

HLA NEWS

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Being HEALTHWISE – a health information literacy resource for patients and carers

Suzanne Lewis and Narelle Hampe report on the partnership between Central Coast Local Health District (CCLHD) Library Service and the CCLHD Care Support Service to develop a series of short online modules on finding high quality, reliable health information for patients, carers and the community.

Emerging evidence around the issue of health literacy indicates that patients and carers need to be health literate to engage effectively with health services and be active partners in their own care. 'Of significance are the population measurements of functional health literacy levels by the Australian Bureau of Statistics (ABS) indicating that 59% of the Australian population aged 15-to-74 years does not achieve an adequate health literacy skill level to meet the complex demands of everyday life and work' (ABS 2008 cited in Johnson 2014). Healthcare providers need to promote health literacy as part of a range of approaches to support consumers and carers 'to actively participate in the improvement of the patient experience and patient health outcomes', as mandated by the NSQHS Standard 2 – Partnering with Consumers (Australian Commission on Safety and

Quality in Health Care 2014). To become active partners in their own care patients and their families need access to high quality, relevant, easy to understand and reliable health information which, increasingly, they are seeking online.

With this in mind the Central Coast Local Health District (CCLHD) Library Service partnered with the CCLHD Carer Support Service to develop a series of short online modules on finding high quality, reliable health information on the Internet for patients, carers and the community. In 2013 the Library had presented a face-to-face session for carers on finding high quality health information on the Internet as part of Carers' Week. Evaluation of the presentation by the carers who attended prompted library staff to translate the content into five short videos, the Healthwise on the Web series. Following development

of scripts and storyboards, the modules were created using Adobe Captivate software. They were evaluated by staff, volunteers and carers at the Carer Retreat and Information Service and feedback was used as the basis for revision of the modules. For the

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Join the discussion about this article or other issues relating to health librarianship by emailing the Editor at HLA_News@hotmail.com

Library staff, the most challenging aspect of the process was translating health literacy and information seeking concepts and language from an information professional's perspective into content meaningful to a broader audience.

The modules, ranging from 45 seconds to 5.5 minutes in length, comprise the following:

- **Why be Health Wise?**
Being health wise is being health literate, but what is meant by the term Health Literacy? This short video introduces this concept and highlights sources of reliable health information.
- **Health Information on the Web**
This video indicates why the web is a useful place for finding health information, and discusses both the advantages and disadvantages of accessing information on the Internet.
- **Smart Searching**
This video provides tips and tools for successful web searching.
- **Evaluating Information**
Finding health information on the internet is just the start of the process. This video highlights some things to consider when looking at websites, to help patients, families and carers decide whether the information on the site is accurate, reliable and trustworthy.
- **Accessing Reliable Health Information**
This video explains the main features of the Commonwealth government's healthdirect Australia health information website.

The finished modules are freely available via YouTube (<https://www.youtube.com/user/cclhd>). Captions are available for each module to improve accessibility to the material. The modules are promoted within CCLHD to patients, carers and staff, but they are not specific to our health service. They were designed to present basic and generic principles of health literacy and health information location and evaluation that would be widely applicable and not date quickly. We encourage any health librarians to use the modules within their own organisation and promote to their patrons as appropriate, and welcome any feedback.

Suzanne Lewis & Narelle Hampe

(Ed note: contact details for Suzanne included in committee list at left)

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CONVENOR'S FOCUS

Let's review progress of HLA's two-year education and workforce research project ...



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... we have taken
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In September I will be presenting about how health librarians are re-skilling themselves for the future at an AGLIN/URLS Seminar entitled 'Change, challenges and opportunities: recasting your library skills'. There are challenges for all special librarians to remain current in their skills and relevant in the delivery of their services, and health is no different. It's four years since we released the Final Report¹ of HLA's two-year education and workforce research project which aimed to design a system to deliver competency-based education and professional development to serve the health librarianship workforce of the future. So it's timely to review our progress in implementing the Report's recommendations.

There were two aspects to the research – education and workforce, and we recognized that they are inextricably linked. The Report opens with the statement:

Education and workforce planning are related concepts. Education lays the foundations for the future workforce, and must do so in the context of current and likely future needs of employers. It is critical, therefore, that the two processes are linked through market research and consultation between education providers, employers and practitioners in the field.

The HLA executive strongly believed that education held the key to the future for health library workforce planning, that basic librarianship qualifications were simply the starting point to a career in health, and that a specialist health librarian qualification at a post-graduate level with ongoing continuing professional development and periodic revalidation were necessary if health librarians were to achieve professional recognition by employers. And this professional status was necessary for improving pay, conditions and career opportunities. We also recognized that no one was going to do this for us and we needed to set in place the education system to equip us for the future.

So how have we fared in terms of the recommendations resulting from the research? The achievements are impressive:

1. We created ALIA's first competency-based professional development specialization, allowing our members to become certified as Health Librarians and Health Library Technicians.

This is a three-year certification and revalidation cycle, with a requirement for reflection, documentation and audit. As ALIA is our national professional association, we have established a structure and system for continuing professional development, aligning with the other health professions and allowing health librarians to be recognized in the category of 'self-regulating' professions within the requirements of the Australian Health Professional Regulation Authority (AHPRA).² AHPRA is responsible for the registration and accreditation of the health professions and supports the professions' national boards which register practitioners and students, and approve standards of education and programs of study. Continuing Professional Development is a requirement for all registered health professionals, with details of the numbers of credits/points/hours that practitioners must spend each year on learning activities published in the professions' registration standards.

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2. We mapped the eight HLA competency areas³ to currently available education and training offerings, and identified the gaps for future commissioning of courses.

This table⁴ of nationally and internationally available education programs is maintained by our executive, and is available for everyone on our HLA website. It allows health librarians to develop their careers by designing their own professional development programs. Ideally this is done within the individual's work-based performance and career development framework.

3. We created an online competency-based Health Librarianship Essentials course.

Recognizing that for many health librarians the only way to develop health specialist skills was through on the job training, our next step was to begin to fill the gaps in our education offering. From our workforce research, we realised that we were facing a potential shortage of health librarians in the near future, as there were many who were approaching retirement age. We wanted this generation of health librarians to have the chance to pass on their professional knowledge and expertise to those coming into the profession.

In conjunction with QUT, we created an online Health Librarianship Essentials course, targeting new and aspiring health librarians and focusing on four of the eight competency areas. There were 29 participants in this inaugural (and very well-received) course, and Suzanne Lewis has written about the course evaluation in this issue. As this is a university course, it is possible for the unit to be articulated into a post-graduate qualification. The building blocks of a specialist postgraduate certificate and a three-year cycle of professional development activities are gradually coming together.

4. We implemented the first national census of the health library workforce.

On the workforce side of our strategy, one of the projects which HLA funded was an Anne Harrison award which has enabled the development and implementation of the first national census of the health library workforce. Over a few years, we consulted with Health Workforce Australia about how other health professions had tackled this process and they helped us refine our census data collection methods and the questions we were asking, enabling us to gather more robust data. We now have a data set about the health library workforce available to assist government in planning the broader health information professional workforce, as well as providing us with objective data and evidence which can be used for advocacy purposes.

Not a bad effort for what is essentially a group of volunteers who have regular day jobs!

Each of the stakeholder groups with whom we consulted in our original research – education providers, employers and practitioners, continues to need our attention. Within the ALIA governance structure, the HLA executive is able to represent our profession in different forums and meetings of these stakeholder groups. I will be proud to represent health librarianship at the AGLIN/URLS Seminar, as I know that we have taken our destiny into our own hands, and through the efforts of many – particularly the HLA executive, local groups, and our professional association members, health librarianship is transforming itself into a vibrant, relevant and essential profession in the health professional workforce.

