

Contributed Posters - Poster Session I

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Access to Health Information: Outreach Efforts to Ronald McDonald House Augusta

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Objective:	The library seeks to improve the use of reliable electronic health information to fill this information need for an under-served population in crisis. In 2014, a new and larger Ronald McDonald House (RMH) opened in Augusta across a shared parking lot of the Robert B, Greenblatt, M.D. Library. Currently, there are no health information resources available in the house. The house staff/volunteers have shared that they have received questions about health information but are advised not to give medical advice.
Methods:	A computer designated for accessing health information and a small selection of printed materials has been made available within the RMH. The library is in position to train the RMH house staff/volunteers on consumer health resources and how to evaluate reliable web resources. This will allow them to promote authoritative health resources for families/caregivers of children who are receiving medical treatment at the Children's Hospital of Georgia. A health information web page has been developed and is accessible through the RMH portal. This web page is also being used as a class outline for hands-on computer training sessions for RMH staff.
Results:	The results of the training within the past six months will be presented along with suggested improvements for the staff who are teaching caregivers how to access health information.
Conclusion:	Parents will do anything for their child, especially when they are sick. Often they turn to the internet searching for answers. The library recognized the potential to build a positive partnership with the community. Using our expertise to aid this under-served population will assist parents in finding authoritative and up-to-date information health information resources. This project has been funded in whole or in part with Federal funds from the National Library of Medicine, National Institutes of Health, Department of Health and Human Services, under Contract No. HHS-N-276-2011-00004-C with the University of Maryland Baltimore.

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Collaborating with the Department of Medicine to Assess Residents' Information-Seeking Skills

Author(s):	Kevin Bradford, M.L.S., Clinical Informationist, Woodruff Health Sciences Library, Emory University, Atlanta, Georgia 30012, kdbradf@emory.edu ; Amy Allison, M.L.S., AHIP, Associate Director, Woodruff Health Sciences Library, Emory University, Atlanta, Georgia 30012, amy.allison@emory.edu ; John K. Nemeth, Clinical Informationist, Woodruff Health Sciences Library, Emory University, Atlanta, Georgia 30012, jnemeth@emory.edu ; Lisa D. Travis, MS, EdS, AHIP-D, Clinical Informationist, Woodruff Health Sciences Library, Emory University, Atlanta, Georgia 30012, lisa.travis@emory.edu .
Introduction:	The American Council on Graduate Medical Education's (ACGME) Outcome Project identifies competencies that residents should demonstrate upon successful completion of an accredited program. The Practice Based Learning and Improvement competency includes skills for using "technology to optimize learning" and evaluating and using scientific evidence [1]—skills required for finding and selecting literature to answer clinical questions.
Background:	Emory University's Department of Medicine enrolls approximately 80 post-graduate residents each year. These enrollments include 50 categorical, research, and primary care residents in three-year tracks and 30 residents in the single year transitional and preliminary tracks. The instructors of the program's evidence-based medicine (EBM) module have been exploring how to evaluate residents' competencies in locating, evaluating, and applying published evidence for practice improvement. An emerging body of literature suggests that collaborations between librarians and medical educators results in an effective partnership in cross-disciplinary EBM instruction [2]. Reflecting this partnership framework, Clinical Informationists at Emory University's Woodruff Health Sciences Library teach within the EBM module. The goal of this instruction is to improve residents' skills at effectively and efficiently searching medical literature and selecting the highest quality and most relevant evidence to address clinical questions. Based on their experience assessing these skills for another post-graduate program in the school [3], the informationists proposed piloting a similar assessment within the Department of Medicine program.
Objectives:	Clinical Informationists collaborated with the Department of Medicine to assess medical resident skills in locating and selecting evidence-based information for patient care, and to provide residents and faculty with individual performance feedback and evaluative data.

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Collaborating with the Department of Medicine to Assess Residents' Information-Seeking Skills (continued)

Methods:

Informationists proposed an assessment instrument, based on the Fresno Test of Evidence-Based Medicine [4], to the Department of Medicine Residency Program's leaders. The aim of the test was to measure interns' skills at finding and selecting published evidence to address patient care (Appendix A). The Informationists collaborated with Faculty to develop appropriate test questions in an online format, and to administer the test in the residency program's course management system. The test included therapy, diagnosis, prognosis, and guideline questions. For each question type, residents were asked to indicate the search tool they used, their search strategy, selected article references, and article selection criteria (Appendix B). A scoring rubric rated residents' responses as excellent, acceptable, limited, or not evident (Appendix C). Residents received feedback based on their individual performance (Appendix D). Informationists and faculty collaborated to determine the level of acceptable performance and to develop criteria for remediation. Residents who earned a rating of limited or not-evident were referred to meet with an Informationist to review their performance and receive suggestions for improvement.

