Canadian Health Libraries Association 2013 Conference	Association des bibliothèques de la santé du Canada Congrès 2013
22–25 May 2013	22 au 25 mai 2013
Saskatoon, SK, Canada	Saskatoon (SK) Canada

Presentation abstracts / Résumés des exposés

Supporting Research: Reframing the Library's Search Service

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Introduction. The formation of a Research Support Group (of which the Health Sciences Library is a member) prompted an evaluation of our literature search service. While the service has been in place since 2005, the visibility of the Research Support Group sparked an increased demand for a comprehensive search assistance service. Simultaneously the librarians expressed a need for a formalized process for literature search requests. It was an ideal time to review how we perform and market search assistance services. **Methods.** We began by examining the librarians' individual approaches to identify consistencies and gaps in service, as well as a review of the usage statistics to identify trends in requests by user group, type of request, and topics. Additionally we searched the literature for current evidence-based approaches, and examined the approaches at Canadian and US health sciences libraries to determine whether standards of practice exist. **Results.** Our review led to the development of a three-tiered service model designed to improve clarity for users and provide structure for the librarians. Outcomes of the review included: a new webpage and LibGuide for Search Assistance, a revised online user request form, and an internal process and response template for search requests. **Discussion.** Terminology and approach varied greatly among libraries. We were unable to model any set standards, resulting in a model that best suited our environment. To date, the response has been very positive. We will continue to evaluate the usage statistics and plan to engage Faculty in further analysis of the search assistance service.

Challenges in Creating Canadian Indigenous Peoples Filters for Medline

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Introduction. Performing systematic review searches related to Canadian Indigenous Peoples, particularly in areas of public health, is difficult because MeSH terms for both Indigenous Peoples and geography do not retrieve all relevant articles in Medline. Keyword searching for Canadian Indigenous Peoples presents challenges in the varieties of names, spellings and languages. This project undertakes to create a series of Canadian Indigenous Peoples filters to allow for efficient extraction of a larger number of relevant articles and to document challenges to be considered in the development of Indigenous Peoples searches. **Methods.** Terms describing both Canadian Indigenous Peoples and geography, were identified using government, historical and ethnographic publications. Name lists include current and historical names in multiple languages, as well as local and settlement names and names of linguistic groups. Test keyword searches were created for several provinces and territories. Search results were reviewed for false recalls related to terms with multiple meanings and groups of people who overlap borders. Revised searches were enhanced with terminology which implies the presence of Indigenous People. Results from keyword searches were then compared with MESH searches to identify differences. Keyword search results were analysed for relevance. **Results.** Preliminary keywords retrieve substantially more relevant articles related to Indigenous Canadians, than they currently can with the MeSH terms.

Searching for Knowledge Translation Literature or How to Find the Needle in the Haystack

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Introduction. To discuss the librarian's role in the knowledge to action cycle and the challenges of searching in knowledge translation; to present practical strategies for searching knowledge translation questions. **Methods.** Knowledge translation (KT) is a growing area of research in the health sciences. The problem of inconsistent language has been well documented in the literature, but few practical strategies exist to assist the librarian who must create comprehensive searches for systematic and scoping reviews in this field of study. Through the experience of creating KT searches for researchers in medicine, nursing, and rehabilitation, the presenters have developed suggested best practices for approaching KT questions. **Results.** Examples of successful search strategies and the rationale behind the creation of these strategies will be presented. Concrete methods for approaching the development of KT searches will also be presented with an emphasis on the following key areas: KT theory versus KT interventions and tools, suggestions on resources to search, and guidelines for selecting MeSH terms and keywords. **Discussion**. The challenges and opportunities for librarian involvement with knowledge translation research will be discussed.

Going Out on a LIM: Consumer Health Information and the Practices of Lay Information Mediaries

