including humans.



## Poster

Keywords: Co-production ; Service development ; Engagement ; Libraries

### **“From donations to distribution network: A story of organic growth of user and community engagement.”**

**Christopher Michael O'Malley**<sup>1,2</sup>

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#### Introduction:

In 2016 the Highland Health Sciences Library (HHSL) conducted a significant re-design of its physical space.

A prominent display space opened up, where we established an 'Honesty Library,' populated with donations of fiction items we previously had difficulty placing. Users could borrow as many items as they wished, for as long as they wished, without a documented record of the loans. If they wanted to keep any item, we just asked that they replace it in kind with another item.

Rather than attrition and stock loss, the HHSL instead found great user uptake, the 'honesty' element respected, and a steady growth of donations.

This was the extent of the plan, however the success of the engagement with the users has since provided significant opportunities to establish stronger relationships with our various user groups - itself an organisational goal.

#### Aim:

The aim was to provide non work/ study reading to highlight the mental health benefits of work/ life balance, as well as another path for user engagement.

This was more successful than originally anticipated. One e.g. of profile growth was via a portion of NHS Highland (NHS H) staff who became more regular users, who also spread word to their colleagues, expanding the number of NHS H staff joining and using the library.

This Poster focuses on a larger-scale project, which began with a Non-Executive NHS H Board Member. Donating items and asking HHSL staff about the collection lead to HHSL support for research they were conducting. This in turn led to a request to utilise the Honesty Library within the Dementia Ward in the Raigmore Hospital, Inverness.

The project was for a rotation of Honesty Library stock through the Ward, focusing on items which would stimulate memories, and be fit for purpose in context, for e.g. large print items, and visual or local content items to stimulate memory.

#### Method:

The HHSL saw the potential to place donated stock into more locations. Currently this is at an early stage of development - with the Children's Ward at Raigmore, the local Prison Library, and a range of Departments and Wards in rural and remote hospitals in the Highlands targeted.

To facilitate such growth we needed stock, which led to a negotiated provision of discarded stock from the local Public Library network, Highlife Highland. They provide the volume and profile of stock over and above standard donations. This facilitates their goals of recycling, reducing disposal costs, and exploring further avenues for community engagement and benefit.

#### Results:

The project at present is continuing to grow in scope and potential. Already, however, we have seen greater engagement with more users, with now 2 NHS H Board Members, with local public libraries and the community, including patients and their families and friends in the hospital wards.

#### Conclusion:

From small aims and origins, we have found a path to grow the profile of the service with its users and further into community engagement. This project has grown beyond its original remit, and continues to grow.



## Poster

Keywords: storytelling ; communication ; resources; visibility

### History matters: storytelling at the Library of Medicine in Lausanne

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#### Introduction

Is the concept of storytelling an adequate tool for valuing the medical collections at the Library of Medicine (CHUV Library) in Lausanne?

How could the Library use this concept to communicate about its resources?

For decades, our library has owned number of medical textbooks essential to students and practitioners' daily work. Among them, Gray's Anatomy; Netter Atlas of Anatomy; Harrison's Principles of Internal Medicine and Bates Guide to Physical Examination.

Nowadays, storytelling concept is an emerging trend in the libraries' world and is becoming an essential tool for resources communication.

#### Aim

The main challenge of this project is to adjust the storytelling concept to our aim of promoting the Library's resources and collections.

#### Method

- First step will be to explain how storytelling can be a good communication tool in a medical library.
- Second, in a constant effort to promote its resources to its users, the Library chooses to test this new communication method on these four emblematic medical titles and tell about the origins of their creation, their authors and what kind of publishing and technologic evolutions they went through across the 19th and 20th centuries to today.

#### Results

In order to measure the impact of this campaign on the Library's users, several means of diffusion will be used.

1- The Library's social media (Facebook and Twitter) and the internet site homepage will introduce the campaign with a catchphrase like "Did you know that major textbooks you have been using since your first years of medical school were first published more than a century ago?" with links to the resources.

2- The poster as well as boards summarizing the history and chronologies of the four textbooks chosen will be displayed in the new medicine library.

3- These means of communication can be used in a second phase to set out a survey, involving the Medicine Students Association (AEML), in order to define the students' behavior towards the Library's resources and customize as much as possible its offer against their needs.

#### Conclusion

Library users' feedback about this campaign could help the new library to build its new branding, and optimize the collections' visibility and accessibility.



## Poster

*Keywords:* evidence-based medicine, toolkit, teaching tool, medical librarians

### **How Do We Teach Clinicians Where the Resources for Best Evidence Are?**

**Sandra Kendall, Michelle Ryu, Chris Walsh**

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#### Introduction

Sinai Health System (SHS) is an internationally recognized academic health sciences centre affiliated with the University of Toronto. With more than 28,809 admissions a year, clinicians at SHS are often challenged with locating the best available evidence at the time of need. The overwhelming number of electronic resources available, coupled with long hours of clinical work which includes clinicians working in multiple locations, our library recognizes how staff may be prevented to easily and seamlessly seek information in an efficient and timely manner.

#### Aim

The goal is to provide a simple, practical teaching tool to help clinicians easily find quality health information from the vast offerings of publishers.

#### Method

The SHS Library created a toolkit that groups electronic resources into tiers based on the hierarchy of evidence, in a step-by-step approach. The SHS EBM Toolkit lists key electronic resources available through the library. Mobile application options are available for most of the resources.

#### Results

Since its publication in 2008, the original toolkit received positive feedback from medical students and in-house clinical staff. As well, the toolkit has been incorporated into the teachings of the Royal College of Surgeons and Physicians of Ontario, Ministry of Public Health, and various hospital and patient libraries across the Greater Toronto Area.

#### Conclusion

The toolkit continues to add value to our hospital. The SHS Library encourages other libraries and institutions to adapt the toolkit for their users. In the future, this toolkit will be revised to tailor to the research needs of nursing and allied health staff.

#### *Biography and Bibliography*

Sandra Kendall, Director, Library Services, Sinai Health System: Sandra is the 2017 President of the Ontario Health Libraries Association. Sandra received her Master's degree in Library Science from the University of Toronto. Since then she has worked in corporate, public and not-for-profit libraries, culminating in her current 18 year tenure as Director of Library Services at SHS. She has presented at library conferences including OLA, Internet Librarian, the Medical Libraries Association and IFLA. Sandra has also published in a number of journals. Her recent work is featured in *International Librarianship: Developing a Professional, Intercultural and Educational Leadership*, in which she documents her over 8 years of experience working with The Toronto Addis Ababa Academic Collaboration in Ethiopia.



**Poster**

*Keywords:* decision making support, information needs, information sources, health planning, health economics and management

**Information support for specialists in health planning, management and economics**

**Tatyana Kaigorodova, Irina Kriukova**

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**Introduction:**In general, specialists in health planning, management and economics provide information and analytical reports and reviews for decision makers. Therefore, it is important to understand what topics are of interest to this group of information consumers, as well as what information sources they may need. Information support for the Ministry of Health of the Russian Federation in health management and economics is provided by Federal Research Institute for Health Organization and Informatics; Higher School of Economics; National Public Health Institute named after Nicolay Semashko and federal medical universities.

**Aim:**to analyze information needs of specialists in health planning, management and economics and review available information sources.

