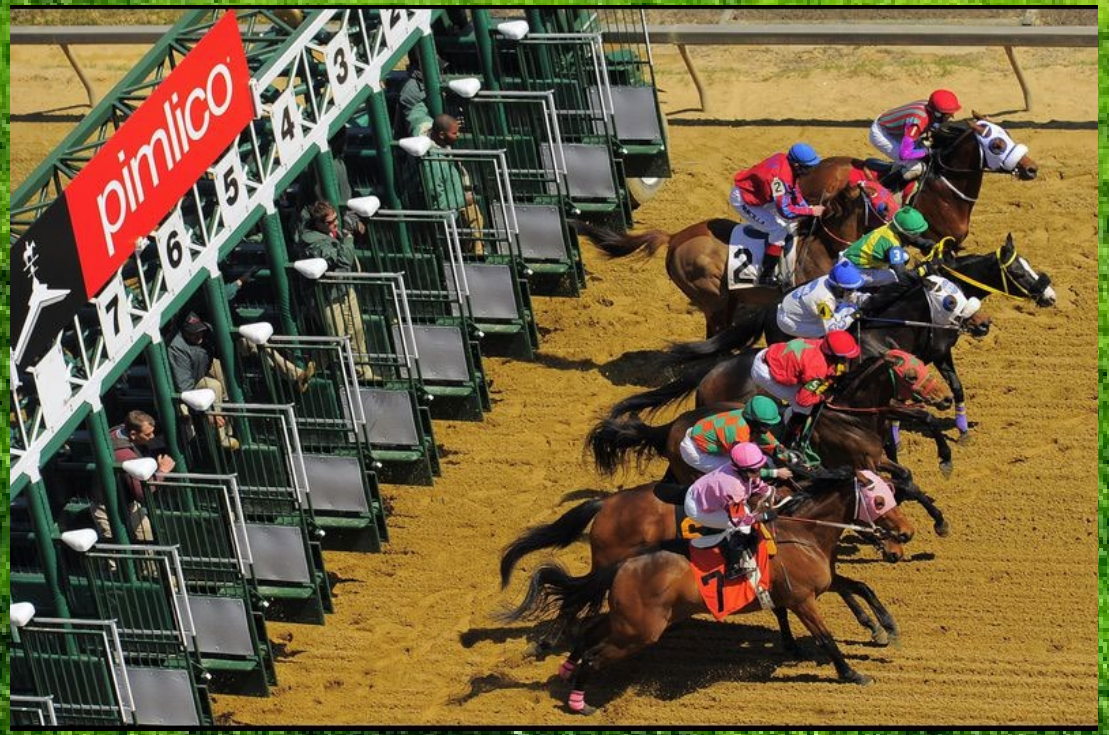
Out of the Gate



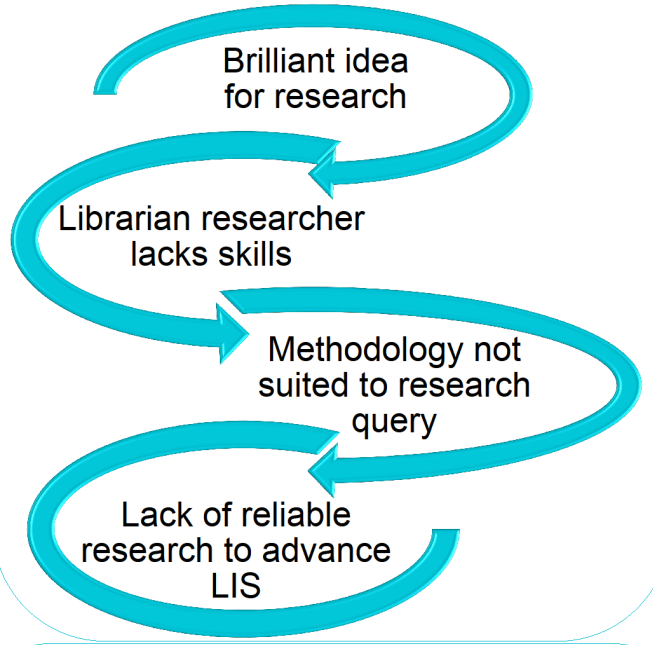
searching the literature
+ developing instrument
+ IRB

Systematic, Interactive Teamwork in the Development of a Delphi Study: Advancing Knowledge through an Underutilized Methodology in Library & Information Science

Authored By:
Stacy Posillico, MLS, JD,
Senior Librarian for the
Eastern Region Hospitals
of Northwell Health

Northwell Health™

BACKGROUND



NOTES

❖References are available upon request from the author.

❖A sincere thank you to Debra Rand, Mark MacEachern, Jodi Philbrick, and all the RTI Faculty for their support and guidance with this project, and to Saori Wendy Herman and Jaclyn Vialet for joining me on this adventure.

Using the **Delphi Research** Methodology, the right **team** can develop **evidence-based research** to advance **Library** and **Information Science policy, practice** and **procedures.**

Images by Gerd Altmann from Pixabay.

WHAT IS THE DELPHI METHOD AND WHY USE IT?

AN IDEA NOT EASILY STUDIED:
The Delphi Method is used to develop predictions and find answers for the best practices, policies and procedures.

SURVEY OF EXPERTS UNTIL CONSENSUS IS REACHED:
1) Delphi researchers select a panel of experts; 2) Survey questions are sent to each expert on the panel over two to five rounds; 3) Controlled feedback is provided in between rounds until consensus is reached.

COMPARE TO SURVEYS & FOCUS GROUPS:
This research type generates consensus and allows all opinions to be heard.

TEAMWORK & TIME

The right TEAM is critical to success

Plan for the TIME to meet your goals

OUTCOMES

SUCCESS: With the right team and time, we developed a research protocol for a Delphi Study to be presented at MLA '21.

CHALLENGE: I learned that I cannot become an expert by reading about a topic. Skills are only truly gained by doing the work.

Nurses, Empathy, and Graphic Medicine: a recipe for success?

Melanie E. Sorsby, MLIS

Providence St. Joseph Health

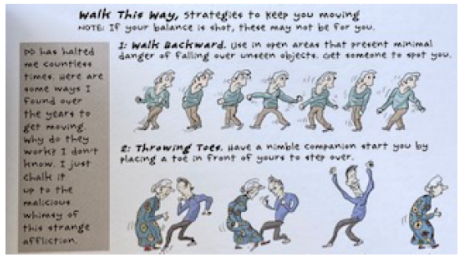
Background

Emergency Department (ED) nurses have a higher rate of burnout than other specialties. Researchers have discovered that "work factors" and "individual factors" both affect the rate of burnout. Swider and Zimmerman (2010) discovered a correlation between personality traits and burnout level. Studies have found both a negative and a positive association between empathy and burnout. Now more than ever, as we find ourselves coming through a pandemic, we must do everything we can to help our nurses. Evidence shows that increasing empathy can help with burnout and improve the quality of healthcare. There are many studies that show empathy can be improved in medical students and physicians when reading graphic medicine; however, there are few studies to see if the same approach would be effective in ED nurses.

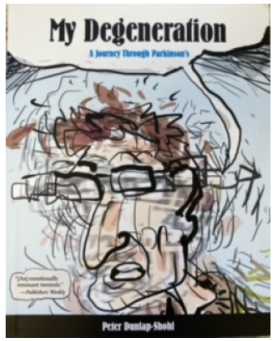
NB – The data collection for this study has not started yet.