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Introduction. Unpaid caregiving is a pillar of health care and caregivers will often seek health information on behalf of a loved one by acting as a lay information mediary (or LIM). Few research studies investigate the information practices of LIMs and how librarians might best serve this user group. Using two original research projects and the general lay information mediary behaviour (LIMB) model, we explore and describe the information practices of lay information mediaries in consumer health contexts. Implications for librarians interacting with LIMs will be discussed. **Methods.** The first data set consists of the messages posted on three online newsgroups in which posters were seeking information on behalf of a loved one who suffers from depression. Additional data were gathered from ten (10) in-depth interviews with adults who self-identified as suffering from depression. Similarly, data for a pilot study was collected via telephone interviews with five (5) adult informal caregivers. Data from both studies were analyzed using constant comparison. **Results.** LIM searches are internally motivated, self-initiated, and occur in the presence of a catalyst. However, LIMs serendipitously encounter pertinent information as well. LIMs draw upon experiential and expert knowledge to guide their searching, and to evaluate the usefulness of the information found or encountered. LIMs frequently opt to store the information acquired rather than sharing it with the loved one. **Discussion.** The results partially support the LIMB model and emerging LIMB characteristics. Librarians can serve LIMs by drawing upon both expert sources and sources of information where experience is emphasized.

Information Needs and Information-Seeking Behaviour of Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) Health Professionals: Results of a Follow-Up Study.

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Introduction. Lesbian, gay, bisexual, transgender and queer (LGBTQ) people comprise a significant proportion of the health care team, yet almost no research has been conducted into their specific information needs and information-seeking behaviour beyond that by Fikar and Keith (2004). Much has changed since 2004, such as perceptions of LGBTQ people by society as a whole, and an explosion in the use of social networking and in the availability of health information online. There is therefore a need for an updated and expanded study to examine how these and other changes may have affected the information-seeking behaviour of LGBTQ health professionals. **Methods.** A web-based questionnaire has been designed which builds on Fikar and Keith's work and which takes it further by investigating attitudes to the use of social networking and to new technologies which were not available at the time of the original study. The results of an analysis of responses to this questionnaire and to a small number of semi-structured interviews will be presented, along with a discussion of the implications for health sciences librarianship and a summary of relevant changes over the last decade. **Results**. Results are expected by May 2013. **Discussion**. This paper will provide a useful insight into the current information-seeking behaviour of LGBTQ health professionals and into changes that have occurred in this area over the last decade. It will provide evidence to show how health sciences librarians can continue to meet the needs of, and to engage with, this significant group of users.

Status Update: Mobile Services and Supports Available to the Health Sciences Information Consortium of Toronto.

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Introduction. In the summer of 2012, the Electronic Resources Sub-Committee of the Health Sciences Information Consortium of Toronto (the Consortium) created the Mobile Devices Task Force (MDTF). The purpose of the MDTF was to learn more about what is happening regarding wireless technologies in Consortium member libraries, and supports available to them. A formal research project and a mobile apps review was conducted by the MDTF. **Methods**. Data were collected using three separate web-based surveys targeted at: i) Heads of Libraries who are members of the Consortium; ii) Wireless Champions from each member's organization; and iii) Vendors of the Consortium. A "Mobile Apps Review" was also conducted based on a list of criteria prepared by the MDTF using a "Mobile Apps Review Tool" created by the MDTF. **Results**. Data from the three surveys will be reported, including feedback from closed and open-ended questions. The results from the Mobile Apps Review will also be discussed. **Discussion**. The information gathered from the surveys achieved the objectives set out by the

MDTF. Findings of the review have provided insight into: i) how Consortium libraries are rolling out mobile technologies and their plans; ii) the main types of mobile devices being rolled out by home organizations, and iii) the main types of mobile devices being supported by vendors.

The results willprovide the Consortium with information it needs to ensure that key mobile devices are supported by vendors it deals with. Areas for future research will be discussed.

More Knowledge On The Go: A Survey of Mobile Device Usage in Pharmacy.

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Introduction. Mobile devices and resources have been topics of interest to health sciences libraries for many years. While studies have examined medical student and physician use of handheld technologies, few have investigated their use by pharmacy students and faculty. This study is designed to gather information about this audience by surveying students and faculty at participating Canadian pharmacy schools about their adoption of smartphones and tablets. Some topics to be explored include popular products, selection criteria for resources, and barriers to accessing and using mobile resources. **Methods**. The methodology follows the protocol developed by a similar medical student and faculty survey conducted last year, the results of which were presented at CHLA 2012. This multi-site study will be conducted at seven Canadian universities. An electronic survey was distributed in February/March 2013 to pharmacy students and faculty members via departmental email distribution lists, personal contacts, and relevant websites. Survey questions gathered data about the types of information sought, frequency of use of mobile resources, barriers to access, awareness of institutionally-licensed resources, and personal purchasing of resources. Interviews with participants will be conducted at a later date and will not be completed in time for presentation. **Results**: Data from over 500 survey responses will be presented. **Discussion**. Mobile access will continue to be a major factor in collections decisions and service offerings in academic health sciences libraries. Methods for effective support for mobile technologies and resources in this setting, and the need for marketing, will be discussed.