**Method:** statistical, sociological, bibliometrics and content analysis.

**Results:** Authors have surveyed this group of specialists and analyzed their requests to the World Health Organization Documentation centre. Based on the survey results major needs of this group of information consumers have been identified. Requests by topic are as follows: analysis and trends in mortality by age and cause of death, analysis and trends in fertility, economic indicators of performance of health care facilities, quality indicators of performance, overviews and comparisons of international experience related to the mentioned above issues. Information sources used by the respondents include the following: Russian statistical compilations, State report on health, articles in the Russian journals on economics and health management, World Health Organization statistical databases, EUROSTAT, World Health Organization evidence reports on health economics and management, OECD databases, articles on quality of care, health care financing and planning of Cochrane library, PubMed, etc.

**Conclusion:** To conclude this study, we can say that our survey showed that information support for decision making is a topical issue, dissemination of information including WHO materials among national users is extremely relevant and that analytical reviews and selections of related materials on certain topics including health care improvement in Russia and international practices are highly demanded by specialists, and timely update on latest materials is much welcomed.



## Poster

*Keywords:* research data management, professional competencies, new services, job advertisements

### **Is research data management our future or a fad? An examination of job responsibilities in current health librarian positions**

#### **Glyneva Bradley-Ridout**

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#### Introduction

Research data management (RDM) includes tasks such as preserving data, organizing data, data dissemination, and data extraction among others. These responsibilities and other research data management skills have been discussed as an increasingly important role for health science librarians, and a way in which we might shape our services to meet a growing demand from our clientele. However, it is unclear how much newly hired health science librarians are being required to know about RDM, or if they will be asked to perform RDM responsibilities in their professional roles. To answer this question, this research examined currently advertised jobs in health science librarianship to investigate whether research data management duties are being included in posted positions.

#### Aim

To examine if health science librarians are being required to have research data management experience or skills at the time of hiring, and whether they will be expected to perform these tasks in their health librarian role.

#### Methods

Job advertisements posted on the University of Toronto's Faculty of Information (iSchool) jobsite between February 2017 and April 2018\* were collected and analyzed. Inclusion criteria was defined, which included jobs located in any country, jobs that were both part-time and full-time, and jobs in any sector, so long as they required a professional master's degree in librarianship. The job advertisements were analyzed to ensure all included postings were clearly related to health librarianship. The job descriptions of these postings were then further examined to identify instances where research data management skills or responsibilities were mentioned.

#### Results

Thirty-two job descriptions were identified as meeting the inclusion criteria. Of these thirty-two health librarian postings, eight included supporting research data management services, in varied capacities, as part of the position description.

#### Conclusion

The literature indicates that research data management is predicted to be a central competency for health science librarians in the near future. However, through the job posting analysis, a trend emerged where RDM is not consistently seen as a mandatory skill, or an expected task for newly hired health science librarians. As such, it is argued that this disconnect needs to be addressed. If RDM is to be a significant responsibility on the roadmap of our profession, then these skills need to start being acknowledged and reflected in education and employment opportunities.

\*Please note: prior to the presentation of this poster, the research will be updated to reflect new postings advertised since the date of last data extraction (April 2018 – April 2019). If applicable, any changes to the original results and conclusions will be discussed accordingly.

#### *Biography and Bibliography*

Glyneva Bradley-Ridout (B.A., MI) is an Education & Liaison Librarian at Gerstein Science Information Centre at the University of Toronto. Her role includes supporting the Leslie Dan Faculty of Pharmacy, liaising to various departments in the Faculty of Medicine, and co-responsibility for the health sciences collection. Previously, Glyneva worked at St. Michael's Hospital in Toronto as an Information Specialist.

#### Recent Publications:

Bradley-Ridout, Glyneva. "Preferred but not Required: Examining Research Data Management Roles in Health Science Librarian Positions." *Journal of the Canadian Health Libraries Association/Journal de l'Association des bibliothèques de la santé du Canada* 39.3 (2018): 138-145.

Bradley-Ridout, Glyneva. "In Transit: The Information Behaviour of Toronto's Public Transit Commuters." *The iJournal: Graduate Student Journal of the Faculty of Information* 3.1 (2017).



## Poster

*Keywords:* Off-campus access, library tool, Lean Library, browser extension, open access

### **Lean Library: Your library in a browser. Experiences from the University Medical Center Groningen and the University of Groningen**

#### **Robin Ottjes**

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#### Introduction

Accessing the collection of your university, or using tools made available by the library is not always easy if you work off-campus. When working off-campus a login in for example a proxy-server or VPN is needed to work as if you were at your office or at the library. This is where our students, staff and researchers had troubles, they were not starting on the library website with the right links to the licensed content. To make working off-campus a lot easier the University Medical Center and University of Groningen started a pilot with the browser extension Lean Library. The pilot started in September 2018 and will run until February 2019. The main functionalities of Lean Library are providing users with 1-click access to our e-resources, communicating tailor-made messages to our users on, by the library specified, websites and providing users with alternative routes to full texts if they are available.

#### Aim

To make working off-campus just as easy as working at university computer, and to bring library services to the users in an easy way in their browser. By doing so the aim is to see more use of our collection and have a greater presence of the library in the workflow of students, staff and researchers. Also better use of the universities' open access deals and better insight in the use of our collection are an important aim of our pilot.

#### Method

For the implementation, it was important that the library had control of what and when exactly Lean Library would show. Therefore, we gave Lean Library our holdings information and the access to our proxy-domains. By doing so, the user has immediate access to scientific publications and is not stopped by a paywall. Another important aspect of the implementation was that the library is control. Lean Library gives the library staff the possibility to tweak and change the messages that are shown to the users of extensions when they are on certain websites.

#### Results

The pilot has a duration of six months, September until February. During this time we promote the use of Lean Library, but also ask users for feedback. With a single click the users go to a survey in which they can give us their opinion or suggest improvements. Next to the user feedback, Lean Library also offers many statistics concerning the use of the extension. By using these statistics over the course of the pilot and comparing statistics like the proxy-server use before and after we started the pilot, we can determine if it is a success.

#### Conclusion :

While this is an ongoing project, the initial results are looking promising. We see an increase in the use of our proxy-server and we see an increasing number of users every month. A full analysis if the pilot is a success can be given after February, when the pilot period ends. However, for now Lean Library is helping our students, researchers and staff to work comfortably from home, with the library in their browser.



## Poster

*Keywords:* Evidence based veterinary medicine, library outreach, veterinary librarianship, freely available resources

### **Librarian support of evidence based practice for non-affiliated veterinarians using freely available resources**

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#### Introduction

The College of Veterinary Medicine and Biomedical Science is a primary client group supported by the Medical Sciences Library at Texas A&M University (TAMU MSL). The support goes beyond traditional academic support to include library outreach to veterinarians in practice.

Veterinarians are trained in evidence based veterinary medicine (EBVM) although veterinary medicine is somewhat behind the human medical sciences in evidence based practice. This methodology is generally described with five steps whether referring to human or veterinary medicine. Essential in these five steps is identification of published evidence and its acquisition for further appraisal and application. The motive for TAMU MSL to support veterinarians in practice is that there are two barriers for practicing evidence based veterinary medicine: identifying published evidence and acquiring it. TAMU MSL librarians are well-positioned to lessen those barriers.

#### Aim

The aim of this poster is to discuss and demonstrate the evolution of six years of increased support for clinical veterinary practitioners who do not have an institutional affiliation that provides information resources and services. This support is proffered through recommendation of freely available resources and proven information management strategies.

