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Presentation abstracts / Résumés des exposés

ABSTRACTS / RÉSUMÉS

The scoping study in physical therapy: application of traditional systematic review guidelines to an emerging methodology

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Introduction: Scoping studies which are conducted to locate all relevant research require highly sensitive strategies and wide-ranging supplemental searching and the same degree of transparency as the systematic review. This paper describes how the application of traditional systematic review search guidelines supported the process of a physical therapy mapping review and reports on the analysis of the results. **Method:** The standard search strategy methodologies included the topic definition, an iterative search strategy development, and a detailed record of where references were located. The final set of studies selected for inclusion in the mapping review was used to evaluate database coverage, indexing issues, and the value of supplemental searches. **Discussion:** Use of a standardized search methodology provided a good basis for collaboration and communication, and provided a stable framework for search strategy formation across a variety of sources. Detailed record keeping provided the data for to analyze database and journal coverage, expose indexing issues, evaluate the impact of supplemental searches on finding missed citations, and reveal issues associated with title and abstract screening. **Conclusion:** Use of the methodologies from the outset was vital for providing structure during a dynamic and iterative process, for tracking and reporting progress, and for data analysis. The examination of resources and comparison of results highlights the elusive nature of physical therapy evidence and supports the need for multiple sources and a variety of strategies.

Realist review: searching support for a new research methodology for complex policy interventions

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Introduction: Realist review is a recently developed methodology [1]. McGill researchers identified this methodology as the most promising for two public health projects (benefits of participatory research methodologies; health and climate change). The objective of this paper is to describe the realist review methodology and to identify searching needs for realist reviews. **Methods**: From experience in McGill projects and through a review of documentation on and published reports of realist reviews, features of this methodology, including searching needs, will be identified. **Results:** Realist review methodology is not yet fully developed and understood. Searching for realist reviews is as exhaustive as that for systematic reviews. However, identifying clusters of papers associated with projects included in the review and the need to locate "mid-range theories" add complexity. **Discussion:** Realist review is a promising methodology gaining attention from funding bodies including CIHR [2]. Librarians will find the methodology of interest both for researchers they serve and for library research. Search supporting a realist review is similar to that for a systematic review with differences arising from the need to investigate theories as well as the data themselves.

References

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Re-visioning a public health library service to support evidence-informed decision-making

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Introduction: Peel Public Health is integrating the concept of evidence-informed decision-making into daily practice. The current library service was identified as a key element necessary to support staff in this vision. A review of library service was undertaken to assess the current level of support it was providing to clients. **Methods**: A needs assessment was undertaken and included data from a web-based survey, a focus group and interviews. This information was incorporated with relevant library best practices to form recommendations as well as short and long term goals that will position the library to support evidence-based decision-making. **Results**: The results of the needs assessment showed of those who answered the survey ($n = 223$), just over half indicated that they used the library. There was an indication of low usage of some services such as the physical library and catalog; a high use of electronic journals; a preference and value for secondary resources like systematic reviews; and a high demand for continued training. **Discussion and conclusions:** The proposed recommendations and planning structure were accepted. The primary recommendations included re-visioning the library service to incorporate the concepts of evidence-based practice and knowledge translation as integral to the service, adding human resources in order to provide the specialized service that is required and ensuring that the electronic (text and database) and print resources are appropriate to the needs of the organization are purchased. Additional training will also be provided to the current library staff.

A follow-up survey of Ontario health libraries: building on our past

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Introduction: (Objective and scope) This study was conducted as a follow up to a survey administered in 1996 of hospital libraries in Ontario, by Kathy You of the Sault Area Hospital. The objective was to determine changes in practice and environment from 1996 to 2008, and to use the data to draw conclusions about the directions of change and implications for future practice in hospital libraries. **Methods:** The 1996 Survey of Hospital Libraries in Ontario, with 28 participants, was used as the basis for a new survey, in order to obtain comparative data, and revised to introduce questions that would not have been relevant in 1996. Questions were both qualitative and quantitative. The revised survey was posted electronically, and requests for participation were sent via email to the membership of the Ontario Health Libraries Association, as well as additional contacts known to the authors. **Results:** Forty-four complete and 12 incomplete results were collected from June 2 to July 17, 2009. The data was analyzed for significant trends or differences. **Discussion:** Many changes are reflected in the

results of the survey: changes in staffing patterns, budgets, resource purchases, Docline use and an emphasis on collaborative purchasing and resource-sharing are all apparent. A statistical analysis of these changes will demonstrate the areas of most change, and how these areas reflect changes in practice by health librarians, and external forces. The authors will discuss how these may be relevant to future trends.