Launching a Three-Part Mobile Resources Program at London Health Sciences Centre.

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Introduction. Hospital staff use their smartphones or tablets at work and have been inquiring about mobile access to Health Sciences Library's resources, as well as recommendations for clinical apps. The Health Sciences Library's mobile resources program aims to promote and support clinical use of mobile devices to improve staff efficiency and patient care. **Methods**. We began by researching how other library websites displayed on mobile devices, which mobile services were offered by other medical libraries, and which apps were recommended. Next, we created a mobile resources program that included three components: a mobile optimized library website, a subject guide highlighting free, subscription-based and fee-based mobile apps, and two instructional sessions encouraging staff to discover and implement clinical and productivity apps. **Results**. Feedback from our subject guide and

instructional sessions indicates that our clients have found these helpful. We hope to continue making improvements and refinements based on user feedback. **Discussion**. There were challenges to making resources fully accessible on mobile devices. Some resources require an internet connection to use, but the hospital only provides WiFi access to certain clinical staff. Our mobile website also has significant limitations due to the platform, and the catalogue cannot be accessed from a mobile device or offsite desktop computer as it is behind a firewall. In addition, some subscription resources are not available on mobile platforms and a few are inaccessible to hospital staff or affiliates due to the limitations of the existing contract with the vendor. We discuss possible solutions and future directions.

Graphic Medicine: From Library to Classroom

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Introduction. Graphic medicine is defined as the use of comics in health sciences education and patient care. Graphic stories about personal experiences of illness from patients and their families can be used to illustrate distress, empathy and collaboration between family members and health professionals and thus give students a broader experience of disease. We present a collection of graphic novels and outline collaboration with professors from various faculties in order to use comics as teaching material in health sciences. **Method.** The university has health sciences faculties of Nursing, Medicine, Pharmacy, Dentistry, Veterinary Medicine and schools of Public Health, Optometry and Kinesiology. The Health Library is offering its patrons a collection of 40 comics mainly on the theme of patient and family illness experience. An ongoing survey gathers feedback from users; results will help us promote the collection. A librarian is working with professors from the faculties of Nursing, Medicine and Pharmacy in order to integrate comics' excerpts into e-learning modules for three health and social services interprofessional courses reaching more than 1000 students annually. Other courses teaching empathy and partnership with patients will be identified and professors will be approached to raise awareness of the collection's potential as teaching material. **Results.** The collection has been available to patrons since October 2012. Survey responses collected so far are very positive and titles are regularly borrowed. The collection has been added as suggested reading in a physiotherapy course outline. **Discussion.** The comics collection is already widely used by our patrons. Steps are being taken to integrate the collection into more health sciences courses and thus define graphic medicine as teaching material in health sciences education at the university.

Evaluation of Evidence-Based Point-of-Care Medical Applications for Mobile Devices by Residents on a Clinical Rotation: A Role for Librarians in Clinical Research.

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Introduction. We discuss the results of a two phase study on evaluating medical apps in the clinical setting. In phase one librarians created a scoring rubric to assess point of care apps. In phase two residents evaluated the applications during their internal medicine rotation. This paper will discuss the overall project but will focus primarily on phase two. **Methods**. Residents were asked to utilize and evaluate each of the selected medical applications during their internal medicine rotation. Upper-year medical students and residents with rotations

of at least 4 weeks in length were recruited from Nov 2011 until Nov 2012. iPod Touch handheld devices were provided pre-loaded with the necessary software. The residents were assigned the apps in different sequences to minimize bias and confounding factors. At the end of each week the participants evaluated the software using a questionnaire. **Results**. Strengths and weaknesses of the study as well as the role of the librarian will be discussed. Information seeking behaviour gathered from the surveys will also be reported. **Discussion**. Although medical staff expressed a strong interest in using mobile devices in practice, it was a challenge to get participants for the study. There were also technical obstacles such as keeping the devices charged and updated. The librarians were responsible for creating the rubric in phase one but also provided technical and logistical support in phase two. There is a place for librarians in clinical research outside of literature reviews.

Examining the Impact of Mobile Learning Using iPads in the Anatomy Lab: A Pilot Study.

