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## ABSTRACTS / RÉSUMÉS

### Mind the gap! Understanding current practice of front line health care workers as information providers to patients: implications for service direction

**Michelle Helliwell**

*Library and Knowledge Management Services, Shared Services (Dalhousie School of Nursing – Yarmouth Site, Annapolis Valley Health, South Shore Health, South West Health), Eastern Kings Memorial Community Health Centre, Wolfville, NS, Canada*

**Question:** The primary goal of this study was to assess the current practice of health care providers in their role as information providers to patients. Results would assist in service planning for the information management of patient education materials. **Design:** This was a descriptive statistical study. A survey of 20 multiple choice and free text questions were delivered in both paper and electronic survey format. **Setting:** The survey took place across three District Health Authorities (DHAs) in western Nova Scotia. **Participants:** One hundred and fourteen front line health care providers (HCPs) across multiple disciplines and practice environments (nursing floors, community health centres) were the target of this survey. **Results:** Seventy-one percent of HCPs lacked the time to find and assemble patient education materials, and 1/3 of nurses reported spending at least

25% of their time looking for, collecting, and providing material to patients. Patient-orientated books are available to 62% of HCPs, but only 5% preferred them. Information types HCPs wanted and could not find included information about local services, self-directed care information, and wellness information. Eighty-four percent of HCPs reported seldom or never using Library Services' search services for patient education information requests. **Conclusion:** The results of this study were instrumental in highlighting services gaps for Library Services in the realm of patient education materials provision, and in the development of best practice standards for the information management of patient education materials in the DHAs. These standards range from the selection and (or) creation of material, usage, availability, access, and education for health care workers.

### A comparative analysis of librarians and health professionals as "health info(r)mediators"

**Nadine Wathen,<sup>1</sup> Leslie Bella,<sup>2</sup> and Sally Wyatt<sup>3</sup>**

*<sup>1</sup>Faculty of Information & Media Studies, The University of Western Ontario, London, ON, Canada; <sup>2</sup>School of Social Work, Memorial University of Newfoundland, St. John's, NL, Canada; <sup>3</sup>Virtual Knowledge Studio for the Humanities and Social Sciences, Royal Netherlands Academy of Arts & Sciences, Amsterdam, The Netherlands*

**Objectives:** The public is being bombarded with health information from sources with different and sometimes conflicting interests. The new concept of "health info(r)mediation" denotes the processes through which health information is provided to users. This paper explains how librarians and information specialists are central to the effec-

tiveness of the info(r)mediation work of health professionals. **Methods:** A comparative analysis of the codes of practice and training materials of librarianship, medicine, social work, nursing, dietetics and nutrition, and pharmacy, focusing on involvement in patient/client education. **Results:** These health professions are all involved in health

info(r)mediation, with some more concerned about patient compliance and others about patient self determination. Their info(r)mediation practices are affected by the emergence of Internet-based health information. Librarians are central to the production and management of health information systems, building collections, writing finding aids, and helping people who approach the reference desk. Health librarians also construct systems used by health professionals to access current information about illness and treatment.

Ultimately, the future effectiveness of the info(r)mediation work of these five health professions will depend on foundations built by librarians and information technology specialists who produce and manage health information systems and help others to use them. **Discussion:** Our findings about health info(r)mediation will be discussed in the broader context of emerging socio-technical configurations in the production, consumption, and regulation of health information.

## Bridging the divide between consumer health and evidence-based information

Lori Giles-Smith<sup>1</sup> and Christine Shaw-Daigle<sup>2</sup>

<sup>1</sup>Neil John Maclean Health Sciences Library, University of Manitoba Health Sciences Libraries, Winnipeg, MB, Canada; <sup>2</sup>University of Manitoba, Victoria General Hospital Library, Winnipeg, MB, Canada