From uncertainty to answerable questions: question negotiation in evidence-based practice

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Introduction: Health sciences librarians are familiar with PICO (patient, intervention, comparison, outcome), the question-formulating structure proposed by the evidence-based practice (EBP) framework for describing answerable clinical questions. Librarians teaching EBP encourage clinicians and students to phrase their questions using PICO to increase the likelihood of finding answers. This research compares question-formulating structures proposed in the health and social sciences, (e.g., PICO, PECODR, PESICO, SPICE, ECLIPSE) against actual clinical questions collected from rehabilitation therapists to determine the suitability and utility of the structures in supporting question negotiation. **Method:** A qualitative approach was taken to explore the clinical questions of rehabilitation therapists (occupational therapists, physiotherapists, and speech-language pathologists) working in stroke care. The diary-interview method was employed for data making; a journal was kept by each informant to document clinical questions, followed by a semi-structured narrative interview to elucidate details. Clinical questions and interview transcripts were analyzed inductively and deductively to reveal question elements. **Results:** Preliminary results suggest that clinical questions initially identified by rehabilitation therapists contain a few but not all of the elements from any single question-framing structure. Further discussion with informants revealed that other elements may be present and relevant, but not explicitly identified. **Discussion:** Taylor's theory of question negotiation, which describes a crucial element of the reference interview, is useful for understanding how clinicians ask questions and why they do not always fit with the PICO structure prescribed in EBP. Considering other question-formulation structures may be of use in guiding the reference interview.

Interviewing in the library...with a qualitative twist!

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Purpose: While conducting a "grounded theory study" to find out how 4th year nursing students conduct their research, the author had the opportunity to interview a number of students. Although background reading and a qualitative research class was undertaken on the topic of interviewing before the interviews took place, the author learned some valuable "on the job" lessons while going through the process of the interviews. This session proposes to delve into the topic of interviewing, whether it be for a formal research study, or to informally gather information from users, and hopes to pass along valuable lessons learned. **Setting:** The interviews took place in 2009 and 2010 at the University of Saskatchewan (U of S), in Saskatoon. Some interviews were held in vacant offices in the Library, and some were held in the Interview Room of the Qualitative Research Centre at the U of S. All interviewees were fourth year students from the College of Nursing at U of S. **Method:** Although the ideal way to collect this data would have been direct observation of the students, the discontinuous nature of the students' research process would have made direct observation challenging. Simply interviewing students about how they usually do research would most likely have resulted in simplified, scaled down versions of how students went about finding information, which would not serve the purpose of exploring the searching process. Asking

students to document the process as they work through the assignment provided a more detailed, and accurate record of the process. After collecting the journals, and reviewing their contents, the researcher arranged to meet with each participant individually to conduct a semi-structured interview. The follow up interview was used to help flush out the entries made in the journals, and to allow the researcher to clarify the steps each participant took in the process of locating information. With the participants' permission, the interviews were audiotaped. **Results:** The process of conducting interviews was a learning experi-

ence. Challenges that arose included recruiting participants, finding a suitable setting for the interviews, drafting effective questions, and analyzing and reporting the results. **Discussion:** Interviewing is a valuable research tool for gathering ''rich'' data. When used appropriately, interviewing can provide invaluable data that illuminates our patrons' experiences, helping us to understand the meaning that they have made from their experience. With some training and experience, librarians can learn to be effective interviewers and start tapping into that ''rich'' data.