Results:

Eighty-one residents completed the pre- and post-assessments in 2014-2015; performance improved in the post-assessment scores for all question types and individual tasks. Interns showed the greatest increase in their performance of guidelines questions, with the tasks of reference selection and selection criteria returning the lowest post-assessment scores. In collaboration with Department of Medicine faculty, Informationists tailored remedial one-on-one sessions focusing on these two critical areas of search skills improvement. After a successful pilot, the program leaders elected to make the assessment a formal evaluation requirement for residency completion.

Conclusions:

Informationists can successfully collaborate with faculty, creating, marketing, and administering educational assessment instruments in evidence-based medicine.

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From confusion to community: designing a more creative (and fun!) library orientation

Author(s):	Krystal Bullers, Shimberg Health Sciences Library, University of South Florida, kbullers@health.usf.edu , 813-974-2990; Allison Howard, Shimberg Health Sciences Library, University of South Florida, amhoward@usf.edu , 813-974-4752; Kristen Sakmar, Shimberg Health Sciences Library, University of South Florida, kmorda@health.usf.edu , 813-396-9667; Randall Polo, Shimberg Health Sciences Library, University of South Florida, rpolo@usf.edu , 813-974-9965.
Purpose:	This poster describes a strategy for improving the library orientation assignment for new pharmacy students. The goal was to introduce students to the library, its resources, and staff in a way that increased knowledge retention, accuracy, self-reliance, and sense of community. Secondary goals were to decrease the disruption experienced in previous events and to make the experience fun.
Setting/ Participants:	First-year pharmacy students (PY1s) and library staff at an academic health sciences library.
Brief Description:	The pharmacy curriculum for PY1s includes a graded assignment about library facilities, resources, and staff that requires a library visit for successful completion. In the past, students converged on the library en masse which encouraged them to share answers (often incorrect) and generally resulted in confusion and misinformation. For the incoming class of 2019, the librarians collaborated on an adapted scavenger hunt design. Students began at different points and rotated through stations managed by staff, gathering accurate information and picking up clues needed to finish the assignment.
Results/ Outcome:	The structured approach produced an organized and efficient flow of students through the exercise and improved scores over previous years. The change from a library policy quiz to interactive, hands-on skills-based activities created a more engaging teaching experience. Students enjoyed the team-building aspects while learning useful library skills.
Evaluation Method:	The event was evaluated through observation of the process, student performance on the assignment, and conversations with participating staff and students.

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Two years in the life of an embedded librarian program at a school of nursing

Author(s):	Vicki Burchfield, MLIS, vburchfield@gru.edu, (706) 721-9742, Georgia Regents University.
Objectives:	To demonstrate usage patterns and activities of an embedded librarian at a college of nursing.
Methods:	Two years' worth of usage statistics collected by embedded librarians and the results of a campus-wide survey were examined. Interviews were conducted with librarians who had acted in the role of embedded librarian for the college of nursing since the inception of the university's embedded librarian program.
Results:	From June 13, 2013 through June 12, 2015, 521 reference transactions were recorded from the college of nursing. 276 (53%) of these transactions were initiated by students and 185 (36%) by faculty, with the remainder initiated by staff, senior administrators, librarians, and employees of the university's health system. Student-initiated transactions were primarily basic reference or one-on-one instruction sessions, while faculty-initiated transactions were mostly basic reference, literature search requests, or for scholarly support. Nursing students surveyed indicated working with an embedded librarian on classwork, literature searching, and scholarly support. Faculty surveyed indicated that they considered the embedded librarian to be an integral part of their group. Within the college of nursing, the librarian is part of the center for nursing research, and she regularly attends academic affairs meetings and information technology committee meetings at the school of nursing.
Conclusions:	Insight into the ways in which the embedded librarian is used most frequently can help current and future nursing librarians at the institution to better target services.

