COLUMN / CHRONIQUE

Current Research

Compiled by Christie Hurrell

Austvoll-Dahlgren A, Danielsen S, Opheim E, Bjørndal A, Reinar LM, Flottorp S, Oxman AD, Helseth S. Development of a complex intervention to improve health literacy skills. *Health Information & Libraries Journal*. 2013. [Epub ahead of print]. doi: 10.1111/hir.12037.

Background: Providing insight into the developmental processes involved in building interventions is an important way to ensure methodological transparency and inform future research efforts. The objective of this study was to describe the development of a web portal designed to improve health literacy skills among the public. **Methods:** The web portal was tailored to address three key barriers to obtaining information, using the conceptual frameworks of shared decision-making and evidence-based practice and based on explicit criteria for selecting the content and form of the intervention. **Results:** The web portal targeted the general public and took the form of structured sets of tools. Content included: an introduction to research methods, help on how to find evidence-based health information efficiently based on the steps of evidence-based practice, an introduction to critical appraisal, information about patient participation rights in decision-making, and a decision aid for consultations. **Conclusions:** The web portal was designed in a systematic and transparent way and address key barriers to obtaining and acting upon reliable health information. The web portal provides open access to the tools and can be used independently by health care users, or during consultations with health professionals.

Buijink AW, Visser BJ, Marshall L. Medical apps for smartphones: Lack of evidence undermines quality and safety. *Evid Based Med*. 2013 Jun;18(3):90–2. doi: 10.1136/eb-2012-100885.

Increasing numbers of healthcare professionals are using smartphones and their associated applications (apps) in daily clinical care. While these medical apps hold great potential for improving clinical practice, little is known about the possible dangers associated with their use. Breaches of patient confidentiality, conflicts of interests, and malfunctioning clinical decision-making apps could all negatively impact on patient care. We propose several strategies to enhance the development of evidence-based medical apps while retaining their open nature. The increasing use of medical apps calls for broader discussion across medicine's organising and accrediting bodies. The field of medical apps is currently one of the most dynamic in medicine, with real potential to change the way evidence-based healthcare is delivered in the future. Establishing appropriate regulatory procedures will enable this potential to be fulfilled, while at all times ensuring the safety of the patient.

Charbonneau DH. Strategies for data management engagement. *Med Ref Serv Q*. 2013 07/01; 2013/09;32(3): 365–74. doi: 10.1080/02763869.2013.807089.

The research landscape is growing dramatically, and librarians are examining new roles, services, and types of collaborations to support data-intensive research. This column describes curricular enhancements at one School of Library and Information Science in the United States. Several key areas of data management in which health sciences librarians may wish to build or enhance their skills are outlined. Possible roles and opportunities for health sciences librarians to strategically engage in data management initiatives are also presented.

Spievak ER, Hayes-Bohanan P. Just enough of a good thing: Indications of long-term efficacy in one-shot library instruction. *The Journal of Academic Librarianship*. 2013 [Epub ahead of print]. doi: http://dx.doi.org/10.1016/j.acalib.2013.08.013.

Website attributions were measured as one way of evaluating the efficacy of the "one-shot" library session. Survey results indicated support for single session information literacy instruction in that participants exposed to a librarian classroom visit reported that they would be significantly more likely to have used library databases, checked out a book, asked a librarian for help, and to predict that they would ask a librarian for help at a later time. Results also indicated that students who reported a classroom librarian visit may have engaged in more systematic or complex processing to evaluate websites in that they considered more attributes and took less time to make better judgments about the quality of sources.

Vodicka E, Mejilla R, Leveille GS, Ralston DJ, Darer DJ, Delbanco T, Walker J, Elmore GJ. Online access to doctors' notes: Patient concerns about privacy. *J Med Internet Res*. 2013 09/26;15(9):e208. doi: 10.2196/jmir.2670.

Background: Offering patients online access to medical records, including doctors' visit notes, holds considerable potential to improve care. However, patients may worry about loss of privacy when accessing personal health information through Internet-based patient portals. The OpenNotes study provided patients at three US health care institutions with online access to their primary care doctors' notes and then collected survey data about their experiences, including their concerns about privacy before and after participation in the intervention. **Objective:** To identify patients' attitudes toward privacy when given electronic access to their medical records, including visit notes. **Methods:** The design used a nested cohort study of patients surveyed at baseline and after a 1-year period during which they were invited to read their visit notes through secure patient portals. Participants consisted of 3874 primary care patients from Beth Israel Deaconess Medical Center (Boston, MA), Geisinger Health System (Danville, PA), and Harborview Medical Center (Seattle, WA) who completed surveys before and after the Open-Notes intervention. The measures were patient-reported levels of concern regarding privacy associated with online access to visit notes. **Results:** 32.91% of patients (1275/3874 respondents) reported concerns about privacy at baseline versus 36.63% (1419/3874 respondents) post-intervention. Baseline concerns were associated with non-white race/ethnicity and lower confidence in communicating with doctors, but were not associated with choosing to read notes or desire for continued online access post-intervention (nearly all patients with notes available chose to read them and wanted continued access). While the level of concern among most participants did not change during the intervention, 15.54% (602/3874 respondents, excluding participants who responded "don't know") reported more concern post-intervention, and 12.73% (493/3874 respondents, excluding participants who responded "don't know") reported less concern. **Conclusions:** When considering online access to visit notes, approximately one-third of patients had concerns about privacy at baseline and post-intervention. These perceptions did not deter participants from accessing their notes, suggesting that the benefits of online access to medical records may outweigh patients' perceived risks to privacy.

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