

Current research

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Harrison J, Sargeant SJ. Clinical librarianship in the UK: temporary trend or permanent profession? Part II: present challenges and future opportunities. *Health Info Libr J*. 2004 Dec;21(4):220–6. PMID: 15606879 [PubMed – in process].

Background: This article is the second part of a two-part series reporting a study of the role of the clinical librarian (CL) in the UK. **Methods:** A qualitative method of semi-structured interviews was used to explore in-depth the role of the CL. The interviews provide a rich source of data and give insight into this new and emerging role as practised in the National Health Service (NHS). Similarities and differences are examined between the CL population and reported within themes, specifically personal qualities and skills required, training for the CLs, marketing the CL service, working in the clinical environment, monitoring and evaluation, and the acceptance of the CL in the NHS. **Results:** A common understanding of the skills and knowledge required to undertake the CL role was shared by the respondents. However, practice differed as this was often dictated by local circumstances. The study confirmed the need for the CLs to work with clinical colleagues in the clinical setting to enhance patient care. **Conclusion:** The importance of using best evidence to support patient care is a message that is slowly becoming the norm in the NHS and the CL role in this practice is demonstrated by this study.

Wakeham M. Marketing and health libraries. *Health Info Libr J*. 2004 Dec;21(4):237–44. PMID: 15606881 [PubMed – in process].

Aim: To present an overview of the concepts of marketing and to examine ways in which they can be applied to health libraries. **Methods:** A review was carried out of literature relating to health libraries using LISA, CINAHL, BNI, and Google. **Results:** Marketing is seen as a strategic management activity aimed at developing customer relationships. Concepts such as the “four Ps” (product, price, place, and promotion), marketing plans, marketing mix, segmentation, promotion, and evaluation are identified and discussed in relation to health libraries. **Conclusion:** In increasingly complex health service and information environments, the marketing and promotion of library services is becoming more important if those services are to justify the resources given to them. Marketing techniques are equally applicable to physical and digital library services.

Gentry M, Marone RK. The virtual medical library: resources at the point of need via a proxy server. *Journal of Electronic Resources in Medical Libraries*. 2004;1(1):3–20.

Most academic health sciences libraries have developed impressive digital collections of journals and books over the past few years. These resources constitute a strong core collection of library resources, easily accessible to campus users anytime, day or night. Remote access proxy servers and other remote access technologies allow affiliated students, staff, and faculty to use these resources from the home, office, or remote clinical locations, virtually anywhere there is access to the Internet. This paper provides an overview of issues related to implementing, promoting, and supporting remote access technologies. This paper also provides an overview of issues related to implementing, promoting, and supporting remote access via a proxy server and selected issues related to licensing and managing electronic resources. The particular experiences of the Yale University’s Cushing/Whitney Medical Library are highlighted.

Wilczynski NL, Haynes RB, Lavis JN, Ramkissoonsingh R, Arnold-Oatley AE, HSR Hedges team. Optimal search strategies for detecting health services research studies in MEDLINE. *CMAJ*. 2004 Nov 9;171(10):1179–85.

Background: Evidence from health services research (HSR) is currently thinly spread through many journals, making it difficult for health services researchers, managers, and policy-makers to find research on clinical practice guidelines and the appropriateness, process, outcomes, cost, and economics of health care services. We undertook to develop and test search terms to retrieve from the MEDLINE database HSR articles meeting minimum quality standards. **Methods:** The retrieval performance of 7445 methodological search terms and phrases in MEDLINE (the test) were compared with a hand search of the literature (the gold standard) for each issue of 68 journal titles for the year 2000 (a total of 25 936 articles). We determined sensitivity, specificity, and precision (the positive predictive value) of the MEDLINE search strategies. **Results:** A majority of the articles that were classified as outcome assessment, but fewer than half of those in the other categories, were considered methodologically acceptable (no methodological criteria were applied for cost studies). Combining individual search terms to maximize sensitivity, while keeping specificity at 50% or more, led to sensitivities in the range of 88.1%–100% for several categories (specificity ranged from 52.9% to 97.4%). When terms were combined to maximize specificity, while keeping sensitivity at 50% or more, specificity of 88.8%–99.8% was achieved. When terms were combined to maximize sensitivity and specificity, while minimizing the differences between the two measurements, most strategies for HSR categories achieved sensitivity and specificity of at least 80%. **Interpretation:** Sensitive

and specific search strategies were validated for retrieval of HSR literature from MEDLINE. These strategies have been made available for public use by the US National Library of Medicine at www.nlm.nih.gov/nichsr/hedges/search.html.