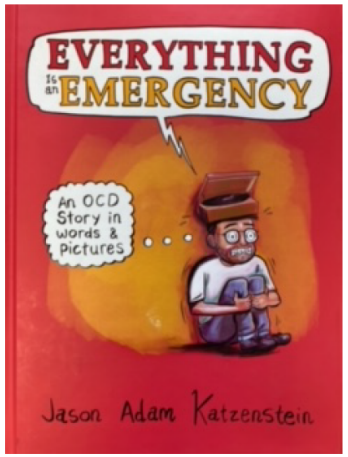
Purpose

The purpose of this study is to determine if participation in a monthly book club, reading one book per month for three months increases empathy scores using the Interpersonal Reactivity Index (IRI) and as reported in focus groups.



My Degeneration, pg. 35, by Peter Dunlap-Shoal





Methods

- Mixed Methods Study
- Convenience sample/ED RNs (pedi & adult)
- Preferably 30 RNs will be recruited to read 3 graphic medicine books and participate in focus groups and pre and post empathy tests. If possible, we will have also recruited 30 RNs for a comparison group
- Interpersonal Reactivity Index (IRI) shown to have Reliability and Validity
- This study will be of interest to both the library and nursing communities due to the combination of important concepts to each specialty, library outreach and burnout

Discussion/ Implications

- Graphic Medicine has become very popular recently, and especially using the graphic memoir to portray the patients experience of their disease granting insight and a chance for empathy in nurses.

Results

- We hope to show that reading Graphic Medicine can improve empathy in ED RNs
- With so much attention on burnout in nurses recently, I hope this study could be a step in the right direction

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UNIVERSITY of HOUSTON
HEALTH SCIENCES LIBRARY

Listening to *Voces*: Exploring Oral Histories to Identify Health Literacy Gaps in the Latinx Community

Ana Corral, MLIS, Health Sciences Library

BACKGROUND

Low health literacy and access to reliable health information serve as barriers to good health, both of which have been brought into stark relief during the COVID-19 pandemic. Health literacy skills in the United States are assessed using questionnaires or measurement tools supported by the Agency for Healthcare Research and Quality (AHRQ). However, these metrics are dependent on reading skills and an understanding of English-language medical terms, an overreliance which ignores the sociolinguistic factors and nuances that affect health literacy skills of communities that have been historically marginalized; in this case, the Latinx community.

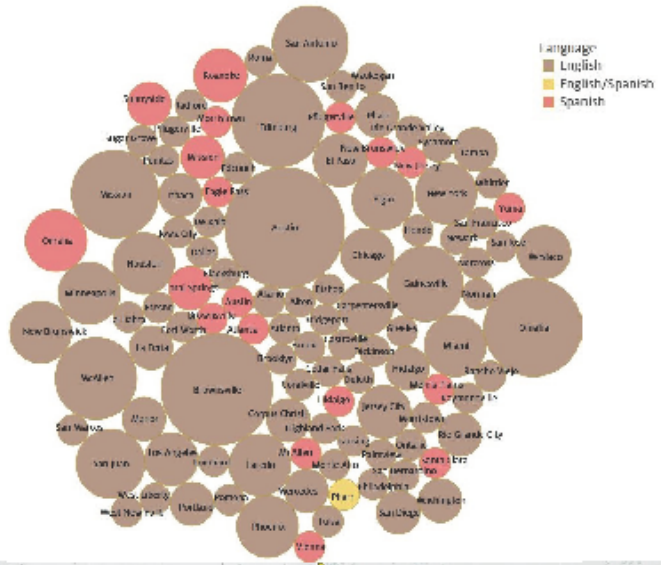
METHODS

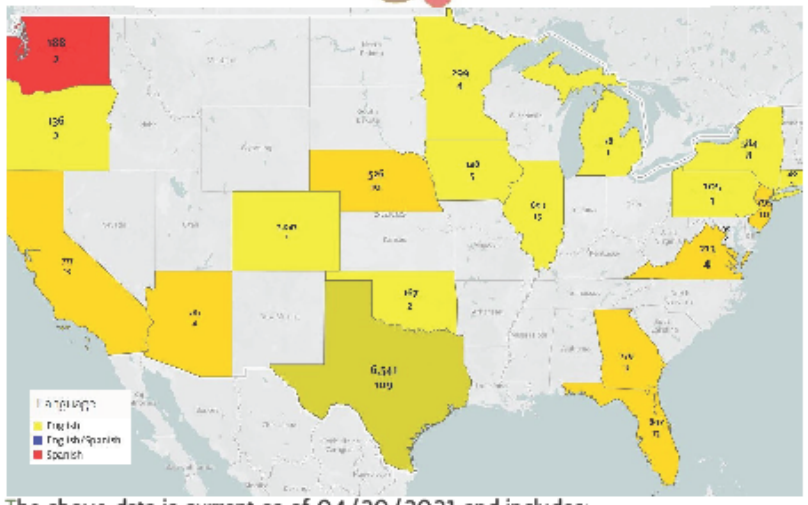
This project will reuse existing oral history data to explore the intersection of health literacy, health information access, and language in the U.S. Latinx community during the COVID-19 pandemic. Employing a social ecological model of health information behavior, combined with critical librarianship theory, and the concept of Nepantla, I will analyze data from the *Voces of a Pandemic* oral history project from the Voces Oral History Center, University of Texas at Austin. Purposive sampling with be conducted from the current data sample of 252 English- and Spanish-language oral history interviews to address the following research questions:

- How can the experiences of the Latinx community during the COVID-19 pandemic inform how health science librarians and their institutions can support health literacy and outcomes of their communities?
- Can health sciences librarians use oral history data to inform work with community organizations and institutions to promote health and digital literacy?
- How do health literacy and language affect access to credible and reliable health information in the Latinx population?
- How/if can we use the results to inform on frameworks for community health outcomes and partnerships?

The coded data will demonstrate that information gleaned from oral histories and cultural storytelling can be used to inform on the health information needs of a community and should be used alongside current metrics. The conclusion will focus on the implications for reusing existing data to inform health literacy and informational needs of the Latinx community that encompass academic libraries and their partners.

