

## Current research

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MacDonald J, Bath P, Booth A. Healthcare services managers: what information do they need and use? *Evidence Based Library and Information Practice*. 2008;3(3):18–38. Available from: <http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/1479/3327>.

**Objectives:** The purpose of this research project was to gain insight into the information behaviour of healthcare services managers as they use information while engaged in decision-making unrelated to individual patient care. **Methods:** This small-scale, exploratory, multiple case study used the critical incident technique in 19 semi-structured interviews. Responses were analyzed using “Framework,” a matrix-based content analysis system. **Results:** This paper presents findings related to the internal information that healthcare services managers need and use. Their decisions are influenced by a wide variety of factors. They must often make decisions without all of the information they would prefer to have. Internal information and practical experience set the context for new research-based information, so they are generally considered first. **Conclusions:** Healthcare services managers support decisions with both facts and value-based information. These results may inform both delivery of health library services and strategic health information management planning. They may also support librarians who extend their skills beyond managing library collections and teaching published information retrieval skills, to managing internal and external information, teaching information literacy, and supporting information sharing.

Rankin J, Grefsheim S, Canto C. The emerging informationist specialty: a systematic review of the literature. *J Med Libr Assoc*. 2008 Jul;96(3):194–206. Available from: <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=2479064&blobtype=pdf>.

**Purpose:** A systematic literature review was conducted to synthesize what is known about informationists, highlight program models, and suggest areas for future research. **Methods:** Articles retrieved through database searching were reviewed for relevance. Informationist case reports were identified and coded according to an attributes checklist. Data from other retained publications were synthesized under broad themes. The few research studies found were reviewed for level of evidence. **Results:** Of 113 papers reviewed, the study identified seven classic and eight emerging informationist programs. Two major models are apparent, clinical and research, with priorities differing according to program maturity. The literature synthesis also brought to-

gether current thinking about informationist qualifications; practice roles; setting characteristics; education and training; organizational, programmatic, and service provider success factors; and challenges and barriers. Program outcomes to date are reported, and future research topics suggested. Specific findings will assist informationist program planners. **Conclusions:** While the informationist concept remains in the early adopter stage, it appears that domain knowledge, continuous learning, and embedding (working in context) are essential to success. The need for librarians to transition to greater specialization and libraries to emphasize customized service was underscored. A research agenda focused on information management, dissemination, behaviors, and economics is proposed.

Hendrix D, Hasman L. A survey of collection development for United States Medical Licensing Examination (USMLE) and National Board Dental Examination (NBDE) preparation material. *J Med Libr Assoc*. 2008 Jul;96(3):207–16. Available from: <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=2479044&blobtype=pdf>.

**Objective:** The research sought to ascertain medical and dental libraries’ collection development policies, evaluation methods, purchase decisions, and issues that relate to print and electronic United States Medical Licensing Examination (USMLE) and National Board Dental Examination (NBDE) preparation materials. **Methods:** The investigators surveyed librarians supporting American Association of Medical Colleges (AAMC)-accredited medical schools ( $n = 58/125$ ) on the USMLE and librarians supporting American Dental Association (ADA)-accredited dental schools ( $n = 23/56$ ) on the NBDE. The investigators analyzed the data by cross-tabulating and filtering the results using EFM Continuum Web survey software. Investigators also surveyed print and electronic USMLE and NBDE preparation materials from 2004 to 2007 to determine the number of publications and existence of reviews. **Results:** A majority of responding AAMC libraries (62%,  $n = 58$ ) provide at least one electronic or online USMLE preparation resource and buy an average of 11.6 print USMLE titles annually. Due to a paucity of NBDE print and electronic resources, ADA libraries bought significantly fewer print resources, and only one subscribed to an electronic resource. The most often reported evaluation methods for both populations were feedback from medical or dental students, feedback from medical or dental faculty, and online trials. Some AAMC (10%,  $n = 58$ ) and ADA libraries (39%,  $n = 23$ ) libraries reported that no evalu-

ation of these materials occurred at their libraries. **Conclusions:** From 2004 to 2007, publishers produced 45 USMLE preparation resources (total  $n = 546$ ) to every 1 NBDE preparation resource (total  $n = 12$ ). Users' needs, institutional missions and goals, financial status, and official collection policies most often underlie decisions to collect or not collect examination preparation materials. Evaluating the quality of examination preparation materials can be problematic due to lack of published reviews, lack of usability testing by libraries, and librarians' and library users' unfamiliarity with the actual content of examinations. Libraries must integrate faculty and students into the purchase process to make sure examination preparation resources of the highest quality are purchased.

Schimming LM. Measuring medical student preference: a comparison of classroom versus online instruction for teaching PubMed. *J Med Libr Assoc.* 2008 Jul;96(3):217–22. Available from: <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=2479068&blobtype=pdf>.