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From library liaison to co-instructor in 15 months: A first-year librarian's timeline of events

Author(s):	Jill Deaver, MA, MLIS, University of Alabama at Birmingham, Lister Hill Library of the Health Sciences, jilld@uab.edu, 205-934-2231.
Objective:	To demonstrate how one librarian made in-roads with a school of nursing to extend the role of library liaison to include teaching at the doctoral level.
Methods:	Detailed calendar events, along with notes taken from conversations during faculty office hours, conversations before and after featured lectures, and other events involving liaison activities, the librarian has put together a useful timeline of events demonstrating how one collaborative opportunity leads to another.
Results:	Given the relative little time it took to become an adjunct faculty member, other librarians will benefit from hearing what has worked for one library liaison.
Conclusions:	Librarians interested in evolving their roles in the schools they serve will gain knowledge and ideas to implement in their own practice.

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Color My World Healthy: Taking It to the Streets

Author(s):	Elaine Evans, ETSU Quillen College of Medicine Library, evanse@etsu.edu , 423-439-6254; Wendolin Elrod, B.S. Public Health/Nutrition, East Tennessee State University, elrodw@goldmail.etsu.edu , 423-930-0343; Suresh Ponnappa, Professor Emeritus, Department of Learning Resources, East Tennessee State University, PONNAPPA@mail.etsu.edu .
Objective:	In 2008, the medical library sought to discover how we could effectively get quality healthcare information to the “grass roots” areas of the community, and the underserved population in rural Appalachia. An award from NN/LM SEA made this project possible. Our nation has become more health aware, so how do we translate what we hear on the news or at the doctor’s office into personal knowledge that encourages healthy lifestyles? This question affords opportunities and mentorship for librarians and health sciences students to work with the community to deliver health education to seniors, kids, teens, and any of the underserved.
Method:	“Color My World Healthy” is a consumer health program designed to give, the ETSU Health Sciences community opportunities to teach multi-generationally through classes and programs focused on health literacy and activities for the underserved.
Results:	Since the initiation of “Color My World Healthy,” we have shown members of the community how healthy eating, nutrition, exercise, awareness of family medical history, and knowledge of medical terminology can improve their quality of life and enable them to take an active role in their healthcare. In 2007, 40.9% of Tennessee’s youth were classified as overweight or obese, and in some Tennessee counties that rate was as high as 52%. With the installation of the Color My World Healthy library at Carver and the inclusion of Health & Nutrition classes as well as the piloted National Saja Foundations “Wise Kids” health education program, we saw an increased interest in healthy eating and during the school year of 2011 that average had dropped to 38%. During the 2010 – 11 school year the first 6 students ages 8-11 graduated from “Meet the Doctor.” Our graduates received their White Tee Shirt, diploma, and stethoscope for successfully completing the class. “Meet the Doctor” went on to become the most popular of the 21 “Color My World Healthy” programs with more than 125 students taking part.
Conclusions:	These services empower the users with medical information, better understanding of major health issues, and direction for the usage of prescribed medications. This collaborative effort between the library, the health sciences students, and the Johnson City, TN government has resulted in a more informed and healthy community with the potential of having a far reaching global effect.

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Librarians Join Forces! Collaborating with Faculty and Instructional Designers to Create a Rubric for Students on How to Use Evidence-Based Medicine Resources

Author(s):	Shalu Gillum; Michael Garner; Deedra Walton; Pamela Herring; Nadine Dexter. Harriet F Ginsburg Health Sciences Library, University of Central Florida College of Medicine.
Objective:	To collaborate with Practice of Medicine module faculty to introduce first year medical students to the use of evidence-based medicine resources when answering clinical questions developed during patient encounters. Students in the module were not using evidence-based resources to answer clinical questions in their Patient Encounter Logs (PELs), and instead were relying on internet search results, notes from classes, or consults with preceptors.
Methods:	After each preceptor session, students completed a PEL for two patients using LiveText e-portfolio. For each patient, students identified a patient-related clinical question to investigate. Students had to document the question, write a brief answer, and cite their resources. Six librarians were assigned twenty students each. Librarians reviewed the assignment and gave students feedback on the chosen resources. Feedback was structured by a rubric, created by librarians in collaboration with module directors, module coordinator, and an instructional designer. The rubric allowed librarians to give consistent and constructive feedback, determine how much knowledge students had of library resources, determine students' resource preferences, and whether they correctly cited their resources.
Results:	Librarians need a face to face meeting with all students prior to students completing PELs. Directions on the original assignment needed to be clearer. Many students did not know how to draft a clinical question, the correct evidence-based resources to use, or how to cite resources. The rubric needs to be reexamined and tailored to include the abnormal situations received. The rubric was necessary in order for the librarians to provide consistent feedback to students.
Conclusions:	Librarians' collaboration with Practice of Medicine faculty resulted in the development of a guide for students to determine which types of evidence-based library resources to use when answering clinical questions. This ultimately led to students having better answers to their clinical questions, more use of evidence-based resources, and familiarity with library resources.

