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Implanter un service en support aux revues systématiques en milieu hospitalier: le chemin parcouru par les bibliothèques du Centre universitaire de santé McGill

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Introduction: Les bibliothécaires du Centre universitaire de santé McGill (CUSM) ont récemment implanté un service de recherche documentaire pour répondre aux demandes de soutien dans la réalisation de revues systématiques (RS). **Description:** Afin de structurer le processus de recherche documentaire, deux outils qui permettent d'encadrer le bon déroulement de chaque projet ont été développés: un plan de travail que le(la) client(e) doit compléter au démarrage et un diagramme détaillé des étapes à suivre, sorte de procédure pour mener à bien la portion recherche. **Résultats:** En plus d'assurer l'uniformité du service, le développement et l'évolution ultérieure de ces outils nous ont apporté une meilleure compréhension de l'ensemble du processus de RS et une confiance accrue dans notre expertise, nous amenant même à agir en tant que conseiller auprès de certaines équipes de RS. Au cours de cette présentation, nous discuterons de l'évolution de nos outils ainsi que de notre rôle conseil auprès des équipes hospitalières. Nous présenterons également quelques données sur les ressources impliquées dans ce service de soutien aux revues systématiques. **Discussion:** Offrir un service de recherche documentaire de qualité pour soutenir les RS en milieu hospitalier est extrêmement exigeant. Le temps investi par les bibliothécaires sur chaque RS est considérable. Il est également essentiel de rester au fait des recherches dans ce domaine pour s'assurer de suivre les méthodes de recherche éprouvées.

Lost in translation: Evaluation of support tools for systematic literature search training

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Introduction: Systematic reviews (SR) are a crucial component of evidence based practice in healthcare. Health sciences librarians are involved with SRs at their institutions, particularly in the development of systematic search strategies. In academic settings, librarians frequently contribute by training review authors on comprehensive search methods and translation to multiple databases. There are numerous online training resources to support developing initial search strategies, but few, if any, publicly available tools addressing search translation to subsequent databases. This step takes substantial training time and effort; we have developed a video and toolkit to assist in training and execution of the search translation. **Methods:** This project will explore the user experience and effectiveness of support tools for search translations. Participants were recruited from library users requesting assistance on their SR projects. Participants completed a preliminary questionnaire establishing

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baseline knowledge and skills, then completed a follow-up survey to assess the toolkit function and impact on user outcomes. Qualitative and quantitative data will be collected and analyzed using thematic analysis and exploratory statistics, respectively. **Results:** This is a pilot evaluation of support tools for researchers conducting SRs. Outcomes of interest include user satisfaction, need for additional support, search strategy completion rate, and time to complete translations. **Discussion:** The results from this project will inform refinements to the content and delivery of SR support toolkits and services. Next steps include validation of the toolkit, further assessment, and subsequent dissemination to peers involved in training systematic review authors.

Research Syntheses in Graduate Research: A Scoping Review

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Introduction: In evidence based practice, systematic reviews–and research syntheses more generally–are considered higher levels of evidence. Consequently, an increasing number of graduate students in health sciences are undertaking syntheses as research projects. The objective of this study was to conduct a scoping review of research syntheses produced as students' theses and dissertations to better describe the phenomenon. **Methods:** We systematically searched ProQuest Dissertations and Theses from 1981 to 2012 using 27 search terms and retrieved 4523 records. Initial screening eliminated 1539 irrelevant records. Two reviewers independently assessed the remaining 2913 records for inclusion. **Results:** From 2000 to 2012, the number of research syntheses produced as theses or dissertations increased from .79 per 1000 (total: 58) to 2.70 per 1000 (total:194). The US produces 75%, followed by Canada (20%). Within Canada, the Universities of Alberta, Ottawa, Toronto, McGill University, and Université de Montréal are the top five publishers. Most research syntheses are in health sciences, followed by psychology, education, and social sciences. Results will be further adjusted once data covering 1981–1999 is added and discrepancies between reviewers are resolved. **Discussion:** Librarians have an important role in the creation of research syntheses, often as embedded "systematic review librarians." If the trend in producing research syntheses as theses continues to grow, students will increasingly need support. Likewise, librarians will need guidelines regarding the level and types of support to provide. To be successful, librarians must embrace this increased involvement in supporting the production of higher levels of evidence.

Literature Search Service: A Decade in the Life of an Academic Service

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Introduction: This paper discusses an evaluation of the literature search service of an academic health sciences library system over a 10 year period from 2004–2013. In hospital libraries, literature search services are often considered one of the core services provided to clients, but this is less common in academic libraries. **Methods:** Data regarding searches and clients has been collected since 2004 using an Access Database. A client satisfaction survey has gathered data using Survey Monkey since 2006. Researchers analyzed the length of time for searches, the number of resources used per search, the frequency of search requests, broad

patron profession categories, and the number of searches completed by each library unit. **Results:** The researchers analyzed 19,248 literature searches completed between 2004 and 2013. With the percentage change in searches requested declining by 3.1% in 2011 and 3.5% in 2012. Most clients request 1–2 searches per year. The heaviest users of the service are Nurses (39%) followed by Allied Health professions (21%). Average length of time per search is 85 minutes. Average number of resources used per search is 3. **Discussion:** Little variation has occurred in the length of time to search or the number of resources used. The decline in service requests suggests a need for targeted promotion of the service. This paper will highlight the best practices identified by the authors in terms of literature search service procedures, particularly in the area of data collection.