#### Method

Freely available resources are promoted, demonstrated, and taught to veterinary practitioners through library outreach activities. Outreach to veterinary practitioners is passively provided through resources linked on the TAMU MSL website and LibGuides and through articles in veterinary publications. It is actively provided through librarians exhibiting, speaking, and providing continuing education/continuing professional development at veterinary conferences.

Across this time a five point information management strategy has been resonating with veterinary practitioners. Additionally, freely available resources have increased across this time. First in the strategy are freely available online resources that can be used to identify published evidence. These include PubMed, IVIS, VetSRev, and others. Second, is sharing strategies for new item alerts including My NCBI, individual journal alerts, and Change Detection. Third are tools for identifying freely available full text such as UnPayWall, Open Access Button, Kopernio, and Google Scholar. Fourth are recommendations about using mobile phones and tablets as mobile scanners to collect information and process the files with OCR. Lastly, are the techniques for collecting and organizing information using citation management tools like Zotero and Mendeley.

#### Results

Since 2013, changes to library outreach activities to practicing veterinarians have resulted in increased metrics in all areas. Increases were seen in requests for services and resources, teaching and publication invitations, and contact numbers at events. These activities and feedback from veterinarians resulted in an information management strategy and recommendations for freely available resources that support EBVM.

#### Conclusion

Thoughtful changes to the TAMU MSL veterinary outreach program resulted in an increase for both the use of and demand for support. The global rise of open access resources, including those that support EBVM, was critical to the success of the TAMU MSL program. Creativity added to a base knowledge of freely available resources and information management strategies can empower librarians to support the practice of EBVM for clinical veterinary practitioners not affiliated with an institution.



## Poster

Keywords: Library, Open access repository, Library technology, Scholarly communication

### **Lithuanian Academic Electronic Library as a significant part of scholarly communication**

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#### Introduction

Currently open access has become the usual practice of publishing results of scientific and research work, especially in natural sciences and medicine.

Some of the specific benefits of the electronic submission and archiving of publications include: Availability; Multimedia Integration; Digital Research Skills; Improves Library Service.

The Lithuanian Academic Electronic Library (eLABa), as a national aggregated open access (OA) repository, in accordance with its legal regulation, was started in the 2012.

#### Aim

The aim of creating Lithuanian Academic Electronic Library (eLABa) is by the use of information and communication technologies to develop favorable conditions to disseminate more quickly the newest scientific knowledge and learning material, to improve the quality of research and higher education processes, to develop distance and lifelong learning, to promote the activity and achievements of scientists institutions of research, science and higher education.

Another aim of the eLABa creation is to properly manage intellectual property rights associated with research performed at Lithuania Universities. This is accomplished by: documenting the student and researcher author's intellectual property rights by depositing his or her work in Lithuania Universities digital depository.

#### Method

The main goals were achieved by creating eLABa as the environment and tool, allowing preparation, collection, long-term preservation, and permitting access to research and study e-documents, created in Lithuania. Functioning of the eLABa is based on the usage of the Fedora repository software and infrastructure, allowing collections and storage of various e-objects concerning science and studies of different types and access to their metadata for the search systems using the OAI-PMH protocol in popular metadata standards, e.g. DC, ETD-MS, MARC 21.

#### Results

eLABa consists of 6 science and study e-document collections: ETD (bachelor and master theses, doctoral dissertations and their summaries); Journals (periodic or one-time reviewed scientific and popular journals and other publications); Books (monographs, manuals, teaching books, their parts and others issues of science and studies); Proceedings (reports at scientific or methodological conferences, seminars and other scientific and educational events); Working Papers (research, development activities and project reports, and other research and study materials, prepared in e-form); Empirical Data (empirical data of research in humanitarian and social sciences).

The largest collection of the full-text e-documents stored in the eLABa repositories is ETD (Electronic Theses and Dissertations) collection. Theses and dissertations provide tangible evidence of the scholarly development of students and their ability to effectively communicate research findings. ETDs enable graduate students to effectively and creatively present their research.

#### Conclusion

eLABa creation establish new possibilities to make scientific information Findable, Accessible, Interoperable and Reusable for all Lithuania academic community.

Electronic access greatly increases the number of times works are viewed and read. Students and researches who spent a great deal of time on their research should be encouraged to know that others are consulting it. This may guide and save others the time of redoing a study.

eLABa, as Open Access repository, creates conditions for participation in the international European and worldwide OA projects, such as NDLTD, DRIVER, DART-Europe, PEER, OpenAIRE.



Poster

Keywords: Health Literacy, Mentally Ill Persons, Interdisciplinary Teams

**Mental Health Bridges: An interdisciplinary project of librarians and mental health professionals building an online mental health literacy tool**

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INTRODUCTION

Health sciences librarianship is no longer practiced only in the library by librarians. Today, librarians work more and more in interdisciplinary teams. This poster describes outcomes from the creation of an online health literacy training tool containing resources developed by a team of librarians and mental health professionals. Specifically, we will discuss usability testing of the site as well as efforts to disseminate this resource to the public. Persons with serious mental illness (SMI) have a higher prevalence of overall physical health risk due to comorbidities and treatment side effects. Facilitated access to online health information, using tools and resources designed specifically for people with SMI, could mitigate this risk. However, health literacy resources for this population are few. Moreover, while health literacy in the general population can be as low as 36%, it is documented at even lower rates among those with SMI. This website has been designed as a portal to tools and resources promoting health literacy. Through its simplicity, yet comprehensiveness, these resources could be useful to those with SMI worldwide.

AIM

This project was funded by the U.S. National Library of Medicine with the goal of developing an interactive website providing individuals with SMI health literacy skills so that they can more easily obtain and understand health information. By improving these skills and accessing online health information, SMI individuals will develop a greater ability and ease in communicating with providers, friends and family about their health – an important step in the management of their illness. The website contains several interactive features (narrated video, activities) that will facilitate the comprehension of information while fostering health literacy skills.

METHOD

Usability testing is being conducted asynchronously using the Optimal Workshop online usability testing program as well as through traditional face-to-face individual or group sessions. Persons with lived experience of mental illness as well as mental health professionals (librarians, practitioners, researchers) are participating. Data collection is occurring between autumn 2018 and early 2019. Upon completion, data from approximately 20 representative end-users will be analyzed using Optimal Workshop and Dedoose, a qualitative research analysis software. The data will inform the final version of the site, anticipated to launch in Spring 2019. This research is approved through the Institutional Review Boards of the University of Massachusetts Medical School and the Commonwealth of Massachusetts Department of Mental Health.

RESULTS

Results will be available in early 2019 and will be shared in this presentation plus through supplemental handouts. Findings from prior research incorporated into the design will be described.

CONCLUSION

We describe the design and implementation of an interactive website designed to enhance health literacy skills of individuals with SMI, bridging physical and mental health information to address co-morbid health conditions. Moreover, the study provides insights on enhancement and dissemination strategies, such as translating content into other languages for international users. This presentation highlights a new roadmap being followed by health sciences librarians; working in interdisciplinary teams to create new tools to address health literacy and reduce health disparities in underserved populations.



## Poster

Keywords: Evidence-based Practice, information specialist, medical library, hospital, nursing

### Multidisciplinary Evidence-based practice course

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#### Introduction

Evidence-based practice (EBP) becomes increasingly more important in the delivery of quality care and as a result positive patient outcomes. The bachelor of nursing 2020 describes the competences and requirements of nurses graduating in 2020. A substantial part of the bachelor profile 2020 is dedicated to the CanMEDS-4 role: the reflective EBP-professional. The 2020 graduate will, for example, be able to set up a research question using the PICO-method, will be able to conduct a systematic and efficient search, and will be able to assess, evaluate and implement the found scientific literature. In collaboration with the Northwest Academy, we designed an EBP course to support and further develop the role of current nurses (and medical professionals) as EBP-professionals.