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Collaborating with colleagues: Evaluating information professionals' experiences and satisfaction with implementing a Discovery System

Author(s):	Marilyn G. Teolis, M.L.S., AHIP Distinguished, Information Services Librarian, Saint Thomas Midtown Hospital, Nashville, TN, marilyn.teolis@sth.org , (615) 284-5373; Mary Virginia Taylor, M.L.S., Chief Librarian, Overton Brooks VA Medical Center, Shreveport, LA, MaryVirginia.Taylor1@va.gov , (318) 990-5181; Jan Haley, M.L.S, Information Services Librarian, Saint Thomas West Hospital, Nashville, TN, jhaley@sth.org , (615) 222-3051.
Research Methods:	A questionnaire using Survey Monkey was employed. Written approval of the Institutional Review Board's exemption is pending.
Objectives:	To evaluate the attitudes and experiences of information professionals concerning the implementation of a discovery service.
Methods:	Information professionals were surveyed regarding their experiences with purchasing, implementing, and maintaining a Discovery Service. Participants were asked to rank the value of the various features of discovery products, rate their satisfaction with the tool, and share the lessons learned about their experiences.
Results:	Of the hundred and ninety two information professionals who responded to the survey, 51% (98) planned to acquire or had purchased a Discovery Service while 49% had no purchase plans. Features such as percentage of library resources owned and faceted navigation were ranked as very important. Although 77% of respondents were satisfied with their service, only 48% believed a Discovery tool met their expectations as a single box gateway.
Conclusions:	Our research provides our colleagues with valuable insights regarding Discovery Services that will assist them with their decision making and workflow processes when acquiring and implementing a Discovery Service. We encourage others, especially hospital librarians, to conduct further research related to Discovery Services and their products.

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Hospital Librarians Supporting GME Programs and Collaborating with Academic Libraries

- Author(s):** The Hospital Librarians Program Advisory Committee (HLPAC) of the Southeastern/Atlantic Region (SE/A), National Network of Libraries of Medicine (NN/LM): Mary Wallace Berry, Manager, Library Services, Novant Health Presbyterian Medical Center, Charlotte, NC (mwberry@novanthealth.org); Jan Haley, Information Services Librarian, Library & Information Services, Julius Jacobs Health Sciences Library, Saint Thomas West, Nashville, TN (jhaley@sth.org); Dionne Lyne-Rowan, Manager, Medical Library Services, Columbus Regional Health, Columbus, GA (Dionne.Lyne-Rowan@columbusregional.com); Mollie Titus, Librarian, Medical Library & Community Health Information Center, Self Regional Healthcare, Greenwood, SC (mtitus2@selfregional.org); PJ Grier, ex-officio member, Outreach/Access Coordinator, NN/LM SE/A, Baltimore, MD (pgrier@hshsl.umaryland.edu).
- Objective:** To determine the extent to which hospital librarians support Graduate Medical Education (GME) programs (specifically MD and DO) and to discover if and how hospital libraries collaborate with the affiliated academic libraries of these programs.
- Methods:** 10-question pilot survey
- Population:** Hospital librarians in Florida and North Carolina, with the possibility of extending the survey to other hospital librarians within the Southeastern/Atlantic Region of the National Network of Libraries of Medicine.
- Results:** Surveys were sent to 69 hospital libraries within DOCLINE® and a total of 34 responses were received. Twenty responders indicated they support a GME program; of these, 7 do collaborate with their residents' academic library or libraries. Librarians were asked about the services they provide to medical residents; Clinical Rounding received the least number of responses, while Interlibrary Loan/Document Delivery, Research Assistance for Patient Care and Scholarly Activity, and Bibliographic Instruction received the highest number of responses. On average, most responders spend 0-10 hours per week working with medical residents. The results of the survey will be used to support the SE/A's Hospital Librarians Toolkit – a list of ideas, resources, and connections for hospital librarians – as well as other Regional Medical Library (RML) programs that could benefit from these findings.
- Conclusions:** While hospital librarians spend time and resources on supporting resident physicians, they less frequently collaborate with the academic libraries of Graduate Medical Education programs. Supporting resident physicians and coordinating with academic libraries increases the visibility of the hospital library and highlights the important role the hospital librarian plays in reinforcing the education of healthcare providers; however, this support takes time and resources, and collaboration between libraries is not always feasible.