Behavioural tracking on consumer health websites: a health literacy challenge

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Introduction: This project documents the behavioural tracking practices and privacy policy disclosure of these practices on consumer health websites. Behavioural tracking (BT) records non-personally identifiable information (IP address, visited pages, etc.) though various mechanisms (cookies and web beacons), and is often aggregated by third parties (e.g., advertisers) across websites. The assembled profiles present both benefits (e,g., personalization of information) and risks (e.g., unintended disclosure of personal information) to users. **Methods:** Two sets of websites are contrasted: 1) websites recommended by information professionals (CAPHIS (2010) and CHIPIG (2010)); and 2) non-recommended websites returned by Google searches of the most commonly searched conditions. Each site was visited to document BT practices, using tools to identify the presence tracking mechanisms. Available privacy policies were archived and later analysed for disclosure of behavioural tracking. **Results:** The results demonstrate that many consumer health information websites engage in BT, often without acknowledgment in privacy policies. Furthermore, 'recommended' websites demonstrate rates of tracking similar to those found on sites identified through a Google search, and among sites that engaged in BT, 'recommended' sites were no more likely than 'non-recommended' sites to disclose this practice in their privacy policies. **Discussion:** Consumers of online health information are subject to behavioural tracking, often without their knowledge or even implied consent. As a result they experience unacknowledged privacy risks that are not to date addressed by information professionals in their role as information intermediaries. Awareness of and protection from BT are important information literacy issues that information professionals should address to support consumers seeking health information online.

The Limitations of Expert-Based Knowledge – Implications for Professional Practice

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Introduction: This research is part of a larger study that investigated how food experts (Registered Dietitians) and non-experts (food-interested lay people) understand healthy eating and classify foods in their everyday life. Based on the findings of this research, the author will consider some strengths and limitations of how librarians evaluate consumer health information. **Methods:** This research involved two phases. In the first phase, 30 food-interested lay people were asked to complete a q methodology exercise. Q methodology offers a statistical means

of identifying diverse constructions of a topic. In this exercise, participants were grouped according to their shared understandings of healthy eating and in relation to statements from Canada's Food Guide. In the second phase, 18 Registered Dietitians were asked to respond to the diverse understandings of healthy eating offered by phase one participants. **Results:** Q methodology revealed four distinct groups of people who shared different understandings of healthy eating. Although all phase one participants were aware of the healthy eating principles offered by the government-produced food guide, only one of four groups moderately agreed with these principles.

Discussion: Librarians typically evaluate consumer health information based on the strength of evidence supporting it and factors such as currency, accuracy, scope, and authority. Registered Dietitians also rely on the strength of evidence supporting nutrition claims. While there are clear benefits to this approach, this research considers some limitations of privileging expert-based knowledge, such as the positioning of non-experts who do not value this knowledge as "misinformed" or "non-credible". Suggestions for providing good service to clients who resist the expert-based understandings of health are considered.

Mieux m'informer sur ma santé: A protocol for a new community-based health information literacy initiative

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Introduction: "Mieux m'informer sur ma santé" is a health information literacy initiative by two librarians and the Pointe-Saint-Charles Community Clinic, a unique citizen-controlled health agency. We will direct the community to reliable and accessible online health information in English and French by maintaining a dedicated page on the Clinic website. We hope to empower citizens to make informed decisions and become partners in their care. Using a participatory approach, we will involve Clinic staff and users throughout the project. **Description:** To promote health information literacy, the initial plan was to develop a website providing annotated links. The Members & Users Committee suggested starting small: a webpage to be added to the Clinic's website (http://ccpsc.qc.ca/). We will create entries beginning in 2014. All resources will conform

to HONCODE standards (http://www.hon.ch/HONcode/Conduct.html). An ongoing needs assessment will identify the relevant topics for the community and resources currently used by staff. Community organizations working on issues like nutrition and physical activity will be invited to participate. We will measure site visits and track growth. By June 2014, we will interview a convenience sample of Clinic staff and users, to identify changes in knowledge of and attitude towards online health information, and the use of information in professional-patient interaction. **Expected outcomes:** By using a participatory approach, we will create a webpage promoting quality and easily understood health information resources, therefore contributing to health information literacy in the community, and potentially leading to better health.

