

Current research

Compiled by Sandra Halliday

Perry GJ, Roderer NK, Assar S. A current perspective on medical informatics and health sciences librarianship. *J Med Libr Assoc.* 2005 Apr;93(2):199–205.

Objective: The article offers a current perspective on medical informatics and health sciences librarianship. **Narrative:** The authors (1) discuss how definitions of medical informatics have changed in relation to health sciences librarianship and the broader domain of information science; (2) compare the missions of health sciences librarianship and health sciences informatics, reviewing the characteristics of both disciplines; (3) propose a new definition of health sciences informatics; (4) consider the research agendas of both disciplines and the possibility that they have merged; and (5) conclude with some comments about actions and roles for health sciences librarians to flourish in the biomedical information environment of today and tomorrow. **Summary:** Boundaries are disappearing between the sources and types of and uses for health information managed by informaticians and librarians. Definitions of the professional domains of each have been impacted by these changes in information. Evolving definitions reflect the increasingly overlapping research agendas of both disciplines. Professionals in these disciplines are increasingly functioning collaboratively as “boundary spanners”, incorporating human factors that unite technology with health care delivery.

McDiarmid M, Auster E. Using volunteers in Ontario hospital libraries: views of library managers. *J Med Libr Assoc.* 2005 Apr;93(2):253–62.

Background: Volunteers have been a resource for all types of libraries for many years. Little research has been done to describe the attitudes librarians have toward library volunteers. More specifically, the attitudes of hospital librarians toward volunteers have never been studied. **Objective:** The objective was to explore and describe the extent of volunteer use and to determine library managers’ attitudes toward volunteers. **Design, setting, and participants:** An anonymous, self-report 38-item questionnaire was mailed to the target population of 89 hospital library managers in Ontario. Seventy-nine useable questionnaires were analyzed from an adjusted sample of 86 eligible respondents, resulting in a response rate of 92%. SPSS 11.5 was used to analyze the data. **Findings:** The data revealed that the attitudes of managers using volunteers did not differ significantly from the attitudes of managers not using volunteers. The findings showed that a majority of manag-

ers did not believe their libraries were adequately staffed with paid employees. Sufficient evidence was found of an association between a manager’s belief in the adequacy of staffing in the library and the use of volunteers in the library ($\chi^2(1, n = 76) = 4.11, p = 0.043$). Specifically, volunteers were more likely to be used by managers who did not believe their libraries were adequately staffed. The presence of a union in the library and the use of volunteers were also associated ($\chi^2(1, n = 77) = 4.77, p = 0.029$). When unions were present in the library, volunteers were less likely to be used. **Implications:** This research has implications for hospital library managers in the management of volunteers. Volunteers should not be viewed as a quick fix or as a long-term solution for a library’s understaffing problem.

Pluye P, Grad RM. How information retrieval technology may impact on physician practice: an organizational case study in family medicine. *J Eval Clin Pract.* 2004 Aug;10(3):413–30.

Rationale: Information retrieval technology tends to become nothing less than crucial in physician daily practice, notably in family medicine. Nevertheless, few studies examine impacts of this technology and their results appear controversial. **Aims and objectives:** Our article aims to explore these impacts using the medical literature, an organizational case study, and the literature on organizations. **Methods:** The case study was embedded in an evaluation of the implementation of medical and pharmaceutical databases on handheld computers in a Canadian family medicine centre. Six physicians were interviewed on specific events relative to the use of these databases and on their general perception of impacts of this use on clinical decision making and the doctor–patient relationship. A thematic data analysis was performed concomitantly by both authors. **Results and conclusion:** Findings indicate six types of impact: practice improvement, reassurance, learning, confirmation, recall, and frustration. These findings are interpreted in accordance with both a medical and organizational perspective. The fit with the literature on interorganizational memory supports the transferability of the findings. In turn, this fit suggests how information retrieval technology may change physician routine. This study suggests a new basis for evaluating the impact of information retrieval technology in daily clinical practice. In conclusion, our paper encourages policymakers to develop, and physicians to use, this technology.