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TAKING FLIGHT

as FIRST-TIME PRESENTERS on our first year of health librarianship

Steven Chang and Nikki May were first time presenters at the 7th New Librarians Symposium (NLS7) in Sydney in July. They share their perspective on the conference, their paper and their experience.



ABOVE – Steven Chang, Western Health Library Services, Melbourne



ABOVE – Nikki May, Flinders University Health Sciences Faculty, Adelaide

On the evening of the 24th July we met for the first time at Quay Bar in Sydney. Thirty-six hours later, we were standing at a lectern in the NSW Teachers Federation Conference Centre in Surry Hills presenting our joint paper, “Two new librarians take on the world of healthcare”, to the 7th New Librarians Symposium (NLS7).

The conference, themed “Trajectories”, was healthily attended by almost two hundred people, who comprised of a mixture of new graduates, library and information science (LIS) students, as well as experienced leaders of the profession keen to pass their wisdom onto their early-career counterparts. Most attendees were NSW-based, but many others flew to Sydney for the conference.

The symposium was opened by ALIA President John Shipp, while the former governor-general Dame Marie Bashir spoke on Friday about the influence libraries had on her and their enduring value today. Other keynote presenters included Sue Hutley, Director of Library Services at Queensland University of Technology, who challenged us all to think deep and plan our futures thoughtfully. Nathan Connors from Melbourne Library Service led us through a timeline of three decades of revolutionary technology as well as cutting-edge initiatives at the flagship Docklands Library. Last but not least, the New Zealand librarian duo, “Heroes Mingle”, led us on an inspired audience-led journey through their collaborative achievements.

Key themes emerged across the two-day conference as the presentations and discussions unfolded. These included the importance of collaborations both between libraries and outside the sector, the significance of transferrable skills in a fluidly changing job market, and the urgency of dynamism in challenging static, traditional norms in the library world.

Social media was abuzz throughout the whole conference via the Twitter hashtag #NLS7, with a flurry of photos, quotes, and talking points on the Twittersphere acting as digital commentary for each session. This allowed discussion to organically flourish online as presentations unfolded. However, importantly, this also opened up the NLS7 experience to those who were interested but unable to attend in person. Additionally, the pervasive social media dimension of the symposium enabled people to “ease” into face-to-face networking by virtue of already having digitally engaged in conversation and following each others’ tweets.

COLLABORATING TO DELIVER OUR PRESENTATION

Our presentation offered attendees a window into the everyday life of a health information professional. We highlighted the unique challenges of health librarianship and presented the audience with several key reasons to pursue a career in the health specialisation. These included the intellectual stimulation of learning medical terminology and the principles of evidence-based practice, as well as the satisfaction of delivering evidence for improved patient care and clinical research. We also explored our contrasting experiences as a hospital librarian versus an academic health librarian and the significantly different client groups

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ABOUT THE AUTHORS

Steven Chang is a hospital-based librarian at Western Health in Melbourne. He is active on the Health Libraries Inc committee as well as with ALIA Victoria. Steven is particularly passionate about user-experience design, mobile technology, evidence-based practice, and systematic reviews.

Nikki May is the liaison librarian for the health sciences at Flinders University in Adelaide. Nikki is passionate about improving patient care through providing her future health professionals with a solid evidence-based foundation. Her future plans include undertaking her own primary research into advanced health librarian skills.

and user needs that we serve. Lastly, melding with the “Trajectories” theme of the conference, we flagged the variety of career “flight paths” open to those in this field of librarianship.

We were proud to fly the flag for health libraries at NLS7, inspired by Suzanne Lewis’ talk at the previous 6th New Librarians Symposium in 2013¹. Our presentation was also an opportunity to raise the profile of professional associations that have played a key role in shaping our development, such as Health Libraries Australia and Health Libraries Inc. There was only a light presence of health librarians at the symposium, though a handful were present from Central Coast Health, Sutherland Hospital, and ourselves from Western Health and Flinders University.

The fact that two strangers living in different states had collaborated to present at NLS7 became a bit of a talking point at the conference. Steven is based in Melbourne, while Nikki lives in Adelaide; it was initially an exchange of tweets on Twitter that provided the spark of an idea to co-present at the symposium. We are both involved in weekly #MedLibs Twitter chats with other health librarians across the globe, and discovered a shared interest in evidence-based practice and systematic searching.

Using online tools such as Google Slides and Skype, we worked collaboratively on our presentation slides and paper – often in real time – and only actually met face-to-face the night before the conference began. This limited our opportunities to go through practice runs of our presentation in person, but ultimately we delivered a successful, well-received session². We hope that our example can encourage others to leap into unconventional initiatives and use social media to form collaborations via online platforms and spaces, where distance limitations can be minimised.

Following our session, a number of people commented that they had worked in health research, which provided us with a fantastic networking opportunity and demonstrated the broad interest in health research and evidence out there. Others mentioned that they were now more open to considering the health sector of librarianship which had previously been quite unfamiliar to them.

Feedback indicated that attendees were particularly fascinated by the concepts we covered that were unique and innovative to them, like the emerging role of information professionals in the systematic review process and new roles such as the embedded clinical librarian. We were also approached by individuals who had taken an interest in the key challenges we discussed in our presentation, such as expert literature searching. The possibility of a hands-on advanced search workshop led by health librarians for the next 8th New Librarians Symposium (2017) was mentioned.

CONCLUSION

It was a highly inspiring weekend, and we would like to congratulate the NLS7 committee for a fantastic, engaging conference. It is a testament to the success of the symposium that plans for NLS8 in two years’ time are already underway. We strongly recommend that any young librarians or LIS new graduates consider attending, or even dive into presenting, at this stimulating and thought-provoking conference.

We would also like to thank Suzanne Lewis and Cheryl Hamill, among others, for their advice informing our presentation.

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A FEAST OF INSPIRATION

Conference overview: EBLIP8 & HLA PD Day

Helen Skoglund from Barwon Health Library Service reports on back to back events in July – the EBLIP8 conference hosted by Queensland Institute of Technology and the HLA PD Day.

“

We have to remain relevant to our clients' needs, and the only way that we can do this is through consultation

”

The EBLIP8 conference this year was hosted by the Queensland University of Technology at The Cube in the Science & Engineering Centre building. I have to start by recommending that anyone visiting Brisbane has to put The Cube on their list of places to visit. It is an amazing innovative learning environment consisting of 48 multi-touch screens and 14 high-definition projectors across two storeys. There is something of interest there for everybody.

From the first keynote address on day one to the last session on day three of the conference the attendees were reminded how and why our research, and collaboration of that research, is such a vital component of evidence based library practice.