La prescription d'information: un tour d'horizon

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Introduction: Dans un contexte où le patient est partenaire, fournir au patient la bonne information au bon moment devient primordial pour l'aider à choisir les

options qui s'offrent à lui concernant sa santé. Au CSSS de Laval des initiatives ont été entreprises par la bibliothèque afin de favoriser l'éducation au patient. Divers

organismes se sont penchés sur ce sujet et ont développé différents modèles dont la prescription d'information. « Prescrire » des ressources d'information devient une réalité. Une revue de littérature effectuée en juin 2013 brosse un portrait de la situation. **Description:** Des études démontrent que peu d'informations transmises par le médecin au patient sont retenues et que la compréhension de l'information retenue serait souvent erronée. À cet égard, au CSSS de Laval, un centre d'information pour les patients a été créé à la bibliothèque. Une bibliothèque virtuelle a été réalisée à l'unité de médecine familiale ce qui permet aux professionnels de la santé d'avoir accès à des ressources dédiées aux patients. Également, un centre de documentation à l'usage exclusif des patients et de leurs proches a été inauguré au Centre intégré de cancérologie de Laval (CICL). **Résultats:** Des statistiques d'utilisation des ressources démontrent que le besoin d'information est incontestable. Des tests pré et post visionnement de vidéos produites par le Centre intégré de cancérologie de Laval sur les services offerts au patient ont été effectués auprès du personnel et de la clientèle. Les résultats sont préliminaires. **Exposé:** Au travers des années, nous réalisons que la prescription d'information peut prendre différentes formes. Les initiatives et actions entreprises à travers le monde sur ce concept de « prescription d'information » ou thérapie par l'information influencera les prochaines étapes de nos actions entreprises. Notre offre de service permet de constater qu'il y a des barrières à l'implantation d'un service de prescription d'information, mais que les impacts positifs sont bien réels.

Effects of Librarian-Provided Services in Health Care: A Systematic Review

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Question: Clinical librarians play a key role in contributing to the information literacy of health professionals, the health literacy of patients, and provide support for researchers in medicine and health. The purpose of our study was to systematically review the literature to answer the question, 'What are the effects of clinical librarian-provided services on patient, health care provider, or researcher outcomes'? **Data Sources**: MEDLINE, EMBASE, CINAHL, Cochrane Central Register of Controlled Trials, ERIC, and LISA were searched from the earliest date available until June 2013. **Study Selection**: Two independent reviewers selected studies for inclusion if the intervention included clinical librarians providing services to patients, health care providers, researchers, or health care organizations. **Data Extraction**: Information about the study population, features of each intervention, use of statistical tests, comparative data, and methods used to measure patient relevant outcomes (such as patient length of stay), clinician relevant outcomes (such as choice of therapy, choice of tests), knowledge and skills of participants in training programs (such as medical licensing examination scores), and research funding were extracted. **Results**: A total of 11,061 titles and abstracts were reviewed, leading to retrieval of 169 full-text articles for assessment; 25 of these studies met all inclusion criteria **Conclusion**: Primary outcomes of patient relevant outcomes (such as patient length of stay), clinician relevant outcomes (such as choice of therapy, choice of tests), participants in training programs knowledge and skills (such as medical licensing examination scores), and research funding are reported.

Disclosure Statement: Nothing to declare.

Using an evaluation framework to measure value and impact of library services

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Objective: This evaluation initiative measures the value and impact of library and information services provided to a provincial health system in Alberta, Canada. **Methods:** A multidisciplinary team led the development of an evaluation framework as part of a library optimization initiative that unified 18 relatively independent hospital libraries into a provincial network providing equitable information resources and services to all health system staff. The evaluation framework consists of ten key performance indicators that assess the library network's progress against organizational goals, which emphasize a virtual service model providing one point of access to high-quality resources and services that support evidence informed decision making. **Results:** A web-based survey was developed to measure key performance indicators such as awareness and use of library services, satisfaction with information resources and services, and impact of resources and services on patient care, policy and planning, and continuing education. The survey will be distributed province-wide to a group of over 100,000 health professionals, support staff, and physicians. **Conclusions:** An evaluation framework and key performance indicators are useful tools for measuring the impact of library and information services to a large and diverse organization. Tying library evaluation activities to key organizational objectives helps to ensure that data and results from the evaluation can be used to meet the needs of staff and to strengthen our position within a patient-focused, provincial health system.

Starting the Data Conversation: Using Interviews to Inform the Creation of an Institutional Data Catalogue

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Introduction: To inform the implementation of an institutional data catalogue for health research datasets, the library conducted a series of interviews with academic health researchers. The interviews served to inform use cases and requirements for a data catalogue to meet the data management needs of an academic medical centre research community. **Methods:** Interview questions were developed and informed by a review of data interview literature and data catalogue use cases and requirements. Use cases and requirements were established based on collaboration with a Canadian, National Library of Medicine Associate Fellow who has experience working with big data initiatives on a national scale; communication with Information Technology (IT), research administration and academic departments; and knowledge gained from the library's existing research data education services.

The medical centre's grants administration tool was used to identify currently funded academic researchers. Purposive sampling was used to select researchers that varied in terms of their expected data service needs, type of research (e.g., genetics, neuroscience, health services), level of experience, and involvement in Big Data. Interviews were conducted until theoretical saturation was achieved, such that no new insights into key requirements for the data catalogue were

identified. **Results/Discussion:** Interview responses informed the library about institutional health research data including: the types of data created; the standard operating procedures for collecting, storing, and sharing data; and the challenges related to data collection and organization within the research community. This information was used to identify initial data catalogue users, develop a metadata schema and workflow for the institutional data catalogue, and tailor the library's data management services for researchers within the medical centre.

