



---

**Canadian Health Libraries  
Association  
2008 Conference**

26–30 May 2008  
Halifax, Nova Scotia, Canada

**Association des bibliothèques  
de la santé du Canada  
Congrès 2008**

26 au 30 mai 2008  
Halifax (Nouvelle-Écosse), Canada

---

**Poster abstracts / Résumés d'affiches**

## 2008 CHLA Conference / 2008 Congrès de la ABSC

<b>Olwen Beaven and Tamara Rader</b>	<b>97</b>	<a href="#"><u>Collaborating across the Atlantic: the experiences of Canadian and British librarians working together</u></a>
<b>Laurie Blanchard</b>	<b>97</b>	<a href="#"><u>The Info Long Term Care Blog: a current awareness service for geriatric practitioners</u></a>
<b>Jim Henderson, Eamon Duffy, Debbie Meert, and Louisa Piatti</b>	<b>98</b>	<a href="#"><u>Which are the most productive sources of information for global health?</u></a>
<b>Dawn Hooper and Betty M. Jeffery</b>	<b>98</b>	<a href="#"><u>Promoting academic library resources within a course management system: partnering with faculty</u></a>
<b>Kimberley Meighan and Mary Anne Howse</b>	<b>99</b>	<a href="#"><u>Fostering a healthy environment for health literacy in Canadian consumers</u></a>
<b>Christine Neilson</b>	<b>99</b>	<a href="#"><u>Preliminary experience using a portable training lab in rural Saskatchewan</u></a>
<b>Kelly Nystedt, Lorraine Leitz, Carlene Meilleur, Lee Salter, and Rachel McDonald</b>	<b>100</b>	<a href="#"><u>WISE: Web-based Interactive Support and Education</u></a>
<b>M. Chipanshi, S. Olfert, J. Mason, S. Powelson, and M. Chipanshi</b>	<b>101</b>	<a href="#"><u>Evidence for change: Regina Qu'Appelle Health Region Health Sciences Library Usage Survey</u></a>
<b>Beata Pach, Maria Aulicino, Elena Goldblatt, Gayle Jessop, Heather Kemp, Allison McArthur, and Barb Murray</b>	<b>101</b>	<a href="#"><u>Skills enhancement for public health: online course on information searching and retrieval</u></a>
<b>Risa Shorr, Alexandra Davis, and Margaret Quirie</b>	<b>102</b>	<a href="#"><u>Value of demonstration authoring software in a hospital library</u></a>
<b>Eva Veres</b>	<b>102</b>	<a href="#"><u>Navigating the sea of change: A small hospital library becomes a worldwide seller of specialized health resources</u></a>
<b>Rita Vine, Rita Shaughnessy, and Mindy Thuna</b>	<b>103</b>	<a href="#"><u>EBM tool-picking made easy: simplifying the tiers of evidence helps students choose the best information tools for their clinical question</u></a>
<b>Linda Wilcox, Elizabeth Russell, Peggy O'Neil, Deb Miller, Eeva Munoz, Harriet Rykse, Elyse Pike, Pat Redhead, Brad Dishan, and Karla Van Kessel</b>	<b>103</b>	<a href="#"><u>Sailing together in the seas of change</u></a>
<b>Liz Bayley, Doug Suarez, and Elena Prigoda</b>	<b>104</b>	<a href="#"><u>Nursing and medicine: their professional cultures and implications for training in evidence-based practice</u></a>
<b>Gurvinder Batra and Kimberley Aslett</b>	<b>105</b>	<a href="#"><u>Access to archives: the OHLA archives online</u></a>

## ABSTRACTS / RÉSUMÉS

### Collaborating across the Atlantic: the experiences of Canadian and British librarians working together

**Olwen Beaven and Tamara Rader**

*BMJ Knowledge, BMJ Publishing Group, BMA House, Tavistock Square, London, WC1H 9JR, UK*