**Objective:** To develop a value-added resource that combines consumer health media reports with evidence-based medical information for physicians. **Setting:** Through a number of media sources, today's consumers have unprecedented access to health information of varying reliability and authority. Empowered by this information, patients are becoming more involved in their health decisions and are more willing to question the advice received from physicians. This is challenging for physicians, who must now find time to read mass media health reports in addition to medical research. To help physicians with this task, the University of Manitoba Health Sciences Libraries created What Your Patient Reads. **Audience:** Physicians and medical residents working in Winnipeg's hospitals. **Program:** The What Your Patient Reads service involves scanning local and national

print and electronic media sources, and creating a briefing connecting the reports with medical evidence. Each one-page synopsis contains a summary of the news report, reference to the cited research, key points from both the news report and cited research, and related medical evidence. These reports will prepare physicians for questions from their patients by making them aware of the media reports and pointing them to literature that can either support or refute the claims. **Conclusion:** The Health Sciences Libraries has identified a shift in consumer health literacy habits and in response has developed a value-added project to help physicians become aware of health reports in the media. This will allow them to anticipate and answer patient questions with authority and confidence.

## Collaborating with the teaching doctor: an evolving informatics approach

Sarah Wickett

Bracken Health Sciences Library, Queen's University, Kingston, ON, Canada

**Program objective:** The position of Health Informatics Librarian was created to help professors in the Faculty of Health Sciences use innovative information resources to improve teaching. By providing access to electronic multimedia resources, the library contributes to an increase in the relevance, integration, and interactivity within the health sciences curricula, resulting in a reduction in the amount of di-

dactic teaching. **Setting:** Bracken Health Sciences Library at Queen's University in Kingston, Ontario, Canada. **Participants:** The library serves users in the schools of Medicine, Nursing, and Rehabilitation Therapy, as well as the Life Sciences and Biochemistry programs. In total, the library supports over 700 faculty members. **Program:** By providing a range of informatics services and resources, Bracken Health

Sciences Library and the Health Informatics Librarian play a central role in helping faculty improve their teaching. For example, a new partnership between the library, Office of Health Sciences Education, and Medical Education Technology Unit provides faculty with a single source for requesting and receiving help with any teaching question, be it resource-based, technological, or pedagogical. Also, by identifying and (or) purchasing resources such as image collections, 3D anatomical models, and videos, the library provides access to many valuable teaching tools and helps faculty move beyond books and journals as sources of infor-

mation. In focusing on collaboration with faculty, the Health Informatics Librarian is able to provide timely, responsive, and innovative solutions to common teaching concerns. **Results:** After 2 years in the position of Health Informatics Librarian, the author has seen a marked increase in the numbers of requests and collaborations around technological resources for teaching. **Conclusion:** Librarians who support faculty in any teaching setting (classroom, clinic, bedside) will learn useful tips for creating a health informatics strategy at their institutions.

## Health sciences librarians in Europe

**Iona Robu**

*Université de Médecine et de Pharmacie, Cluj-Napoca, Romania*

The aim of this presentation is to provide an overview of the European Association for Health Information and Libraries (EAHIL), including the mission and objectives of the association, its organization, its members, as well as the main projects under way. The most recent evolution after the

integration of former communist countries in the European Union will be also briefly described, with a focus on health sciences librarianship in Romania and the projects being developed in this country.

## Consumer health information in public libraries: a five-country comparison

**Laura DiCarlo, Elizabeth Clara Sander, Samantha Burdett, and Roma Harris**

*Faculty of Information and Media Studies, The University of Western Ontario, London, ON, Canada*

**Objective:** To assess the relative size and coverage of consumer health collections in public libraries in different countries. Citizens are expected increasingly to take responsibility for their own health. An important aspect of this responsibility involves staying informed about health-related matters, especially “healthy living”, and being able to participate in an informed manner in decision-making related to medical treatment. Although the Internet plays a significant role in the health information seeking practices of many lay citizens, in some countries the public library is an important site of health information resources. A recent study in the UK revealed, for instance, that library patrons rated public libraries among their most trusted sources of health information, second only to doctors. In this presentation, we explore how support for users’ consumer health information needs is

expressed in the collections available to patrons of public libraries in six countries. **Methods:** The holdings within several Dewey classifications that reflect mainstream and alternative health resources were tabulated for public library systems drawn from a random sample of mid-sized cities in six countries: the United Kingdom, Italy, Australia, Canada, and the United States. **Results:** We will present findings comparing the relative size of the collections and the emphases on different types of health information material (reflected in the distribution of items across Dewey classification numbers) available in public library collections in several countries. **Discussion:** We will discuss our results in terms of the health information roles played by public libraries in different countries.