VOCES OF A PANDEMIC ORAL HISTORIES*

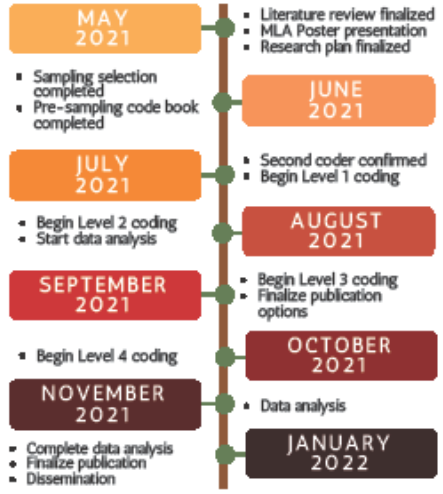




The above data is current as of 04/30/2021 and includes:
235 Interviews, 30 States, 96 Cities, 29 interviews in Spanish, 211 in English

**236 out of 252 YouTube videos are included. Three international countries and four international cities are not included in the above visualization.*

TIMELINE



ISSUES & CONSIDERATIONS

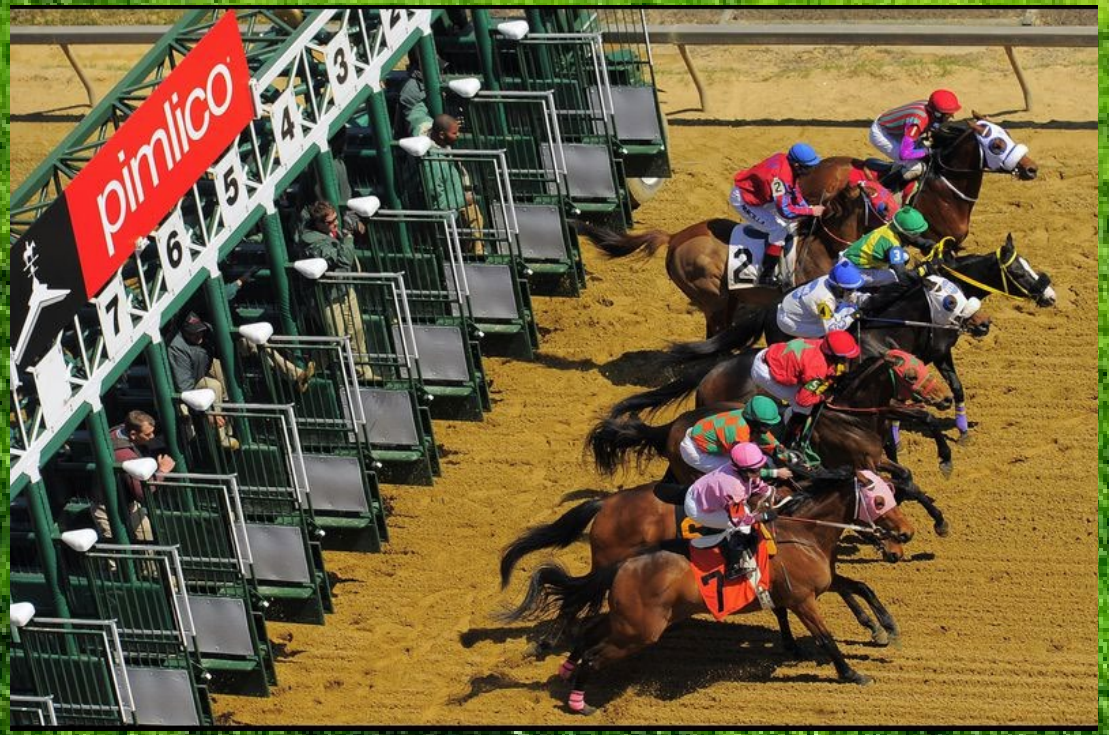
Ethical: Consider the ethics of engaging with historically marginalized communities. What are the long-term impacts that your interactions and research would have on them? How, if at all does this research benefit the community? How can you create a mutually beneficial experience? Do you have the time/ability to forge connections? To maintain them?

Profession: Consider your professional goals and where you currently stand. My transition from a contracted position to an unrestricted one at the same institution, then to an unrestricted position with a new institution heavily impacted my time and approach with my subject population, and research data. Ask yourself, will I be leaving the institution soon? Will I be going on job interviews? Can my research follow me? How does it inform my broader research agenda?

Time: Realistically consider how much time you can allocate to your research. Try to refrain from pushing your research to the "when I have time category". If you can, allocate time daily or weekly. Remember to be kind to yourself if your time management strategies are not working. It just means you need to try a different way to allocate the time and space for your research.

Subject knowledge: Take into consideration what your current knowledge is on the topic that you plan on exploring and make sure to factor that into your research plan. Give yourself the appropriate amount of time to familiarize and understand your topic.

Out of the Gate



searching the literature
+ developing instrument
+ IRB

Rounding the Corner

collecting data

RTI work in progress report: Teaching the teachers: comparing MLIS curricula to entry-level job descriptions

Caitlin Meyer
Research and Education Librarian
Coordinator of Instruction

Harvey Cushing/John Hay Whitney Medical Library
Yale University

Project overview

- *Burning questions:* Are MLIS programs adequately preparing graduates for the job market, particularly in regards to skills and knowledge around instruction and instructional design? Are MLIS programs' curricula reflective of skills and experience expected in practice?
- *Data sources:* course catalogs (titles and descriptions) from all ALA-accredited master's programs in library and information science programs, entry level job postings
- *Theoretical framework:* content analysis with structured matrices[1]
- *Data collection and analysis plan:* Data is captured in Google Forms. Each catalog is examined by hand, logging instruction-related course titles and descriptions and marking if they are mandatory or elective; job descriptions that meet set criteria are examined for mention of instruction-related skills, marking which section of the posting they occur in (general description, required qualifications, preferred qualifications).

Literature review key findings

- Instruction-related skills are not explicitly referenced in *the Standards for Accreditation*[2] (revised 2019), but are in the ALA's *Core Competencies of Librarianship*[3], last updated in 2009: "7C. Learning theories, instructional methods, and achievement measures; and their application in libraries and other information agencies."
- Projects comparing course catalogs and job postings have been published in disciplines like hospitality management[4], journalism[5,6], health informatics[7].
- Within LIS literature, course catalogs have previously been used to investigate prevalence of access services[8] and makerspace[9] courses across schools and job postings have been used to track discipline-specific openings over time[10,11] or skills/knowledge for specialty positions[12-14].
- Since I first worked on this topic in 2017 for my MLIS capstone project, other researchers have proposed similar projects and arguments[15,16], but have not strictly focused on entry level positions in doing so.

Next steps

The literature review, data collection for the course catalogs, and preliminary data analysis for the course catalogs have been completed. Next steps include developing the rubric for the job postings, and then collecting and analyzing that data.

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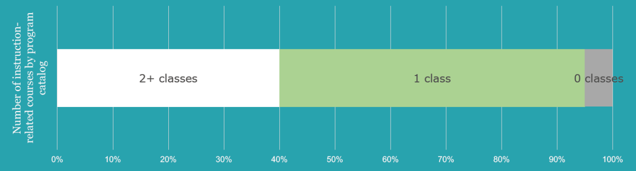
Preliminary findings from course catalogs

Only three out of the 62 programs examined had zero instruction-related courses in their catalog:



Program notes:

- Of the 59 programs with instruction-related courses, only two programs had mandatory instruction courses in their general LIS curriculum.
- Of the 24 programs that offered two or more instruction-related courses, 10 programs' additional offerings were exclusive to school media certificate students.

Course characteristics (n=100):

- Information literacy, unsurprisingly, was the most frequently occurring course. Variations of the phrase appeared in 33 course titles and 38 descriptions.
- Instruction vs teaching vs learning: 52 titles mention instruction, 11 mention teaching, 17 mention learning.
- Theory and practice: 47 courses mentioned theory in the descriptions, 26 mentioned learning related technology. *Instructional design* explicitly appeared in 7 course titles and 14 descriptions.
- More than planning: 53 courses mentioned program and/or instruction evaluation and/or assessment.