Whilst all of the sessions I attended were valuable, and I've come away from the conference with a wealth of information on evidence based practice, space constraints restricts discussing them all. Two sessions that I particularly recall were firstly the sessions presented on the second morning on the importance of client consultation for the design or redesign of library spaces. The theme of these morning sessions highlighted the importance of functionality, flexibility and connectivity between the library space and the library clients. Examples of qualitative research were presented showing how the new library spaces being developed ensured that their designs were actually relevant to the clients' needs. It's important that we think about our physical library spaces: are they being used and if not – why? We have to remain relevant to our clients' needs, and the only way that we can do this is through consultation with them. The second session was the one presented by Suzanne Lewis, from the Central Coast Local Health District, on service rounding. Suzanne discussed the value of the research she had conducted in the area of departmental service rounding with both the nursing and other department managers across her health service. I think that the idea of service rounding with staff is interesting as being in

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... even though
strategy is
important for
our teams,
it is more important
that the correct
work culture
is properly
developed for
our teams
to work
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efficiently ...



the health industry we are aware of the importance placed on rounding for patient journeys and results. Patient service rounding in health care involves visiting every patient to ensure they are receiving quality service and help address any concerns. This model makes the idea of conducting research on the rounding of client journeys through their library service experiences interesting as the results from the research would potentially provide opportunity for improvement of library services to the clients.

The conference didn't just consist of papers being presented; there was opportunity for participation too. On day one there was a workshop session which consisted of a choice from six different workshops. This gave us an opportunity to further develop our knowledge and skills from experts in the particular subject areas presented. I attended the Quantitative vs Qualitative Research Methods: Determining the Best Method for Evidence Based Research workshop, presented by Sandy Hirsh from San José State University in California. This was a great refresher on the two different types of research methods, and how to choose which is the best method for research when conducting evidence based practice

Day two started with a great keynote address by Dr Neil Carrington who is the Chief Executive Officer of ACT for Kids. He was very informative on the importance of teamwork; how teams work, and about creating a high performance team culture. He taught us that even though strategy is important for our teams, it is more important that the correct work culture is properly developed for our teams to work effectively and efficiently. We also learned about knowing the difference between being a leader and being a manager, and when in fact we need to lead, and when we need to manage.

The afternoon sessions on day two started with a panel session to discuss the opportunities and challenges that we face in evidence based practice. There were some great questions put to the panel which led to some interesting discussions on this subject. At afternoon tea break we were then treated to the Formal Poster viewing across the two storeys of multi-touch screens, what an amazing forum for displaying the high standard of posters presented.

Kim Tairi's keynote address on the final day rounded up the themes of the conference. She emphasized that we can't be influencers in our fields, or advocates for what we do and our value, without providing the evidence. She reminded us that we have to deal with role conflicts in our work place, especially when research isn't in our job descriptions; if it is important to us, it is important that we make time to do it. Finally she reinforced to us that we need to have good ideas, find good collaborators, stay up to date and take control.

On the Thursday after the EBLIP8 conference had finished the HLA held an informative PD day which consisted of a choice of 2 of 4 three-hour workshops. The two that I chose to attend were Smart Searching: Search Filters and Expert Topic Searches, and Research Data Management. It was great to reinforce and refresh current knowledge in these areas, as well as learn new developments. The smart searching workshop reinforced that smart searching is an essential component in our work practice. This is because of our clients' needs for relevant evidence, the impact of missing any evidence in searching, the volume of information that is there, and the complexity of sources that we are searching. We were taken through the journey of how a smart search string is developed and the advantages of having that smart search string expressed as a URL and made available to the clients as a future useful tool for them to reliably access future evidence.

I found the Research Data Management workshop interesting as I admit to previously only having a fundamental knowledge in this area. The main message was that any data worth analysing is worth storing, and storing it does add value to research. A presentation by a representative from the Australian Longitudinal Study on Women's Health

gave us some great insights into the issues of storing and sharing sensitive data. The importance of librarians to researchers in this area was highlighted due to the wealth of information and experience that we can bring to data management. We do this through our skills in resource description and discovery, our knowledge of scholarly publishing, our expertise in delivering training and information literacy programs, and by collaborating with the research staff and students to understand their information needs.

I have come home from the conference and PD day with a greater comprehension on research in our field. We cannot underestimate the importance of engaging in research as librarians. We must use it as a means to review and analyse our current work practices, and as an opportunity to make any necessary practice changes moving forward. We must collaborate both with fellow librarians and library clients in our research. My main “take-away” reflections from the conference come from Kim Tairi’s address. We don’t have to be perfect to take the risks in our field with research, we’ve just got to believe in ourselves and get out there and do it. Importantly though, we need to share the outcomes and processes of our evidence based practice to help others to make better decisions, and create better experiences for our clients.

Helen Skoglund
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Library Service

Editor's NOTE



This issue is an especially valuable one, containing as it does a wealth of reports from recent professional development opportunities, including our own HLA Professional Development Day which backed onto the EBLIP8 Conference in Brisbane, and the 7th New Librarians Symposium in Sydney.

Participants were unanimous in their praise for the Brisbane venue and for the high calibre of presentations.

We thank all our presenters for their willingness to share, our sponsors for enabling these events to happen and our band of ace reporters for their help in capturing the content and spreading the learnings more widely.

We hope you enjoy the issue.

Jane Orbell-Smith
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HEALTH LIBRARIES more than just a search engine!

CONGRATULATIONS

2015 HLA/MedicalDirector Health Informatics Innovation Award Winners

Please join us in congratulating Kate Jonson, Ingrid Tonnison and Rianna Bryant from Central Coast Local Health District, Library Services, winners of the 2015 HLA/MedicalDirector Health Informatics Innovation Award for their project: Preserving the past, looking to the future: a digital repository for the Central Coast Local Health District

HLA acknowledges and thanks Medical Director for their support with this year’s award, which was presented at our HLA PD Day.



ABOVE – Left to right: Kate Jonson, Rianna Bryant, Shaun Eliastam (Medical Director) and Ingrid Tonnison.

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SMART SEARCHING

– search filters and expert topic searches

Jennifer Goh from Health and Life and Environmental Sciences at Deakin University shares her learnings on search filters and expert topic searches from the presentation by Sarah Hayman and Raechel Damarell.



ABOVE – WoltersKluwer sponsored the Smart Searching workshop.

The HLA PD Day was held in Brisbane on 9th July 2015. I was fortunate to have been provided with a free registration, courtesy of QUT and HLA. Being new to health librarianship, I am unfamiliar with search filters and certainly not an expert in conducting topic searches. With this in mind, I attended the smart searching workshop to learn more about this. The workshop was presented by Sarah Hayman and Raechel Damarell, both from Flinders University.

With the volume of information increasing, the sources available to search this information are becoming more complex. In the health sciences field, there is an increasing need for practitioners to find and use evidence from the available literature to support their clinical decisions. As Sarah mentioned, developing effective searching skills is imperative in order to find this evidence. By developing an understanding of terminology used (both keyword and controlled vocabulary) and database features, searchers can develop effective searching skills to retrieve relevant literature for their users.

Prior to explaining what search filters were, we were told exactly what they were not. In PubMed¹ for example, the limits or facets that appear on the left hand side of the search results screen are referred to as filters. These are not the search filters that Sarah and Raechel both develop and work with. So, what are search filters, where can we find them and how can they be used?

WHAT IS A SEARCH FILTER?

A search filter is essentially a search strategy that is:

- Rigorously tested and its performance in retrieving relevant articles is measured and documented for critical appraisal.
- Developed for a particular purpose and context e.g. to retrieve relevant articles on a specific topic or methodology.
- Designed to be used in a particular bibliographic database.

Search filters can also be designed to be either highly sensitive (i.e. where there is a high proportion of relevant articles retrieved) or highly specific (i.e. where the proportion of irrelevant articles that are not retrieved is high).

WHERE CAN WE FIND THEM?

There are a number of search filter resources available. Some examples include CareSearch², Flinders Filters³, BMJ Clinical Evidence⁴, InterTASC Information Specialists' Sub-Group (ISSG) Search Filters Resource⁵ and the McMaster University Health Information Research Unit Hedges Project⁶.