Connecting with health through children's literature

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Introduction: Stories, picture books and other fictional works may help children to better understand and absorb concepts related to health, illness and disability, and to cope with those conditions in their lives. This project brings together and reviews juvenile fictional works relating to health, illness, and disability, and focuses on those works that are readily available for purchase in a North American environment. **Methods:** For this project, we compiled a list of health and wellness search terms based on Azarnoff's (1983) subject list, our own health subject knowledge, and reputable children's health organizations' topic lists. We used these terms to search for English-language juvenile fiction books in the OCLC WorldCat and Canadian Children's Book Collection databases, published from 2011–2014. We reviewed each of the books to determine their suitability for inclusion in Canadian library collections of children's fiction based upon positivity of the health-related message and other standard measures such as reading level and quality of production. **Results:** The end product was a core list of current juvenile health fiction books spanning health promotion, physical and mental health conditions and disabilities. **Discussion:** The intent of this project was to develop a resource to inform collection development activities relating to children's health. This resource is relevant to environments that promote children's health literacy, including hospital, school, public libraries, and academic libraries with an elementary education collection. We will publish the list as an addendum to an article and encourage librarians to use, build upon, and update this core list.

Oh, the Places We'll Start (and Go): Testing the Waters for Web Content Development & Management as a Hospital Library Service

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Introduction: Electronic books and journals are becoming the norm, but access is problematic in a hospital environment due to many factors including cost, past practices, and security policies. Capital Health Library in Nova Scotia is using this challenge as an opportunity to expand and define its role in the overall management of institutional resources and content. **Methodology:** Capital Health Library's clients gained convenient and visible access through 1) catalogue updates allowing for the generation of permalinks to individual records, and 2) acquisition of the LibGuides content management system to highlight and organize resources by clinical discipline. Producing LibGuides, or "Starting Points," increased high-use clients' awareness of access and resources: http://libguides.cdha.nshealth.ca/StartingPoints/Home. Outreach consisted of incorporating new access opportunities into the Library's pre-existing training program, and asking high-use stakeholders for content ideas and assistance.

Results: The Library's Starting Points Guides, launched in December 2012, assisted in generating increased use of electronic resources and library services (e.g. literature searches). Requests for a stronger library presence in content development and delivery via the web also resulted. **Discussion:** Current projects with Public Health, Addictions, and Organizational Learning & Development using the LibGuides platform are being monitored to shape the Library's web content development services. Emerging issues include: copyright, design options and consistency, mobile access, time management, library staff skill levels and roles, relationships with the hospital's IT department, and security.

Intégrez les plans de cours à votre développement de collection grâce à Syllabo

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Introduction: Syllabo est une base de données maison visant à faciliter le processus de développement de collection, tout en ciblant le mieux possible les besoins des étudiants. L'objectif est d'atteindre la meilleure adéquation possible entre les collections des bibliothèques de l'Université de Montréal et les ouvrages et sources d'information mentionnés dans les plans de cours. **Méthodologie**: Le développement de Syllabo a débuté en juin 2009 à la Bibliothèque de la santé, dans la perspective de faciliter le processus de révision des syllabus des cours offerts à chaque trimestre par les facultés et les écoles desservies par les bibliothèques. Un procédurier décrit en détail la configuration de cette base élaborée à l'aide du logiciel EndNote. On y explique les étapes de repérage des syllabus et des données bibliographiques, les champs personnalisés disponibles (sigle du cours, statut du document, suivi des démarches, etc.), le vocabulaire contrôlé et les règles d'écriture associés à ces champs, ainsi que les procédures de sauvegarde. **Résultats**: La base Syllabo facilite maintenant le repérage annuel de nouvelles éditions, assure un suivi plus systématique de toutes les démarches requises, tout en simplifiant les communications avec les professeurs. La Bibliothèque de la santé applique dorénavant cette même méthodologie à la gestion de ses sections référence et de réserve de cours. **Exposé**: La base Syllabo a grandement amélioré l'efficacité du processus de révision des syllabus et est maintenant implantée dans cinq autres bibliothèques de l'Université de Montréal. Une brève démonstration de la base Syllabo sera offerte.

Collection de livres anciens dans les hôpitaux pour les nuls!

Diane St-Aubin et Daniela Ziegler

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Introduction: Aux points de service du centre de documentation et dans les sous-sols du CHUM, une «collection oubliée» dort depuis plusieurs années. Conservés dans des conditions douteuses, un nombre indéterminés de livres d'un âge certain sont dispersés d'un site à l'autre. Le déménagement futur de l'hôpital nous a mené dans le cadre d'une plus vaste opération d'inventaire, à nous pencher davantage sur ces ouvrages parfois précieux. Sans réelle expertise sur le sujet, ni moyen financier pour embaucher un spécialiste, nous avons recherché l'information nécessaire à l'évaluation de cette collection insoupçonnée et avons établi des priorités quant à sa conservation en fonction de la mission de la bibliothèque du CHUM. **Méthode:** Avec comme outil de départ notre procédurier d'inventaire général, suite à une revue de littérature sur les collections de livres anciens qui a mené à la consultation de documents incontournables sur le sujet et à l'établissement de contacts avec quelques experts: bibliothécaires spécialisés, muséologues, avocats, etc. nous avons produit une grille de prise de décision.