Selected unique and interesting courses:

- Informal Learning and Pedagogies, *University of Illinois*
- Principles of Software Design for Learning; Transformative Learning and Teaching with Technology, *University of Michigan*
- Librarians as Instructional Partners, *Texas Woman's University*
- Facilitating Online Learning, *Long Island University*
- User Education: Multimedia, *University of Iowa*

Acknowledgements

Thank you to the RTI crew, specifically Lorie Kloda, Susan Lessick, Gary Atwood, Michele Coles, and Ana Corral for your feedback and enthusiasm. Thank you to CWML administration for supporting my participation in the RTI Fellowship. Thank you to Dana Haugh for the poster template.

STAYING CURRENT:

Preferred Professional Development Methods of Health Science Librarians

Margarita "Maggie" Shawcross, MLIS, MPH, CHES
University of Northern Colorado, Greeley, CO

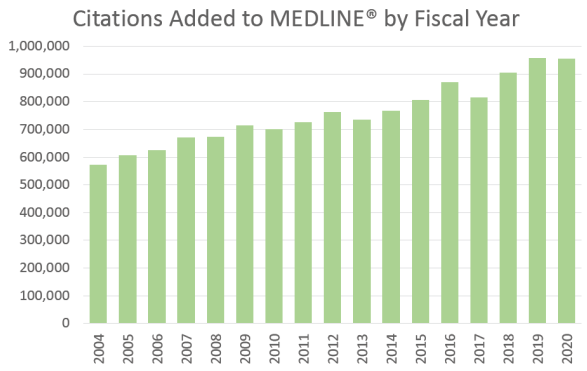
Introduction

Purpose: The goal of this project is to learn about the preferred method of professional development (PD) of health science (HS) librarians

Methods: A survey was created using Qualtrics that asked participants:

- General demographic information
- General PD questions such as asking them to rate their preferred method of PD and about support from their employers
- About their experiences with seven different PD modalities
- To rate effectiveness of these seven modalities to gaining new skills/knowledge

Rapidly Changing Landscape of Health Information



Type of PD	Description
Journal Articles	Journal articles that contains content relevant to HS Librarianship.
Conferences	A formal meeting where PD takes place.
Courses	A series of lectures that are typically held on multiple days or weeks on a specific topic.
Webinars	Online sessions where continuing education occurs.
Listservs	Email lists that sent to groups of people with a similar interest to share and ask questions.
Twitter	A "microblogging" system that allows users to send, receive and post messages.
Other Social Media	Social networking sites, that are not Twitter: such as LinkedIn, Facebook, and Instagram.

Interested in Participating?

There's still time. Survey will close on May 15, 2021. Scan QR Code to take you to survey.

Development of Survey Tool

- There were many older articles looking at PD. There have been numerous advances and changes in technology and resources since those publications were published.
- Most articles on PD is on academic librarians, very few articles specifically on PD for health science librarians
- Original list of PD to discuss was based on literature read and my experience as HS Librarian
- Asked MLARTI Mentor and Cohort to review survey tool and they proposed edits, including adding courses to list of modalities

Researching during COVID-19

Personal Impact:

- Increased household responsibilities with children attending school from home
- Contending with work-life balance

Professional Impact:

- Assisting students and faculty as we transitioned from in-person to online
- Had similar number of one-shots taught from year to year but had higher demand for research consults
- Health Science publication productivity, specifically COVID-19 related publications, increased enormously

Next Steps

1. Finish collecting surveys, survey closes May 15, 2021
2. Analyze data collected
3. Write up results
4. Complete writing journal article
5. Select journals to publish in and submit

Preliminary Survey Comments

Acknowledgements

I would like to thank every library professional who took the time to complete my survey. I am constantly in awe of how supportive our field is.
I would also like to acknowledge the Medical Library Association Research Training Institute (MLARTI), specifically to Emily Vardell, my RTI-assigned mentor, for their assistance and guidance.

Bibliotherapy for Stress Management: A Wellness Intervention for First Year Medical Students

Rebecca Morin, Head of Research and Instruction, Hirsh Health Sciences Library, Tufts University
Amy LaVertu, Associate Librarian, Hirsh Health Sciences Library, Tufts University

Problem

Medical students exhibit a higher prevalence of "high emotional exhaustion, high depersonalization, and burnout" as well as a greater likelihood of depression and fatigue, as compared to other US college graduates aged 22-32.[1] The COVID-19 pandemic introduced further disruptions in personal and academic life, with greater than 40% of respondents to a recent survey indicating elevated adverse mental health conditions.[2]

Background

Bibliotherapy, loosely defined as reading for therapeutic effect, has its modern roots in the Library War Service of the First World War. In collaboration with physicians, librarians "prescribed" books to soldiers recovering from illness or injury, in efforts to boost the spirits and bolster the mental health of invalids in military hospitals.

In the 21st century, bibliotherapy has been deployed in clinical settings and in a public library-led community self-help context. With face-to-face interprofessional contact between students and library staff nearly eliminated due to COVID-19 restrictions, there was an opportunity to pilot an online, self-directed bibliotherapy program at the Hirsh Health Sciences Library.

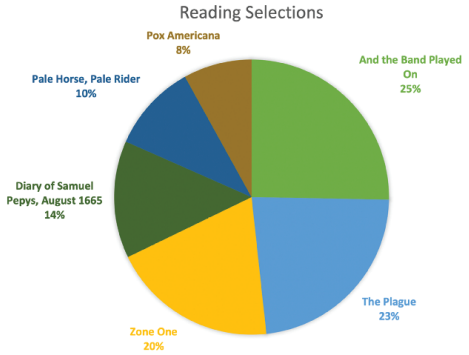
Investigators selected the current first year class of medical students (MD1) as the study population. The bibliotherapy intervention reflects themes of pandemic and plague, building on the work of scholars such as Kobie van Kreiken, which posits that consumption of tragic/horror narratives enable readers to mentally prepare for challenging situations.[3]

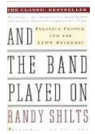
Methods

The study is an Interrupted Time Series Analysis composed of three pre-intervention stress assessments, a self-directed bibliotherapy intervention, and three post-intervention stress assessments. Subjects successfully completing the interrupted time series will also have the opportunity to participate in a focus group to solicit feedback on the utility of the intervention. The stress assessments and intervention are delivered via Qualtrics, and focus groups will be held via Zoom.

The tool used for stress assessment is the 10 Item Perceived Stress Scale (PSS-10), a validated instrument widely used to assess subjects' global perceived stress. The PSS-10 is distributed via Qualtrics the first Monday of each month (January-June 2021) and subjects have one week to complete the survey.

The intervention consists of three short readings, chosen from a list of six by each subject. Students have 3 weeks to complete the intervention. Each reading is estimated to take 11-32 minutes to complete, and the list contains excerpts from both fiction and non-fiction selections.