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Academic Department Administrative Personnel Collaborating, Communicating, and Connecting with Library Stakeholders

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Objectives: Since the Department Associates for Library Research (DALR) program's inception in 2011, the Charlotte Maguire Medical Library has collaborated with department administrative personnel in the College of Medicine at Florida State University to facilitate point-of-need research support for faculty in basic literature searching, citation management, and information access. DALRs have effectively addressed faculty researcher needs by providing a knowledge source for library services within the home department, and by connecting faculty to the library for advanced, long-term research assistance. Over time, the program has helped clarify the roles of librarians, administrative staff, and faculty within the research process. This poster describes the DALR program's next phase: developing communication strategies among stakeholders; providing structured training for DALRs on current and future medical library resources; marketing and outreach to department researchers; identifying areas for improvement; and planning for program expansion.

Methods: The DALR program stakeholders include the administrators (the library), participants (administrative personnel), and customers (faculty researchers). The authors conducted a series of free-response interviews with program participants and customers to collect feedback on effectiveness of added program initiatives, as well as administered a survey to determine areas of improvement.

Results: Data collection is ongoing and will be shared at the conference presentation.

Conclusion: We expect the results to reflect that the next phase of the DALR Program continues to meet stakeholder needs and addresses the intended outcomes of customer satisfaction and enhanced library use. The DALR Program will continue to evolve to deliver high-quality services to stakeholders. Future program initiatives will measure the DALR program's impact on scholarly output at the FSU College of Medicine.

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Collaboration to Promote Hospital Librarians

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Author(s): Holly S. Kimborowicz, M.L.S., AHIP, Health Sciences Librarian, Lake Health, Resource Center/Library, 7590 Auburn Road, Concord Twp., OH 44077, library@lakehealth.org, 440-639-4387; Cathy Murch, M.L.I.S., AHIP, Health Informatics/Systems Librarian, Lake Health, Resource Center/Library, 7590 Auburn Road, Concord Twp., OH 44077, library@lakehealth.org, 440-639-4387.

Objectives: Objective: To demonstrate how interdepartmental collaboration supports hospital librarians to provide important customer services and programs, increasing the visibility of the librarians and promoting the hospital library.

Brief Description: The Lake Health Resource Center/Library, staffed by 1.5 librarians, serves over 2,850 staff and 575 physicians, students, patients, families and community residents with two acute care community hospitals with a combined total of 393 beds. The librarians constantly look for opportunities to work with other departments and team members to provide important customer services and programs. Many of these programs would not be possible without this assistance for a small hospital library staff in two hospitals. Some collaborative efforts include the interactive inpatient television system, patient/family laptop lending, electronic medical record, patient satisfaction, Tumor Board conferences, and Lean/rapid improvement events. Departments collaborating with the library include Information Technologies, Maintenance, Nursing, Security, Wellness, Tumor Registry, and Marketing. This poster delineates many of these services and programs, and the librarians' experiences and outcomes, including benefits in terms of increased visibility of the librarians within the institution.

Results: Collaboration with numerous hospital departments has provided the librarians with many opportunities to develop new roles in the hospital and work closely with many team members they would not have encountered in a more traditional library role. For example, the CIO recruited one of the librarians to be the project manager for implementation and ongoing system management of the Interactive TV and Patient Education system. This opportunity recognized the librarian's education and being technologically savvy. The project included collaboration with IT, Marketing, Nursing, Medical Records, Medical Staff, Spanish translator, Maintenance, Nutrition Services, Patient Education and Clinical Informatics. This project led to the librarian's involvement with the EHR Implementation Team, Wayfinding System project management, investigating streaming video/internet, piloting Chromecast, evaluating new patient education vendors and evaluating an informed consent vendor. A very important outcome was re-establishing full-time 40 hours/week for the librarian. This is one example of the benefits of interdepartmental collaboration. Other specific examples are depicted on this poster.