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Introduction: A pilot study was undertaken from 2011–12 to evaluate mobile learning by medical students in the anatomy lab at the UBC Southern Medical Program. The main objectives were to encourage active learning and discussion during labs, provide enhanced resources to aid in teaching and visual learning of anatomy, and to provide self-directed learning opportunities. This paper presents the preliminary findings of this study to help inform the future direction of mobile learning in medical education. **Methods:** 7 iPads and 4 apps were utilized by the anatomy instructor and 32 first year medical students. Apps selection was reviewed by the anatomy instructor and librarian using Bates & Poole's (2003) SECTIONS framework. The UBC Evaluation Studies Unit collected data using an online survey administered to 32 first year medical students and focus groups with 7 SMP faculty and staff. **Results:** 76% of students that responded (n = 21) found the iPads to be easy to use and appreciated faculty guidance on what apps would be useful in the lab setting. 68% of students felt the iPads had a positive impact on their overall learning. The devices were most useful in regards to providing access to visual resources (90%), engaging students in active learning (80%), and enhancing discussion within dissection groups (70%). **Discussion**: The use of mobile devices such as the iPad in the anatomy lab appears to have a positive impact on medical students' learning. Further investigation is needed to explore the long-term impact of app benefits, mobility requirements, device procurement and implementation.

Embracing Evidence-Based Practice: the Effectiveness of Small Group Literacy Instruction for Undergraduate Medical Education Students.

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Introduction. In 2011, the library changed the information literacy training taught in the Applied Evidence-based Medicine course, from a one hour hands on lab to five 15 minute sessions that were part of the preceptor lead small group seminars following each of the five course lectures. This research evaluates the effectiveness of this approach to teaching information literacy skills. **Methods**. 160 second-year Undergraduate Medical Students were asked

to complete an online survey before and after the series of five 15-minute information literacy sessions. Data analysis was through simple descriptive statistics, reporting proportions of responses and comparing pre and post results. **Results.** 144 students responded to the pre survey and 112 responded to the post survey. The number of students likely to use Medline increased from 31% to 63%. After the small group instruction program 75% of the students would be likely to consult a librarian as compared to 54% in the pre survey. Students expressed increased confidence in their ability to create answerable clinical questions (43% to 94%), choose resources (76% to 94%), and find a systematic review (72% to 91%). **Discussion.** Integrating information literacy instruction into small group seminars was an effective method to deliver information literacy skills. While we were concerned about the brief time allotted and the lack of hands on learning, the small group and presence of a physician preceptor created an environment where the importance of the skills could be emphasized.

Evaluating the Impact of a Librarian-Faculty Health Literacy Education Intervention in a Family Medicine Residency Program.

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Introduction. To determine health literacy (HL) knowledge and its use in practice among academic family physicians and residents; measure the impact of an education intervention on first-year family medicine residents' knowledge of and willingness to employ HL principles. **Methods**. A 21 question online survey assessing HL was administered at baseline to physician faculty members and first-year family medicine residents (FMRs). Over two academic periods (2010/11 and 2011/12), the FMRs in three teaching clinics received two health literacy focused education sessions, delivered by a librarian-faculty team. Session recipients were asked to voluntarily respond to the post-test survey. Descriptive statistics was used to analyze the survey data. **Results**. There was 66% response rate among physician faculty and 12% among both pre-test and post-test FMRs. A majority of both faculty and pre-test resident groups underestimated the prevalence of low HL in their patient population. 11% pre-test FMRs reported feeling 'not at all' confident in recommending high-quality consumer health website as compared to 0% post-test for the same confidence level. Knowledge of low health literacy indicators increased 10–20% across all indicator categories in post-test responses. In assessing the knowledge of strategies in addressing low health literacy, post-test responses were higher for all strategies than both pre-test and faculty. **Discussion**. The HL education sessions improves residents' knowledge of health literacy and awareness of its impact on their practice. Future librarian-delivered HL sessions should focus on integrating information management skills with HL principles to facilitate its practical application in practitioner-patient communication and patient education delivery.

Evaluation of the Effectiveness of Course Integrated Library Instruction in an Undergraduate Nursing Program.