And the Band Played On
Describing government and civilian reaction to the burgeoning AIDS epidemic in 1983

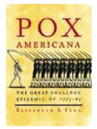
The Diary of Samuel Pepys, August 1665
An eyewitness account of the Great Plague of London

Pale Horse, Pale Rider
Centered on the protagonist's experience of contracting and recovering from influenza in 1918

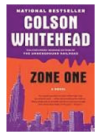
The Plague
Concerning the psychosocial impact of quarantine and isolation

2020
- July: Research Training Institute
- November: IRB approval
- December: Recruitment begins 30 MD1 students enrolled

2021
- January: PSS administered
- February: PSS administered
- March: PSS administered
  Mid-March: Intervention administered
  End of March: Intervention period closed
- April: PSS administered
- May: PSS administered
- ** to come**
- June: PSS administered
- June-July: Focus group(s)



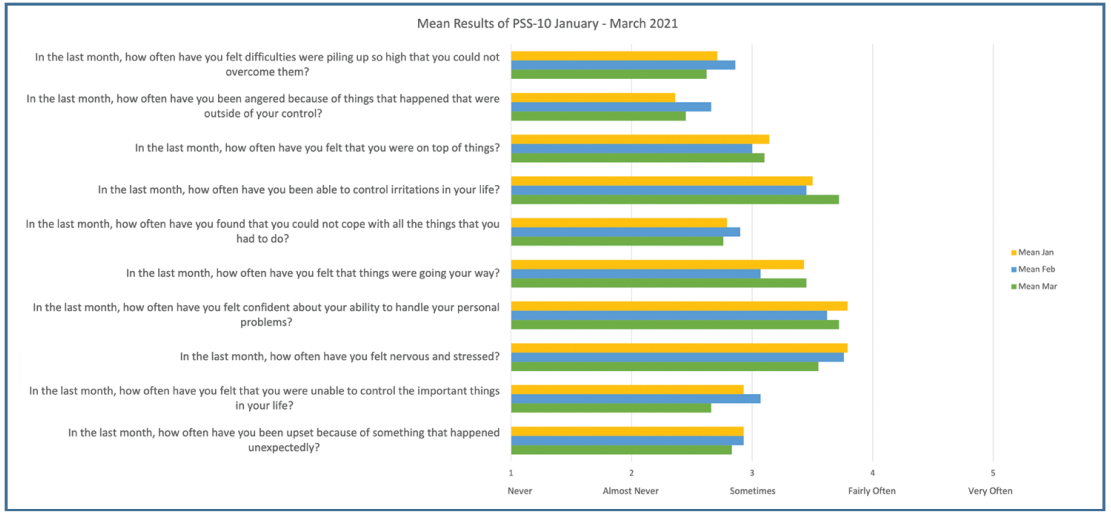
Pox Americana
A narrative of the smallpox outbreak among Colonial troops during the American War of Independence in 1775

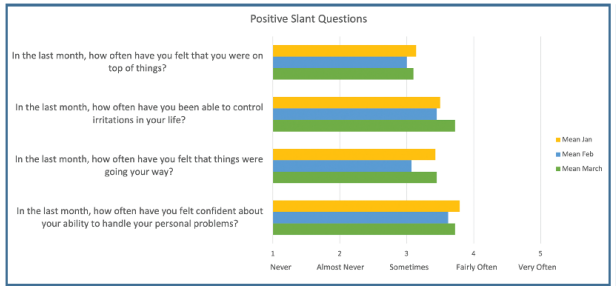


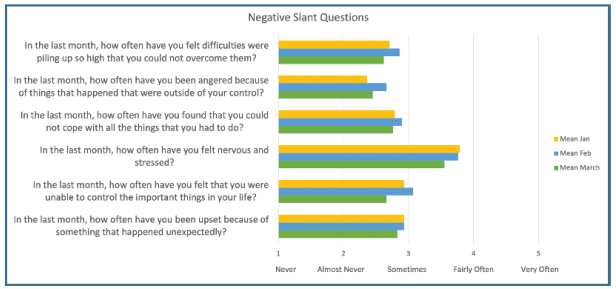
Zone One
A post-apocalyptic zombie novel set in New York City

Conclusions so far

30 MD1 students started the study in January 2021 (15% of MD Class of 2024)
90% completed the intervention in March 2021 (27 students)







Next Steps

Perceived Stress Scale results from January-March (pre-intervention) will be compared to results from April-June (post-intervention) to determine if there are any trends for analysis (overall and per-question). Focus groups will be scheduled for June and/or July to run via Zoom. Investigators hope there will be several groups, based on participant interest and schedules, of no more than 5. They will be recorded, saved, and transcribed locally. Investigators plan to analyze transcripts using constant comparison analysis.[4]

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An Evaluation of Point of Care Tools by Nurses: How Do They Compare?

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University of Illinois Chicago

Background

To answer clinical questions quickly at the bedsides, healthcare practitioners need point-of-care tools (PoCTs). Little research has been done on healthcare practitioner's opinions of these tools, even less targeting nurses specifically. This study compared three PoCTs from a nursing perspective to determine which resource best met the unique information needs of practicing registered nurses the University of Illinois Hospital (UIH). The investigators hypothesized the most nursing centric tool, Nursing Reference Center Plus, would be preferred.

- Nursing leadership wanted the best PoCT for their nurses
- Librarians developed a rubric to review PoCTs, but realized nursing perspective was needed
- Librarians worked with UIH nursing council to develop a survey for RNs
- Three PoCTS were compared:
  - Nursing Reference Center Plus (NRC)
  - ClinicalKey for Nursing (CKN)
  - UpToDate (UTD)

Methods

A total of 92 participants, 76 of whom completed the survey were first asked whether they had used the tool before (Figure 1) then to choose a clinical question category, going through the PoCTs to find the answers, spending 3 minutes or less on each question.

- Guidelines and understanding of disease
- Assessment and diagnosis
- Nursing interventions and medication information

All were asked to find how to perform a defined procedure

They were then asked about their experiences. All participants used the tools in the same order and responded on a seven-point Likert scale of strongly disagree to strongly agree to following statements:

1. Indicate your familiarity with the tool
2. The layout of the information displayed on the screen was clear and concise
3. The relevance of the results displayed was highly applicable to the clinical question
4. The information displayed appeared to be the most recent available
5. The site was intuitive and easy to navigate
6. Content was clearly labeled (e.g. headers, links)
7. The use of filters to refine the search was user friendly (e.g. age of patient)

Results

Of the three PoCTs, respondents were most familiar with UTD and least with NRC. Despite this, average Likert scores showed similar responses (Figure 2). A one-way Anova revealed that differences between the tools were not statistically significant.

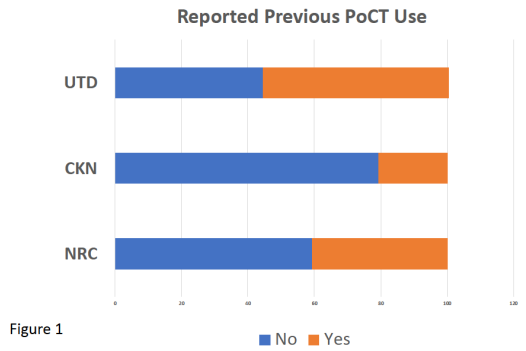

Figure 1

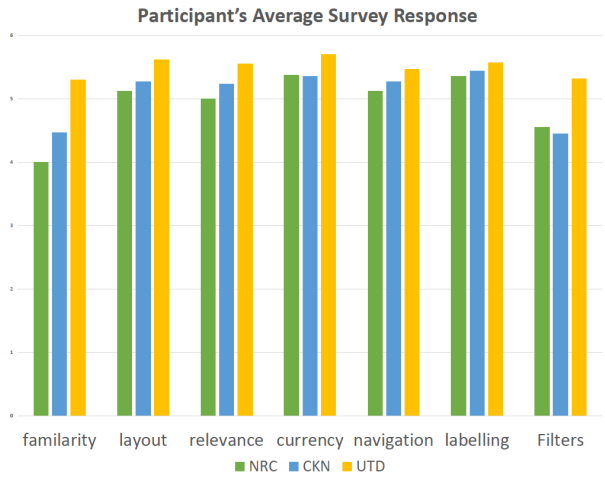

Figure 2

Comments

"I could not find the answers in 3 minutes. I could not find a way to the site to help me find skills versus data"

"trusted" *"easy to use"*

"difficult to pull up scholarly articles"

"Best research app available, free for me, easy to navigate, better topic and search results control"

"The procedural instructions are not supported with pictures"

Conclusions

The perceptions of nurses towards PoCTs were markedly different than what had been anticipated by librarians. Answers between the tools were not significant even when accounting for previous use, years experience, or education level.