Résultats: Plusieurs découvertes. Sur les façons de procéder: ADDALL.com, Garrison et Morton, etc; Sur la collection: d'abord un plus grand nombre d'ouvrages d'intérêts que celui attendu. Évidemment, une majorité de titres édités au XIXème siècle; Sur sa conservation futur: les choix institutionnels à faire; ainsi que les choix légaux et juridiques, car il peut y en avoir. Et l'impact de ces choix sur le futur de cette collection. **Discussion:** Cet exercice nous a mené à la rédaction d'une annexe d'importance au procédurier d'inventaire général déjà produit, à réfléchir sur une véritable politique de dons, à la pertinence de la conservation d'une telle collection par rapport à la mission de la bibliothèque. L'idée a également germée sur la possibilité de rendre quelques-uns de ces ouvrages disponibles grâce à leur numérisation ou plutôt à moindre frais, faire pointer des liens vers de grandes bibliothèques virtuelles qui possèdent déjà ces mêmes livres en version numérique comme Gallica. bnf.fr ou l'incontournable GoogleBooks.

Making Mealtimes Better: A Research Colloboration Journey

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Introduction: The Education-in-a-Box series was developed by the University of Manitoba Health Libraries Long-Term Care Outreach Librarian and the Regional Educator for the Winnipeg Regional Health Authority Personal Care Home program. The series, consisting of kits containing selected quality information resources targeted at staff working in personal care homes, aims to conveniently disseminate information resources to educators and staff. This research project aimed to address the question of whether the dissemination of a variety of selected, quality information resources contributes to the knowledge translation process as reflected by self- reported behavior change. The study, led by the research team of librarian, educator, and two dieticians, was conducted by a group of 4th year students in a practice-based research course in Human Nutritional Sciences, in order to learn how to apply theoretical knowledge of the research process to a practice-based research project. **Methods:** Educators and staff at personal care homes volunteered to participate, each receiving the "Making Mealtime Better" Box for three weeks. HNSC 4600 students distributed surveys to educators and staff in each facility. Survey questions addressed the Box as an educational tool and included reflective questions addressing practice changes to improve mealtime experience. **Results:** Due to issues with human resources and data collection at the facilities, results of the study were inconclusive. However, the research team has been meeting regularly to document their experience. This presentation will focus on the challenges of knowledge translation research in health libraries, interprofessional collaboration, and lessons learned during the research process.

Implementing a Virtual Platform to Support a Province-Wide Library Service Transformation

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Objectives: Knowledge Resource Service (KRS) provides information and library services to healthcare professionals throughout Alberta, Canada. KRS recently transitioned to a unified, province-wide, virtual service model with physical sites and staff throughout the province. This goal of this project was to implement a virtual platform to manage services and requests, delivering high quality and equitable services across a province-wide health authority.

Methods: In late 2012 a small working group of KRS librarians and consultants came together to review trends in library website content, conduct a content inventory, evaluate types of software available for the virtual platform, solicit feedback from users and staff, design new virtual service standards, and create quality of service delivery metrics. In August 2013, KRS implemented a new virtual platform using Springshare's LibGuides CMS and LibAnswers platforms. **Results:** The virtual platform had a positive impact on KRS services and staff. The working group addressed a number of variations in operational processes across provincial sites. Feedback from the KRS team demonstrated that the new platform provided colleagues with an enhanced sense of collaboration to solve problems, share workload and build a virtual knowledgebase. Client response to the new platform has been positive, resulting in a quantifiable increase in service requests and engagement with the web platform. **Conclusion:** A new virtual platform can be a vehicle to review, renew and transform virtual library services. Evaluation of the changes made as result of the shift in service delivery model are in their preliminary stages but show promise for informing the development of a unified province-wide approach to the delivery of library services. Ongoing work includes further refinement of processes, staff training, communications and a social media strategy to support continuous improvement of resources and services delivered to clients.

Peeking Under the Hood: a Closer look at JCHLA/ JABSC

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Introduction : From the first printed issue in 1976 of Can Group News (on behalf of the MLA Canadian group) "containing material useful to health libraries in Canada…include[ing] such things as listing of free publications, news items, job vacancies, new appointments, etc.) to a triannual, open access, electronic publication, the Journal of the Canadian Health Libraries Association (JCHLA) / Journal de l'Association des bibliothèques de la santé du Canada (JABSC) is the only Canadian journal publishing in the area of health sciences librarianship. To date, an analysis of readership and a review of the aims of the Journal (JCHLA/JABSC) has not been completed. **Methods:** Using Google Analytics and Cross Ref, the author will analyze patterns of readership from the first online issue published in 2004 onwards. Research will focus on patterns of readership: where geographically are our readers located? What do they read? How much time do they spend on the site? Do they view a single page and then leave? **Results:** Data gathered from the reports generated from Google Analytics and Cross Ref will be analyzed and presented in graphical form, whenever possible. **Discussion:** The results of this study will have implications for our association and its commitment to JCHLA/JABSC. Is JCHLA/JABSC doing what we want it to? Can we, as an association, decide on what its "key performance indicators" should be? Can we measure "success" of JCHLA/ JABSC? Or is it time to rethink our national publication?

