



**Canadian Health Libraries
Association
2015 Conference**

19–22 June 2015

Vancouver, British Columbia, Canada

**Association des bibliothèques
de la santé au Canada
Congrès 2015**

19 au 22 juin 2015

Vancouver, British Columbia, Canada

Posters / Affiches

POSTERS / AFFICHES

Meta-tool for Quality Appraisal of Public Health Evidence

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Introduction: Public Health Ontario (PHO) Library Services supports synthesis research and evidence review projects, including assisting in the selection of appropriate critical appraisal tools (CATs) for use with public health evidence. Most of the tools facilitate the appraisal of internal validity of one study design, with limited attention to applicability to public health settings. To address this issue, Library Services conducted a peer-reviewed and grey literature scan to identify relevant CATs for assessing public health evidence. The identification of tools grew into the development of a generic public health critical appraisal framework, while still incorporating rigorous risk-of-bias assessment using design-specific companion tools. **Methods:** A search for critical appraisal tools was conducted to identify those relevant to public health. Grouping and comparison of tools resulted in the

development of an innovative four-part quality appraisal framework that was paired with a set of existing design-specific companion tools to form a meta-tool. **Results:** The MetaQAT is a critical appraisal meta-tool, consisting of a generic framework and suite of companion tools drawn from the critical appraisal literature. The generic framework includes four domains: relevancy, reliability, validity, and applicability, broadening the appraisal process to include issues relevant to public health application. Users are directed to the design-specific companion tools to assist in the appraisal of validity. **Discussion:** The meta-tool structure allows for a tool that is both generic and provides rigorous appraisal of studies in public health. In addition, its development highlights an expansion of the traditional library role within the research process.

Identifying and Removing Duplicate Records Resultant from Systematic Review Searches: a Comparative Investigation

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Background: Strategies for deduplicating records returned from systematic review searches remain mostly an informal skill discussed on search expert listservs. The purpose of this study was to formally compare the effectiveness of different options for deduplicating records returned from systematic review searches. **Methods:** Five deduplication options were compared in this study using

the records from a published systematic review: deduplication in Ovid across Embase and MEDLINE records (Ovid multifile search), deduplication of MEDLINE records in Ebsco CINAHL, and deduplication of MEDLINE, Embase, and CINAHL records in RefWorks, EndNote, and Mendeley. The time taken to deduplicate in each option and the number of false positives (duplicate citations that

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were deleted but should not have been) and false negatives (duplicate citations that should have been deleted but were not) resultant from each option were recorded. **Results:** Except for deduplication of records in RefWorks, which took 10 min, each deduplication option took less than three minutes to execute. The number of false

positive and negatives for each option varied, with only the OVID multifile search resulting in zero false positives. **Discussion:** Based on the results of this study, we recommend different deduplication options based on the skill level of the searcher and the purpose of deduplication efforts.

The Role of the Medical Library in Supporting LEAN Transformation

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Introduction: Between 1948 and 1975, Toyota developed “LEAN Production”. The Japanese term “Kaizen” (meaning “good change” or “improvement”) is the cornerstone of this system. Kaizen promotes the complete elimination of any process or effort which does not benefit the customer or is not necessary for the functioning of the company. This management philosophy has been duplicated by companies and organizations globally. Often, those emulating Toyota are completely isolated from the automobile sector. In 2012, Saskatchewan became the first Canadian province to implement LEAN across all health regions. **Objective:** The Saskatoon Health Region’s Medical Library is eager to assist this process. However, lack of awareness/understanding of library services & resources is sometimes an obstacle. Regardless, libraries are LEAN by nature and are an ideal partner to help with these initiatives. **Methods:** Librarians have documented

quantitative and qualitative data related to services given to LEAN initiatives. User statistics and written feedback have led to a better understanding of how to contribute to overall LEAN implementation. **Results:** Due to outreach efforts and existing relationships with departments, librarians have become key participants by developing a collection of “LEAN education” books, completing literature searches with LEAN/Kaizen as an identified purpose, and assisting with a week-long 5S project (sort, straighten, shine, standardize, sustain). Notably, the library also helps with Rapid Process Improvement Workshops (RPIWs) which strive for continuous improvement, even in areas that are already satisfactory. **Discussion:** Feedback has included very positive reviews. However, other responses suggest there is room to grow as the Medical Library’s involvement in LEAN remains in its infancy.