HOW CAN THEY BE USED?

They can be created as a URL and embedded in a web page for easy and quick access to relevant evidence based literature. It was explained that search filters are generally designed for use by clinicians who may not be as familiar with controlled vocabulary but want to be able to conduct quick searches and get relevant results on a specific topic.

At this point in the workshop, we were given the opportunity to work on two hands-on exercises. In the first exercise, we conducted a search

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in PubMed using any one of the listed search filters. In the second exercise, we developed our own search strategy in PubMed on one of the two listed topics (cultural diversity in residential aged care and lung cancer) and compared it to the search filter developed for each of those topics. I found it a good opportunity to get input and learn from the more experienced librarians in the room. Both Sarah and Raechel were also on hand to answer participants' questions.

The second half of the workshop focussed on the methodology used in developing an expert topic search strategy or search filter. This was illustrated using the four modules in the Smart Searching website⁷:

- **Module 1** highlights the benefits of collaborating with an expert advisory group (e.g. clinicians or researchers) to minimize bias that librarians as searchers may bring into the process. Subject experts can also verify the relevance of results retrieved.
- **Module 2** explains the need to create a sample set of references relevant to the topic that can be used to test and validate your search strategy.
- **Module 3** describes how to identify terms to use in your search. Using tools such as PubMed PubReMiner⁸ and Writewords⁹, you can copy and paste text from references in the sample set to determine how frequently terms relevant to the topic occur.
- **Module 4** details the process of testing your selected terms and measuring their performance in retrieving relevant articles.

I initially found this all quite mind boggling. However, since the workshop, I have redone these exercises and have spent some time examining these filters in more detail. I am still amazed and in awe at the amount of time, thought, work and expertise that goes into developing a search filter. I also learnt some tips and tricks that I can use to enhance my own literature searching techniques. Once again, many thanks to QUT and HLA for giving me the opportunity to attend this very informative session.

Jennifer Goh
Liaison Librarian - Health and Life and Environmental Sciences
Deakin University

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health librarianship
by emailing the Editor at
HLA_News@hotmail.com

When ECONOMISTS meet LIBRARIANS

AusHSI regularly delivers short courses on cost-effectiveness analysis. Recently they had a special group of customers: health librarians from across Australia.



Ed NOTE: This article was originally published as AusHSI 27 July 2015 Blog Post. HLA thank AusHSI for allowing us to re-publish the article in HLA News.

Having received the request for training, it was clear that the course would need to be very different to what we have delivered in the past. One of the challenges of targeting a presentation to a new audience is assessing their training needs. We spent some time thinking about what information would be most useful for a librarian. We imagined a situation where a researcher working on a cost-effectiveness analysis approaches a librarian for aid in their research. What does the librarian need to know?

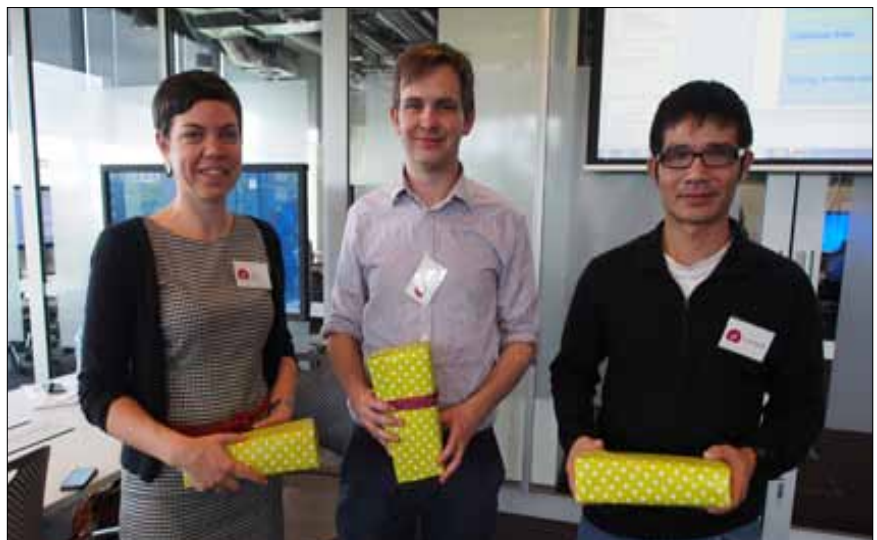
That question formed the framework on which we prepared for the workshop. We only had two hours to deliver the course, so we had to be efficient. Yes, we should cover principles of cost-effectiveness and economic evaluation but we don't need to get into mathematical formulae or normative frameworks. We need to cover relevant search terms, databases, and other resources but we can skip some of the more nitty gritty issues with methods. We wanted to make sure that a librarian who left our workshop would be a great aid to any researcher trying to find cost-effectiveness information.

Finally, the day arrived. Our first impression was positive: the training room was modern with a big flat screen monitor at each table as well as the main projector screen. The first session introduced the concepts of cost-effectiveness analysis in healthcare. We were impressed with the number of excellent questions from participants and the discussions these generated. Slides we were worried might be too dry or technical, provoked discussion. Even the representative of the sponsor (MIMS Australia) joined in with interesting comments about economic modelling and how irrationality gets included in analyses. The first session ended with a brainstorming exercise which linked well with the next session on quantifying costs and effects.

One of the themes of the discussions during the first session was the different contexts in which economic evaluations are used for decision-making. This was a topic we were light on in our slides because of the preconception we had about what librarians would be interested in.

The second session was adjusted to go through how different contexts affect how cost-effectiveness analyses are produced and used – a topic that fortunately overlaps with one of our PhD projects. We found out

Continues on p14...



RIGHT – Presenters left to right, Victoria McCreanor, Greg Merlo and Son Nghie

that a couple of the participants were working on measuring whether the service they provide as health librarians was cost-effective, so we discussed potential methods they could use to do so – how to measure costs and changes in productivity; and what could be used as a measure of effectiveness. They had some suggestions for measuring cost-effectiveness that had never occurred to us – such as using Google Analytics to measure time to seek information. But the most important lesson for us was why they were doing the cost-effectiveness analysis – like everyone else in the health sector they were feeling the budget squeeze and wanted to defend their funding.

With this discussion and questions there was less time to cover the content we scripted. There was only 15 minutes for the last session on health economics and systematic review. Thus, the session was focused on delivering the main messages: librarians are key stakeholders in a systematic review, and a systematic review is the most reliable source of evidence.

The feedback from the participants was very positive. We weren't expecting how interested this audience would be in cost-effectiveness research for their own sake, rather than just through their professional capacity; that they would find the methods interesting; or that they would care about how cost-effectiveness evidence is used in decision-making and its impacts on policies. Most of all, we didn't guess that they might want to do a cost-effectiveness analysis. After all, we managed to find a common language for economists and librarians.

Greg Merlo
Victoria McCreanor
Son Nghiem

ABOUT THE AUTHORS

Greg Merlo is in the final year of PhD candidature, researching how economic evidence is used in decision-making related to infection control policy.

Victoria McCreanor is a research associate with a diverse background in law, science and health economics.

Son Nghiem is a VC research fellow with a project on the cost-effectiveness of the NDIS.

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Cost-effectiveness Analysis FOR HEALTH LIBRARIANS

Rob Penfold shares learnings from AusHSI's cost-effectiveness analysis session at the HLA PD Day.



ABOVE – Victoria McCreanor presenting at the HLA PD Day.

