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

Stat!Ref talks (5 minutes) abstracts / Résumés des communications Stat!Ref (5 minutes)

Breaking Ground: The Process of Developing an Institutional Research Services Policy

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In response to an increasing demand for various types of literature reviews, the Health Sciences Library embarked on a project to create a policy that would support these requests. The aim of the Research Support Services Policy was to help mitigate and outline the type of support that librarians could offer at the Health Sciences Library and their affiliated hospital libraries. The Research Support Services Policy encompasses all types of reviews, including narrative, scoping, rapid and systematic reviews and meta-analyses. The resulting policy came as a collaborative effort between the Health Sciences Library and the affiliated hospital libraries. Once cemented at the branch level, the policy was presented to the senior management of the University Library, and underwent revisions that reflected a more inclusive policy that was applicable to the libraries within the network of the University. The logic behind this decision was two-fold: systematic reviews are becoming more interdisciplinary, as well as expanding beyond the health sciences into other disciplines (e.g. psychology, education, social work, and geography). There is paucity of published literature regarding formal literature review policies within the library community. Bearing this reality in mind, the resulting policy exhibits an innovative approach to balancing the needs of the research community with the workload of a librarian. It also is the fruit of a cooperative and collaborative effort among the librarians at the Health Sciences Library and affiliated hospitals libraries.

Reviewing the Electronic Bookshelf (EBS) at Doctors Nova Scotia

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Introduction. As part of a 10 year review of services, Doctors NS initiated a needs assessment for the virtual health library (the Electronic Bookshelf; EBS). The objective was to elicit feedback from members in a structured manner with respect to member needs regarding resources, and services in the context of other similar services platforms in Canada and internationally. **Methods**. From November 2010 to April 2011 Doctors NS conducted a structured study to assess the information resource needs of the membership. Consultants Dysart & Jones Associates first conducted an environmental scan of Canadian and US services. Subsequently, structured phone interviews provided themes for an online survey. To provide an international context, interviews were conducted with health librarians in London UK.

Results. The survey showed that: 1. 62% of respondents access information for diagnosis or treatment from any source every 2–3 days; 2. Family practitioners are more likely to use the EBS since they may lack information access from other libraries; 3. The profile of EBS resources and services is low; and 4. 21% rated the ease of use of the EBS as poor. Interviews with London health librarians highlighted the importance of one-on-one information skills training. **Discussion**. Based on the findings, 3 recommendations were made: 1. Focus the EBS on resources for family medicine and support services for all members; 2. Improve the EBS profile; and 3. Make the EBS easier to use.

Making the Most of Library Metrics

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Library Services is an embedded department within Public Health Ontario providing library and information support to a new public health agency established in 2008. As Public Health Ontario has grown into its role in the Public Health Ontario public health system, Library Services has had the opportunity to establish itself as a key element in Public Health Ontario's provision of scientific and technical support to health providers, the public health system and partner ministries. To do so, we have had to be innovative in the manner in which we maintain and share library metrics. Moving away from traditional library statistics, we have used collaborative technology, such as Microsoft SharePoint, to ensure that executive management and scientific advisors in the organization are kept apprised of library metrics that are meaningful to them, as well as support the development of the burgeoning Library Services department. Through the strategic selection of indicators which are meaningful and relevant to the entire organization and the creative utilization of technology to increase the accessibility, visibility, and uptake of collected data, the department has leveraged these metrics to foreground its role as an active partner in the scientific activities of Public Health Ontario.

Connecting Policy Researchers to Evidence: An Embedded Library Service for the Mental Health Commission of Canada

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The Mental Health Commission of Canada (MHCC) is funded by Health Canada with a 10-year mandate (2007–2017) to create Canada's first mental health strategy. The Commission also carries out numerous other mental health policy initiatives, including knowledge exchange in mental health; working to reduce stigma; and examining the best ways to help people who are homeless and living with mental health problems and illnesses. Because of the temporary nature of its mandate, the MHCC did not have access to an established library service. As its head office is located in Calgary, the Commission approached the University of Calgary's Health Sciences Library about contracting to provide its researchers with both collections and literature searching support. The resulting partnership provided the Commission with licensed access to databases and e-journals, and embedded a part-time librarian in the Commission's Calgary offices, providing support to the Commission's staff in various parts of the country.

"Google Scholar Is Not Enough to be Used Alone for Systematic Reviews"

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Introduction. Google scholar (GS) is noted for its ability to search broadly for citations in the biomedical literature. Gehanno et al examined Google scholar in their 2013 study: *'Is Google scholar enough to be used alone for*

systematic reviews?' In this paper, we revisit this question. **Methods.** For our study, we searched for papers that were used by Chou et al (2013) in their systematic review on social media in health. We checked 506 publications from Chou et al in GS by querying GS for the title of each study (in quotes "") one by one. When searches in GS failed to retrieve the article, or produced too many results, we used the allintitle: command to find the paper. **Results.** GS produced records for about 95% of papers cited by Chou et al (n = 476/506). Of the 30 papers not found in GS, we retrieved them via PubMed and regular Google. We could not run the searches that were originally performed by Chou et al in any of PubMed, Web of Science, Scopus and PsycINFO® due to the different structure (and interface)

of GS. Identifying 506 papers in GS was inefficient and time-consuming, especially for papers that used similar (common) keywords. **Conclusions.** Has Google Scholar improved enough to be used alone in searching for the systematic review? No. Its constant changes, algorithms and structure make it a poor first choice for systematic reviewers. Looking for papers (when you know their titles) places different demands on searchers than finding them initially. Further research is needed to determine when GS might be used on its own in searching for SRs. But first Google must provide details about its coverage and improve its interface (e.g., with semantic search filters, stored searching, etc.). Perhaps then it will be an appropriate exclusive choice for SR searching.