#### Aim

The aim of this paper is to outline the development of the EBP course designed for nurses and other medical professionals at the Northwest Clinics.

#### Method

The EBP course consists of 10 sessions led by different expert teachers. The course starts twice a year with 12-15 participants. The participants are from different educational levels and work in different departments in the hospital, resulting in multidisciplinary groups that stimulate interprofessional learning. Feedback from participants was collected after every session and used to shape the ongoing and future EBP course.

The focus of the EBP course is on the formulation of a research question using the PICO-method, the selection of the appropriate databases, formulation of a search strategy and the selection of relevant information. All participants write a Critically Appraised Topic (CAT) based on a clinical question related to bring what they have learned during the course into practice. The course is further supported through an E-learning PubMed module.

#### Results

Since the start of this EBP course in April 2016, 33 participants graduated. The next cohort will graduate in March 2019 and consists of 12 participants. One of our (graduated) participants has published in a national journal for nurses. Another graduate was one of the winners, out of 2850 participants, of Nursings' 2016 EBP knowledge test. We also have an EBP graduate in the Northwest Science Committee. Moreover, as a result of the EBP course, several scientific research projects have started, including a research project that studies the effect of audiovisual tools on the quality of life in dialysis patients and a project on the management of functional constipation in children.

#### Conclusion

In conclusion, our EBP course increases the participants' professional growth, critical thinking and due to the group diversity this course also allows for interprofessional learning, building bridges, connecting people and more importantly ideas.



## Poster

*Keywords:* professional competencies, leadership, interprofessional collaboration, library impact, educational needs

### **Paving the road to success: leadership skills in an interprofessional landscape**

**Nicole Capdarest-Arest<sup>1</sup>, Jamie Gray<sup>2</sup>**

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#### Introduction

Academic medical libraries often sit at the crossroads of the complex landscape of the health sciences. Medical librarians in these environments must navigate and lead endeavors and services that may cross many professions. In one day, for example, a medical librarian could meet with a department head of medicine, a director of nursing education, a chief information officer, and a patient safety director, each of whom are held to the leadership standards of their fields. In addition to being excellent leaders in their own professions, how can medical librarians lead in an interprofessional context? In this study, the authors set out to understand leadership principles from three professions closely affiliated with medical librarianship in order to identify a core interdisciplinary leadership skill set.

#### Aim

To review the existing literature from the last 5 years around leadership in academic medicine, nursing, hospital administration, and medical librarianship in order to identify core leadership skills across the disciplines and identify potential differences.

#### Methods

We searched the literature published from 2014 – February 2019 on leadership skills in each of four professional domains: 1) academic medicine, 2) academic nursing, 3) hospital administration, 4) medical librarianship. Medline/PubMed, Scopus, and Business Source Complete were searched, and articles discussing leadership skills or competencies written in English with full-text availability were included. Skills mentioned were extracted using text analysis and trends were identified using descriptive analysis.

#### Results

Three hundred-fourteen citations were retrieved. After deduplication, 169 unique citations were screened for inclusion based on predefined criteria. The two authors independently screened articles using predefined inclusion/exclusion criteria and, after applying said criteria, 44 articles were included in the study. Skills in each of the four identified domains were collected. A full analysis of skills, common themes, and perceived differences is presented in the poster presentation.

#### Conclusion

Modern medical librarians must more often lead, not only internally, in the library setting, but externally, as they are more involved with connecting and collaborating with leaders across disciplines. Having the skills and vocabulary to lead and identify necessary leadership characteristics across fields is important to successfully navigating this landscape and enhancing impact of the library. By reviewing the leadership literature in the fields that most often intersect with medical librarianship, we can better understand, learn, and enhance our own skills in these areas so as to better navigate the complex landscape of the health sciences.



**Poster**

*Keywords:* leadership, management, library directors

**Path to leadership: The career journey of academic health sciences library directors**

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**Introduction:** Leadership development and preparedness are important contributors to leadership effectiveness. There have been a number of studies that have examined the leadership development of academic library directors as well as evaluating what the library profession itself has done to promote leadership development. The majority of this research has focused on mentoring, on-the-job training, library leadership training programs, and leadership development and preparedness in general.

Each of these studies is useful for understanding why leadership development and preparedness is important. Unfortunately, no studies were found that allowed a reader to understand how these various elements of leadership development and preparedness interrelate and progress during someone's career journey. A cohesive picture of this career journey into library leadership would further the understanding of the value of leadership development and preparedness and act as a model for those interested in moving into leadership positions.

**Aim:** As part of a larger study on leadership in academic health sciences libraries, the authors sought to examine the career journey of academic health sciences library directors to better understand what led them into leadership positions in libraries.

**Method:** Qualitative phenomenological research was selected for the research design due to its focus on exploring and understanding the meaning individuals ascribe to a particular phenomenon or experience. A part of the interpretivist theoretical perspective, phenomenology searches for the essence of a phenomenon from people's shared experience of it and works particularly well with phenomena that does not lend itself to easy quantification, like leadership.

The study used purposeful sampling and criterion-based sampling strategies to select its participants. Eleven library directors from academic health sciences libraries at public universities with a RU/VH Carnegie Classification agreed to participate in the study. They also met all other selection criteria for the study. Data were collected through two semi-structured interviews with each participant. The data were later transcribed and coded. Thematic analysis was used to analyze the data from which categories and themes emerged.

**Results:** A major theme that emerged from the data was the participants' path to library leadership. Each participants' path was unique, but there were common elements that are informative as to how they understood their experience as emerging leaders and what it takes to be a leader in libraries. Each participant had a wide range of library experience and/or education, but at some point, when they decided to enter into a leadership position, they became very focused in their preparation for leadership. The participants also shared how important leadership mentors were to them in their journey to becoming leaders.

**Conclusion:** Leadership development and preparedness have been found to be important contributors to leadership effectiveness in other studies. It was encouraging to witness and understand the amount of preparation the study participants did to get themselves ready for their roles as library directors. In particular, it was illuminating to hear how big of a role that mentors and mentoring played in the participants' development as leaders and their desire to mentor the next generation of library leaders.



Poster

Keywords: Critical Pedagogy, Team-based Learning, Case-based Learning, Library Instruction, Health Sciences Graduate Students

**Preparing Health Sciences Students for Real World Information Gathering Using Teams, Cases, and Critical Pedagogy.**

**Margaret Henderson**

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Introduction: Teaching in health sciences professional schools has been moving to Team-Based Learning (TBL) and Case-Based Learning (CBL), with a focus on health inequalities and disparities to better equip students for workforce conditions. TBL and CBL have been shown to enhance learning in a variety of environments. TBL leverages the power of action-based instruction to help students acquire a deeper understand of the course content than lectures, as well as showing students the value of social support and peer tutoring. Case-studies provide a way to introduce real-life examples of problems students will encounter in their professional work, including the aspect that a perfect answer might not exist. One-shot information literacy instruction can benefit from team-based learning, but there is little evidence that graduate level health science information literacy instruction, focusing on the skills for a comprehensive literature review, can be enhanced with TBL, CBL, and cases focusing on healthcare disparities.