**Objective:** To report on the successful working partnerships between Canadian and British staff that have been established in the BMJ Knowledge Information Team. **Methods:** A process evaluation of our experiences working with colleagues from Canada based on a questionnaire and personal testimony covering all members of our Information Specialist Team. We will look at what can be learned and identify the elements that have allowed this to proceed successfully. **Results:** The evaluation is currently ongoing, but we already know that employing three different Canadian librarians over recent years has produced a successful outcome in each case. Common characteristics do run across each appointment, but each post and situation was distinct,

so we wish to understand more about the factors that contributed to this success, both at the organisational (the BMJ and Canadian employers) and the individual level. We hope to analyse more fully the value of this form of cross-border sharing of staff expertise and highlight what circumstances allow it to work effectively in the way that we have experienced. **Conclusions:** Working abroad in a professional library/information post can be a rewarding exercise but is often a “hit and miss” process. We hope, by analysing our experiences, we can provide an insight into the factors that are required for success, both for the individual and the employers involved, which will help others to replicate the good outcomes we have achieved.

### The Info Long Term Care Blog: a current awareness service for geriatric practitioners

**Laurie Blanchard**

*J.W. Crane Memorial Library, University of Manitoba Health Sciences Libraries, 2109 Portage Avenue, Winnipeg, MB R3J 0L3, Canada*

**Objective:** To investigate whether a blog is an effective way to provide a current awareness service for long-term care practitioners. **Method:** Many social networking technologies are ideally suited to alerting users to new research and journal literature. While blogs, in particular, provide potential for busy clinicians to stay current with new research and an option for health librarians in delivery of information services, little research exists to determine whether they do so effectively. Using a simple interface and integrating information technologies such as RSS feeds and bookmarking tools, I created a hybrid weblog (<http://infoltc.blogspot.com/>) to communicate with health care practitioners in long-term care.

This poster will illustrate how a blog can be used to provide a current awareness service in long-term care and will also report on tools (survey and blog statistics) to evaluate use and satisfaction with the blog. **Results:** Blog statistics will report on frequency of use and page views. Survey results will include profession of visitor, comparison to other current awareness services, useful areas of the blog, and overall satisfaction. **Discussion:** A current awareness service using blogging and other social networking software is easily created and maintained, and is potentially an effective way of alerting health care professionals to new Web sites, resources, and journal literature.

## Which are the most productive sources of information for global health?

**Jim Henderson, Eamon Duffy, Debbie Meert, and Louisa Piatti**

*Life Sciences and Osler Libraries, McGill University Library, McGill University, Montreal, QC, Canada*

**Background:** Global health is an interdisciplinary endeavor. In 2007, a group of McGill librarians from across the Library system began to collaborate in support of global health research and teaching, including organizing training workshops and maintaining a wiki as a guide to information resources. In preparing workshops, example subject searches were shared. It quickly became evident that the databases and Internet resources of no single discipline covered the topic comprehensively; valuable answers would be missed if topics in this interdisciplinary area were not searched across various resources. **Objective:** To quantify the value of various bibliographic sources and Internet resources for identifying publications on global health. **Methods:** Ten questions

representing the various areas of global health will be searched in the health, social science, legal, and statistical databases, and on Internet resources such as those provided by international organizations. **Results:** The results will be classified by resource and by discipline to point out the strengths of each resource and the best resources to use for each discipline. **Discussion:** This study will identify the best resources for finding global health information, analyzing results by number and quality. Results will suggest the most efficient strategies for finding information and will bring out the necessity of searching a range of resources for information on interdisciplinary topics.

## Promoting academic library resources within a course management system: partnering with faculty

**Dawn Hooper and Betty M. Jeffery**

*Robertson Library, University of Prince Edward Island, 550 University Avenue, Charlottetown, PE C1A 4P3, Canada*

**Outline:** Undergraduate students often find it difficult to select the most relevant research materials for their courses from the various resources offered through the Library Web site. Many universities use a course management system or CMS. One of the benefits of using a CMS, such as Moodle, is that course materials can be accessed from one Web location whenever and wherever students want. So why not use the course management system to push library resources relevant for specific courses? **Objective:** To promote the use of library resources in first-year courses by integrating a library presence into the campus CMS, Moodle. **Methods:** Nine first-year courses, including Nursing 101 and Psychology 101, were selected as part of a funded pilot for the 2007 fall term. A standard block of four library resources appears by default. In addition, course-specific resources are selected by the liaison librarian in consultation with the course instructor. Course-specific resources include electronic course reserves, databases such as CINAHL or PsycINFO, research guides, and tutorials.