Evaluation of the Perceived Quality of Literature Searching Services Provided by Hospital Librarians

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Background: Clinical librarians at a large teaching hospital in London, Ontario annually conduct approximately 800 literature searches for hospital staff in support of patient care, research and education. **Methods:** Following

the critical incident technique, a short survey was constructed, and evidence-based methodologies for survey design were adopted to strengthen the validity of the tool. A systematic sample of staff who requested literature

searches were invited to participate in the study. **Results:** After a year of systematic sampling, data collection for this study is now complete. A total of 132 surveys were submitted by a range of hospital staff, representing a 71% response rate. While 23% of staff indicated that less than half of their results were relevant, 90% felt that the quality of the literature search results was very good or excellent. Survey comments revealed several areas for improvement including: the provision of electronic full-text articles; the potential for value-add through tailored results presentation

and; the benefit of follow-up discussion with the librarian to clarify the search request. **Discussion:** Literature searching for hospital staff is a valuable service that can save healthcare practitioners time and help to ensure evidence-based care. In this study we identified various areas for improvement to a mediated literature searching service. The survey tool used in this study and the study findings can be used by other libraries to improve the quality of their literature searching services.

Our iPad Lending Program

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Introduction: This poster will describe the launch, management, and evaluation of an iPad Lending Program, the first of its kind for Toronto hospitals. At St. Michael's Hospital Health Sciences Library one of our strategic priorities is to "Create multiple, adaptable and inspiring points of access to knowledge." The main goal of our program is to provide access to iPads as learning, teaching and research tools. Other goals and outcomes include raising the library's profile, marketing and the piloting of new service models. **Methods:** We began by reviewing policies and practices at other institutions. We then updated existing lending agreements to include iPad specific responsibilities and penalties. A checklist was developed to ensure that the entire iPad "kit" including

case, wires, adaptors, etc., are both checked-out and returned in good condition. We also produced an iPad Libguide and pre-loaded a standard set of medical applications. Clients can also add applications and set-up personalized e-mail and social media accounts. Upon return, units are restored to their original settings from back-up. Such a "wipe" addresses privacy concerns and ensures a uniform offering. **Results:** For the last three months we've had a steady queue of reservations. According to survey results the most popular apps are related to web browsing, journal reading and anatomy. **Discussion:** What started as an idea and developed into a pilot is now becoming an everyday part of our library. We will continue to collect statistics, evaluate the program and apps offered.

Use Analysis of Scopus for Systematic Review

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Introduction: Anecdotally, health sciences academic and clinical faculty members indicate Scopus as increasingly core for scholarship, but its necessity to health sciences librarians has not been established. **Objectives:** The primary objective of this study was to quantify use of Scopus in systematic reviews to determine its necessity in a core undergraduate medicine program at a Canadian university. **Methods:** This is a regressive study which uses citation and database analysis of published Cochrane Systematic Reviews over the past 5 years to determine the scope of use of Scopus. The results will be compared in relation to

other citation tracking databases like Web of Science. **Results:** Based upon preliminary analysis, it is anticipated that Scopus will not be identified as a core or necessary resource for our health sciences collection. While Scopus provides valuable citation information, its use for systematic review is minimal when compared with cost. **Discussion:** Librarians were unable to justify purchase of Scopus for use by this university's faculty, due to lack of compelling evidence that the resource is core or seen as equivalent to other products of a similar nature.

How do Health Libraries Use Twitter? A Content Analysis

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Introduction: Incorporating Twitter into library outreach has become common, but we have only begun to explore how health libraries are making use of the service. This poster describes a content analysis of a sample of tweets belonging to 10 health and medical libraries. **Methods:** A pool of Twitter feeds belonging to health/medical libraries was identified using Google, from which 10 feeds were randomly selected. Seven of the feeds belonged to academic health libraries and three feeds belonged to special health libraries. Eight of the libraries were located in the United States, one was located in Canada, and one was located in the United Kingdom. A total of 524 tweets were collected over four, 1-week periods in 2014. The tweets were analyzed using a grounded theory approach to identify themes and categories present in the sample.