## Repository redux: UPEI virtual research environment

**Mark Leggott**

*University of Prince Edward Island, Charlottetown, PE, Canada*

**Objective:** The Robertson Library at the University of Prince Edward Island (UPEI) embarked on the development of a comprehensive program for the stewardship of information resources in the three primary academic “landscapes”: administration, learning, and research. The VRE or virtual research environment is a collaborative research environment supporting all stages of the research life cycle. **Methods:** The VRE is being developed using the open source Drupal and Fedora systems as the two primary components and is compared with more traditional models for institutional repositories, which have not always met with the anticipated success. The session will also touch on aspects of capacity building and staff development at a small

academic institution that are enabled by the use of open source applications. **Results:** There are a number of VREs currently in production at UPEI, with a particular focus on the biosciences including generic collaborative tools as well as vertical applications that provide repository functions of interest to specific research areas. This session will present some of the elements of the VRE that would be of particular interest to health-related research. **Discussion:** Issues and challenges encountered in developing the VRE model will be discussed, including how the VRE project was used to build capacity in a young team and issues when an academic library engages the research community in new ways.

## New roles for health sciences librarians in disaster response

**Robin Featherstone**

*National Library of Medicine, Bethesda, MD, USA*

**Question:** What are the roles for medical librarians in disaster planning, response, and recovery? **Setting:** National Library of Medicine in Bethesda, Maryland, USA. **Participants:** Librarians from across North America who responded to a wide range of disaster situations, such as hurricanes, epidemic outbreaks, and terrorist attacks. **Methods:** Interviews were conducted over the phone and via e-mail to determine the roles that had been played. Transcripts were subsequently analyzed and individual activities were catego-

rized. **Results:** Librarian skills naturally lent themselves to disaster scenarios in which accurate information was needed in a short time frame. Health information was of particular importance, and medical librarians made significant contributions by disseminating materials to first responders and health providers working in evacuation shelters. **Conclusions:** Based on the findings of the investigation, a strong case can be made for librarian involvement in federal, provincial/state, and local disaster response activities.

## Refocusing the HSL: shifting to a services paradigm

Peggy O'Neil,<sup>1</sup> Shauna-Lee Konrad,<sup>1</sup> and Jessica McEwan<sup>2</sup>

<sup>1</sup>London Health Sciences Centre, London, ON, Canada; <sup>2</sup>London Regional Cancer Centre, London Health Sciences Centre, London, ON, Canada

**Program objective:** Primary – To refocus the library's role within the organization toward professional services instead of technical services and collections, and thereby solidify the library as an integral contributor to patient care, teaching, and research. Secondary – To introduce a liaison-librarian model of professional services with subject-specific portfolios. **Setting:** Teaching hospital library in London, Ontario, Canada. **Participants:** Staff of the London Health Sciences Centre. **Program:** The library shifted its philosophy and respective labour mix to include six librarians. Existing services were re-evaluated while new services were considered. A liaison-librarian model was adopted to target specific hospital departments and build client relationships. Through regional and organizational partnerships, the focus and extent of library collections changed, minimizing technical services. Intentional and systematic promotion of the

new library focus and model was conducted. **Results:** Use of existing services has significantly increased, and new services have been added to the suite of librarian services. The information literacy program has been enhanced. The liaison model has been widely accepted within the organization. The successes and challenges of adopting the new focus and model for the library will be discussed. **Conclusion:** In the digital age, the library can continue to be relevant to users by moving from a traditional collections-focused model to one centered on excellent professional services. Within the health sciences context, library services are crucial in supporting evidence-based practice through enhanced access to, and effective use of information by health care professionals. The liaison model is an effective way of engendering trust and confidence between the librarian and health care practitioner.