These additional resources are integrated into the courses and dynamically updated using an in-library developed "database of databases". **Results:** It quickly became evident that the standard set of resources could be useful to all courses through to the 4th year level and was immediately provided in all Moodle course communities. Based on positive feedback from participating faculty and students, the service is expanding to other courses. **Discussion:** Placing direct links to library resources in Moodle provides students with one-click access to a visible set of Library resources. Other resources could include a link to RefWorks, online reference tools, and Web sites. This project expands the use of a database originally designed to manage the Library's databases on our Web site to include managing library resources in the CMS. Liaison librarians can use this service to partner with faculty in promoting the use of library resources as well as participating in course forums and chats. Bring the Library to the student by using the CMS as a gateway to library resources.

## Fostering a healthy environment for health literacy in Canadian consumers

Kimberley Meighan<sup>1</sup> and Mary Anne Howse<sup>2</sup>

<sup>1</sup>*SickKids, Toronto, ON, Canada;* <sup>2</sup>*Marion Powell Women's Health Information Centre, Women's College Hospital, Toronto, ON, Canada*

**Objective:** This poster presentation will highlight more recent consumer health initiatives in fostering health literacy and the consumer health librarian's role in ensuring patient and families understand the most recent evidenced-based health information. Health literacy is defined by Healthy People 2010 as "the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions". Health literacy is not just knowing how to read. It requires a complex set of skills involving listening, problem solving, and a set of decision making skills that can be overwhelming for many individuals. Research has shown that low health literacy is often linked to higher rates of hospitalizations and higher costs associated with increased emergency visits and overall health care costs. Statistics from 2007 show 60% of adult Canadians (ages 16 and older) lack

the capacity to obtain, understand, and act upon health information and services and to make appropriate health decisions on their own. Ensuring culturally appropriate resources are available can sometimes be a significant challenge; however, with the growing immigrant population in Canada, it is ever more important for consumer health librarians to be diligent in advocating for such resources. Consumer health librarians are often faced with the challenges of ensuring patients, families, and the public have a good understanding of their health care needs and options. Utilizing their expert knowledge, librarians have the ability to help individuals make informed health decisions. This poster presentation will feature examples of existing programs, tips to ensure patients and families get what they need, and opportunities for librarians to advocate for healthy public policy and more health research.

## Preliminary experience using a portable training lab in rural Saskatchewan

Christine Neilson

*Saskatchewan Health Information Resources Partnership, Health Sciences Library, Saskatoon, SK, Canada*

**Objective:** The Saskatchewan Health Information Resources Partnership (SHIRP) provides library instruction to health care practitioners across Saskatchewan as part of its mission to provide the province's health community with access to critical evidence-based health information. This poster will describe the use of a portable lab for instruction. **SHIRP training:** SHIRP provides library instruction to health care practitioners across the province as part of its mission to provide Saskatchewan's health community with access to critical evidence-based health information. **The need for hands-on training:** Training has previously included a mix of presentation style demonstrations and computer lab training where lab facilities exist. Participant feedback reflected a preference for hands-on training; however, most rural health facilities do not have computer labs,

and it can be difficult for practitioners to travel to another facility in their region. **The lab:** To address the need for hands-on training in more facilities, SHIRP created a portable lab composed of five laptops, each equipped with anti-virus software, Windows Firewall, a spare 9-cell battery, and a cordless optical mouse; a wireless broadband router; an LCD projector; a portable printer; and a custom travel case. There has been the odd bump along the way, but overall the introduction of the portable lab has been smooth. **The participants' response:** Since August 2007 the lab has functioned well in a variety of spaces, and the response to the new equipment has been very positive. Participant comments received both informally and through the session evaluations indicate that they want—and need—hands-on sessions to strengthen their skill using the SHIRP library resources.