Guide médical en soins de longue durée: un guide mobile de bonnes pratiques cliniques créé par une équipe interprofessionnelle

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Introduction : Au Québec, peu de formations spécifiques sur les soins de longue durée (SLD) sont offertes aux étudiants en médecine et les manuels récents en français sont quasi-inexistants. Pourtant, on assiste à l'alourdisse-

ment de l'état de santé des personnes âgées hébergées. Dr Champoux et son équipe de l'Institut universitaire de gériatrie de Montréal décide alors de créer un outil clinique convivial permettant de soutenir les médecins œuvrant en SLD. L'objectif: améliorer la qualité des soins médicaux prodigués aux aînés hébergés en SLD pour ultimement améliorer leur santé, leur sécurité et leur qualité de vie. **Description** : S'adressant aux médecins travaillant en SLD, aux étudiants et aux équipes de soins interprofessionnelles, le Guide médical en soins de longue durée (http://www.mdsld.ca), site web et mobile, présente des ressources, meilleures pratiques et outils cliniques issus des données probantes et des connaissances d'experts du domaine. Il intègre le cadre des compétences

CanMEDS du Collège des médecins de famille du Canada. **Résultats** : Lancé à l'automne 2013, le Guide connaît un vif intérêt de la part des médecins et étudiants. Huit chapitres sont déjà disponibles, une soixantaine le seront à terme. Des crédits de formation continue seront bientôt accessibles. **Discussion** : Réalisé par une équipe de médecins, professionnels de la santé, experts des technologies web mobiles et une bibliothécaire, ce projet présentait plusieurs défis: édition et structuration d'un contenu clinique, intégration des technologies mobiles, mais aussi gestion de projet web et collaboration interprofessionnelle. Le rôle de conseil et de coordination du bibliothécaire a permis l'arrimage des différents éléments du projet.

La Boîte à outils technopédagogiques en sciences infirmières – Fruit d'un partenariat entre bibliothécaires et professeurs

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Introduction : Le développement des compétences informationnelles chez les infirmières est essentiel tant pendant leur formation qu'en pratique professionnelle. Or, Mittermeyer & Quirion (2003) ont démontré que les étudiants universitaires québécois présentent des lacunes importantes en la matière. Ces résultats corroborent nos observations chez les étudiantes en sciences infirmières. **Méthodes :** Nous avons soumis le questionnaire mesurant les compétences informationnelles de Mittermeyer & Quirion à sept groupes d'étudiantes au baccalauréat en sciences infirmières de l'Université du Québec à Rimouski (n = 162, 115 en 1e année et 47 en 2e) afin d'identifier les forces et les lacunes en présence. **Résultats :** Les résultats obtenus sont semblables pour les étudiantes de première et de deuxième année. Le score moyen est de 42,4% (ÉT = 14,0%) pour les étudiantes de première année et de 41,5% (ÉT = 11,5%) pour les étudiantes de deuxième

année. Aucune différence statistique notée sur les moyennes calculées pour les cinq thèmes mesurés: identification des concepts, stratégie de recherche, types de documents, outils de recherche, exploitation des résultats. **Discussion :** Les lacunes identifiées en matière de compétence informationnelle chez les étudiantes en sciences infirmières nous ont conduit à organiser des entretiens de groupe auprès des étudiantes, des professeurs et des personnes chargées de cours pour identifier les facteurs en cause. Nous avons ensuite intégré des activités de formation progressives dans le cursus universitaire et nous avons développé la Boîte à outils technopédagogiques en sciences infirmières (http://boiteaoutils.uqar.ca/). Cet outil est maintenant exploité par les bibliothécaires de chacune des constituantes de l'Université du Québec pour les formations documentaires données aux étudiantes en sciences infirmières.

Scaling new heights: embedded librarians adapt orientation to service enrollment increase

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Introduction: Embedded librarians were given two-month notice of 27% increase in first-year student enrollment at the Faculty of Dentistry, University of Toronto. This necessitated the deployment of an innovative strategy for delivering library instruction during September orientation. A new library catalogue was launched at the end of August 2013, which added to the challenge. In 2012, orientation consisted of a mandatory library tour, a traditional lecture on library services and an optional quiz tied to a prize incentive. Our 2013 voluntary orientation included a tour, a series of online instructional videos, a quiz and an "Amazing Race" scavenger hunt. The quiz and race were tied to prize incentives. **Methods:** Eleven short instructional videos about library resources were created using Echo 360 and uploaded on our website. During orientation, students were provided a paper quiz on video content, which when returned was entered in a draw. A scavenger hunt, based on the Amazing Race, tested student knowledge of library policy, resources and services discussed during the library tour. Students entered a draw once they completed the race. **Results:** Despite the voluntary nature of library orientation and smaller prize incentives in 2013 than 2012, the percentages of attendees that submitted quizzes were approximately equal. In 2013, 34% of attendees participated in the Amazing Race event. **Discussion:** Our new orientation provided students a practical opportunity to explore the library and video content to consult in the future. Changes were positively received by the students and provided a great means of student outreach.