The Cost Effectiveness Analysis for Health Librarians AusHSI workshop was sponsored by MIMS

For every \$100 dollar the nation earns (as measured by GDP), approximately \$10 is spent on health care, with this figure likely to increase due to an ageing population, increasing costs and higher health care expectations.

So it is no wonder that the cost effectiveness of this expenditure is increasingly being scrutinized. This three hour session aimed to give participants a sense of how the cost versus benefit equation could be modelled, how costs and benefits could be measured, and which databases could be used to source economic evaluations of health care interventions.

This is the world of QALYs, ICER, decision trees, Markov models, Monte Carlo simulations (so named after the famous casino), probability sensitivity analysis, the cost effectiveness plane, EQ-5D, AqoL and a multitude of other exotic acronyms and Scrabblers delights.

Three staff from the Australian Centre for Health Services Innovation endeavoured to make these comprehensible to the assembled health librarians. A kind of “Health Bang for your Buck for Dummies” session.

Victoria McCreanor gave an overview of models used to approach an economic evaluation. Randomised controlled trials, while useful for informing the effectiveness of an intervention, are only part of the jigsaw. RCTs are generally not ideal for economic evaluations due to such factors as often only comparing one alternative, a short term outcome, poor generalizability etc. So additional tools such as decision trees and Markov models must be employed. Statements such as “the dead state absorbs people. No one can leave the model” added a Kafkaesque touch to proceedings.

One of the important aspects of cost benefit analysis is that both parameters (costs and benefits) are converted into universal units, which allows comparisons across a whole range of interventions. In terms of costs, the generic unit is of course dollars whereas in terms of benefits it is a measure called quality adjusted life year (QALY).

Next up was Greg Merlo (whose presentation got better the longer it went on), who talked about how you measure both costs and benefits and populate the models discussed by Victoria. The cost side is the easier part of the equation and is often framed as humans, space and things. As an aside, we learnt that 70-80% of the costs of running hospitals is staffing. In terms of measuring benefits, three approaches are generally used. With the visual analogue scale you simply indicate where you sit on a gradation

Continues on p16...

SAVE THE DATE

Advanced Searching WORKSHOP to be held in SYDNEY

ALIA HLA will be hosting a full day workshop on advanced search techniques for systematic reviews with Carol Lefebvre from the UK on 23 November in Sydney.

ABOUT THE PRESENTER



Carol is an independent information consultant and was previously the Senior Information Specialist at the UK Cochrane Centre from 1992 to 2012, where she was involved in founding The Cochrane Collaboration in 1993. She is Co-convenor of the Cochrane Information Retrieval Methods Group, serves on the Cochrane Methods Executive and is lead author on the searching chapter of The Cochrane Handbook.

She is a health sciences librarian by background and was the deputy librarian at the University of Oxford Medical School Library (UK) before joining Cochrane.

She has an M.Sc. in Library and Information Science from the University of Loughborough (UK) and is an Honorary Fellow of the Chartered Institute of Library and Information Professionals.

Since starting her own company in 2012, she now focusses on teaching and consultancy in information retrieval for evidence synthesis, such as systematic reviews, health technology assessment and guideline development. She is an active member of the UK InterTASC Information Specialists' Sub-Group (ISSG) and the HTAi Interest Subgroup for Information Resources. She is an Associate Editor of the journal Research Synthesis Methods.

ABOUT THE WORKSHOP

This full day session will provide opportunities to learn new techniques, to discuss best approaches, to share insights and to assess variations in current best practice. The workshop will be facilitated by Carol Lefebvre who is experienced in literature searching to inform systematic reviews and HTAs and in conducting research into the evidence base for information retrieval.

We hope to make the session as interactive and participative as possible so you are encouraged to bring along a computer or device for searching. It will also comprise presentations and discussion. More information about what the workshop will cover to follow.

OPEN YOUR DIARY ...

TOPIC: Advanced Search Techniques for Systematic Reviews, HTA and Guidelines

DATE: Monday 23 November, 2015

VENUE: Macquarie University Library,
Building C3C, Room M4.01 – Level 4 Library,
Macquarie Drive, Macquarie University

PRESENTER: Carol Lefebvre

[THIS EVENT IS SOLD OUT]

Cost-effective analysis for health librarians
continues from p15...

of images from extremely poor health to complete vitality. With the time trade off you are essentially asked how much time you would be willing to give up to avoid a poor health condition. And with the standard gamble approach you present the person with a wager; the certainty of a given health state versus the chance of either better or worse outcomes. As can be imagined, measuring benefits is an inexact science.

Finally, Son Nghiem went over the characteristics of systematic reviews, meta-analyses, reference management software – more familiar territory for health librarians. Useful databases include the NHS Economic Evaluations Database (NHS EED) and Health Technology Assessment (HTA).

The Powerpoints from all three presenters are available on the ALIA website at <http://tinyurl.com/HLA-costeffective>

So, in summary, what did this session provide to health librarians? A lot of the material was quite technical and so probably more interesting than immediately applicable. However, it did promote a better understanding of a health research area that is likely to become more important over time with countries such as Great Britain and Germany already leading the way. It certainly provided food for thought on how health libraries might evaluate their own services; never a bad thing.

Rob Penfold
Library Manager,
Nambour Hospital Library

PubMed TRAIN THE TRAINER

– a preview for Health Librarians

In 2014 ALIA Fellow Cheryl Hamill received the Anne Harrison Award for her project **On the road to expert searching in Medline, a pilot project to establish a model for train-the-trainer deployment**. Murray Turner from the University of Canberra reports on Cheryl's 'road test' of the new training modules at the HLA PD Day.

“

Health librarians definitely should be skilled in [its] use and the knowledge that Cheryl is sharing through this project is highly valuable

”

The HLA Executive had once again worked hard to offer a range of workshops for participants at latest HLA Professional Development Day. The choice included “Smart Searching: Search Filters and Expert Topic Searches”, “Cost-Effectiveness Analysis for Health Librarians”, and “PubMed Train the Trainer”, which was presented by ALIA Fellow, Cheryl Hamill. Cheryl is Chief Librarian at the South Metropolitan Health Service, Library and Information Service, Western Australia, and is an ALIA Fellow being an advocate for health libraries, health librarians, and an active ALIA member for over 25 years.¹ Cheryl has more than 35 years of experience as a user of PubMed and its predecessor MEDLARS.

The PD Day gave Cheryl the opportunity to “road test” version one of this learning module that she has developed as a result of being the 2014 recipient of the Anne Harrison award for her project “On the road to expert searching in Medline, a pilot project to establish a model for train-the-trainer deployment.”² Among the project aims are developing a curriculum and associated training modules for PubMed search skills as well as teaching notes for train-the-trainer. The curriculum and training modules focus on the use of the PubMed open interface as that is the interface that is accessible to everyone.

Cheryl delivered the training in an innovative way, essentially breaking down the whole into a three part series of modules, starting with “PubMed Foundations”, followed by “PubMed Geography and Anatomy” and then “PubMed Physiology”.

PUBMED FOUNDATIONS

The foundation module provided a brief history of the U.S. National Library of Medicine (NLM) beginning with its foundation in 1836 as the Library of the Surgeon General's Office-United States Army, and further history of the NLM through to the present day. The module then covered the precursors of PubMed, including the print precursor Index Medicus (1879-2004), the introduction of the computerised MEDLARS (Medical Literature Analysis and Retrieval System) in 1964, and the introduction of Medline (MEDLARS online) in October 1971. The module also provided a brief history of MEDLARS and Medline in Australia. It finished by mentioning the

[Continues on p18...](#)



RIGHT – Cheryl Hamill presenting the PubMed Train the Trainer workshop at the HLA PD Day. The workshop was sponsored by Ebsco.

launch by Vice President Al Gore of PubMed on June 26, 1997 and the attainment of the 25 millionth journal citation in PubMed on 16 June 2015.³ Overall, the foundation module provided an understanding of the history of PubMed and emphasised its importance as a core database for health librarians.