## WISE: Web-based Interactive Support and Education

**Kelly Nystedt, Lorraine Leitz, Carlene Meilleur, Lee Salter, and Rachel McDonald**  
*BC Cancer Agency, Vancouver Island, Victoria, BC, Canada*

**Outline:** Currently there is no interactive component on the British Columbia Cancer Agency (BCCA) Web site ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)). The Web site provides a vast amount of information to patients, the public, and health care workers, regarding types of cancer, treatment options, prevention, screening, statistics, research, regional services, and much more. However, the information available on the Web site is almost entirely in the presentation format, except for an option that users have to submit questions to the webmaster. An interprofessional group consisting of a librarian, a nurse, a radiation therapist, and a radiation therapy educator, conducted a survey of patients and their family and friends to determine whether there is interest in an interactive component (Internet forum, online support group, public bulletin board, chat room, etc.) on the BCCA Web site. **Question:** Do Vancouver Island Centre (VIC) patients and their caregivers (family and friends) want, and would they use, an interactive module on the BCCA Internet Web site ([www.bccancer.bc.ca](http://www.bccancer.bc.ca))? **Setting:** The study was conducted in the Radiation Therapy, Chemotherapy, and Patient Clinic areas of the BCCA VIC in Victoria, British Columbia. **Participants:** Data was collected by surveying a convenience sample of patients and their family and friends ( $n = 284$ ). **Methods:** The research team members distributed the surveys to patients and their caregivers who attended the VIC over 2 days. The 28-question survey included demographic information, as well as questions about participants' interest in various interactive Internet forums, including online support groups, online conversations with health care professionals, Web-based public bulletin boards, mailing lists/list servers, and chat rooms. Information about past experience with the Internet, the BCCA Web site, and various interactive forums was also collected. **Results:** A total of 295 surveys were collected over 2 days, almost 30% more than our goal. Overall, 64% of people were aware of the BCCA Web site, but that awareness decreased with age: 100% of people age 18–30 years old were aware of the BCCA Web site, 82.6% of those 31–45 years old, 77.5% of people 46–

60 years old, 53.6% of those 61–75 years old, and only 28.6% of people older than 75. However, less than half, only 47.8% of respondents, had actually utilized the BCCA Web site. Even fewer were aware of (30.3%) or had accessed (21.3%) the regional VIC pages. Only 46% of respondents were aware of and fewer (14.8%) has used the Internet access available to patients in the centre's waiting rooms and library. Interest levels reported for interactive Internet services were considerably higher than past experience or participation; however, the highest level of interest in any interactive service was only 51.9% for an online conversation with a physician. Interest in online conversations with other health professionals ranged from 23.1% for a conversation with a librarian to 50% for a conversation with a nutritionist. Only 28.8% of respondents were interested or very interested in an online support group, 24.5% were interested in a bulletin/message board, 24.5% were interested in a mailing list, and 19.8% were interested in a live chat room. **Discussion:** The results of this study did not indicate a strong need for an interactive component on the BCCA Web site at this time. Although there was interest, it was not of a sufficient level to justify the resources required. The most desired interactive service as indicated by the responses were online conversations, especially with a physician. However this would likely be the most difficult to implement due to the human and technical resources required along with issues of privacy and confidentiality associated with patient data. As expected, demographically, the 18–30 year age group was most interested, and those over 75 years old were the least interested and experienced with interactive Internet services. With fewer than 10% of respondents under the age of 45, it is likely that within the next 5–10 years these services will be increasingly in demand. With so much emphasis being placed on providing information, educational materials, and patient support online, we need to be cognizant of the needs and abilities of our oncology patient population in the realm of the Internet and ensure that we provide them with the information they need in a more accessible face-to-face format.

## Evidence for change: Regina Qu'Appelle Health Region Health Sciences Library Usage Survey

M. Chipanshi, S. Olfert, J. Mason, and S. Powelson

*Regina Qu'Appelle Health Region Health Sciences Library, Regina, SK, Canada*

**Objectives:** The Regina Qu'Appelle Health Region (RQHR) Health Sciences Library provides library services for physicians, staff, and medical residents and needed to better understand who the users are, what their information needs are, and how the library can best meet those needs. The main purposes of the study were to determine, among RQHR staff and physicians, (i) the level of awareness of library services, (ii) the use of library services, (iii) the frequency of library patrons requiring information, and (iv) the reasons why library patrons require information. Additional purposes of the study were to determine the use of the electronic resources among library patrons and the impact of being able to access information for physicians, staff, and medical residents. **Design and methods:** A survey was sent

to all RQHR physicians and medical residents ( $n = 564$ ), and a random sample of RQHR health practitioners identified as information users ( $n = 1200$ ). **Results and conclusions:** The response rate among physicians and staff was 47%. Staff and physicians are continuing to use print departmental collections, and lack of computer access is impeding complete adoption of electronic resources. However, easy off-site access is a critical issue that needs to be resolved. The library needs to implement easier off-site access. Despite significant promotional activities some staff remain unaware of the library and library services. Additional work needs to be done to identify the pockets and enhance library promotion. Departmental print collections continue to be important for responding to immediate information needs.