Kipnis DG, Childs GM. Educating Generation X and Generation Y: teaching tips for librarians. *Med Ref Serv Q*. 2004 Winter;23(4):25–33.

This article provides a list of helpful teaching tips for instructional librarians who need to meet the changing generational needs of their patrons. Specific generational qualities and attitudes of Generation X and Generation Y are discussed along with educational techniques and software recommendations. These tips are based on the authors' experiences at Drexel University's Hahnemann Library and Thomas Jefferson University's Scott Memorial Library, both of which are academic health sciences libraries.

Moore ME, Vaughan KTL, Hayes BE. Building a bioinformatics community of practice through library education programs. *Med Ref Serv Q*. 2004 Fall;23(3):71–9.

This paper addresses the following questions: (i) What makes the community of practice concept an intriguing framework for developing library services for bioinformatics? (ii) What is the campus context and setting? (iii) What has been the Health Sciences Library's role in bioinformatics at the University of North Carolina (UNC) Chapel Hill? (iv) What are the Health Sciences Library's goals? (v) What services are currently offered? (vi) How will these services be evaluated and developed? (vii) How can libraries demonstrate their value? Providing library services for an emerging community such as bioinformatics and computational biology presents special challenges for libraries, including understanding needs, defining and communicating the library's role, building relationships within the community, preparing staff, and securing funding. Like many academic health sciences libraries, the UNC at Chapel Hill Health Sciences Library is addressing these challenges in the context of its overall mission and goals.

Weightman AL, Williamson J, Library & Knowledge Development Network (LKDN) Quality and Statistics Group. The value and impact of information provided through library services for patient care: a systematic review. *Health Info Libr J*. 2005 Mar;22(1):4–25.

Objective: An updated systematic review was carried out of research studies looking at the value and impact of library services on health outcomes for patients and time saved by

health professionals. **Methods:** A comprehensive systematic search was undertaken of the published literature to September 2003 in ERIC, LISA, MEDLINE, PREMEDLINE, EMBASE, the Cochrane Controlled Trials Register, and Google. Some hand searching was carried out, reference lists were scanned, and experts in the field were contacted. Twenty-eight research studies of professionally led libraries for health care staff, including clinical librarian projects, met the inclusion criterion of at least one health or "time saved" outcome. Papers were critically appraised using internationally accepted criteria. Data were extracted and results were summarized using a narrative format as the studies were heterogeneous and precluded a statistical analysis. **Results:** There is evidence of impact from both traditional and clinical librarian services. The higher quality studies of traditional services measured impacts of 37%–97% on general patient care, 10%–31% on diagnosis, 20%–51% on choice of tests, 27%–45% on choice of therapy, and 10%–19% on reduced length of stay. Four studies of clinical librarian projects suggested that professionals saved time as a result of clinical librarian input, and two of these studies showed evidence of cost-effectiveness. However, the clinical librarian studies were generally smaller, with poorer quality standards. **Conclusions:** Research studies suggest that professionally led library services have an impact on health outcomes for patients and may lead to time savings for health care professionals. The available studies vary greatly in quality, but the better quality studies also suggest positive impacts. Good practice can be gathered from these studies to guide the development of a pragmatic survey for library services that includes the direct effects for patients among the outcome measures.

Weklinski JM. Studying Google Scholar: wall to wall coverage? *ONLINE*. 2005;29(3):22–6.

Most academic librarians reacted to the initial introduction of Google Scholar with a mixture of glee and horror. They were delighted to see Google making scholarly literature more accessible, but terrified students would not search beyond Google. Libraries rushed to incorporate mentions of Google Scholar on their Web pages, emphasizing the availability of full text at the library and explaining how library collections supplement and enhance Google Scholar.