PUBMED GEOGRAPHY AND ANATOMY

The next module began with the “geography” of PubMed – basically how to locate the PubMed database and how to navigate through its different parts. This included running basic and advanced searches as well as understanding and sorting search results, applying various limiters and obtaining the full-text. The “anatomy” part of the module went into more depth, covering the major data elements in PubMed (such as Abstract (AB) Author (AU) Title (TI)), adding qualifiers to search terms, Medical Subject Headings (MeSH), major topics, MeSH subheadings, check tags, supplementary concept terms and publication types. In this module Cheryl also provided the participants with an understanding of the difference between Medline and PubMed via an explanation of the additional content in PubMed.

PUBMED PHYSIOLOGY

The final module “PubMed Physiology” was the most challenging and covered the most advanced functionality and features of PubMed. This included the Automatic Term Mapping feature that searches for unqualified terms, the Citation Sensor – a feature that assists searchers looking for a specific article, and the single citation matcher – the precursor to the citation sensor. Cheryl then showed the best ways of running author and investigator searches, including author identifiers, before going in-depth with subject searching and the structure of MeSH. Boolean searching, search building, limiting search results, clinical and topic-specific queries, Mesh of Demand, and linking in PubMed were all covered in this comprehensive module that drew to a close with customisation and how to keep abreast of updates.

PubMed, the publically available interface of Medline is a core resource for health researchers and will only become more important as the cost of subscription databases continues to grow. Health librarians definitely should be skilled in the use of PubMed and the knowledge that Cheryl is sharing though this project is highly valuable, particularly to us newer and lesser-experienced professionals. Cheryl has successfully repackaged information from the NLM website into a much more user-friendly format and will soon be adding more content such as quizzes, exercises, and more examples, to revised versions of the modules. The revised versions will be made freely available on request and with acknowledgement, for anyone wishing to use them for training. Personally I can’t wait to share what I have learned with my colleagues.

Murray Turner
Faculty Liaison Librarian, Health
University of Canberra

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“

PubMed will only
become more
important as the
cost of subscription
databases
continues to grow.

”

NETWORKING



[TOP TO BOTTOM]

1. The Research Data Management workshop, sponsored by OCLC
2. A big crowd around the EBSCO stand (EBSCO were Gold Sponsors)
3. Elsevier Health Solutions & Cambridge University Press (Silver sponsors)
4. Jane Simon, Rob Penfold and Kim Guerrero from Queensland Health
5. Morning tea and a chance to talk about what's been said...





JOIN the ALIA Health Libraries Australia online COMMUNITY

Be the first to hear about our news and events, and avoid missing out on important announcements by joining the ALIA Health Libraries Australia Community.

ALIA provides members with access to the ALIA Communities Forum. The home site is <http://membership.alia.org.au/community> – HLA Members are encouraged to join. When participating in the Communities, please review and abide by the ALIA Social Media Engagement Guidelines.

HOW TO JOIN

1. Go to ALIA site
2. Go to Members Portal (top right)
3. Log in as a member
4. Select Our ALIA Communities (left column)
5. Select ALIA Health Libraries Australia Community.
(You will need to login again)

SET UP YOUR PROFILE

On the left-hand side menu, select My Community Profile <http://membership.alia.org.au/member-centre/member-centre> This information is self populated from your ALIA membership record – ensure it is up to date.

SET YOUR COMMUNITY PREFERENCES

Select Preferences – add any notifications you require.

Left click on the image to upload a photo (square image is best). SAVE. That's it. Easy!

The screenshot shows the ALIA Health Libraries Australia online community profile page. The page is divided into several sections:

- Left-hand side menu:** A list of various ALIA groups and services, including "Environment Interest Group", "ALIA Asia Pacific Special Interest Group", "ALIA Children's and Youth Services", "ALIA Children's and Youth Services (QLD)", "ALIA Digital Hubs", "ALIA Digital Humanities Special Interest Group", "ALIA Far North Coast Regional Group", "ALIA Health Libraries Australia", "ALIA Hunter Group", "ALIA LARK (Library Applied Research Collective)", "ALIA Law Librarians (QLD)", "ALIA National Library Technicians", "ALIA Library Technicians (NSW)", "ALIA Library Technicians (QLD)", and "ALIA Library Technicians (VIC)".
- Profile Section:** Displays the user's name "Jane Orbell-Smith" and title "Health Librarian". Below this is a "Services" section with "Community, Indigenous & Subacute".
- Preferences Section:** A section titled "Notify me by email when" with checkboxes for "I get a new follower", "somebody I'm following creates a new post", "somebody I'm following replies to a post", and "somebody I'm following creates an event". There is a "Save" button below the checkboxes.
- Latest Activity Section:** Shows a post by "Jane Orbell-Smith" with the text "Test Only - Checking Site Capability Ann. Gemma and Catherine, did you receive an email to say this message was published? Thanks Jane." and a timestamp "4 Sep 13 10:31 AM in ALIA Health Libraries Australia". There is a "Write a reply" button below the post.
- Right-hand side section:** Titled "You are a member of", it lists several ALIA groups with a green checkmark next to each, indicating membership. The groups listed are "ALIA Agriculture and Environment Interest Group", "ALIA Health Libraries Australia", "ALIA Queensland", "ALIA OPALS Queensland", and "ThropicALIA".

Annotations on the screenshot include:

- A box labeled "Left Click to Add a Photo*" with an arrow pointing to the profile picture placeholder.
- A box labeled "Self-populated from ALIA Membership Record" with an arrow pointing to the name and title.
- A box labeled "Select your preferences" with an arrow pointing to the "Preferences" section.
- A box labeled "This is your list of communities." with an arrow pointing to the "You are a member of" list.

Those CLEVER LIBRARIANS... and their BOOKFACE!

Angela Smith reveals how HNE Health Libraries' decision to embrace the Bookface concept for their Australian Library and Information Week promotion this year proved an excellent opportunity to engage their clients and hear about their experience with the library's resources and services.

HNE Health Libraries have always celebrated Australian Library and Information Week. We go to great lengths each year to plan an appropriate week of activities and promotions. We've done everything from book launches to art exhibitions, morning teas, to email campaigns with quizzes and prizes. We write for available Health District newsletters and other publications, we've even done radio interviews with our local ABC Radio and appeared in the local rag, The Newcastle Morning Herald. Like most Library and Information professionals we seize on any opportunity to promote our resources and services to our clients.

This year's source of inspiration derived from a newsfeed in Facebook from the New York Times and a short piece titled, 'Oh Those Clever Librarians and Their #Bookface'. Bookface, for the uninitiated, involves strategically aligning the face or other body part with the corresponding image appearing on the cover of a book. The promotion has become popular mostly in public libraries, both here and overseas. It provides a means for Libraries to interact with their clients in a fun and creative way, in the digital environment.

The application of the concept into the medical library setting was immediately appealing, although I did wonder about the availability of appropriate book covers, there was potential for things to get messy. It represented a great opportunity for our Library service to connect with our clients in a way we don't often get to do, bringing us face to face, when so many of our services are delivered, and interactions occur electronically or via email. The promotion created an opportunity for us to hear directly

Continues on p22...