Aim: Will TBL and CBL, using cases based on healthcare disparities, enhance learning in one-shot curriculum-based information literacy sessions in the health sciences and improve student literature review skills?

Method: Classes are assigned to TBL/CBL or lecture classes, based on course instructor preference, the resources requested, room availability, and class size. Case studies were chosen based on relevance to course, and critical pedagogy to focus on healthcare disparities. The librarian reviewed the cases to pull out the information needs and developed mini-cases to use in class. Students worked in self-selected groups and each group chose their case. After a review of search methods, teams were asked to find peer-reviewed and grey literature to help with their case. Groups then presented their search strategies and results to the whole class. Surveys will be sent out 3 or 4 weeks after the class, but within the semester, to see how well students met class objectives and completed the information collection part of their assignment. In the case of classes where the students were learning to conduct a literature review for a capstone, thesis, or dissertation, a second survey will be sent several months later. Faculty will also be surveyed to find out how they view the different class styles and future use of librarian information literacy instruction for their classes.

Result: Preliminary results show that students who participate in a TBL/CBL class feel better prepared to conduct a literature review than those in a regular lecture class. Follow-up surveys will be used to assess long-term effects of the method.

Conclusion: Students in all health science fields need to be able to find the information required for decision making, so it is essential that their information literacy and critical thinking skills are developed during their education. Preliminary results show that using TBL, CBL, and critical pedagogy, helps students learn more about literature searching. Taking pedagogy seriously should also help demonstrate to faculty that librarians are true colleagues and collaborators.



## Poster

Keywords: evidence-based librarianship, research cycle, library support, research libraries, systematic review

### Quality support during the research cycle

**Regina Küfner Lein<sup>1</sup>, Hilde Wedvich<sup>1</sup>, Gunhild Helene Austrheim<sup>2</sup>**

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The library plays a role within several stages of the research cycle. To our knowledge, there is no consensus on where in the research cycle the library supplies the most valuable support services for the researcher. As all academic and research libraries must prioritize their limited resources we set out to investigate what is known about research support services in terms of value and type of services. To take an evidence-based approach to the investigation we decided to conduct a systematic review on research support services.

The aim is to improve the library support of researchers during the research cycle. First, by evaluating the evidence of research support practice in academic and research libraries. Second, by doing a systematic review in full we improve our own research practice and get a better understanding for the research process.

Conducting a systematic review is the gold standard for summarizing evidence. The authors of this review attended a year-long course in doing a systematic review alongside academic staff. The protocol for our systematic review is published in the Current Research Information System in Norway. A literature search was run in nine databases, and two reviewers screened the title/abstract and full text independently. Data has been extracted independently by the reviewers. Consensus for selection and data extraction has been achieved by discussion. The final report is planned to be published in the fall of 2019.

The process of conducting a review is challenging and time-consuming. We did this work beside our regular duties in the library. The searches retrieved 10 622 references. After removing duplicates, 7907 were screened and 736 were included for full text screening. Poor descriptions in the abstracts were the reason for the high number of full texts to screen. 84 records were included for data extraction and quality assessment.

Among the 84 records we found studies across all continents. So far, our analyses of the material show that research support was mainly given to faculty and PhD students. The largest share of branch libraries giving research support were libraries within medical and health sciences. The research support consisted mainly of one-on-one consultations, workshops, courses, embedded librarian service and online material. The most supported parts of the research cycle were literature searching, reference management and research impact. The library support was evaluated by surveys, mostly questionnaires, interviews, pre-post-test and focus groups.

Performing a systematic review gives valuable experience and more understanding for the process of doing a systematic review. We are now familiar with the development and registration of a protocol, selection of studies for inclusion, data extraction and analysis, and writing and publishing a review. These experiences make us better collaborators when supporting researchers in doing a systematic review. The findings of this review contribute to make evidence-informed decisions concerning the library research support. Results from the included studies on the value of research support and our own experience during the work with the systematic review will be presented in more detail in our poster at EAHIL 2019.

*Biography and Bibliography*

Lein, R.K., Wedvich, H. & G.H. Austrheim. Quality support during the research life cycle from academic and research libraries - A systematic review. Protocol published in CRISStin (ID: 536409). Available from: <https://app.cristin.no/projects/show.jsf?id=536409>



Poster

Keywords: Bibliotherapy, Partnership, Mental Health, Literature

**Reading for resilience: Bibliotherapy lights the road to recovery for mental health patients**

**Sandy Iverson<sup>1</sup>, Carolyn Ziegler<sup>1</sup>, Sharon Bailey<sup>2</sup>**

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Introduction: Bibliotherapy can be defined as the use of literature to help deal with the challenges of life. There is extensive literature on the history of bibliotherapy, a practice that has been in existence for hundreds of years. There are a wide variety of definitions and examples of bibliotherapy, but at its most fundamental, bibliotherapy is "reading to assist in the process of coping with life".

Aim: This poster will provide an overview of the history of bibliotherapy and an introduction to the two primary types of bibliotherapy: clinical or prescriptive and Creative or developmental/social. Further, the poster will explore the use of a particular form of creative read-aloud bibliotherapy with two different groups of mental health patients at an academic hospital in Toronto, Canada.

Method: Librarians at an academic hospital partnered with their psychiatry department to deliver a bibliotherapy program to mental health patients. Programs were delivered to both in-patients and out-patients. Each program ran for a minimum of 8 weeks and engaged between 3 and 8 clients in each group. Peer-support workers also participated in the group sessions. Readings from literature (poetry, fiction and non-fiction) were used to introduce and discuss topics such as loneliness, compassion, forgiveness, gratitude, etc. The discussions were facilitated by a librarian and a librarian/psychotherapist. Basic written evaluations were collected from participants and interviews were conducted with the peer support workers that also attended the groups.

Results: Participants unanimously reported that participating in the groups was a rewarding experience for them. In addition to offering generous thanks and appreciation, participants often shared their suggestions for additional topics and readings. Peer-support workers added significant positive feedback and observations on the impact of the program on the participants. Longer readings were less popular, particularly with the inpatient group, many of whom struggle with concentration issues.

Conclusion: Librarians are important partners in the delivery of bibliotherapy programs, but partnering with peer-support workers, therapists, or others trained in clinical counselling is essential when delivering bibliotherapy interventions with vulnerable populations. Our experience facilitating bibliotherapy groups was a rewarding experience and has led us to start planning further bibliotherapy projects including the possibility of a more in-depth research study.



## Poster

Keywords: • RDM, research data management, training, research lifecycle, library services

### Research Data Management Librarian Academy

**Jean P. Shipman<sup>1</sup>, Elaine Martin<sup>2</sup>**

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#### o Introduction :

• Many librarians have become active participants in their institutions' research lifecycles. Librarians have the expertise to capture scientific knowledge as it is being created so it is managed and recorded for later dissemination, but their skills with managing research data vary. For librarians to effectively lead the application of research data management (RDM) solutions at their institutions, they need training to support all levels of librarians.

#### o Aim

• Several librarians recently partnered with Elsevier to study the need for a Research Data Management (RDM) Librarian Academy to offer online training. The team includes Harvard Medical School, Tufts Health Sciences, MCPHS University, Boston University School of Medicine and Simmons College. This session reports on a needs assessment and inventory.