Results: The tweets collected during this study were largely focused on current events occurring outside of the organization, and as such, there was relatively little original content included in the tweets. Information about the library or its broader organization was also provided to a lesser extent. The topics of individual tweets varied across a wide spectrum, and included content related to 6 broad categories: academia, events, health, specific population groups, technology and miscellaneous subjects. **Discussion:** This snapshot of health library tweets contributes to the broader discussion of how libraries are using Twitter. Additional research is needed to determine the factors that influence why individual libraries use Twitter the way they do.

Capacity Building in a Bangladeshi Allied Health Library

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Introduction: Bangladesh, with its population of 157 million, extreme poverty, and a high prevalence of disability, has a severe shortage of health care professionals. As the Bangladesh Health Professions Institute/Centre for the Rehabilitation of the Paralysed (BHPI-CRP) continues to expand its allied health academic programs, its Library must increase capacity within limited resources. The Dept. of Foreign Affairs, Trade & Development funds a Queen's University-led project at the Centre, which is located near the site of the 2013 Rana Plaza garment factory collapse. **Methods:** The Library was at a juncture where an e-library would provide users with unmediated access to e-resources. In 2013 an e-library was developed which provides access to: a wealth of content provided at no cost by HINARI (a partnership of the World Health Organization and commercial publishers); a new online catalogue; and an institutional repository. The

e-library was introduced to user groups. In a 2014 return visit, hands-on information literacy classes were developed and delivered to faculty, clinicians and students. **Results:** Since February 2013, the e-library homepage has had 25,331 page views. Of 134 learners who participated in information literacy sessions, 99 completed evaluations: 68 had no further questions, and 13 had questions about resources and procedures. **Discussion:** Ready access to scholarly resources, coupled with information literacy skills, will help to foster a research culture at the BHPI-CRP. Despite vastly different settings, the Bracken Health Sciences Library and the BHPI-CRP Library share many common goals as both strive to positively impact the delivery of health care. Future collaboration may centre on the BHPI-CRP Library as a training ground for newly graduated librarians, thus building capacity for health sciences librarianship in Bangladesh.

Information Literacy Skill Retention and Use by Healthcare Professionals: First Steps

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Objectives: The objectives of this study are to measure the information literacy skills acquired during the programs of Physical Therapy, Occupational Therapy and Dental Hygiene; and to measure the retention and use of those skills one year into professional practice. **Methods:** The information literacy skills measured here reflect skills identified in the ACRL Information Literacy Competency Standards for Higher Education and matched to professional competencies from the individual disciplines. Participants will be assessed at three points in time: beginning students, graduating students and early professionals. At each point, participants will be invited to complete a short demographic survey and a test on information literacy. The surveys will be different for each time period; collecting baseline information, attitudes upon graduation, and

professional perspectives on information literacy, respectively. Responses to the surveys and tests will be tabulated by cohort and data analyzed for trends across time. The study will not be analyzing performance between disciplines, as the academic programs are not comparable. Additionally, reporting on cohorts only rather than individuals retains the highest level of privacy for the participants possible. **Results:** Professional regulatory bodies and curriculum require competency in information literacy in all healthcare disciplines. Results from this project will be used to inform the structure and content of information literacy training to support both educational and professional needs. **Discussion:** This poster presents research methodology, sample test instruments and discussions of our pilot testing, undertaken in 2014.

Integrating Evidence into Health Services: The CDR Evidence Centre Rapid Response Evidence Service

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Introduction: The Child Development and Rehabilitation (CDR) Evidence Centre, based at the Sunny Hill Health Centre for Children, is a knowledge translation unit dedicated to accelerating the benefits of research for children and youth with special needs. Clinical services at Sunny Hill have an established history of integrating research evidence into assessments and interventions but administration and programming have yet to adopt evidence-based practice. The Rapid Response Evidence Service (RRES) is an initiative created by the CDR Evidence Centre to address Sunny Hill decision makers' needs for rapid assessment of evidence to inform improvement activities in program management and services. **Methods:** The RRES process was launched in November 2014. While at the outset the process appears to resemble a

traditional literature search request, the RRES adds further value by partnering with CADTH for reports and adding an integrated knowledge translation phase which can include synthesis to integration of evidence. The RRES knowledge products can vary; they include reports, implementation tools, and evaluation plans. **Results:** The RRES is currently being accessed by management at Sunny Hill with a positive response overall. While a formal evaluation is planned, informal assessment of the process is ongoing. **Discussion:** The incorporation of evidence into programs has not previously been documented therefore it is unclear where and how evidence may have informed services. Our intention is that the RRES is an effective and streamlined method for managers to access evidence.