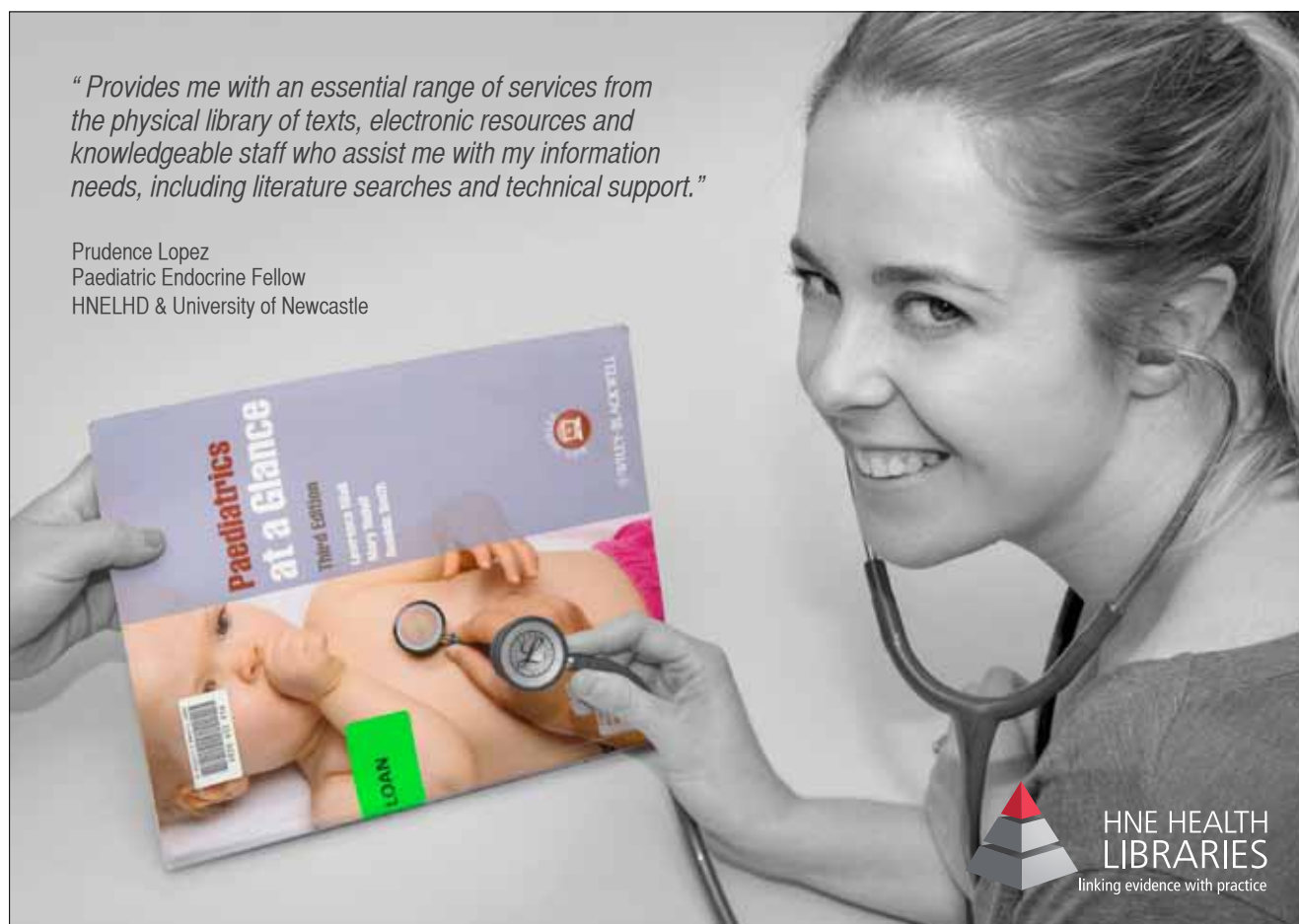
from these clients about their experiences using our resources and services.

The Bookface idea morphed into four case studies of our clients' experience with our Library Service, which we could use to promote the positive impact our work has on the care of patients and in contributing to research, education and staff development across our local health district.

We were concerned to approach the promotion in a professional way and ensure the experience of being photographed and featuring in our campaign was consistent with the experience of using our services. We hired the skills of a photographer, who provided his time and services largely on a gratis basis, and used a local printing company to produce and mount the images.

The images, in large format A0, are hanging in the HNE Health Libraries main branch at the John Hunter Hospital. We have incorporated the images on the front page of the Library's website, and have a variety of files in jpeg and pdf for use in upright banners, smaller posters, brochures and email signatures. We used our organisational email system to roll out an image each day during Australian Library and Information Week, in conjunction with other planned activities for the week, which included training courses. We received and continue to receive some amazing feedback, both from our clients and our health district executives. Overall the campaign has been a fantastic opportunity to work with a cross section of our client population, using their experiences with the services provided by our library to promote its benefits to our wider client base.

Angela Smith
Communication & Liaison Librarian,
HNE Health Libraries, HNELHD
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Health Librarianship Essentials

COURSE REPORT

Suzanne Lewis provides this report of the first Health Librarianship Essentials course for current and aspiring Australian health librarians, run from April to June 2015 as a joint initiative of ALIA Health Libraries Australia and the Queensland University of Technology.



I am very happy that this course gave me the knowledge and the confidence to apply for a position and advance as far as a job interview. Thank you all for this course. It was challenging and enjoyable and I finished it with a sense of pride at having completed something so worthwhile.



Participant feedback
HLE course, 2015

The first Health Librarianship Essentials (HLE) course for current and aspiring Australian health librarians was run from April to June 2015 as a joint initiative of ALIA Health Libraries Australia (HLA) and the Queensland University of Technology (QUT). Twenty-nine students completed the course and preliminary feedback from them indicates that the course was very successful.

First, some background to the course. Research carried out by HLA in 2009-2011 investigating current and future skills and knowledge required by Australian health librarians resulted in seven key recommendations, one of which was that a 'specialist postgraduate certificate and a three-year cycle of professional development activities' be developed (Hallam et al., 2011). The HLE course is a first step toward such a specialist postgraduate qualification, and would be the first competency-based pathway for specialisation in health librarianship in Australia.

The HLA executive approached the QUT Information Systems School with a proposal that QUT deliver the course with much of the content and guest presenters provided by HLA executive members and invited speakers. A project team was formed consisting of:

- Project Leader and Course Administrator – Kate Davis, Coordinator, Information Education, Information Systems School, QUT
- Course Coordinator – Adjunct Professor Gill Hallam, Independent Consultant, Adjunct Professor – Information Systems School, QUT
- Assistant Course Coordinator – Cecily Gilbert, Independent Health Library Project Officer
- Coordinator Module 1 – Ann Ritchie, HLA Convenor and Director, Library and Literacy, Barwon Health
- Coordinator Module 2 – Cheryl Hamill, A/Manager Library and Web Services, Fremantle Hospital and Health Service
- Coordinator Module 3 – Suzanne Lewis, HLA executive member and Library Services Manager, Central Coast Local Health District
- Lisa Kruesi, Manager, Hargrave Andrew Medical Library, Monash University, and
- Sarah Hayman, Research Fellow (Evidence), Flinders Filters, Flinders University

The module and course coordinators developed the structure and content of the course while the QUT Information Systems School provided the infrastructure for course delivery including promotion, enrolment, the online course delivery platform Collaborate, the BlackBoard student learning platform for access to resources and activities, and a Facebook group to facilitate informal interaction and discussion. Twenty-nine students from across Australia enrolled, with the choice of participation only or, with the addition of completing the assessment tasks, certification and credit points towards a current or future qualification. Participants who are ALIA members were also able to earn points towards the Health specialisation component of the ALIA CPD scheme (<https://membership.alia.org.au/pdinfo/alia-pd-scheme>).