**Objective:** The research analyzed evaluation data to assess medical student satisfaction with the learning experience when required PubMed training is offered entirely online. **Methods:** A retrospective study analyzed skills assessment scores and student feedback forms from 455 first-year medical students who completed PubMed training either through classroom sessions or an online tutorial. The class of 2006 ( $n = 99$ ) attended traditional librarian-led sessions in a computer classroom. The classes of 2007 ( $n = 120$ ), 2008 ( $n = 121$ ), and 2009 ( $n = 115$ ) completed the training entirely online through a self-paced tutorial. PubMed skills assessment scores and student feedback about the training were compared for all groups. **Results:** As evidenced by open-ended comments about the training, students who took the online tutorial were equally or more satisfied with the learning experience than students who attended classroom sessions, with the classes of 2008 and 2009 reporting greater satisfaction ( $P < 0.001$ ) than the other two groups. The mean score on the PubMed skills assessment (91%) was the same for all groups of students. **Conclusions:** Student satisfaction improved and PubMed assessment scores did not change when instruction was offered online to first-year medical students. Comments from the students who received online training suggest that the increased control and individual engagement with the Web-based content led to their satisfaction with the online tutorial.

Rossall H, Boyes C, Montacute K, Doherty P. Developing research capacity in health librarians: a review of the evidence. *Health Info Libr J.* 2008 Sep;25(3):159–74. PMID 18796077.

This critical review considers current issues of research capacity development in UK health care and the role of health librarianship in this context, placing particular focus on the use of research networks. There is a growing literature base recognizing the need for librarians to engage more with research. The concepts of evidence-based health librarianship and clinical librarianship are discussed in the context of research and examples of existing good practice are reviewed. It is suggested that librarians should build on this

through better consideration of evidence-based methodologies, hierarchies of evidence, improvement of research skills, and a collective endeavour to identify research priorities. The importance research capacity is being given in the Department of Health R&D strategy and the use of networks in achieving this is discussed, and it is suggested that the utilization of networks and collaboration should be undertaken and explored in more depth in developing research capacity in health librarianship. Areas where librarians currently engage with research and use networks and collaborative practices to contribute to the research base are reviewed. A coordinated approach to developing research capacity is called for, and it is argued that the use of networks would be beneficial in assisting the process.

Voisin CE, de la Varre C, Whitener L, Gartlehner G. Strategies in assessing the need for updating evidence-based guidelines for six clinical topics: an exploration of two search methodologies. *Health Info Libr J.* 2008 Sep;25(3):198–207. PMID 18796080.

**Background:** Because of the expense of updating practice guidelines, recent attention has focused on approaches that can reliably assess any updating required. Shekelle et al. (*Journal of the American Medical Association*, 2001;286:1461–7) proposed using limited literature searches with expert involvement to reduce resources used in assessing whether a guideline needs updating. **Objectives:** This study compared Shekelle's method and the traditional systematic review method regarding comprehensiveness and effort. **Methods:** Two research teams translated critical key questions on screening test treatments and outcomes to Medical Subjects Headings (MeSH) and search strategies. They refined Shekelle's method over three iterations, seeking greater efficiency. Using both methods independently, teams assessed the need to update six topics from the *1996 Guide to Clinical Preventive Services* (US Preventive Services Task Force). Outcomes included completeness of study identification, importance of missed studies, and effort involved. **Results:** The revised review approach produced fewer citations than the traditional approach and saved time, identifying fewer eligible studies than the traditional approach. None of the studies missed was rated important by the experts consulted. **Conclusions:** The revised review approach provides an acceptable method for judging whether a guideline requires updating. Librarians were an integral part of the research process that streamlined the searches.

Bertulis R, Cheeseborough J. The Royal College of Nursing's information needs survey of nurses and health professionals. *Health Info Libr J.* 2008 Sep;25(3):186–97. PMID 18796079.

**Aims:** To find out about the nursing community's needs in the following areas: information or knowledge to improve practice in the clinical area; information to support lifelong learning and formal study. **Methods:** A questionnaire was circulated in summer 2004 containing questions on types of information source used for particular types of problem or question; specific sources used; ease of access to various information sources including computers and the Internet, and local health library; and workplace culture and environment.

**Results:** A total of 1715 usable questionnaires were completed and returned. Significant numbers of the nursing community have currently no or limited access to computers. Nursing staff in the independent sector had less access to computers and the Internet than those working for the National Health Service (NHS). Workplace culture was as important as access to IT equipment. **Conclusions:** As a result of the survey, the Royal College of Nursing (RCN) is working with the NHS and the independent health sector to improve access and provide complementary services for the whole nursing community.

Marriott R. Let's stick together: collaborative purchasing of electronic journals in the National Health Service.

*Health Info Libr J.* 2008 Sep;25(3):218–24. PMID 18796082.

**Aim:** To describe the process and the lessons learned from the collaborative purchasing of electronic journals by National Health Service (NHS) libraries in the East Midlands, UK. **Results:** The background to a successful joint purchasing initiative is described, including the methodology for selecting titles and the formula for dividing the payment. Factors that have a bearing on successful collaboration are discussed, including use of a Framework Agreement, licensing conditions, and measuring impact. **Conclusion:** NHS librarians working together can leverage collective benefits for users through collaborative purchasing.