## Skills enhancement for public health: online course on information searching and retrieval

Beata Pach, Maria Aulicino, Elena Goldblatt, Gayle Jessop, Heather Kemp, Allison McArthur, and Barb Murray

*Ontario Ministry of Health and Long-Term Care, Toronto, ON, Canada*

**Background:** The Ontario Public Health Libraries Association (OPHLA) is a community of information professionals who work in partnership from within public health units across Ontario. In winter of 2007, OPHLA became aware that an e-learning module on information searching and retrieval was being developed for the Public Health Agency of Canada's Skills Enhancement for Public Health Program and offered to enhance the module's content with public health-focused information. **Objectives:** Building on the already developed content, OPHLA integrated into the module their own custom-designed information tools and products. The additional topics included in the updated version of the module, and their scope, were chosen to provide public health practitioners with rudimentary skills in information literacy, basic literature searching, information management, and awareness of intellectual property issues. **Methods:** Contrib-

utors employed their collective public health information expertise to design the module. After several consultations, the group developed a strong project model and focused work plan. They incorporated into the content of the module tutorials based on instructional materials used to train public health unit staff to address the requirements of an online learning environment. Feedback from a pilot session was utilized to include additional information identified by users as useful. **Results:** The course has been evaluated by a test group, with excellent reviews, and approved for inclusion in the Skills Enhancement program across Canada. The module's customized information literacy instruction and provision of appropriate research tools will empower public health practitioners to become more efficient information users. This project also allowed OPHLA to promote the role of information professionals in public health research.

## Value of demonstration authoring software in a hospital library

**Risa Shorr, Alexandra Davis, and Margaret Quirie**

*The Ottawa Hospital, 501 Smyth Road, Ottawa, ON K1H 8L6, Canada*

**Objectives:** To measure the value of using demonstration videos and online tutorials in place of one-on-one training for basic training in a hospital setting. **Methods:** Created a demonstration video that will be posted on the hospital intranet to teach library users how to access journals through the library Web site. Monitored frequency of use of demonstration video and invited all users to participate in an online survey/test to measure the impact. **Hypothesis:** The number of one-on-one instructional sessions that were requested by users of the virtual collection will be reduced with the availability of demonstration videos. With the availability of

demonstration videos, training resources will be available 24 hours a day, 7 days a week. A cost-benefit analysis will prove this to be a beneficial tool for hospital libraries. **Discussion:** The preference for demonstration videos and online tutorials is a personal choice. While we understand that some users will never use demonstration videos, the availability of an alternate source of information will meet some users needs. This will reduce staff time spent training users and increase accessibility to training for users. This poster will have two components, a poster and an electronic demonstration of the video.

## Navigating the sea of change: A small hospital library becomes a worldwide seller of specialized health resources

**Eva Veres**

*BC Children's Hospital and Women's Hospital & Health Centre, Agencies of the Provincial Health Authority, Vancouver, BC, Canada*

Canadian hospital libraries have traditionally not considered income-producing activities a function of their organizations. Times have changed. As health care costs increase—and ongoing cuts to programs a reality—revenue building opportunities can serve as an alternative funding source for hospital libraries. Faced with such a scenario, the librarian at the Family Resource Library at BC Children's Hospital capitalized on a new Web-based catalogue project by creating the C&W Bookstore. By sharing infrastructure, staff, and operational costs, the bookstore and library have been able to support not only patients and families seeking to purchase or borrow consumer health materials, but also the hospital staff needing avenues to disseminate the resources they have cre-

ated. Working closely with the hospital's IT and finance departments, the C&W Bookstore was able to expand its online capabilities by enabling buyers to select and securely pay for their purchases using credit cards. Buyers from around the world were now able to purchase materials previously available in-house and negotiate license/copyright agreements with the librarian. Heading into its 5th year of operation, the C&W Bookstore has become financially self-sufficient and shares profits with the many hospital authors. Its success in providing a unique service unavailable at any other Canadian hospital has raised the profile of the Family Resource Library within the hospital community and has ensured the library's continuity in the face of cut-backs.