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Introduction. Many faculty in two Schools of Nursing found that nursing students in the 4th year of the BN program were not well equipped to efficiently and effectively perform information literacy activities, such as doing research to support their daily work. A course integrated information literacy program was implemented

at both sites, which left some students having very little information literacy training, while others, who started the program in later years had information literacy training in all or most years of the curriculum. This study sought to evaluate students as they gained more experience with information literacy. **Methods**. Two methods of evaluation were employed to determine if increased exposure to information literacy training improved student's level of competency and confidence with information literacy. The first method was a comparison survey of fourth year students in different stages of the information literacy program. The second method compared first and fourth year student's competencies and confidence with aspects of information literacy. **Results**. Results are currently being analysed to determine if students of differing levels of information literacy training are more competent and more confident with aspects of information literacy. **Discussion**. There was significantly more data collected comparing first and fourth year competencies and confidence levels. Due to this, results will be discussed using this method. Limitations and strengths of the two methods will also be discussed.

Value and Impact of User-Initiated Literature Searches on Academic and Clinical Practice.

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Introduction. The Health Science Library, an academic and hospital library, offers a literature search service to faculty, staff and health care providers. Within a twelve-month period over fifty literature searches were requested. An unsolicited email of thanks from a recipient of the service was the impetus to determine the overall perceived value and impact of literature searches performed by librarians.Given the varied population of users we are able to determine value and impact related to both clinical and academic environments. **Methods.** Using the critical incident method of subject selection, all those who requested literature searches during a twelve-month period were invited to complete a survey regarding their experience with and their perceived value of the service. The survey was designed to elicit general satisfaction with the service, identify the nature of the informational need, determine whether or not the information was utilized clinically or academically, whether or not the information was used in an evidence-based practice model, what was impacted by the information utilization, and how much perceived value was placed on the impact. **Results.** Results of this study are not available at the time of paper submission to CHLA/ABSC 2013, however they will be analyzed and prepared for dissemination in the first quarter of 2013. **Discussion.** Aside from adding to the body of evidence related to the clinical impact of library services, the intention of this study is also to determine the value of the service in terms of academic pursuits including curriculum planning, evaluation, assessment, research, and professional development. Results will be used to inform the development and prioritization of library services at the Health Sciences Library as well as showcase the perceived value and impact through internal promotion and dissemination.

Design for a Collaborative Needs Assessment: Inspiring Innovative Library Services.

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Introduction. Health librarians working in non-traditional academic or clinical settings are faced with the challenge of determining the needs of their unique clientele. Furthermore, a preliminary literature review revealed a dearth of literature on user-based information needs assessments in health research organizations. The objective of this study is to investigate and compare the needs of users in two such settings: a research granting

agency and a health outcomes research group. **Methods**. Our literature review will guide the design of an information needs assessment, using a mixed-methods design, conducted at both research settings. Quantitative data will be collected using anonymous online and paper surveys. The full population at both organizations will be surveyed due to the small pool of potential survey participants (N = 70). Quantitative data will be analysed using SPSS. Qualitative focus groups interview guides will be informed by preliminary analysis of quantitative data. Qualitative data will be analyzed using a content analysis approach and managed using Nvivo. **Results**. Results from the quantitative and qualitative analyses will be presented at future CHLA/ABSC conferences. We anticipate the results will illuminate both similar and disparate needs of users between the two research settings. **Discussion**. The results of this explorative study will enrich the knowledge base of these unique health research settings, and contribute evidence to develop and implement library services that align with users' needs. Further comparison of data between the two organizations may identify similar needs that will allow for future collaboration of service provision and inspire innovative library services.

Just Do It. Using a Do-It-Yourself Usability Protocol to Test the Redesign of the Health Sciences Library Webpage.

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Introduction. In 2012 University of Calgary Libraries and Cultural Resources implemented a new webpage, establishing new standards for design. Branch library webpage redesign followed. The new standards, as well as changing needs and usage created an opportunity for the Health Sciences Library (HSL) to significantly rework their webpage. To ensure that the new design was easy for users, a usability study was conducted. **Methods**. Following a do-it-yourself usability protocol (Krug, 2010), eight participants (four faculty, four students) were asked to complete eight tasks using a mock-up of the redesigned webpage. A think-aloud protocol was used. The users' thoughts and pathways to complete these tasks were captured using Camtasia and then analyzed by two librarians. **Results.** (1) Important information needs to be "above the fold"; (2) Unified search, using article title, is the fastest way to find a known article compared with searching by journal title. Database is still "library jargon"(Duncan & Fichter, 2004); (3) When looking at a list of recommended databases, users will scan for databases they've heard of; and (4) 7/8 users had trouble navigating through the Research Guides. **Discussion**. The biggest challenge of the testing was participant recruitment. The redesigned page worked well, and only small design changes were needed. The testing revealed key information about how users search that will be useful for designing future instruction. It also highlighted that work needs to be done to improve our Research Guides.