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Collaboration to Promote Hospital Librarians (continued)

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Conclusion:

Health Science Librarians, especially in smaller hospital libraries, must continuously prove their value to hospital administrators, medical staff, department directors, hospital team members, and even patients. Working with a broad range of clients, collaborating with many departments, being proactive and visible are fundamental strategies promote the skills of hospital librarians in the continuously evolving health care environment.

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Communicating with Professional Development: Factors Influencing AHIP Participation Among the Medical Library Community

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Objectives: To investigate the motivations and reasons behind health science librarians' participation or non-participation in the Medical Library Association's (MLA) Academy of Health Information Professionals (AHIP).

Setting: AHIP stands as one of the only credentialing bodies offered to health science librarians. However, many librarians choose not to participate. In 2004, Baker LM, et. al. surveyed health science librarians for their participation and attitudes towards the Academy. With over 10 years having passed since their results were published, Mercer Medical School librarians hope to discover if there are any changes to the AHIP dynamic by resurveying health science librarians with similar questions.

Methods: With IRB approval, during the summer of 2015 medical librarians at the Mercer Medical Library in Macon, GA sent out a questionnaire containing approximately twelve questions, both closed and open-ended, to health science librarians via the MedLib-L listserv, regional medical library listservs, and other relevant professional listservs. The questions inquired whether librarians participate as part of the academy, as well as their attitudes towards the academy, with special attention placed on non-academy members. Certain questions will reflect suspected reasons for nonparticipation, including: cost, lack of AHIP being a job or professional requirement, cumbersome application process, time-constraints, lack of value, participation in other organizations, etc.

Results: Librarians analyzed the results and compared their findings to Baker's 2004 survey.

Conclusions: Results of the 2015 survey bring understanding to health science librarians' reasons for and against participating in AHIP. They also illustrate the other professional organizations that non-Academy members participate in.

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Collaborating for a mobile environment: A study on the impact of mobile ICTs in health science libraries

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Author(s): Deborah Taylor, Assistant Professor, Acquisitions (dmtaylor@uthsc.edu), University of Tennessee Health Sciences Center Library, Memphis, TN, (901) 448-5635.

Objective: To examine the impact of mobile ICT use in ubiquitous health science libraries

Method: Case study driven by research questions – How has the nature of ubiquitous health sciences libraries evolved? How have ICT and mobile technologies impacted health sciences libraries? A qualitative literature review on the use of mobile information and communication technologies (ICTs) in ubiquitous health science libraries (HSL) was examined to explore its impact. The methodology for selecting articles was approached by searching specific terms using one or more of the following databases: Communication and Mass Media (CMM), EBSCO, Web of Science, and Library Literature and Information Science Fulltext (LLISF). Several searches were conducted to generate well over 60 articles for this review.

Results: Literature implied several areas for future research: redefining e-learning, adapting to continued ICT growth, providing essential librarian training and development, transforming library landscapes, and adjusting library websites to accommodate and support the use of mobile technologies.

Conclusion: Literature disclosed a gap in scholarly research of mobile ICT use in ubiquitous health sciences libraries. Subsequently, additional preparation and training for librarians in how to incorporate innovative e-learning methods in mobile ICT instruction are also needed. Libraries, especially HSL, play a major role in helping aspiring health science professionals gain access to the plethora of digital resources made available through library resources. As mobile technologies continue to evolve, libraries are required to redefine its services. Additionally, librarians must also be knowledgeable and skilled in the use of mobile technology. Therefore, as library landscapes transform to make way for mobile ICT's its survival will rely on its ability to adapt to new and innovative technologies to meet the informational needs of its clients.

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"Continuing a Legacy: DOCS and Librarians Collaborating to Deliver Quality Health Care and Consumer Health Information to Medically Underserved Communities."

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Background: In 2008, Medical Librarians received an Express Outreach Project Award from the National Network of Libraries of Medicine/SE/A region to partner with the Department of Community Service (DOCS) program and public libraries. DOCS enlists the participation of medical students and physicians to provide quality healthcare to underserved populations through eight (8) community Health Fairs at 10 unserved communities. These Health Fairs offer medical students the opportunity to gain practical experience and educate communities on the importance of health screenings. In 2009, an Express Outreach Follow-up Award was received so that Librarians could continue participation in the health fairs for an additional year. In 2011, the library lost its outreach librarian position and its award funding.