## EBM tool-picking made easy: simplifying the tiers of evidence helps students choose the best information tools for their clinical question

Rita Vine,<sup>1</sup> Rita Shaughnessy,<sup>2</sup> and Mindy Thuna<sup>3</sup>

<sup>1</sup>Gerstein Science Information Centre, University of Toronto, 9 Kings College Circle, Toronto, ON M5R 3M6, Canada; <sup>2</sup>Family and Community Medicine, University of Toronto, Toronto, ON, Canada; <sup>3</sup>University of Toronto Mississauga Library, University of Toronto Mississauga, Mississauga, ON, Canada

**Program objective:** Develop a simple, re-usable method to help students quickly identify and select the best tools for answering clinical questions. Librarians delivered a 3-hour workshop on evidence tiers and synthesized information resources to 75 students, as part of a transitional program for physicians educated abroad. None of the participants had prior exposure to synthesized information products. Using feedback from a similar clerkship program, where students reported difficulty understanding and applying the well-known evidence pyramid, librarians developed a “tierless” evidence pyramid within which 13 search tools were placed in a loosely arranged vertical order from most distilled (e.g., BMJ Clinical Evidence) to least distilled (e.g., Google). To further help students, three smaller subset pyramids were developed, containing information tools to best answer ques-

tions about diagnosis, treatment options or drug information. Students were taught to match the clinical question to the best subset pyramid and then select and search from resources in that pyramid. **Results:** The simplified tierless pyramids enabled students to select the best tools for specific types of questions without requiring a deep understanding of each tool’s content or features. **Conclusion:** Initial results indicate that this method can save valuable instruction time and could be used to introduce undergraduate medical students to evidence-based information tools earlier in their medical education. The method will be used in September 2008 to introduce synthesized resources at lower levels of the undergraduate medical curriculum, thereby enabling subsequent clerkship sessions to focus more on comparative appraisal of information tools.

## Sailing together in the seas of change

Linda Wilcox,<sup>1</sup> Elizabeth Russell,<sup>2</sup> Peggy O’Neil,<sup>3</sup> Deb Miller,<sup>3</sup> Eeva Munoz,<sup>3</sup> Harriet Rykse,<sup>3</sup> Elyse Pike,<sup>3</sup> Pat Redhead,<sup>3</sup> Brad Dishan,<sup>3</sup> and Karla Van Kessel<sup>3</sup>

<sup>1</sup>Shared Library Services, South Huron Hospital, 24 Huron Street West, Exeter, ON N0M 1S2, Canada; <sup>2</sup>Library Services, Regional Mental Health Care – St. Thomas, St. Joseph’s Health Care London, 467 Sunset Drive, P.O. Box 2004, St. Thomas, ON N5P 3V9, Canada; <sup>3</sup>WOHKN team members

**Objective:** The Western Ontario Health Knowledge Network (WOHKN) is a newly created not-for-profit, voluntary cooperative between The University of Western (UWO), Grey Bruce Health Services, London Health Sciences Centre, Shared Library Services, and St. Joseph’s Health Care, London. The basis for the WOHKN partnership is the mutual care, teaching, and research goals of the partners and is founded in the view that collaboration between the libraries is mutually beneficial and will allow for excellence in service for hospital and professional staff, faculty, and students. Additionally, WOHKN partners believe that equal access to quality knowledge-based information is required for en-

hanced patient care and patient safety, and for the provision of best practice. **Setting:** WOHKN hospitals currently represent 29 sites, with 16 707 clinical and other staff mostly with the Southwest Local Health Integration Network (LHIN 2). **Method:** In the fall of 2005, library leadership from the respective organizations developed a project plan that included data collection in the current local context, an overview of existing provincial and regional models, and a significant amount of consultation. In March 2006, a preliminary report was delivered to the steering committee and to library staff, and an implementation plan and structure was then established for the development of the regional library

network. **Results and discussion:** WOHKN partners officially sanctioned the relationship between its parties via a letter of intent. A robust collection strategy was developed, and a common suite of electronic journals, e-books, databases, and evidence-based resources was established. A portal was designed and launched ([www.wohkn.ca](http://www.wohkn.ca)). WOHKN's strategic and operational aspects are now managed by its planning and operations committee, which receives recom-

mendations from five sub-committees in the areas of collection development, communications, services, information technology, and purchasing/contracts. **Next steps:** The evolution of WOHKN and expansion to partners within our LHIN will occur by working progressively through a balanced use of evidence-based practice, continuous re-evaluation, together with the flexibility for innovation and responsiveness to community, regional, and provincial concerns.