Discussion

Investigators were surprised at the even representation of opinions across the tools. It had been hypothesized that the nursing specific tool would be favored. In addition to the questions asked, It would have been useful to ask which features they thought should be added and how the PoCTs could assist them in practice.

We acknowledge that results might have been different if tools were gone through randomly rather than sequentially.

Several comments in the short answer revealed a lack of understanding from nurses about how to best search and navigate PoCTs. A clear example is filters, UTD has the least and yet rated highest. More research needs to be done on nurses' information-seeking behaviors.

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Prorok J.C., Iserman E.C., Wilczynski N.L., Haynes R.B. (2012). The quality, breadth, and timeliness of content updating vary substantially for 10 online medical texts: an analytic survey. *Journal of Clinical Epidemiology*. 65(12):1289-1295. doi:10.1016/j.jclinepi.2012.05.003

Rounding the Corner

collecting data

Crossing the Finish Line

analyzing data
+ writing up for publication

Strauss Health Sciences Library
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

Experience Required: A Survey of MLIS Student Experiences with Graduate Employment in Libraries

Christi Piper, MLIS, AHIP. Samantha Wilairat, MLIS.

Background

- Health Sciences library with 2 graduate assistant positions
- Low recruitment whenever positions are open
- Want to determine what the barriers are to graduate employment and what attracts MLIS students to graduate employment
- Many studies looking at impact of specific graduate employment programs and what skills new graduates should have, but few studies looking at the state of graduate employment (or lack thereof) throughout the US. See a brief bibliography here: https://bit.ly/GradStudentBib2021

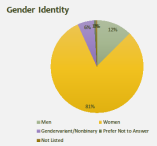
Methods

- Developed a survey about MLIS graduate employment focused on the following questions:
  - Do MLIS students have graduate employment?
    - If yes, what types of libraries and types of work are employing them? What are they factors involved in selecting those graduate employment positions?
    - If no, why not?
  - Does graduate employment differ based on gender, racial identity, or caregiving responsibilities?
  - Is the graduate employment in the same type of library or field as the students wants to work in post-graduation? (results forthcoming)
- Survey was sent to all ALA accredited MLS programs in November 2020 and closed in December 2020

See the survey here:
https://bit.ly/GradStuSurvey2021

Demographics of Results

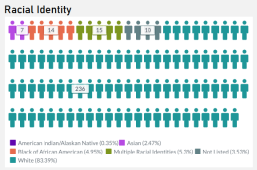
344 surveys were returned. 37 incomplete surveys were excluded.

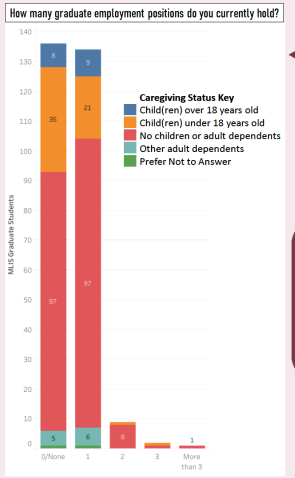


23 ALA accredited programs represented

147 with graduate employment

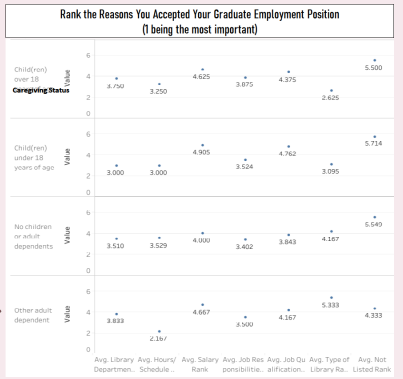
138 without graduate employment



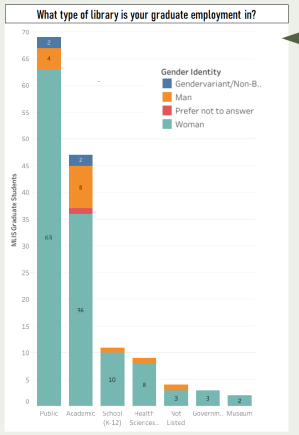


Individuals with Children under 18 years old were less likely to have graduate employment.

Individuals with children under 18 years old and adult dependents prioritized hours/schedule more highly than those without dependents or with children over 18 years old.

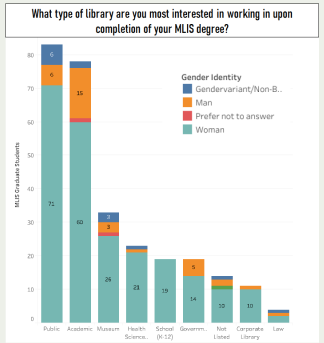


Results by Caregiving Responsibilities

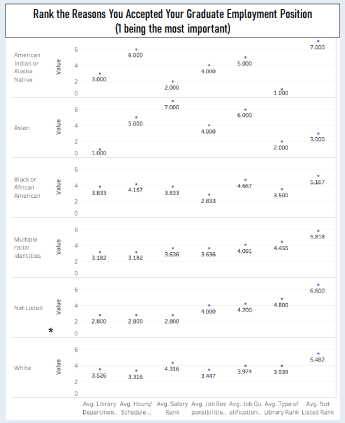


Men more frequently have graduate employment in academic libraries.

Contrasts of Note:
- Men's graduate employment tends to align more closely with their post-graduate employment goals.
- Genderviarant/non-binary individuals have graduate employment at lower rates than others.
- Where women have graduate employment aligns less closely with their post-graduate employment goals.

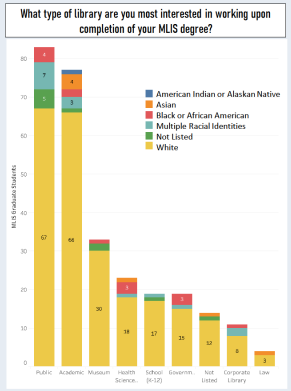


Results by Gender



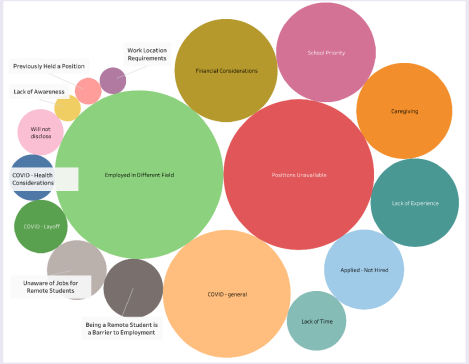
Individuals who identify as Black or African American prioritize job responsibilities more highly than groups.

In general, interest in library type does not vary significantly by racial identity. Of the minority groups, Black or African American students display the largest variation in the types of libraries they are interested in working in.