#### o Method

• The team compiled an inventory of existing courses for academic librarians and conducted a needs assessment through interviews, surveys and focus groups to identify gaps in current training offerings and to identify what librarians and researchers need to contribute to their success. Library school involvement was critical to the project, and the team also interviewed library and i-school educators as well.

#### o Results

• This session will report on the findings of the training needs assessment and will discuss highlights of the training inventory and how it can be applied.

#### o Conclusion :

The needs assessment indicated that librarians feel they want to be part of research teams to assist with managing research data, but they often feel they don't have the needed skills or confidence to do so. They prefer to learn through online modules and at their own pace. A training program is being developed to meet these expressed needs. The inventory of available trainings guided the development of the training modules to address gaps in current offerings available to practicing librarians. The poster will review components of the resulting online training and certification program, as well as share many of the key results of the needs assessment.



## Poster

*Keywords:* medical education, literature searching, gamification cooperative, clinical decision making

### **Searchaton: a gamified, team-based on-site teaching format on literature searching for medical students**

**Michael Wilde<sup>1</sup>, Monika Wechsler<sup>2</sup>, Alain Nordmann<sup>3</sup>**

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#### Introduction

Many training sessions or tutorials in literature searching are (implicitly or explicitly) geared to the ideal of the most systematic and sensitive search – an aim that makes perfect sense for authors of reviews or research papers. For everyday clinical situations and in point-of-care settings, however, conditions for literature searching are different: Under time pressure, physicians must find information that is as reliable as possible as quickly as possible. And the literature search must lead them to a practical solution on how to best treat a present patient. In the Basel medical curriculum we designed a learning unit that addresses these aspects of time constraint and decision making. We implemented it using a gamification-approach in an on-site format with cooperative working.

#### Aim

The new learning unit that was to be developed should offer students the opportunity to expand their searching skills in a case-based, cooperative setting under time pressure. Students should receive expert feedback (both from the library as well as the medical side) and self-critically reflect on their own approach.

#### Method

In a playful contest which we called Searchaton, students compete against each other as teams (consisting of two students each). They receive the same "mission" at the same time: a clinical case vignette including a specific clinical question, written for this purpose by a physician, reviewed and piloted in a test run. Then, in a self-directed search phase, the teams search under time pressure. After that, findings of the teams are evaluated and ranked by a jury composed of a health librarian and a physician. The jury gives short feedback on an ad hoc basis and honours the team with the best results. In a time-delayed follow-up phase, each team revises their version of their search plan on the basis of the received expert feedback. The revised plan is finally checked again and approved by the health librarian.

#### Results

We first carried out the Searchaton with Basel medical students in 2018. The Searchaton is a 2-hour intervention supplemented and prepared by a 2-hour online format (webinar) which included a hands-on searching tutorial. The Searchaton is a resource-intensive teaching format: The number of participants needs to be limited, so that the jury can sift through the results in a short time and give feedback on all solutions. In our case, the number of participants in the first run was 10. However, these participants benefited greatly from the intensive support and appreciated the integration of literature searching and clinical decision making in this learning format.

#### Conclusion

In addition to traditional training concepts for literature searching, a playful teaching format with a limited number of students provides the opportunity to deal with aspects such as time-efficient and cooperative working in searching literature, as well as evidence-based clinical decision-making.



## Poster

*Keywords:* Evidence-based medicine education, Librarian curricular involvement, Medical school faculty perspectives, Evidence-based medicine competencies

### **Seeking Best Practices in Teaching Evidence-Based Medicine: A Journey of Sharing Toward Acting**

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#### Introduction

Teaching evidence-based medicine (EBM) is often a vital and substantial portion of medical libraries' instructional programs, and competencies in EBM are included in accreditation criteria for medical and health sciences education. However, several challenges hamper EBM instruction and student mastery of these competencies: No standardized method of teaching or assessing EBM knowledge and skills exists. Medical schools and librarians face multiple challenges in teaching EBM, from finding time in the curriculum to faculty's lack of EBM knowledge and skills, and students' difficulty in mastering EBM skills. The U.S. board exams do not assess EBM knowledge. Therefore, it is currently unknown how well-prepared medical students are in searching, critically appraising, and applying research literature for patient care upon graduation. This qualitative study investigated educational approaches, including the role of librarians, in teaching EBM.

#### Aim

1. Describe EBM structure, teaching methods, and curriculum placement at medical schools. 2. Analyze themes and identify common challenges in teaching and learning EBM, and strategies to overcome those challenges. 3. Analyze the scope of librarians' involvement with teaching EBM. 4. Explain the value—if any—of teaching EBM.

#### Method

Using a grounded theory approach, semi-structured interviews at multiple institutions were conducted in person with librarians and faculty involved in teaching EBM at schools of medicine and other health sciences. Questions included: Where/when in the curriculum are EBM topics introduced (e.g., PICO, literature searching, and critical appraisal of evidence?) With sophisticated tools such as UpToDate available, is there still value in students learning EBM skills? What specific teaching methods are used; how do you know whether they are effective? To what extent are librarians involved in the curriculum; why (or why not)?

#### Results

Ninety interviews were completed at sixteen institutions in the Pacific Northwest/Midwest. Most schools were undergoing EBM curriculum reform, using a variety of methods in course redesign. Overall, students do not value or apply EBM in practice, yet faculty and librarians still believe there is high value in teaching EBM. Students' perceptions of their EBM abilities conflict with objective competency measures. Major themes included: (1) Consistent/standardized assessments for all steps of EBM learning needed; (2) Resistance to teaching/learning by faculty/students; (3) Perception that UpToDate suffices for practicing EBM; (4) EBM is not consistently modeled in clinical teaching, nor are faculty held accountable for incorporating EBM; (5) Incoming residents possessed wide disparities in EBM competencies; (6) Involvement of medical librarians. The most frequently-asked question was how to assess EBM skills.

#### Conclusion

Teaching EBM is a major issue in redesigning health sciences curricula, and its complex challenges remain unresolved. A "blueprint" for teaching EBM is needed, along with a nationwide consensus on the structure, delivery, value, and assessment of EBM skills in teaching and practice. Instruction librarians could benefit from educational strategies that result in measurable learning outcomes and from methods for increasing participation in EBM curricula. UpToDate potentially undermines EBM teaching effectiveness. Further research is needed to align undergraduate and graduate medical education accreditation standards with each other and medical school curricula.



## Poster

*Keywords:* learning and teaching, medical studies, study guidance

### **Study guidance at the University Library Basel and for medical studies**

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#### Introduction:

Time management, mnemonics and effective reading methods are important study skills for students at all levels. The University Library Basel has been offering study guidance at six locations since 2018, thereby expanding its existing information literacy programme.

#### Aim:

The University Library supports its Bachelor and Masters students with respect to important key competencies such as information literacy, digital literacy and study and writing skills.

#### Method:

In the autumn of 2017, 12 staff members of the University Library Basel and from two network libraries were trained in-house by the study guidance team of the KIT-Karlsruhe during a 5-day course on study guidance.

#### Results:

Since January 2018, study guidance has been offered at six locations at the University of Basel and in the medical library, in the form of open consultation sessions and by appointment. Due to the significant need and interest by the medical faculty, the study guidance team of the University Library Basel is training 30 tutors of the medical faculty, who will pass their knowledge on to new students in the medical faculty. In addition, new formats, for example "Coffee lectures" on specific topics with regard to study guidance are planned. The offer of guidance has not yet been taken up as well as had been expected, but further marketing measures are planned within the university. On the other hand, the high level of implementation within the curriculum of the medical studies demonstrates the project's success.