Wagner KC, Byrd GD. Evaluating the effectiveness of clinical medical librarian programs: a systematic review of the literature. *J Med Libr Assoc.* 2004 Jan;92(1):14–33.

Objective: This study was undertaken to determine if a systematic review of the evidence from 30 years of literature evaluating clinical medical librarian (CML) programs could help clarify the effectiveness of this outreach service model. **Methods:** A descriptive review of the CML literature describes the general characteristics of these services as they have been implemented, primarily in teaching-hospital settings. Comprehensive searches for CML studies using quantitative or qualitative evaluation methods were conducted in the medical, allied health, librarianship, and social sciences literature. **Findings:** Thirty-five studies, published between 1974 and 2001, met the review criteria. Most (30) evaluated single, active programs and used descriptive research methods (e.g., use statistics or surveys and questionnaires). A weighted average of 89% of users in 12 studies found CML services useful and of high quality, and 65% of users in another overlapping, but not identical, 12 studies said these services contributed to improved patient care. **Conclusions:** The total amount of research evidence for CML program effectiveness is not great and most of it is descriptive rather than comparative or analytically qualitative. Standards are needed to consistently evaluate CML or informationist programs in the future. A carefully structured multiprogram study including three to five of the best current programs is needed to define the true value of these services.

Abels EG, Cogdill KW, Zach L. Identifying and communicating the contributions of library and information services in hospitals and academic health sciences centers. *J Med Libr Assoc.* 2004 Jan;92(1):46–55.

Objective: This article introduces a systematic approach to identifying and communicating the value of library and information services (LIS) from the perspective of their contributions to achieving organizational goals. **Methods:** The contributions of library and information services (CLIS) approach for identifying and communicating the value of LIS draws on findings from a multimethod study of hospitals and academic health sciences centers. **Results:** The CLIS approach is based on the concept that an individual unit's value to an organization can be demonstrated by identifying and measuring its contributions to organizational goals. The CLIS approach involves seven steps: (1) selecting appropriate organizational goals that are meaningful in a specific setting;

(2) linking LIS contributions to organizational goals; (3) obtaining data from users on the correspondence between LIS contributions and LIS services; (4) selecting measures for LIS services; (5) collecting and analyzing data for the selected measures; (6) planning and sustaining communication with administrators about LIS contributions; and (7) evaluating findings and revising selected goals, contributions, and services as necessary. **Conclusions:** The taxonomy of LIS contributions and the CLIS approach emerged from research conducted in hospitals and academic health sciences centers and reflect the mission and goals common in these organizations. However, both the taxonomy and the CLIS approach may be adapted for communicating the value of LIS in other settings.

Sherwill-Navarro PJ, Wallace AL. Research on the value of medical library services: does it make an impact in the health care literature? *J Med Libr Assoc.* 2004 Jan;92(1):34–45.

Objective: To evaluate the impact in the health care literature of research articles that provided evidence of the value of library services (including MEDLINE) as an element of quality health care. **Data sources/selection:** Four research articles on the relationship between use of library services and quality health care were selected as "primary articles" from a MEDLINE search using appropriate the Medical Subject Heading. Primary articles met the following criteria: written in English, reported research, related to clinical care, and published before 1995. **Data extraction:** The technique of citation analysis was used to measure the impact of the primary articles on the subsequent literature. The number, authorship, type, and publication venue of articles citing the primary articles were determined using ISI Web of Science, MEDLINE, other electronic resources, and the citing articles themselves. For the 146 English-language citing articles, the article type (i.e., advocacy, instructional, research) was noted; and for those that reported research, the use to which the author put the cited material was determined. **Results:** The primary articles were cited more often than the average articles published that year in the same journals. At the time of the study, each article had been cited almost every year since publication. Of the 146 citing articles written in English, 43% were written by librarians, 38% by physicians, and 12% by librarians with physicians. The majority were published in medical journals, followed in order of decreasing frequency by the *Bulletin of the Medical Library Association*, information science journals, and health administration journals. **Conclusions:** The results of this study demonstrate that published research on the value of medical library services has an impact on the literature. These articles are read and cited and continue to be of value.