## On the cutting edge: experiences of a clinical surgical librarian

Marina Englesakis<sup>1</sup> and Amy Faulkner<sup>2</sup>

<sup>1</sup>Surgical Services, Neuroscience, & Medical Education Health Sciences Library, University Health Network, Toronto General Hospital, Toronto, ON, Canada; <sup>2</sup>University Health Network, Toronto, ON, Canada

**Program objective:** The Clinical Surgical Librarian (CSL) service is designed to go "beyond the library walls" to address the research needs of General Surgery staff. **Setting:** The Surgical Quality of Care Rounds that are held every Thursday afternoon at the University Health Network, Toronto, Canada. These rounds can include discussions of professional practice, assessment of morbidity/mortality for surgical patients, and presentations on surgical topics. **Participants:** Regular attendees at rounds are General Surgery staff, residents, and medical students. Members of other departments are invited for discussions of non-surgical aspects of morbidity/mortality. **Program:** The CSL role is a supplemental function of the Information Specialist position. In this role, the CSL attends the weekly Surgical Quality of Care Rounds and upon request, provides research support to

surgical staff, residents, and (or) medical students. As topics arising from discussions in one week's session may be presented at the next week's rounds, searches of or for the requested material must be timely. **Results:** The impact of the CSL has been a demonstrable increase in an awareness of library services, and use of the Information Specialist both within and outside of rounds. Other positive effects include invitations to provide database search training to surgeons attending the Annual Update in General Surgery conference. **Conclusion:** The function of CSL will continue to be a part of the Information Specialist position. In the future rounds, the CSL will conduct "teaching vignettes" incorporating evidence-based medicine searching principles and database search training. In addition, it has been a learning experience for the librarian.



## Implementing an integrated information prescription model in family medicine

**Francesca Frati**

*Herzl Family Practice Centre, SMBD Jewish General Hospital, Montréal, QC, Canada*

**Program objective:** To meet the health information needs of patients, families, and health professionals at point of care within one academic family medicine teaching unit, supported by the adjacent hospital library, with a librarian on site as a new member of the health care team. **Setting:** The Herzl Family Practice Centre (HFPC), a McGill University family medicine teaching unit in Montreal. **Participants:** Patients and families, health professionals, and support staff at the HFPC. **Program:** This Information Rx model sees the librarian acting as a member of the health care team, providing support at point of care. Health professionals (HPs) are encouraged to write "information Rx" that patients can then fill during consultation with the librarian. The service is located next to the centre's waiting area. Patients and family

members can drop in or make appointments with the librarian independently of their HP. Consultations with patients are documented in the charts. The library's Patient and Family Resource Centre acts as a support and provides access to resources, including a print collection. **Results:** This session explores the process that resulted in the creation of this innovative new service, describes the service, and shares some lessons learned several months after implementation. **Conclusion:** This example shows how collaborating with health care professionals outside of the library setting can enable a librarian to be integrated into the health care team, facilitate a health information service being tailored to the needs of a specific community, and encourage use of the service by acting as a reminder to patients, families and HPs.

## Metropolis revisited: the evolution of an interdisciplinary approach to teaching informatics at the Massachusetts College of Pharmacy and Health Sciences

**Samuel King**

*Health Sciences Library, Manchester Campus, MCPHS, Manchester, NH, USA*

**Objective:** The study of informatics is multidisciplinary in nature. The objective of this paper is to identify opportunities for librarians to engage in interdisciplinary collaboration through the teaching of informatics. **Methods:** The evolution of librarian-taught informatics curriculum at the Massachusetts College of Pharmacy and Health Sciences (MCPHS) will be reviewed. This will include for credit courses taught by librarian led teams as well as librarian participation in informatics courses within the School of Nursing. Issues and challenges working within a class only, class/online hybrid, and totally online environment will be discussed. The benefits of interdisciplinary teaching will be highlighted. **Results:** Librarians can learn and benefit from collaboration with instructional designers, statisticians, nurses, pharmacists, and other professions in teaching a multidisciplinary subject like informatics. We can increase

the profile of our profession, broaden our expertise, and open doors to further participation within the institutional team. **Discussion:** Librarian involvement in teaching informatics at MCPHS began with a National Library of Medicine (NLM) fellowship in informatics at Wood's Hole resulting in the library's first for credit course, offered totally in class and including the participation of faculty from other disciplines. The successful collaboration with the College instructional designer was essential in moving this librarian-led course to a totally virtual environment. In addition, teaming with other faculty resulted in two nursing-led hybrid courses in Boston and Manchester. Librarians have opportunities to learn from other disciplines and much to offer through collaborative teaching. Informatics is an ideal area where these varied disciplines can join to achieve common goals.