#### Conclusion:

Study guidance is becoming an increasingly important requirement for students in order for them to successfully carry out and complete their studies. The university library of the future will be "learning world plus", i.e. not only physical spaces and academic literature will be made available, but also courses, training sessions and support with regard to all skills relevant for academic studies.



## Poster

Keywords: health information literacy, health literacy, survey, Italy

### **Survey on health information literacy in a cohort of elderly people in Pescara (Italy) in 2017. Are they fully aware of the implications behind Internet search?**

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#### Introduction

Health information literacy is widely recognised as an important social determinant of health, although it is difficult to measure it at national, regional and local level.

#### Aim

This study aims to measure the level of health information literacy in a sample of elderly people in the city of Pescara (Central Italy).

#### Method

The study was conducted through a questionnaire during an eye screening in a cohort of elderly people in 2017. 595 individuals (over 60 years of age) were asked to take part in the survey; 429 of them agreed to participate. The submitted questionnaire was based on the European Health Information Literacy Survey (HLS-EU).

#### Results

414 questionnaires were eligible for analysis. Participants' age ranged from 60 to over 80 years. Data collected refer to the number of respondents per question, as a matter of fact not all surveyed people (414) answered to each question. As far as the gender of respondents, the most (283 out of 411) were women (69 %), while the men were 128 (31%). The sample revealed low education level: only 9% had a degree and/or post-doc; 25% had a high school diploma, 39% attended only primary school and 27% junior high school. The sample was quite homogeneous, also because most respondents belonged to a low/middle income population group. The survey showed that the family doctor was the preferred source to get information on health, and Internet was the less used source (22%, 91 out of 414). Most participants declared to seek information in native language. As regards the subject of information retrieved, the answers collected (90) highlighted that the majority of respondents looked for information on diseases in general (94%), on therapies (77%), on nutrition issues (74%), and on diagnosis (69%). A good percentage looks for information on drugs (50%) and on health facilities (44%). The search for information on the Internet, however, includes a relevant variety of issues.

Participants appeared to be fairly satisfied with results achieved from their searches, without showing any reasonable doubt that there could be fake news or misleading information. Most of them also declared that they easily understand what their practitioner says. Besides, they claimed they did not find any difficulty in understanding medicines' labels and drug prescriptions, or to cope with other health conditions such as mental health, hypertension, tobacco smoking, alcohol abuse etc. Additional data are available for discussion.

#### Conclusion

This survey addressed a homogeneous group of elderly people in a small area of Central Italy. Most respondents declared to have an easy access and understanding of health information. Those searching the Internet declared to be rather satisfied with the results they gained, without questioning their reliability. Yet results showed that respondents were not aware that information overload requires critical skills in order to select trusted and updated medical information, properly targeted to people who need it. In any case, health information literacy is difficult to measure, and this survey supports the need for further investigations towards the adoption of best practices.



Poster

Keywords: Systematic review, Search strategy, Evaluation, Library involvement, Motivation

**Systematic reviews: Why don't researchers consider to include a medical librarian and would this collaboration have made things better?**

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Introduction : Systematic reviews are crucial high-level evidence to support healthcare decisions in a world of exponential information growth. These reviews need to be transparent and prove an unbiased approach. Therefore, a rigorous search strategy is essential. Biomedical reference librarians at the Learning Centre Désiré Collen provide assistance to researchers at KU Leuven (Belgium) for building a good search strategy. This includes translating their research question into PICO/concepts and guidance on correct use of Boolean and proximity operators, truncation, related terms, synonyms and index terms for different resources.

Aim The aim is to assess the awareness about this specific library support service among KU Leuven researchers and what motivates them to (not) involve a librarian when conducting a systematic review. To prepare this, we will evaluate the quality of search strategies performed at KU Leuven and determine the added value of the support by a librarian.

Method The search strategies and the methods of recently published systematic reviews (2016-2018; Pubmed, Embase, Web of Science, Cochrane Library), authored by KU Leuven researchers, will be evaluated. A comparison will be made between search strategies with and without library support. The authors of these systematic reviews will be surveyed online about their (lacking) motivation for the involvement of a librarian in the process of conducting a systematic review.

Results Although preliminary, the search strategies reported in those systematic reviews published by KU Leuven researchers with the aid of a reference librarian, are transparent. They demonstrate the correct use of Boolean/proximity operators, a correct translation between resources and correct use of truncation and related terms/synonyms.

Conclusion : This study will provide insights into what drives researchers to contact a librarian for help with their search strategy when conducting a systematic review. Assessing the added value of library support to build a good search strategy at KU Leuven will hopefully provide an extra motivation to include librarians in the future. Since this research is ongoing, the final results will be reported at EAHIL2019.



## Poster

Keywords: Critical Appraisal, Partnership, Library outreach, Knowledge transfer

### The birth of CASPIR – Critical Appraisal Skills Program Ireland

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#### Introduction

Critical appraisal of published research is one essential component of Evidence Based Medicine. In 2016, the Clinical Research Unit (Health Research Institute, University of Limerick), the Department of Public Health (Mid West) and University of Limerick Hospital Group came together to set up CASPIR (Critical Appraisal Skills Ireland), based on the model of the internationally recognised Critical Appraisal Skills Programme UK. The aim of CASPIR is to increase awareness of the importance of critical appraisal and improve critical appraisal skills of health care staff and students using CASP tools and workshop model to help participants put knowledge into practice.

#### Aim

The aim of this study is to describe the CASPIR model, how it impacted on the critical appraisal skills of healthcare staff in the Mid-West region of Ireland and the possible future development of the initiative

#### Method

Staff from a range of multidisciplinary professions including, librarian, nursing, medical, psychology, statistics, physiotherapy and business management were invited to get trained through a "train the trainer model delivered by CASP UK.

CASPIR work on a voluntary basis. Trainers meet annually to share ideas, generate new course material along with reflecting on feedback from previous CASPIR participants and discuss the future of CASPIR.

CASPIR workshops started in 2017 and are delivered 6 times a year to employees from the University of Limerick, University Hospital Limerick, Primary Care and the Department of Public Health (MidWest). The workshops are facilitated by 2 trainers on a rotation basis and last for 3 hours. The emphasis is on hands-on exercises with a review of key research paper components.

Each workshop starts and finish with a confidometer and feedback is systematically collected after each workshop. In 2018/2019 we will collect feedback 3 month after the workshops to find out how critical appraisal skills were applied since the workshop was attended. We will use an online survey and invite participant to participate in focused group or individual interviews.

#### Results

The successful introduction of CASPIR is reflected in the number of participants who have partaken to date. In 2017, 79 participants attended along with a bespoke workshop for 120 undergraduate student nurses from the University of Limerick. The results of the confidometer show an increase in confidence in undertaking critical appraisal just after participating to the workshops.

#### Conclusion

The workshops are very popular and often run to full capacity. Once analysed, the data from the 3-month period feedback will CASPIR on how to best further develop our program. Increase the number of trainer and expand geographically, 1-day workshops rather than 3 hours, more frequent workshops, public outreach?

#### Biography and Bibliography

Isabelle Delaunois is the Medical Librarian at the University of Limerick Hospitals. Isabelle is responsible for the operational management of the Regional Medical Library as well as for developing information literacy skills. A librarian for over 20 years, Isabelle is passionate about supporting evidence-based medicine and teaching how to be systematic with your search. Prior to joining the RML, Isabelle was an information specialist at the European Union institution and in the private sector.