Understanding and Enhancing Library Services in Support of Systematic Reviews

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Objective: While our library statistics reflect an increase in participation in systematic reviews, they do not adequately represent our library's increased role and profile within the hospital. Understanding and Enhancing Library Services in Support of Systematic Reviews suggests new ways to represent our library's contributions to research at St. Michael's hospital. **Methods:** Visually, we broke down the varying steps necessary in completing a systematic review, colour coding where library staff participated. We juxtapose this against a chronological chart marking steps we have taken to improve our skills

and promote them to the Hospital as a whole. **Results:** In the last ten years, the HS library has increased its participation in systematic reviews almost ten-fold. Our role has expanded from service providers of literature searches to participants in other stages of the systematic review, extending in some cases to inclusion as authors. **Discussion:** Libraries have long collected statistics, but these statistics do not always anticipate how our profession develops. Libraries need new ways to represent what we do in order demonstrate our value.

Can We Prevent the Pitfalls Associated with the Use of Online Consumer Health Information?

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Context: According to the Canadian Internet Project 54% of adult Internet users have looked for health information online. Increased patient involvement in their health-care decisions is reflected in an unprecedented demand for consumer health information that focuses on health problems, disease prevention, health-care services and self-care. In spite of its importance, little is known about the use and outcomes of online consumer health information, with few empirical studies and no literature reviews about information use and its negative outcomes. **Objectives:** Identify negative outcomes associated with online consumer health information use in a primary health care setting. Explore whether or not there are methods of preventing these negative outcomes from primary care practitioners' perspectives. **Design:** Two-stage exploratory qualitative descriptive study on consumers of online health information, and primary health care

practitioners. **Setting:** Informal questionnaire circulated via social media to find 20 key consumer informants. Practitioners will be contacted via email and invited to participate. 12 primary care practitioners: family physicians, registered nurse practitioners, health librarians and pharmacists who have had experience with patients using online health information. **Instrument:** Semi-structured phone interviews with consumers. Semi-structured in-person interviews with practitioners. **Outcome Measures:** Potential negative outcomes associated with use, added detailed cases of these outcomes and perceived factors that lead to them. Preventative measures that can be taken to prevent them. **Results:** Transcripts from the interviews will be coded into themes identifying types of outcome. New codes will be derived for factors leading to outcomes and ideas on how they could have been prevented.

Getting Ahead of the Curve: Supporting Healthcare Leaders with a Current Awareness Service

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Objective: AHEAD: Alert for Healthcare Decision-Makers is a current awareness service created for Manitoba's healthcare leaders. The service's goals are to (a) provide leaders with relevant and easily accessible information, and (b) promote the University of Manitoba Health Sciences Library's resources and services and drive clientele to the library webpages. AHEAD is delivered biweekly by email and features links to one free web resource and one library resource on topics such as patient safety, quality improvement, leadership, patient-centered care, and effective administration. While this service is aimed at UMHSL clientele, anyone can subscribe to the list. Our objective is to assess the value of this information service to our clientele. **Methods:** Two sources of data will be

examined to determine the uptake of this service as a measure of value: (1) internal listserv statistics and (2) number and source of clicks on the Bitly custom link for each resource. **Results:** Since its inception, AHEAD has grown from 6 subscribers in 2013 to 351 members in March 2015. The average number of clicks per link is 41. An analysis of the number of clicks per resource shows that alerts about leadership skills, technology, and research and information dissemination received the highest number of clicks. **Discussion:** AHEAD is a unique service that helps busy healthcare leaders stay up to date on topics of interest. Future evaluation of this service will include a survey and a focus group.