Canadian Pilot Study of the Value and Impact of Hospital Library and Information Services.

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Introduction. The objective of this ongoing program of research is to determine the impact and value of all types of hospital-based library and information services on patient-care outcomes. This research expands on prior value studies, with a specific focus on the Canadian context. **Methods**: Original data were collected via a web-based questionnaire administered in four Canadian hospitals, as part of the larger NN/LM MAR study. Following a

modified critical incident technique, physicians, residents, and nurses recalled a time in which they needed information related to patient-care, specified the type of information needed and how it was obtained, and the impact on patient-care and specific outcomes. In a follow-up phase, semi-structured interviews with librarians from the four hospitals explored their experience of participating in the study, how they applied the results in their library practice, and their insights into future research. **Results**. Progress on the studies will be reported, including secondary analysis of the survey data, findings from the interviews, and status of ongoing research. **Discussion**. Overall, this program of research will document the value of library and information services to patient-care providers, and how the use of these services has a positive impact on patient care outcomes.

Benchmarking Canadian Health Facility Libraries.

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Introduction. The purpose of this study was to conduct a benchmarking survey of Canadian Hospital Libraries to provide Canadian healthcare librarians with statistical data to support them in the management of their libraries. The objectives were to determine: 1) the status of hospital libraries in Canada, 2) how many hospital/health facilities have libraries or how healthcare staff access knowledge based information, 3) the consortial relationships, university affiliations and networks that exist, and 4) if libraries meet the 2006 CHLA/ABSC standards. **Methods**. The research design included an online survey of 63 questions under the headings of institutional profile, administration, staffing, environment, resources, and services. The survey was sent directly to 250 heads of libraries, as well as sent out to Canadian library email listservs. **Results**. The survey is currently being conducted with a closing date of December 24, 2012. Preliminary results will be available in January 2013 with data analysis being conducted in January/February 2013. **Discussion**. There is no current benchmarking data for Canadian hospital libraries and there have been many political, economic and technological changes during the past few years that have had a substantial impact on libraries. Anecdotal data suggest that librarians have responded to these changes through library closures, mergers, consortial affiliations, and changing their services. Librarians will be able to use the collected data to compare services, establish best practices, make management decisions, and prepare self-studies for accreditation purposes

Information Bootcamp: Librarians as Personal Trainers.

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Introduction. Responding to the demand for online access to library services and resources results in fewer people coming to the library to attend workshops, obtain information, or ask for reference help. The increase in remote library use brings the new challenge of providing guidance and training to users who find themselves struggling to keep up with related technologies, information overload, knowledge transfer, and library research. Recognizing that users have individual needs and varied schedules, the Information Bootcamp program was developed to provide personalized, competency-based training to users at their convenience. **Methods**. A list of competencies was developed to reflect anticipated needs. A relational database was created to track bootcampers, trainers, competencies identified/completed, and meeting dates/times. Posters were placed strategically and a webpage created. Initial meetings with bootcampers are used to identify competencies they wish to attain and to plan their training program. Progress is tracked as competencies are attained. Upon completion of their individual program, bootcampers are lauded on our Wall of Fame. At time of submission, the program is about to be launched.

Anticipated results include an increase in user ability and comfort level related to searching for and managing information and resources from the Health Sciences Library and an increase in user interaction with the reference librarians. **Results**. Results will be available in Spring, 2013. **Discussion**. Proactive outreach is essential to the provision of quality and relevant informational train-ing. Initial reaction from users informed about the program is positive in terms of addressing a need for customized one-on-one training on areas with which many lack confidence or skill. Users have expressed appreciation for recognizing the individual nature of informational needs and the accommodation of varying schedules and learning styles.

Developing Skills for Searching Public Health Research: Online Learning Module.