* All individuals (n=10) who submitted free text for the Not Listed option identified as Hispanic or Latino.

Results by Racial Identity



Results for Why Don't You Have Graduate Employment?

Key Takeaways:
- More graduate employment opportunities are needed.
- Remote/distance students are less aware of available graduate employment positions in their local areas.
- Salary amount is not the most important factor for students in selecting graduate employment. Positions should instead focus on providing opportunities for experience and skill building.

Want to see more of the data and analysis? Use this QR code to access Tableau for more:

Conclusions

Implications
When considering this information in context of academic libraries with graduate specific positions, it is important to consider what opportunities there are to make positions more flexible to be more attractive to a wider audience. Advertising of the positions also appears to be a factor in reaching all eligible students.

For these authors, this study has helped them to realize that MLIS students typically do not recognize that health sciences libraries are often also academic libraries (as is the case with the authors' workplace). They are considering implementing marketing tactics that will advertise Graduate Assistant positions as academic library positions.

Transmutations in a Research Curriculum: Seeking to Encourage Enthusiasm for the Research Process in a Psychiatry Residency

Ellen M. Justice, MLIS, AHIP, Clinical & Research Librarian; Kimberly Leach, MPH, Research Project Associate (RPA); Stephen Buie, MD, DLFAPA, Psychiatry Department Chair & Residency Program Director; and Kathleen A. Foley, PhD, Executive Consultant
UNC Health Sciences at Mountain Area Health Education Center (MAHEC), Asheville, NC, USA

Objective

Assess the MAHEC Psychiatry Residency Research Curriculum's ability to encourage community-based residents' enthusiasm for and develop confidence in research knowledge and skills.

Background

- 17 residents practicing in a community- and hospital-based psychiatry residency located in Asheville, NC and serving Western North Carolina
- ACGME (Accreditation Council for Graduate Medical Education, 2019) requirements include psychiatry residency program must offer residents, who are interested, access to and the opportunity to participate in ongoing research under a mentor
- Research curriculum characteristics identified in the literature can create enthusiasm and success (Abramson et al., 2018; Hebert et al., 2003; MacMaster et al., 2016). Also see **Figure 1.**

Methods

- Initial & Post- surveys created and managed in REDCap®* (Harris et al., 2009, 2019). Sent out via email to 17 residents
  - **Initial survey: n=15; response rate: 88%**
    - First year, administered at end of year; subsequent years at beginning
  - **Post-survey n=9; response rate: 53% (**Administered April 2021)

Curriculum Transmutations

Longitudinal PGY-1 curriculum: 3 instructors. 19 - 1.5 hour sessions.
Initial goals: Developing more research knowledge. Planning PGY-2 research project.
Selected curriculum transmutations made in response to schedule/dept. changes and/or resident preferences/needs:

- 2nd year sessions reduced to 13 sessions. For review PGY-2s attend some sessions
- Scheduled mentoring provided by 2 research staff. Dropped in 3rd year in midst of pandemic, research department changes, and resident interest..
- Librarian uses LibGuide® to create a page to host curriculum resources
- COVID-19 pandemic forces sessions to be adapted to online presentations
- 3rd year: Course designated Pass/Fail. Pre-assignments are given
- Pivot from implementing research project to emphasis on critical consumption of studies and other scholarly activity such as writing case report with peer review

IRB Status: As of 12/9/2019 the Mission Health Institutional Review Board determined the project is not human subject research and no further action on the submission is required. IRBNet Number: 1531398-1

Created for MLA May 2021 for RTI. Ellen Justice was a 2019 fellow of the Research Training Institute (RTI) in Chicago, IL.

Survey Highlights

Figure 1. Please tell us if you think the following characteristic is present in the curriculum (Post-survey n=9)

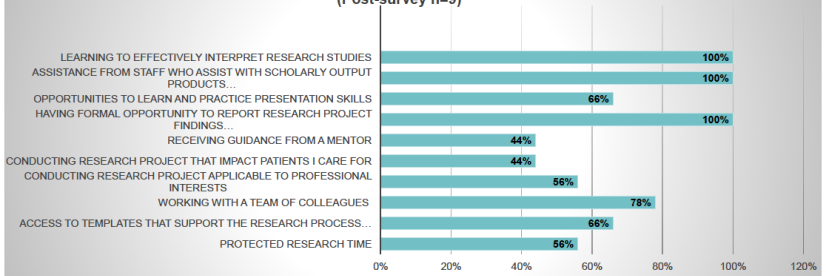


Figure 2. Resident's level of enthusiasm for working on a research project

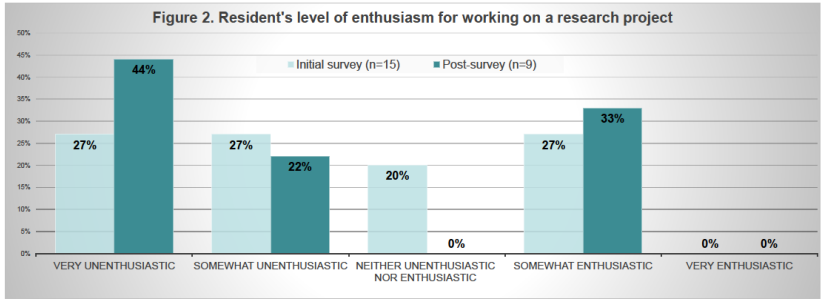
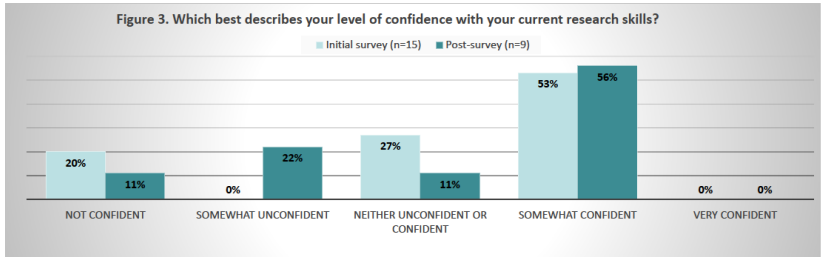


Figure 3. Which best describes your level of confidence with your current research skills?



Acknowledgments: Sheritta Carmichael, MD, Psychiatrist (PGY-2 resident in 2018-19); Sedona Koenders, MS, Research Project Coordinator; Brunilda Lugo MS, PhD, Associate Research Scientist; Philip Hughes, MS, Research Data Analyst; Susan Lessick MLS, MA, AHIP, FMLA, Project Director, MLA Research Training Institute; Ben Vockery, Psychiatry Residency Administrator; Joan Colburn, MLS, Library Director; and all the RTI Institute coordinators and faculty.

*Study data were collected and managed using REDCap® (Research Electronic Data Capture) electronic data capture tools hosted at UNC Health Sciences at MAHEC.

Survey Highlights

- Post-survey - **<50% agree a mentor or conducting research that could impact their patients** is **present** in the curriculum
- Initial survey – **66% say that faculty who are enthusiastic about research is somewhat important or important**; post-survey – **67% agree they are present**
- Of the 1st cohort (n=7), **>70% were satisfied with their experience**
- 5 initial linked to post-surveys - **4 indicated they were more prepared to work on a research project**
- Initial & Post-surveys more **responded that learning to conduct research project was unimportant or somewhat unimportant (40% initial; 55% post); whereas, fewer deemed it somewhat important or important (34% initial; 22% post).**
- Qualitative: What could **increase enthusiasm? Themes include:** identify project that is meaningful contribution; need a dedicated mentor; and nothing

Limitations: Fewer responses to post-survey (n=9) compared to initial (n=15). Some initial and post-surveys could not be linked.