## Promoting effective task-related Internet information seeking for healthcare professionals: oncology nurses as example

Ina Fourie

*Department of Information Science, University of Pretoria, Pretoria, South Africa*

**Background:** A growing interest in using the Internet in healthcare contexts and the numerous factors affecting information seeking by healthcare professionals have been widely noted (e.g., lack of time, computer and search skills, opportunity to use the Internet while at work, and not realizing the importance of information for task completion and personal development). **Objectives:** The paper will address how, in a dynamic healthcare environment facing increasing patient interest in using the Internet and being involved in decision making, healthcare professionals should be prepared to use the Internet for effective task-related information seeking. **Discussion:** Healthcare professionals are working adults with experiences, backgrounds, skills, and beliefs that need to be recognized when promoting information literacy skills. Building on their task environment and allowing them to

help in identifying examples of use in their jobs will thus be addressed. Issues that may be covered in training sessions can include (i) analyzing daily tasks, the information intensity of tasks and plotting these against the value of Internet information resources; (ii) exploring the value of recommended Internet information resources for daily tasks on different levels (e.g., deciding on treatment for nausea and (or) vomiting, explaining chemotherapy to patients); (iii) exploring the scope and limitations of Web search tools (e.g., inadequacy of coverage, lack of overlap between search engines); (iv) exploring mechanisms to identify appropriate search terms; (v) exploring the reasons for poor retrieval when using search engines and how to counter act these by using advanced search features; and (vi) exploring the opportunities for professional development and self-fulfilment.

## Effectiveness of a faculty workshop on finding evidence for teaching and learning in medicine

Christopher Popovich<sup>1</sup> and Lorie Kloda<sup>2</sup>

*<sup>1</sup>Faculty Development Office, Faculty of Medicine, McGill University, Montreal, QC, Canada; <sup>2</sup>Centre for Medical Education, Faculty of Medicine, McGill University, Montreal, QC, Canada*

**Purpose:** This study assesses the effectiveness of an educational intervention on improving literature search skills and confidence of medical school faculty. **Methods:** Participants were invited to attend two interactive faculty development workshops on Searching the Literature for Evidence Based Teaching and Learning. Workshop goals included searching databases for literature on medical education, especially trials and systematic reviews; searching databases of peer-reviewed literature efficiently; and determining whether a document is available online or in the library. Prior to the session, an electronic questionnaire, which served as both a needs assessment and pre-test, was distributed to all registrants. During the workshop, participants completed a pre-post instrument to measure their confidence in online literature searching. After the workshop, feedback was solicited via paper questionnaire. To measure participants' retention

of search skills and perception of such abilities, a second electronic questionnaire was distributed 5 months after the workshop. **Results:** Sixty-five medical school faculty members attended both workshops, which were highly rated. Preliminary data from the pre-test indicated participants had only some basic knowledge required to search effectively. The pre-post instrument demonstrated that although many participants were confident that they could complete several tasks required for a search, they learned more as a result of the workshop. Data from the follow-up questionnaire are being analyzed. **Conclusions:** The revitalization of faculty members' literature search skills is an important component of continuing professional development. This study demonstrates to what extent an educational intervention is effective in meeting this goal.

## Handheld information technologies and medical students: have undergraduates outgrown PDAs?

**Trish Chatterley and Dagmara Chojceki**

*John W. Scott Health Sciences Library, University of Alberta, Edmonton, AB, Canada*

**Background:** Five years ago PDAs were all the rage, especially in health science circles. Are they still being used, or have they been replaced by smartphones and other newer technologies? The John W. Scott Health Sciences Library at the University of Alberta still provides access to some PDA resources but wanted to assess whether or not the collection policy needed to be revised to take into account more recent handheld technology patterns. **Objective:** Two librarians conducted a research project to determine use of handheld devices (PDAs, etc.) by undergraduate medical students and assess their need for handheld resources. Results from the needs assessment will be used to inform library collection development and customer instruction policies and practices.