Impact of a six month clinical librarian trial in a tertiary care centre: a controlled study

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Objective: To measure the value and impact of a clinical librarian on residents and clerks doing rotation in a large tertiary care centre. **Method:** Residents and clerks were pre-assigned to one of two patient care teams. Each team had a month-long rotation on the General Medicine Teaching unit. The Clinical Librarian joined the Intervention team for either morning intake, rounds, or afternoon patient list review, providing as required, immediate literature searches, formal group instruction, informal bedside teaching and/or individual mentoring for use of pre-appraised resources and EBM search techniques. The intervention team completed pre and post surveys comparing their confidence levels and awareness of resources

as well as their self-reported use of evidence for making patient care decisions. The non-intervention team was surveyed as the control group. **Results:** 88% reported having changed a treatment plan based on skills taught by the clinical librarian and 79% changed a treatment plan based on the librarian's mediated search support. **Conclusion:** The Clinical Librarian had a significant impact on patient care both by teaching residents to independently locate and evaluate resources to support patient care decisions and by providing that evidence though mediated searching. Clinical librarians can improve patient care decisions and outcomes and are important members of the interdisciplinary team.

Investigation of information seeking behaviours of University of Alberta health sciences alumni and students

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Introduction: Health care practitioners across Alberta (and Canada) have varying levels of access to information resources depending on their institutional and professional

affiliations, yet access to current health information is crucial for all. This project will investigate the current health information needs of University of Alberta (U of A) health

sciences students and alumni, and their levels of access to resources. **Methods:** Representatives of professional associations have been interviewed regarding resources offered to members and perceptions of their members' needs. U of A students and alumni from all health sciences faculties will be surveyed to identify their levels of awareness and use of specific resources, their information-seeking behaviours, and their most desired types of resources. Focus groups will be conducted to supplement the survey data. Results of the surveys and focus groups will be analyzed. **Results:** Findings from the association interviews indicate that only half provide members with access to licensed databases, with cost being a major barrier. The majority provide access to various publications. The electronic survey is underway; results are forthcoming. **Discussion:** Health practitioner access to current, high quality health information is essential for maintaining professional competence and improving clinical practice. This study will provide an indication of where information access gaps exist, and may inform the development of services to alumni at the U of A Libraries.

Providing an "evidence base" for the Ontario Public Health Standards

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Health information professionals provide value-added services by utilizing the latest online information tools to enhance established practices. The Ontario Public Health Libraries Association did just that when they took on the Ontario Public Health Standards (OPHS) live literature searches project. On January 1, 2009, the OPHS replaced the existing provincial Mandatory Health Programs and Services guidelines as the document which sets out the minimum requirements for essential public health programs and services in Ontario (under the authority of the *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7). Except where governed by protocols, the requirements in the OPHS specify the type of program or service which must be in place at the municipal level without mandating a specific health intervention (as the effectiveness of public health interventions varies according to the characteristics of the target population). To assist front line public health staff in implementing the requirements of the OPHS, the OPHLA created an evidence base for each requirement which collocates information on the effectiveness of public health interventions across different settings. OPHLA members collaboratively developed 140 "live" literature searches which they tailored to meet *unique* public health program planning and delivery needs and retrieve key review articles. OPHLA also developed complementary instructional guides on advanced searching and critical appraisal of scientific literature. These live searches contain a wealth of public health keywords and subject headings and are now freely available on the OPHS website, which has received excellent feedback and been highly accessed by public health practitioners.

Honouring heritage to inspire innovation at the Gerstein Science Information Centre, University of Toronto

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Purpose: To qualitatively assess the library's importance as a physical space with today's millennial digital native students. **Setting:** The Gerstein Science Information Centre at the University of Toronto is the largest academic science and medicine library in Canada. Over the past ten years the library has undergone extensive renovations to create more study space and improve wayfinding. The recently restored reading room, which had been buried and unused for many decades, has received two awards for the revelation of its stunning architecture. In addition, this year the Gerstein Library will be honouring the centennial of its much used journal stacks. **Methods:** A review of the literature on academic library physical space will be conducted. The results of the 2006–2007 LibQual survey at the University of Toronto will be assessed for comments on physical facilities; gate counts over the years will be assessed. User comments

on the newly renovated space will be gathered via surveys. **Results:** The disruptions to users and the concerted efforts of staff during the long periods of renovation have been well worth the effort to create a library which is now a desired destination on campus as attested by student usage as well as blog and Twitter comments. The handsome reading rooms are now constantly full of students silently engaged in contemplation or studying, proving the importance to students of attractive surroundings. **Discussion:** Extensive staff effort on the library's virtual presence is appreciated by students and faculty; however, the physical space remains vitally important.