Screen-capture tutorials: How well do students learn from them?

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Goal: This study evaluated the efficacy of screen capture tutorials in teaching database search skills to undergraduate health sciences students. **Participants:** Twelve undergraduate health sciences students (3 physiology/pharmacology; 1 pharmacy & nutrition; 2 medicine; 2 biomedical sciences; 1 kinesiology; 2 public health; 1 nursing). Participants were randomly assigned to one of two groups: instruction video (n = 6) and a control video (n = 6). [data collection is ongoing with a goal of 30 students by March 2014] **Method:** The participants' stage in the information search process and their topic knowledge were assessed. Participants then searched Medline for articles on a research topic of their choice, watched a 5-minute screencast tutorial (instructional video demonstrated keyword searching, including truncation and adjacency operators; control video described a nursing libguide), then participants conducted a second Medline search. Camstudio software recorded all screen activity. Finally, participants completed a short on-line questionnaire. **Results:** Preliminary results showed little evidence of natural language searches and no use of truncation or adjacency in the pre-tutorial searches. Post-tutorial search activity revealed 32 (instructional group) and 0 (control group) uses of truncation and adjacency. However, when the instructional group used adjacency and truncation it was used correctly a relatively small percentage of the time (adjacency, 25% correct; truncation 37.5% correct). In the post-tutorial questionnaire the majority of participants reported a preference for a combination of face-to-face instruction and screencast tutorials. **Conclusions:** When data collection is complete, this study will help us understand how well health sciences students learn database search skills from screencast tutorials and their preferences for this mode of learning.

"Is THAT what they call it?": Shared Decision Making and the Librarian's Role

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Objective: As physicians and patients engage in Shared Decision Making (SDM), where does the librarian fit? Librarians' engagement in SDM may not be labelled as such. We aim to disseminate the findings from our scoping review and gather feedback from librarians regarding their perceived roles in SDM. **Methods:** Our project is divided into 3 phases: a scoping review, which identified librarian engagement in SDM; dissemination of the review's findings and the gathering of feedback on health librarians' roles in SDM via questionnaire; and implementation of SDM in librarianship in a cohesive fashion. Phase 2 of our project will involve presenting our review findings and launch the questionnaire. It will allow us to determine how librarians participate in SDM, to formally label the role as such, and to promote engagement and awareness. Phase 3 will not be completed until after the CHLA 2014 conference. **Results:** Our scoping review demonstrated that librarians are engaged in SDM; however, terminology and approach vary greatly. **Conclusion:** While Shared Decision Making has been described and monitored among health professionals, librarians have not ascertained their SDM roles and skills. Following the dissemination of the results from our scoping review and questionnaire, we hope to formulate a more comprehensive view of the roles of information professionals within SDM. SDM is an important emerging culture in healthcare and librarians need to proactively identify opportunities to embed our skills and engage with patients and health professionals.

Effectiveness of Instructional Methods Used by Librarians for Teaching Evidence-Based Practice: A Systematic Review

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Objective: To investigate the most effective instructional methods used by librarians or information specialists in teaching evidence-based practice in the health sciences at the undergraduate and graduate levels. **Methods:** A systematic review of the literature was conducted with searches completed through November 2013 including, but not limited to, the following databases: MEDLINE, Cochrane Library, EMBASE and LISTA Sources of grey literature were also searched. A combination of keywords and database-specific subject headings were used to construct each search. Strategies were based on the following PICO concepts: Librarians AND Teaching

AND Evidence-Based Practice. No limits were applied. Results were independently reviewed by two researchers, selected by defined inclusion and exclusion criteria, and assessed for risk of bias based on study methodology. Library orientations, non-librarian teachers, letters and comments, and veterinary education studies were excluded. Data extraction was modeled on the process utilized by Koufogiannakis and Wiebe 2006. **Results:** Preliminary results indicate there is a significant body of literature examining the effectiveness of instructional methods for teaching evidence-based practice. Studies will be compiled and rigorously assessed. Implications for further research will also be discussed.