Best Practices in Digital Display Management for the Library

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Introduction: In August 2014 the Northern Ontario School of Medicine's (NOSM) Health Sciences Library launched our digital displays. Digital displays were identified as a great tool for promoting library services and conducting in-house library sessions. Additionally, they could be used to replace print signage. **Setting:** NOSM's Health Sciences Library has two locations, one in Sudbury and one in Thunder Bay. The library serves learners, residents, faculty, staff and members of NOSM's partner universities Laurentian University and Lakehead University. The digital displays were installed at both locations in our quiet study areas. **Methods:** A literature review of best practices in digital display management was conducted to

inform the library on key elements such as content management, design and maintenance. Software and hardware were sourced by IT. **Outcomes:** A document titled 'Creating and Adding New Slides to the Digital Display' was developed based on the best practices identified in the literature review. This document includes key standards such as the 3x5 rule for text placement, permitted fonts and the RGB of our school colours to ensure compliance with NOSM's visual identity. Slide development was centralized to Public Services and a protocol was put in place for submitting content for slide design.

www.arctichealth.org: An Evolving Website Reflecting a Changing Arctic

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Objective: The Arctic Health website is a central source of information on diverse aspects of the Arctic environment and the health of northern peoples. The site was created by the (United States) National Library of Medicine (NLM) in 2001, and management of the site was assumed by the Alaska Medical Library (AML). Since the website's beginnings, NLM and AML have worked together to reshape the site to meet the changing information needs of Arctic researchers and residents. Particularly with changes brought on by climate change, the Arctic is undergoing stress and adaptation in both environmental and human terms, and the Arctic Health website is designed to reflect those changes. This poster outlines the evolution of the Arctic Health website. **Methods:** For over a decade, librarians and researchers from AML at University

of Alaska Anchorage and from NLM's Outreach and Special Populations Branch have met regularly in person and remotely to discuss and implement changes to the Arctic Health website that will allow users to access burgeoning information on Arctic human and environmental health. In 2013, usability testing was done in the remote Arctic community of Barrow, Alaska, to observe how community members navigated the website and to document their suggestions. **Results:** Changes continue to be made to the Arctic Health website based on input from users and from growing interest in the Arctic. **Discussion:** The changing Arctic is reflective of a changing globe, and the Arctic Health website seeks to make Arctic research findings accessible to all.

Breaking the Limits of Time and Space: How #medlibs Are Collaborating via Twitter

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Objectives: To ascertain if, and explore how, medical librarians (#medlibs) across English-speaking North America utilize Twitter to connect, share ideas, and collaborate with their colleagues. Collaboration is defined as verifying references, assisting with reference questions, providing resources, troubleshooting databases, peer-reviewing searches, collaborating on posters, papers or research projects. **Methods:** An informal discussion was led via Twitter utilizing the time slot of the weekly #medlibs chat October 16th 2014. Responses were analyzed and coded by two researchers. Based on the themes that emerged from the chat, a 19 question Google Forms survey was distributed via email, Facebook, listservs and Twitter. Results were gathered using Google Forms analytics; long-form questions were coded independently by each researcher for broad themes. **Results:** From the #medlibs chat and survey (over 150 responses), overarching

themes were discovered. Themes include: meeting colleagues; keeping abreast of trends, methodology and literature; using Twitter as a tool for constant learning, resource sharing and professional development; collaboration with colleagues; tracking conferences; networking and building relationships; promotion of services or self; seeing Twitter as a knowledge-base for medical librarians; and that Twitter has value, but is not without issues. **Discussion:** Medical librarians who use Twitter appear to draw a great deal of value, despite challenges, from this micro-blogging platform for communication and collaborating with professional peers. Implications for further research include further exploration into the motivations for individual librarians' participation or not in Twitter, and any challenges in implementing an organizational, library-focused Twitter account.