**Methods:** Subsequent to ethics approval, an electronic questionnaire was e-mailed to all undergraduate medical students at the University of Alberta. Following analysis of survey results, focus groups were held with students in both pre-clinical and clinical years of their program to gather more in-depth information about handheld usage. **Results:** This study is currently underway, results are forthcoming. **Discussion:** As librarians, we want to provide access to resources in the formats most preferred by our customers, thereby facilitating knowledge use and adding value to the student experience. Results from this study will enable our library to adapt current practices to best meet the needs of our students.

## Hunting for health statistics? We can help!

**Liz Dennett**

*Institute of Health Economics – University of Alberta, John W. Scott Health Sciences Library, Edmonton, AB, Canada*

**Background:** Many organizations worldwide generate health data and statistics, but there was no one database that facilitated access to this information. As a result, searching for these statistics was often a time-consuming and frustrating task. **Objective:** Our goal was to create a searchable portal that offered a single access point to the plethora of Web-based health statistics available from national and global agencies. **Methods:** We developed a list of potential producers of health statistics and reviewed their Web sites. This was supplemented by a review of various library guides to health statistics as well as general Internet searches. When statistical products were identified, information about each was entered into an Access database we created. Tags were

assigned in such fields as disease category and geography. A simple Web interface was then produced, and the database content was uploaded, making the portal freely available for use. The interface offers both browsing and search functions. **Results:** Though work on the database is still in progress, our product—a simple, freely available portal to health statistics—will be of use to information specialists, researchers, and health professionals. **Discussion:** At present, the database has a largely Canadian focus and is limited to English language resources. As we continue to populate the database, additional categories and regions will be represented. We plan to solicit feedback about the portal and incorporate suggestions into both the user interface and content.

## PubMed Central Canada: A partnership that will increase research access and application

**Geoff Hynes<sup>1</sup> and Donna Meighan<sup>2</sup>**

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Since the 17th century, the scholarly journal has been a central means of disseminating new findings and knowledge. Today, thanks to the Internet, open access is transforming the way in which research findings are disseminated. Open access publishing enables research results to be accessible more quickly by researchers and research users worldwide. Open access recognizes that advancements in science are made possible through widespread and barrier-free access to research. With the announcement of its Policy on Access to Research Outputs in September 2007, the Canadian Institutes of Health Research (CIHR) became the open access leader amongst funding agencies in Canada. This new policy requires CIHR researchers to make every effort to ensure that their peer-reviewed publications are freely accessible online within 6 months of publication. As part of the implementation plan for this policy, CIHR and the Canada Insti-

tute for Scientific and Technical Information (CISTI) are partnering to create a national, Web-based repository of health sciences literature that will be part of the PubMed Central Canada (PMC) network. PMC Canada will be a tool for knowledge diffusion and a platform for knowledge creation. By working together, CIHR and CISTI are sharing expertise to develop a valuable resource that supports both organizations' unique mandates as well as contributes to the advancement of human health and disease knowledge and health policies that will ultimately benefit all Canadians. In this presentation, the systematic development of CIHR's policy will be highlighted, along with the joint work that has begun on building PMC Canada. You will also hear about the future plans for PMC Canada and the lessons learned in this ongoing partnership.

## NurseONE: the Knowledge Beacon...

**Micheline Jaworski**

*Canadian Nurses Association, Ottawa, ON, Canada*

NurseONE is an interactive Web-based portal that is home to a comprehensive list of reliable and respected sources of health information. The portal technology provides members with secure access to scholarly health information at the point of need; utilization of best practices for health care; evidence-based health information for nurses in all domains of practice; access to information for all stages of a nurse's career; and assists in ensuring nurses are able to remain at the forefront of their practice regardless of their geographical location. NurseONE is the one-stop shop for reliable, credible information resources on a 24/7/365 basis for

nurses across Canada as they strive to make the organizational shifts and changes needed to optimize patient outcomes in our ever changing health care system. The portal context has been designed to provide a wide range of services utilizing the latest information communication technologies available to promote professional development; life-long learning; high quality, safe, ethical patient care; and enhanced patient outcomes. This presentation will provide a contextual overview and demonstration of the NurseONE portal from creation to implementation, with a focus on the Helen K Mussallem e-library.