Objective: To continue providing medically underserved consumers in a large multiracial, multilingual, tri-county area with trustworthy health information from resources such as MedlinePlus and MedlinePlus en español, in spite of the loss of funding and a dedicated outreach librarian.

Methods: Medical Librarians reproduced free MedlinePlus brochures and promotional materials in English, Spanish, Haitian Creole, and French, which were distributed to health fair attendees. Attendees were also shown MedlinePlus on iPads and given addresses of public libraries where Internet access is available.

Results: Participated in all but one DOCS Health Fairs from 2011-2015; introduced a source of reliable health information to more than 2,000 attendees; conducted train-the-trainer sessions for DOCS volunteers, public librarians, and more than 30 Health Fair educational vendor participants.

Conclusion: Although funding to support Librarian participation in this project ended after 2010, and with materials now limited to Library-printed MedlinePlus brochures, Librarians are convinced that their continued Health Fair participation is an invaluable service for underserved individuals whose only medical care may be received during the annual physicals at the DOCS Health Fairs.

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One Stop Shopping: Ask-A-Librarian Technology in the Electronic Medical Record

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Objective: This poster illustrates how the librarians added an “Ask a Librarian” button inside the hospital’s electronic medical record (EMR). The primary objective was to increase requests from the medical center’s healthcare providers for medical information. The secondary objective was to embed the library further in the EMR. The physicians and nurses “live” in the EMR and the librarians wanted the electronic library collection of medical journals, books, and databases available and easily accessible to this user group.

Methods: In 2008, the library’s electronic resources were embedded inside the EMR; however, there was not an easy way for the medical staff to contact the library with reference questions. Since the librarians have established a good rapport with the hospital’s Information Systems department, they asked if an “Ask-A-Librarian” button could be added in a prominent spot within the EMR. In April of 2014, the goal of adding an “Ask-A-Librarian” button to the EMR was achieved. Since then, multiple marketing endeavors have taken place to publicize this resource.

Results: Adding the “Ask-A-Librarian” button in EPIC has resulted in a 33% increase in requests to the library.

Conclusions: Placing the “Ask-A-Librarian” button in EPIC has made the users appreciative and happy. A 3rd year resident spoke very highly of the endeavor: “The ‘Ask-A-Librarian’ button is a great resource for clinicians. I believe this should be the gold standard in the age of EMRs.”

Contributed Posters - Poster Session I

Friday, October 23rd, 2015

2:00 PM – 3:30 PM

Salon D

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Expanding service line without expanding square footage

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Objective: To support our organization's vision of working to improve the health of the communities we serve, we expanded our service line to include consumer health resources. Creative solutions were put in place to meet the challenges presented by a limited budget and no new physical space. To measure the impact, usage data for one such solution, the Awareness Wall, is reviewed.

Methods: The Awareness Wall is used to distribute consumer health information to patients and hospital visitors. It consists of eight vertical racks that hold print copyright-cleared information on a variety of health related topics. Topics are changed monthly, and are selected based on the top DRGs of the facility, the National Health Observances calendar and/or common health and safety issues. They are available in English, Spanish and when possible, Creole. Each rack includes a highly visible, relevant graphic cover sheet. Information sources are government websites and licensed content. Data measured include the number of handouts taken per year since the Awareness Wall was launched in FY 2013.

Results: In 2013, patrons took 183 handouts. This increased by 65% to 302 in 2014 and we expect to see an increase of an additional of 15% in 2015. According to staff, unsolicited patron feedback has been positive, and most commonly centers around: appreciation for finding information on a given topic, appreciation that the information is available in Spanish, and surprise/appreciation that this service is available. While the number of handouts taken per topic was not directly measured, we noticed a spike in usage of just over 200% in October, 2014. According to staff, that coincides with increased patron interest in that month's breast cancer awareness topic.

Conclusion: The Awareness Wall has been well received by library visitors. Given the low cost of the program and the benefit received, we plan to continue it. Areas of further study are which topics are most popular, how changes to signage and location impacts usage, and how the Awareness Wall drives usage of other consumer health information services.