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Introduction. Searching for research evidence is a key skill for evidence-informed public health (EIPH) practice. Finding research evidence to support public health decisions is an acknowledged challenge. This workshop will introduce health librarians to online learning resources to support their work conducting searches for public health research and to develop searching skills among practitioners and students. The National Collaborating Centre for Methods and Tools (NCCMT) aims to build capacity in EIPH practice through skill development and training resources for public health professionals. This presentation will explore development, use and preliminary evaluation of NCCMT's online learning module, "Search-ing for Research Evidence in Public Health." **Methods**. Content for this module was developed by a professional health librarian and McMaster faculty, and pilot-tested by public health professionals. Some preliminary evaluation data from pre and post-assessments will be shared. **Results**. This learning module is one resource in a comprehensive suite of free online learning resources available from NCCMT. The online learning module can be used in tandem with online searching pyramids which assist users to access public health research evidence. There are searching pyramids for public health research in general and for six specific content areas. Learners can assess their progress through the searching module by using the Learning Centre, which features self-assessments for users to obtain a certificate of course completion. **Discussion**. Launched in 2013, health librarians can use this learning module, "Searching for Research Evidence in Public Health", to conduct searches for public health research and to support practitioners and students in developing searching skills.

Engaged Learning: Library 101.

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Introduction. First-year nursing students find the library difficult to navigate, both physically and virtually. A new program offered in Fall 2012 increased student involvement and resulted in improved learning outcomes. **Methods**. The class was divided into 4 groups. Each group had a librarian leader who presented information and learning activities at 4 successive stations in the library. These stations and activities will be described. Students were also asked to complete online tutorials on their own time. **Results**. At the end of the library session, students completed a "one-minute" paper including a random question about any of the activities just completed. The entire learning of the library material occurredduring an introductory lecture, the library session and the online tutorials. All the content was tested as part of the midterm and final exams for the course. **Discussion**. The results will be discussed and the implications of this new program explored. It is hoped that this model could be adapted by other institutions that need to train new library users. The authors are interested in audience feedback and participation.

The Canadian Research-Embedded Health Librarian Experience.

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Introduction. Research-Embedded Health Librarians (REHLs) provide tailored, intensive information services to health research teams within which they are integrated. At the 2011 CHLA/ABSC Conference, we presented results of a survey comparing REHLs with traditional health librarians. This paper reports on Part II of the CHLA/ABSC Chapter Initiative Funded REHL study, a mixed-methods exploration of the experiences of Canadian REHLs. **Methods**. REHL experiences were documented through a combination of: a) quantitative online survey, and b) qualitative data from four (online or face-to-face) focus group sessions. A team of current and former REHLs conducted descriptive statistical and qualitative analysis in order to identify and interrogate themes related to REHL identity, contributions, and challenges. **Results**. REHLs may identify more strongly as researchers than as librarians, with professional needs and rewards more typical of a researcher than a traditional librarian. REHLs value "belonging" to the research team, involvement in projects from conception through publication, and developing in-depth relationships with non-librarian colleagues. Yet, despite widely expressed job satisfaction, some REHLs struggle with a relative lack of job security in a grant-funded environment, few appropriate professional development opportunities, and little LIS community and support. **Discussion**. REHLs share certain attributes of other embedded librarians; however REHLs emerge as distinct from both clinical informationists and academic liaison librarians. If REHL jobs are (as perceived by focus group participants) a growing trend, MLIS programs, professional associations, and academic libraries will need to respond to the needs of this population or risk fully losing them to the health research field.

Becoming One of the Team . . . the Clinical Librarian in Critical Care.

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Introduction. The University Hospital is a large teaching hospital with an 18 bed multidisciplinary Critical Care Unit. As part of an innovative collaboration between the library service and Critical Care department, the Clinical Librarian regularly attends ward rounds. Alongside clinicians, the Clinical Librarian conducts evidence searches on an iPad at the bedside to find the latest guidelines and recommendations on the patient's condition and treatment. This evidence can immediately inform decisions made about the patient. Since earning the trust of the doctors, nurses and allied health staff, the Clinical Librarian is considered another member of the multidisciplinary team. **Results**. The results of a pilot phase show that if the Clinical Librarian had not been present, 45% of clinical questions would not have been pursued, and 55% would have been addressed with an internet search (e.g. Google). Clinicians reported that the evidence provided them with a better understanding of the treatment, aided treatment decisions and improved patient management. **Discussion**. The presence of the Clinical Librarian on the ward round enhances clinical decision-making and saves the time (and associated cost) of health care professionals undertaking evidence searches themselves. A short film reconstructing the evidence supported ward was produced. The film has been used to raise the profile of the project, demonstrate value and impact, and to support business cases. The success of the project has afforded senior hospital management the opportunity to involve the library service not only in patient care, but in management decision-making and medical education.