## Poster

Keywords: Academic Social Networks Sites, ASNs, hospital, physicians, medical library

### **Use of Academic Social Networks Sites by Medical Staff in a University Hospital: new competencies for a Medical Library**

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#### • Introduction

In the last decades the scientific communication and evaluation model has experimented a deep transformation fundamentally motivated by the emergence of academic and general social networks and, powered by numerous collaborative tools that have emerged around the Web 2.0 movement.

Nowadays, it is assumed that quality research must be a visible investigation. Currently, it is not enough just to publish, it is necessary to disseminate and promote an adequate personal and institutional digital identity.

For all these reasons, it is necessary to promote a culture of using Academic Social Networks Sites (ASNs), digital identity management and scientific visibility promotion in the medical collective.

#### • Aim

Evaluate the use of the ASNs by the medical staff working in a university hospital in order to identify opportunities for a medical library.

#### • Method

This is a quantitative study, based on an online survey among 955 physicians, who work at the University Hospital Miguel Servet in Zaragoza (Spain), and registered in our medical library database.

The survey was designed and pre-tested before distributed to the target population. It was sent in June 2018. The respondents belong to 42 different medical specialties, and to 5 different professional categories.

#### • Results

A total of 259 of the 955 replied to the survey, with a response rate of 26%.

Participation by gender: 130 men and 129 women.

The main age range of participation was from 31-60 years old; the youngest (20-30) and the oldest ones (61-70) participated less.

The distribution of response rate by category: the majority were received from the Heads of the Service and Section: 50%; the least response, from MIR (Residents): 8%.

Related to the question: "Do you know one or more ASNs?" A 66% respondents say to know at least one or more ASNs.

Respondents who knew some ASNs where asked which one of the following they used more frequently: Google Scholar (GS), Mendeley, ResearchGate (RG), Academia.edu and F1000: they use regularly Google Scholar (24,6%) and ResearchGate, (21,7%). By contrast, F1000 is unknown to 68.4% of the respondents.

Purposes of using ASNs: we proposed 15 reasons to point out. The main answers were:

- Download full-text publications (GS, RG)

- Stay updated (RG, GS)

- Follow other researches (RG, GS)

- Find new research ideas (GS, RG)

#### • Conclusions

- The findings indicate that 66% of our medical users know at least one ASNs.

- The more frequently used are GS and RG.

- The use of ASNs is more frequent in consolidated professionals.

- Because of the low participation, we have to focus our attention in the youngest (Residents).

- The respondents seem to show more concern for being updated than for promoting themselves and increasing their scientific visibility.

- With this study, our medical library finds a determining role in the Institution in supporting and training medical hospital professionals on the mechanisms of scientific communication.

- Finally, to point out that this study contributes to amplify our roadmap as information professionals, not just in medical libraries, but in academic or university ones.



## Poster

Keywords: Embase, Medline, Cochrane, recall, precision

### Which databases are worth searching for systematic reviews?

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#### Introduction

Database licenses are expensive, searching multiple databases is time-consuming, and customers often ask which ones to choose. We generally recommend Embase, Medline, Cochrane and specialised databases depending on the topic, but we would like to back up these recommendations with retrospective analyses from our previous searches.

#### Aim

Our aim was to identify databases that have a high recall and that uniquely retrieve references later included in systematic reviews.

#### Method

We examined systematic reviews for which MGP had performed the literature search. We compared the included references with our unprocessed EndNote files before deduplication to determine in which databases these references had been found. The recall (proportion of included references found in a specific database compared to all included references) and precision (proportion of included references found in a specific database compared to all references found in that database) were calculated. We also counted the number of included references that were only found in one database by our search ("unique hits").

#### Results

So far, 25 reviews have been analysed, of which 8 belong to musculoskeletal disorders or exercise, 6 to the topic of surgery or transplantation, 5 to dentistry, 1 to veterinary medicine, and 5 to miscellaneous topics. A mean of 1360 references (min. 112, max. 8590) had to be screened by the authors of these reviews, and 21 references (min. 1, max. 67) were included (mean 88 screened for 1 included, min. 15, max. 508).

The recall was highest for Scopus (median 0.91), followed by Embase (0.87), Medline (0.83), and Web of Science (0.77). The precision was highest for Scopus (0.052), followed by Medline (0.045), and Cochrane Library (0.028).

The Cochrane Library was searched in 21 of the 25 reviews, but not a single unique hit (reference included in the review) was found. Pedro was searched twice without a unique hit, Biosis 8 times with 1 unique hit.

#### Conclusion

Scopus, Embase, and Medline were the most rewarding databases regarding recall. The Cochrane Library did not yield any unique hits.

These results may depend on the choice of databases (e.g. we do not search Google scholar), the search strategies (we search the Cochrane Library only with free text terms in addition to Medline/Ovid or Ebsco) and the field of research. More published systematic reviews will have to be analysed for more significant statements. Benchmarking with other search teams is wanted.



## Poster

Keywords: PRISMA, reporting standards, systematic reviews, peer review, research methodology

### Why are systematic reviews that fail to meet PRISMA reporting requirements still being published?

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#### Introduction

The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) was developed to improve the quality of systematic review (SR) reporting, and therefore the quality of published SRs. Nevertheless, our own research shows that the searching methods of SRs are often poorly reported which means the SRs are not replicable. This poor reporting of the conduct of search methodology means readers cannot be confident of the overall results and conclusions presented as they have no way of knowing whether vital evidence has been missed or not. Our analysis found that many SRs that claimed to comply with PRISMA failed to describe information sources adequately (#7 of the PRISMA 2009 checklist) and/or failed to present a minimum of one full electronic search strategy (#8 of the PRISMA 2009 checklist).

#### Aims

By analysing a sample of SRs, we aim to identify:

- How many SRs claim to be PRISMA compliant but fail to meet #7 and #8 of the PRISMA 2009 checklist?
- How many SRs, which fail to meet PRISMA requirements for questions #7 and #8, have been published in journals which require PRISMA compliance?
- Is there a correlation between well-reported SRs and a low risk of bias assessment overall, when applying the ROBIS (Risk of Bias) assessment tool?

#### Methods

We will identify our sample of critically appraised SRs from KSR Evidence, a database of SRs which includes a subset of appraised SRs already evaluated using the ROBIS tool. We will assess whether they are PRISMA compliant in #7 and #8, and investigate any correlation between how well the methods are reported and the overall ROBIS assessment of risk of bias. Finally, we intend to investigate all the SRs which fail to meet PRISMA requirements #7 and #8 to assess whether they were published in journals which insist on PRISMA compliance.

#### Results

Results will be presented graphically to highlight successful PRISMA compliance, any correlation of this to the overall quality of an SR, and whether journals adhere to their own publication rules.

#### Conclusion

Results from previous research on the reporting of and conducting of searches for SRs indicates that there are SRs which fail to meet PRISMA requirements but are claiming to be PRISMA compliant. We will discuss whether this is a failure of the peer-review process or an indication that poor reporting of SR search methods is not considered a significant enough reason to exclude an SR. We would like to consider the consequences of publishing peer-reviewed SRs which may be missing vital evidence as a result of poor searching. Our conclusions will also discuss how information specialists should be involved in reporting their own SR searching work and should be consulted in the peer-review process. Information specialists and search experts are best placed to assess whether the conduct of searching and the reporting of methods for SRs is of an acceptable standard.