The William Osler Photo Collection: Reaching the World

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Introduction: Sir William Osler (1849–1919) is among the most famous names in medical history. A graduate and professor of medicine at McGill, he went on to found the Johns Hopkins medical school and hospital (1889–1905), and be Regius Professor of Medicine at Oxford University (1905–1919). The McGill Library recently digitized its collection of approximately 400 Osler photographs held in its Osler Library of the History of Medicine (http://digital.library.mcgill.ca/osler/index.php). This project met the Library's objectives of making McGill's collections of unique material more accessible and developing a prototype for future digitization projects based on best practices as opposed to the ad hoc approach of previous efforts. **Methods:** A Library team consisting of a cataloguer, special collections librarians and technical experts was brought together in 2008 to carry out the project. A metadata consultant was also hired by the Library. An external grant paid for a project cataloguing librarian and a student to scan the photographs and to produce publicity material. **Results:** A template developed for digital projects at McGill; A standard metadata schema established for all digitization projects; An application profile defining each metadata element created, along with a user guide; Much greater visibility for our unique material, including inclusion in the Canadiana Discovery Portal http://search.alouettecanada.ca/search. **Discussion:** The prototype established has been used successfully in subsequent digitization projects at McGill. The website was well received by core user groups and reached new ones.

Information access and barriers to nutrition information for nursing staff in the Regina Qu'Appelle Health Region (RQHR)

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Objective: Nursing staff frequently receive nutrition questions from their patients, and need access to peer-reviewed, evidence-based information to respond accurately to these questions. The current study sought to identify information access and barriers of nurses in obtaining nutrition information. **Methods:** A questionnaire was designed and sent to registered nurses and licensed practical nurses providing direct patient care who had been employed in the Regina Qu'Appelle Health Region (RQHR) for at least one year. **Results and Discussion:** Of the 1090 surveys distributed 142 were returned, for a response rate of 13%. Of those that responded, 89%

indicated that they do not consult RQHR librarians to access nutrition information but 80% indicated they did general internet searching. In addition approximately 40% of nurses indicated they experienced barriers to accessing nutrition information which included lack of time, uncertainty of where to look, and lack of computer access. **Conclusion**: The results of this study provided the first step in creating a library plan to address information access and barriers that exist not only for nursing staff but for the Health Region as a whole.

An exploration of the roles of librarians in supporting patient self-management activities for improved health outcomes

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As self-management support activities and processes for managing chronic diseases are increasingly seen as the responsibility of an informed and active health consumer, patients require more and better education and training, and access to current, quality-filtered self-management tools and resources. In order for patient self-management to be tangibly effective in changing patients' behavior and lives, information alone is not enough. Easy-to-use, readable, patient-centric content must be combined with appropriate learning opportunities and strategies for behavioral change in order to effectively reduce the negative outcomes of chronic illnesses. This presentation will overview the issues that impact on the increased focus on self-management in primary care settings, and on an individual's ability to understand and use consumer health information for patient self-management of common chronic diseases such as obesity, diabetes, asthma, hypertension, heart disease, and others. The impact of the readability and design of consumer health resources; and the impact of patients' numeracy, health literacy and health information skills on health and behavioral outcomes will be discussed. This presentation overviews current library-based programs and projects that address the barriers to effective patient self-management. Strategies that librarians can implement to improve patient self-management materials, resources and access to quality and usable content will also be shared.

The Jewish General Hospital Patient Education Network Working Group: a hospital-based interprofessional collaboration to foster patient education

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Introduction: Librarians and nurses working to create patient education material (PEM) identified a clear need for centralized guidance throughout the process and for establishing best practices to support patient safety. This need led to the formation of the Patient Education Network (PEN), a hospital-wide interprofessional working group. The goal of PEN is to improve the quality and dissemination of patient education materials developed at the Jewish General Hospital (JGH) and to expand the library's leadership role. **Methods:** PEN is co-chaired by a librarian and a nurse, with stakeholders throughout the hospital, including Nursing, Quality Program, Occupational and Physical Therapy, Dietetics, Public Affairs and Communications, Family Medicine etc. PEN's first project was a handbook, How to Create Effective Patient Learning Materials, adapted from McGill University Health Centre (MUHC) guidelines. A needs assessment, environmental scan across North America, and fundraising have been done in preparation for a second project: a centralized online PEM database. **Results:** The PEN Handbook has been used by various departments and health care professionals throughout the hospital, and has been included in a McGill