How to Use Mendeley for Reference Sharing in Provincial Health Care Teams

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Getting health care professionals to use reference management software for their projects can be difficult due to perceived challenges: limited time, limited resources, and limited computer skills. In this talk, I will discuss the implementation of Mendeley for reference sharing, abstract screening and full text selection in a provincial health care department. This software was selected because of the potential for collaboration in groups, cost, ease of use, and

supportive materials. Training took place in online group sessions as well as one-on-one via phone and email. Uptake of the software was successful due to department support and integration into ongoing project work. Lessons learned include how best to set up Mendeley accounts in this environment, limitations of the free versus paid accounts, and management support is crucial for success.

KUDOS – A Low Cost, Introvert-Friendly Staff Recognition Program

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Introduction. When Mount Royal University Library identified the need for a recognition program for both full time and casual library employees, coordinators knew that any initiative would have to be responsive to the diverse personalities represented in the staff mix. Inspiration came from the university's recreation department, which had been distributing recognition cards to staff members when they met set customer service goals. **Description.** The Library's KUDOS card program was developed through extensive consultation. Employees provided feedback on

how they would like to be recognized, what values they would like to be acknowledged for, and if tangible rewards were part of the mix. Even the name of the program was staff generated: Keep up Doing Outstanding Stuff or KUDOS. Since the launch in August 2012, employees have been distributing KUDOS cards to their colleagues in recognition of excellent service, respect, trust, integrity, teamwork, collaboration, innovation, and creativity. Recipients may keep their cards private, have them displayed in the staff lunch room, and/or help themselves to an item

from a "treasure chest" of snacks and re-gifted items. **Outcomes.** There has been significant adoption of the program by library staff. **Discussion.** Further assessment is needed to determine if the KUDOS program has positively impacted library morale and behaviour. Next steps include an anonymous survey of employees and a collection of unused cards to estimate total distribution over the year.

Getting it Right: Education Planning in Alberta Health Services

Morgan Truax

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Alberta Health Services (AHS) is the provincial health authority which provides healthcare to all Albertans. Recent changes to the organization shifted library services to the newly formed Knowledge Management department. Our department has gone through a period of enormous change and improvement as we seek to standardize services and unify resources, providing seamless and equitable access to 100,000+ AHS employees across the province. Part of this work involves revising our educational services, which were previously offered haphazardly, dependant on the former health region being served. The Education Work Group is refreshing and revitalizing our educational program to meet this changing scope of service. What do our users like, want and need in their educational programming? In this talk I will discuss the methods and results from a user needs survey, which was sent to rural and urban AHS staff to help set priorities for further planning. The survey results reinforced some of our assumptions and planned priorities, but also surprised us with new directions to consider, including the length of sessions and the topic areas of highest interest.

HLWIKI International: Evaluating an Online, Crowdsourced Encyclopedia for Health Librarians

Dean Giustini and HLWIKI Team

University of British Columbia

Introduction. To describe the creation of an online crowdsourced health library wiki <http://hlwiki.ca> and assess its value as a platform for information-sharing and collaboration for health librarians. **Methods.** In 2007, two health librarians created a wiki to support students in a 13-week course on *health librarianship* at UBC's iSchool. To evaluate its growth from 2007 to 2013, statistics were gathered using Google Analytics and MediaWiki; qualitative information was gathered from those using the wiki through an online survey tool called Vovici. Wiki users were invited to answer five (5) short questions on a survey about the wiki content, and its value in their professional activities. **Results.** The growth and usage of the wiki has been greater than anticipated. 150 files were initially created, and content doubled every 16 months; by 2012, 800 files were available. About 100,000 unique visitors have visited the wiki and viewed more than 7.5 million pages since 2007. The most popular entries are about expert searching, evidence-based practice and social media. Some health librarians with no access to cloud storage use the wiki to store files. A spike in wiki usage corresponded to a 2011 marketing plan that promoted entries via Twitter. Survey respondents (77%, n = 23) said the wiki helps them to track information trends either somewhat or considerably. **Discussion.** Although the wiki began as a small local project, it now has a global reach. Survey respondents (66%, n = 20) said the wiki's value is due to its high-quality health librarianship and social media entries. Fifty (50%) of the unique visitors (based on IP) reside in Australia, Canada, United Kingdom, United States and developing countries. Of the ∼500 registered users, fewer than 5% (n = 25) write or edit entries. A high number of users visit

entries for less than 5 minutes. HLWIKI International is a regularly-updated online encyclopedia for those interested in finding information about health information and social media. Its collaborative potential is still under develop-ment. The international team of health librarians hopes to be more strategic about meeting the information needs of those using the wiki by implementing better feedback tools.

Using evidence to determine the fate of a print reference collection

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This talk outlines an evidence-based approach to the question of whether to maintain an apparently underused print reference collection in a large academic health sciences library. A previous deselection process had reduced the numbers of titles but hard evidence on usage was lacking. A survey was designed and carried out over one calendar year. An analysis of the results provided the basis for rational decisions on dispersal of the collection. A follow up evaluation confirmed that the decisions were appropriate.