The course consisted of three modules – Module 1: The Australian Healthcare Environment; Module 2: Health Information Resources and Searching; and Module 3: Evidence Based Practice and Research. The

modules were designed to cover the eight competencies identified by HLA as essential for the practice of health librarianship (<https://www.alia.org.au/sites/default/files/HLA%20Competencies.pdf>) which are, in turn, closely based on the seven competency areas defined by the US Medical Library Association. As this was an introductory course, competencies which were regarded as essential for an entry-level position in health librarianship, such as the ability to access and search appropriate online information resources and the ability to critically appraise and filter research literature, were emphasised over other competencies more appropriate to positions in health library management. Each module was delivered over two or three weeks. Students were provided with readings, activities and self-paced exercises plus a two-hour live online class each week. The class was recorded for anyone unable to attend in real time. Participants were also offered the chance to participate in a mentoring program, being matched with an experienced health librarian.

Now that the first iteration of the course is complete the project team is reviewing the feedback from students to identify what worked well, what didn't work so well, and how the course can be improved. Many of the students provided thoughtful and insightful feedback. One participant commented:

'What did surprise me is that I have learnt not just about health libraries, but I have also learnt about health librarians. The passion, enthusiasm and evidence of so much work that the course co-ordinator and fellow speakers put into providing this course for us amazed me. They highlighted the sense of community that health librarians share and this is something I have not witnessed before.'

The Health Librarianship Essentials course is certainly evidence of the commitment of the Health Libraries Australia group to realise their vision for a high quality, formal educational offering to support specialisation in health librarianship, and the willingness of the QUT Information Systems School to turn the vision into reality. The project team were also well supported by a large number of colleagues who generously contributed content, participated as guest speakers in the online classes or provided mentorship to the librarians taking the course. Now that much of the hard work has been done, the course may be offered again in 2016, providing LIS students, new health librarians and librarians wishing to move into the health sector with a strong foundation for a career in health libraries.

Suzanne Lewis

Library Services Manager, Central Coast Local Health District

BELOW – at the HLA PD Day, left to right: Cheryl Hamill, Suzanne Lewis, Sarah Hayman (HLE course module convenors), Angus Cook (OCLC), Gill Hallam (HLE course facilitator). Seated Helen Skoglund (Barwon Health).

REFERENCES

1. Hallam, G., Ritchie, A., Hamill, C., Lewis, S., O'Connor, P., Kammermann, M., Newton-Smith, C. (2011). Health Librarianship Workforce and Education: Research to Plan the Future. Retrieved 8 March 2012, from http://www.alia.org.au/groups/healthnat/reports/HLA%20Report_May2011.pdf



HLA EVIDENCE SUMMARY

CITATION	Marshall J G, Morgan, J C, Thompson, C A and Wells A L. Library and information services: impact on patient care quality. International Journal of Health Care Quality Assurance 2014; 27(8), 672-683
AUTHORS' OBJECTIVES	The purpose of this study was to investigate whether physicians' and residents' (doctors) use of specific library information resources and services would impact on the quality of patient care.
METHODOLOGY • Subjects and Setting • Study Design	<p>A qualitative research method, Critical Incident Technique, was employed to conduct the research.</p> <p>Three Dependent variables are</p> <ul style="list-style-type: none">• time saved,• changes made to patient care, and• avoidance of adverse events. <p>The Independent variable is the use of Library information resources by physicians and residents. Four different approaches of accessing library information resources included:</p> <ul style="list-style-type: none">• asked a librarian for assistance• searched in a physical library• searched the library's website; or• searched the institution's intranet. <p>Data collection & analysis: A large-scale web-based survey was sent to health professionals at 56 library sites serving 118 hospitals in the USA and Canada. There were 4,520 respondents from physicians (72%) and residents (28%), about 10% response rate. Although the response rate is considered a low in a survey, the number was large enough for the research. Three multivariate analysis models were performed to analyse data.</p>
RESULTS	<p>This study found that the physicians and residents' use of the Library information resulted in better patient care outcomes. It suggested that there was a positive relationship between independent variables and dependent variables.</p> <ol style="list-style-type: none">1 It found that physicians and residents with working experience about 16 to 20 years who asked the librarian for assistance had saved more time.2 The respondents who used the information resources for searching or who accessed information resources via the institution's intranet after conducting their research could make more changes in patient care.3 Respondents could avoid more adverse events after they used information resources for searching, or used the institution's intranet to conduct research, or used the available library resources in their institutions. Further, the findings suggested that the respondents who used the institution's intranet to search information resources were best served by libraries which had more FTE professional staff and more information resources available.
AUTHORS' CONCLUSIONS	The authors concluded that the use of library information resources by physicians and residents impacted on the positive patient care outcomes. The findings suggested that the more use of library information resources by physicians and residents, the more time saved, more changes to patient care and more avoidance of adverse events. As well as having consulted more information resources, more professional FTE library staff or librarians was also a factor contributing to time saved and optimized quality patient care. Limitations of this study were low response rate in a web-based survey, estimated 10% of study population; low generalisation to all library resources or all clinical situations. Further research was recommended.
HLA COMMENTARY	This is an interesting paper that demonstrates the value and impact of library services on quality of patient care. CIT seems to be an appropriate study method to answer the research question. Although it is a qualitative research, it also has qualified the respondents' experiences; some stricter editing would have improved the readability and clarity of the article. As a result, strong evidence supports its arguments that consulting information resources and using the library services were associated with clinicians' time saved and impact on quality of patient care by making more changes and avoiding adverse events.
IMPLICATIONS FOR PRACTICE OR RESEARCH	Implication for practice is that the financial investment in information resources, library services and library staff can benefit any healthcare services in terms of saving valuable time for clinicians and advancing the quality of patient care.

[This review summary was prepared by Josella Chan]

EVENTS TO SUPPORT YOUR PROFESSIONAL DEVELOPMENT

YEAR	EVENT	LOCATION	DATE
2015	PubMed Searching - Cheryl Hamill	Melbourne	20 October
	Open Access Week – 2015 Theme: Open for Collaboration	National	Last week of October
	5 th Australian Evidence Based Practice Librarians' Institute	Melbourne	10-13 November
	Julie Glanville Workshop – topics to be confirmed shortly	Adelaide	23 November
	Carol Lefebvre Workshop – Advanced search techniques for systematic reviews, HTA & guidelines	Sydney	23 November
2016	VALA 2016 Libraries, Technology and the Future	Melbourne	9-11 February
	Library Association of Ireland/CILIP Joint Annual Conference (including Health Libraries SIG)	Kerry, Ireland	13-15 April
	Joint Medical Library Association/ Canadian Health Libraries Association/ International Clinical Librarian Conference. Theme: "Mosaic: Be Part of the Big Picture"	Toronto, Canada	13-18 May
	CILIP: including Health Libraries SIG	Brighton (UK)	12-13 July
	ALIA National Conference	Adelaide	29 August to 2 Sept
	EAHIL 2016	Seville, Spain	TBA (mid-year)

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