University Masters of Nursing course pack. A practicum student began developing the database in January 2010. PEN was asked to participate in the hospital's recent Accreditation process. **Discussion:** The interprofessional nature of PEN has improved the library's ability to raise awareness of the importance of quality PEM as a key element in the provision of patient health infomration to promote safer healthcare within the hospital, and enabled the group to provide guidance throughout the process of creating and disseminating these materials.

Open access and health information in 2010

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Objectives: CHLA/ABSC has a record of support for open access (OA): converting the association's journal to an OA model, speaking out publicly in favour of the CIHR/IRSC research access policy, and providing resources to keep members abreast of changes to health information access. This paper updates health librarians on the state of OA initiatives — including research, policy and trends — in Canada today, and discusses OA-related emerging opportunities for health librarians. **Methods:** Drawing on evidence gathered from literature review and environmental scanning, this paper discusses the state of OA in Canada in 2010. **Results:** A brief history of OA with emphasis on health and medical information is presented, followed by updates on the current status of each of the following types of initiative: scholarly publishers and publishing; academic institutional responses, initiatives and policies; research funder policies and initiatives; open data initiatives; and OA-related research. Canada — particularly our health research sector — has experienced a high level of OA activity in recent years, and emerged as an international leader in some areas. **Discussion:** Health and biomedical information has been at centre of much OA activity for the past decade, due in part to unique characteristics of medical publishing and health as a field of research and practice. The scene in 2010 is vastly different than it was just a few years ago, and continues to evolve rapidly. The growing prominence of OA provides opportunities for health librarians to take on new roles as experts in scholarly communications and preservation of research and data.

Selecting the selection tool

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Introduction: Is your library leaving paper slips behind and making the shift to electronic book ordering? Memorial University's Health Sciences Library is currently facing such a conundrum, and in response, is testing four electronic book selection tools to determine the option best suited for our work. Careful consideration is required when choosing the most appropriate electronic ordering tool, and during our session, we will highlight the process we undertook to arrive at our decision. **Methods:** In an ongoing analysis, we will review four electronic book selection tools based on these criteria: ease of use, performance, data quality, product availability, timeliness, customer service, and vendor discounts. **Results:** Yet to be determined. **Discussion:** Attend this session to learn about our research findings, and receive practical advice on some of the electronic book ordering tools available to Canadian libraries. Highlighting the pros and cons of four existing tools, we will present our recommendations on which system best meets our needs.

Rules-based collections reduction: honouring collections while inspiring innovation

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Introduction: In August 2008, the University of Calgary's Faculty of Medicine requested a significant portion of the Health Sciences Library space to accommodate an increasing undergraduate medical student class size. In return, they would fund a complete renovation of the remaining space. This necessitated a deep reduction in the print monograph and serials collections within a tight timeline. **Methods:** For monographs, we developed parameters for what was to be weeded and identified ''candidates'' through collections usage reports generated from our SirsiDynix integrated library system. Choices were to withdraw, move to low-use storage or retain. Titles were identified by year acquired and number of times circulated; store or withdraw decisions were based on the difficulty to re-access or re-acquire the title should that become necessary. We clarified collection policies in our History of Medicine collection and reference collections to exclude texts where the content is readily available elsewhere. Pre-1990 journal backsets available through secure e-archives had already been moved to remote storage. This time, we targeted for storage those up to 1999 not duplicated at the main MacKimmie Library and available electronically. Duplicates were withdrawn. **Results:** In about 10 weeks, about 50% of the monograph collection was withdrawn to storage and 5% discarded. Serials withdrawals were completed recently and we are analyzing the count. **Discussion:** Rules based on low-usage, format and cost to re-acquire can be used to rapidly identify titles for weeding, storage or retention. Using lists can be a relatively straight-forward and efficient way downsize a library collection.