icanhazpdf? User Requests for Medical Literature on Twitter

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Background: While requesting access to journal articles and books via colleagues and authors is a long established academic practice, online websites and social media platforms have broadened the scope and visibility of literature sharing among researchers. On Twitter, the #icanhazpdf hashtag has emerged as a way for researchers to request and obtain journal articles quickly and efficiently. **Objective:** To analyze use of the #icanhazpdf hashtag as a means of obtaining health sciences literature. **Methods:** RowFeeder was used to monitor and aggregate #icanhazpdf tweets over a four month period. This program records data such as Twitter handle, tweet content, tweeter location, date and time. Ethics approval was not required as data was collected from a public arena and user information was

anonymized. **Results:** The data will be analyzed to determine the frequency of requests for health sciences literature. Tweet content will also be used to determine how the user identifies the requested literature (i.e., url, DOI or citation information). In addition, the Twitter handle will be used to categorize #icanhazpdf tweeters requesting health sciences literature by occupation or role, and to determine whether the tweeter has access to library resources and services. **Discussion:** Although questions remain regarding the ethical and legal issues surrounding this practice, investigating #icanhazpdf requests can provide important insights for health librarians into user expectations and behaviours.

Do You Really 'Like' It?: Evaluating Social Media Use to Provide a Current Awareness Service

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Objective: Info LTC is an integrated current awareness service designed for geriatric health professionals. It utilizes a blog, listserv, and Twitter feed to alert users to recent literature while promoting the services of the J.W. Crane Memorial Library. While librarians use social media tools to promote and provide library services, little is known about methods for evaluating these tools. Our objective is to determine how evaluation methods such as focus groups, surveys and online metric tools can be implemented in a library setting to evaluate the use of social media. **Methods:** A focus group with Info LTC users helped design the online satisfaction survey. The survey measured satisfaction with design, content, and relevance to patient care. Bitly, Google Analytics and Blogger

tracked usage trends over a one-year period. **Results:** Results from the online survey and metrics from Blogger, Google Analytics and Bitly identified demographic information. The majority of Info LTC users are Canadian nurses who agree that Info LTC helps them provide better care and keeps them current with the literature. Blogger, Google Analytics and Bitly identified which resources were the most popular by how often they were clicked on. According to the survey, the blog is viewed as valuable, but not as highly as the listserv. Twitter is not viewed as a valuable service. **Discussion:** A variety of methods are useful for evaluating this service. Metrics from different sources are available, but none individually provides all the information necessary.

Knowledge in Your Hands: App Access to Information for Residents

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Introduction: Mobile apps providing ebooks or reference tools can assist residents in accessing the information they need at the point of care, supporting patient care and work-based learning. This paper reports on experiences of providing residents with access to subscribed resources using mobile apps in a large acute hospital setting. Two mobile apps are described: MedHand for ebooks and the Dynamed app. **Methods:** MedHand access began in September 2013. Dynamed mobile app access began in July 2014. Surveys provide data about residents' experiences of both MedHand and the Dynamed app. Detailed usage data for MedHand have been collected and analysed. **Results:** The surveys explored residents' expectations of app access to information, including how accessing information from apps could improve their confidence when

dealing with patients and could reduce worry. Survey results suggested that apps are particularly useful when on call or working at night. MedHand usage data shows patterns of use throughout the day and at different times of the year. A small number of users account for the majority of usage. **Discussion:** The resources are being used, with residents expressing clear interest in accessing information on their mobile devices. However, the relatively small number of high volume users of MedHand, together with the cost implications of purchasing licenses, may limit the sustainability of this model of information provision. Other challenges include technical problems, promoting the resources effectively and organisational and information governance issues relating to uploading organisation-specific guidelines to MedHand.

Building a Comparison Chart to Select Subscription-Based Anatomy E-Resources

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Introduction: This poster describes the process used to compare anatomy e-resources using an iterative approach to develop a comparative chart. **Objectives:** Low use of the University of Calgary's anatomy e-resources prompted a review of the library's anatomy subscriptions to determine whether other available products could better meet the library's needs. **Methods:** Due to the plethora of online anatomy resources, the team focused on fee-based products. A literature review was conducted to find comparative analyses and product reviews. The team then identified preliminary headings for a series of tables within a

comparative chart, summarized the products independently, and finally reconvened to iteratively reach a balanced assessment of each product. **Results:** Through this process the investigators found that assessing and making recommendations for anatomy e-resources is complex. No single product is comprehensive enough to satisfy the varied needs of the academic and clinical sectors. The quantity of free and fee-based resources adds to this complexity. Not all features and functions of each product are directly comparable either.