Embedding in EBM: Librarians in the Postgraduate EBM Curriculum at NOSM

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Program Objective: NOSM Health Sciences librarians support the evidence-based medicine curriculum for Family Medicine residents in several capacities; most significantly in their role as embedded librarian tutors. **Setting:** NOSM residents are based in Thunder Bay and Sudbury. Each campus has a designated librarian tutor. The Family Medicine residents meet approximately nine times per year for 3-hour EBM tutorials. The librarian tutors, along with clinician tutors, attend these sessions. **Participants:** The primary participants are Family Medicine residents in Thunder Bay and Sudbury. Residents from NOSM's eight Royal College Specialty Programs may attend these sessions. **Program:** Each resident is required to act as an EBM discussion leader, in which they demonstrate and facilitate discussion about an EBM topic. Prior to their session, residents consult with the librarian tutor about search strategy and PICO. Librarian tutors provide additional feedback and identify learning opportunities during the session, and have 15-20 minutes of dedicated time for instruction, troubleshooting, and information sharing. **Outcomes:** Involvement with the Family Medicine residents led to increased engagement with residents in the Royal College Specialty Programs. Embedding librarians into these existing academic sessions has facilitated resident-librarian contact and positioned librarians as EBM experts and educators. It has also furthered opportunities for developing EBM content with NOSM's Undergraduate Medical Education (UME) and Continuing Education Professional Development (CEPD) Units. **Conclusions:** Embedding librarian tutors into Postgraduate EBM tutorials is a mutually beneficial avenue for integrating library content and expertise into an already heavy curriculum

Communicating Value: Creating a Health Library Value Toolkit

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Introduction: The Health Science Information Consortium of Toronto (the Consortium) identified the need for members to communicate the value of their expertise and services to their respective stakeholders. In 2013 the Consortium formed the Task Force on Measuring Value (TFMV) to recommend strategies, resources and tools to measure and communicate value for Consortium members, the Consortium itself, and the broader health library community, based on best practices and collective wisdom. **Methods:** TFMV conducted a survey of Consortium

members to learn about current practices, tools and methods, and to identify gaps. The information gathering phase included brainstorming sessions, research and grey literature searches, attendance at workshops, and consultations with evaluation experts. The next step was to develop a conceptual framework for the toolkit including elements such as Quantitative Evaluation Tools, Qualitative Evaluation Tools; Reporting with Infographics, etc. Finally, TFMV selected and evaluated specific resources for inclusion. **Results:** The LibGuide, Measuring the Value of Health Library Services, is the final product of the TFMV. Each section includes samples of top resources, tools or best practices as well as practical examples of how they can be implemented. The TFMV also provided recommendations for benchmarking measures to be collected across the membership of the Consortium. **Discussion:** Because ongoing practice is in a constant state of flux – and advocacy tools are increasingly important – the Health Library Value Toolkit is flexible and easy to update.

We won an international contract, and you can too!

Sandy Iverson and Carolyn Ziegler

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Introduction: In 2013, St. Michael's Hospital Health Sciences Library in Toronto decided to pursue an external contract to deliver professional information specialist services to a global body (the International Liaison Committee on Resuscitation). This presentation will explore the challenges and benefits in undertaking such a significant project. **Description:** The mission of the International Liaison Committee on Resuscitation (ILCOR) is to identify and review international science and knowledge relevant to CPR and emergency cardiovascular care and, when there is consensus, to create treatment guidelines. As part of this review, approximately 200 research questions are examined. For the 2015 consensus process, and to ensure quality and consistency, ILCOR decided to engage the services of a professional health information specialist to develop the literature search strategies for these research questions. St. Michael's library team applied for, and was awarded, the contract to deliver these high-level search strategies. **Process:** The evidence search services are delivered virtually in collaboration with hundreds of scientists from around the world. Five Information Specialists are involved in delivering the search strategies. **Outcomes:** In the 3.5 months since being awarded the contract, the team has devised search strategies for over 60 PICO questions in the field of resuscitation. The preliminary feedback on the quality of the searches continues to be positive. **Discussion:** In this presentation, we will attempt to answer questions such as why we applied, how we were able to win the contract, what some of our major considerations were in undertaking this project, and how we proceed to carry out the project.

Standby...Action! Regina Qu'Appelle Health Region's Experience Using Commercials to Market the Hospital Library

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Introduction: In the winter of 2013, an initiative began to re-brand and market the Regina Qu'Appelle Health Region libraries. There were several reasons to embark on this project: Lack of access to email meant some messages were missed by RQHR staff; the implementation of new digital signage in the Health Region; to better tie the Library to patient care and to let future, existing and non-users know about library services. The main goal of

the campaign is to increase awareness of the libraries' services to all RQHR staff by developing unique marketing strategies, in the hopes that these strategies will foster and maintain more use of the libraries. **Description:** The majority of this paper presentation will encompass the first marketing strategy that the RQHR Library decided to implement, which was a commercial campaign comprised of three, 1 ½ minute commercials promoting three different library services. The services that were promoted were based off of the feedback of a "Library Utilization Survey," which was created with the help of the Research Department and delivered to all RQHR staff. This assessment was created in order to determine what services were underutilized and what the Library can do to better serve the needs of all staff. **Outcomes:** We had over 1100 responses to the Library Utilization Survey. The feedback from the survey, commercials and the before and after usage statistics of our services will be presented. **Discussion:** The challenges encountered, as well as future directions like audience-specific video marketing and the revamping of our promotional materials will be discussed.