## Nursing and medicine: their professional cultures and implications for training in evidence-based practice

Liz Bayley,<sup>1</sup> Doug Suarez,<sup>2</sup> and Elena Prigoda<sup>3</sup>

<sup>1</sup>Health Sciences Library, McMaster University, Hamilton, ON, Canada; <sup>2</sup>James A. Gibson Library, Brock University, St. Catharines, ON, Canada; <sup>3</sup>Gerstein Science Information Centre, University of Toronto Libraries, Toronto, ON, Canada

**Objective:** We planned to determine what behaviours were expected from nurses and physicians to function as competent clinicians and use these findings to suggest what liaison librarians can do to assist both groups to develop the skills necessary to survive and to thrive in clinical settings. **Methods:** Building on our shared experiences as liaison librarians, we explored the professional cultures of both groups by conducting a review of the literature on the professional cultures of nursing and medicine. We aimed to link our findings on each group's skills and valued behaviours with suggested content, methods, and objectives for the delivery of evidence-based practice training. **Results:** The evidence was less abundant and more difficult to find than we anticipated. It became necessary to rely on less systematic and more serendipitous methods of searching, including using Google and Amazon to search book content. Much of the literature on this topic was American and from the 1980s and 1990s, which made it difficult to transfer to today's electronic environment and to the Canadian health care context. Evidence was also more general, and some interpretation was required to apply it to evidence-based practice. **Conclu-**

**sions:** *Implications for practice* – The way in which we approach evidence-based practice in medicine is different from the way we need to address it in nursing. This reflects the different professional philosophies and subcultures of these two professions. In medicine, the overarching issue is certainty versus uncertainty, and evidence-based information and resources give students, practitioners, and faculty a way to deal with this uncertainty. For nursing students, the resources they need are more theoretical and qualitative in nature, while after graduation the information is sought to inform their own practice and thus is tied more specifically to nursing interventions. *Implications for research* – Our study identified a lack of evidence around how different health professions' subcultures affect the information that they require and how best to educate them in evidence-based practice. To validate the implications for practice above, we hope to conduct a qualitative research study with students, faculty, and (or) practitioners to assess their information needs and to develop some generalizable learning objectives and strategies for delivery of our evidence-based practice skills training.

## Access to archives: the OHLA archives online

**Gurvinder Batra<sup>1</sup> and Kimberley Aslett<sup>2</sup>**

*<sup>1</sup>Health Sciences Library, Toronto East General Hospital, Toronto, ON, Canada; <sup>2</sup>Health Sciences Library, Sault Area Hospital, Sault Ste. Marie, ON, Canada*

**Objective:** The objective of this project was to increase accessibility of the archives of the Ontario Health Libraries Association (OHLA). This would impact not only the individual members who may want to review past activities and projects, the executive and other committees of the OHLA that require quick reference to past history and data, but also other organizations and associations with whom we have affiliations and share activities. **Methods:** The methodology of the project involved three steps: (1) identifying materials that would be included in the archive from an existing collection of documents, (2) digitizing the archival materials, and (3) posting the digitized documents to the existing Web site. **Results:** Documents from the inaugural meetings in December 1985 through to the present were assessed for inclusion. Approximately 185 separate documents were cho-

sen based on the inclusion criteria developed by the executive. These were forwarded to Emmett Digital Solutions Inc., where they were digitized into PDF files and named according to the document type and year of origin. OHLA's webmaster organized the documents into natural groupings and posted these to the Web site using HTML coding. The archives were made available on the Web site in April 2008. **Discussion:** It is expected that the impact of this new accessible archive for the association will be that similar library associations may model this method of making materials accessible. Making the organizational memory available helps current projects flow more smoothly and contributes to the field of health librarianship by broadening the shared knowledge base.