Conclusions

Curriculum and survey analysis has contributed to:

- Understanding how to meet accreditation requirements for research and scholarly activity for residents who choose a community-based residency and not one at an academic research institution.
- Even with enthusiastic and knowledgeable faculty; only about 1/4 of respondents considered learning to conduct their own research project as important which could explain relative uneven enthusiasm for research. Also reinforces that residents choosing a community-based program may not be looking to do research.
- Important elements to offer in curriculum that requires a research project and could impact enthusiasm include dedicated mentorship and project that impacts patients.
- Survey findings support pivot away from research project to emphasis on critical consumption of studies and doing other scholarly activity such as case reports.

Although research is not for everyone, the curriculum offers: Experience with critical analysis. Informed consumption of studies. Practice in case report writing and peer review. Opportunity to become more prepared to conduct research if they choose. Residents gain insights into if they want to conduct research.

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Research Data Services and Health Sciences Graduate Students: Preparation, Services, and Populations Served

Stacy Winchester – University of South Carolina, Jenessa McElfresh – Clemson University, Megan Sheffield – Clemson University

Introduction

Data librarianship, a sub-field of library science, has grown in recent years as academic libraries have begun offering research data services to students and faculty researchers. In fact, Tenopir, et al (2019) found that most research data services (RDS) in libraries have begun in the past few years. The investigators are interested in the commonalities in career preparation, services offered, and work environments experienced by this group. Since some research already exists on the population as a whole, it is of interest to learn whether librarians serving specific populations, such as health sciences graduate students, also share traits and services. This introductory research intends to provide a snapshot of this sub-population of data librarians.

Methods

The study was conducted via electronic online survey and received IRB Exempt status via the University of South Carolina and Clemson University. The survey consisted of 29 quantitative questions regarding participant demographics, roles, and the environments in which they work. Survey questions were created collaboratively by the research team and subjected to multiple rounds of editing and testing before being finalized.

The survey was hosted on the Alchemer (formerly SurveyGizmo) platform and was distributed to potential participants via professional listservs, including MedLib-L, RDAP, and ACRL STS-L. The survey was open for a distribution period of March-April 2021. Informed consent was recorded for all participants, and results were anonymous. Preliminary results were analyzed via the Alchemer platform.

Results

The majority of survey respondents have an MLIS and work in a health sciences-focused library at a doctoral granting university.

Respondents work with a variety of health science graduate majors.

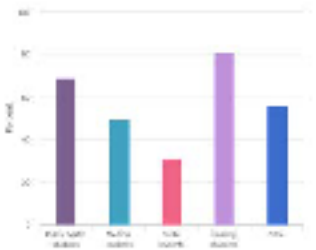


Figure 1. Which health science graduate majors do you provide research data services for? Select all that apply.

Responses were split regarding whether RDS is provided primarily to Master's or Doctoral-level students.

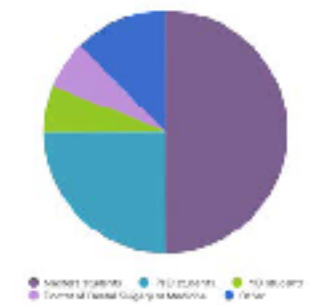


Figure 2. At which degree program level do you most often interact with health science graduate students to provide research data services?

Participants report learning the skills required to provide research data services to health sciences graduate students in a number of ways, with self-directed learning being the most common.

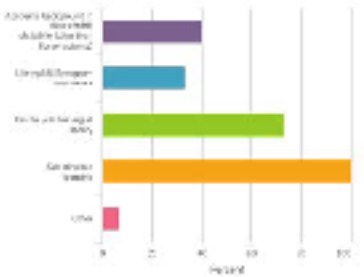


Figure 3. What kind of data training have you received that helps you deliver research data services? Select all that apply.

Lack of training, personnel, technology, and time are reported as barriers to providing or expanding research data services.

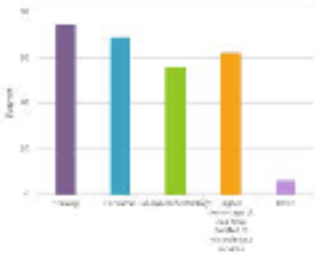


Figure 4. What support would you need in order to provide, expand, or otherwise enhance your library's research data services for health science graduate students?

Responses to this survey indicate that the amount of time individuals are able to devote to research data services varies widely. Responses about confidence in providing RDS varied widely, as did types of services offered. The majority of respondents do not have a physical space or department/unit dedicated to research data services.

Conclusion

The preliminary results of this study identify gaps in the training and support for librarians who offer data services consultations for graduate students in the health sciences. These results help define the library landscape for data services for health sciences graduate students and identify areas of growth and additional support needed for libraries to comprehensively support this user group's data needs.

Limitations of this study include small sample size, lack of validated measurement, and widespread "survey fatigue" due to an increase in survey research as a result of the COVID-19 pandemic. Future research on the topic could include focus groups of health sciences graduate students to assess needs, focus groups of librarians for qualitative results regarding their health sciences data services experiences, and case studies of high-achieving libraries in providing data services for health sciences graduate students.

References

Tenopir, Carol, et al. "Research Data Services in Academic Libraries: Where are We Today?" ACRL/Choice, publisher. 2019. http://choice360.org/librarianship/whitepaper.

COLLEGE of AMERICAN PATHOLOGISTS

Evaluation of Distiller's AI Function

for Title/Abstract Screening in Systematic Reviews

Our Aim:

Validate the use of DistillerAI against the conventional dual review by human subject matter experts during the title/abstract review phase of the systematic review (SR) process and calculate any workload and time savings associated with use of the tool.

Study Design:

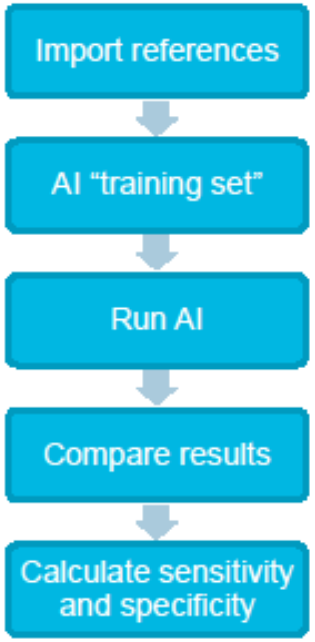
We compared historical guidelines, which used dual human reviewers, to the performance of the AI tool. Both methods used the same sets of original reference data. Then, we compared the outcomes to determine the sensitivity and specificity of the AI tool for each guideline.

Points of Note:

The training sets were seeded with control articles and set at 200 references, regardless of study size.

Inclusion/Exclusion thresholds for the AI tool included a neutral range which put the references for human review.

Project Workflow



Project	Project Size (# Refs)	Specificity	Sensitivity
MMR-MSI	5155	94%	71%
Lymphoma	4929	92%	30%
Diffuse Gliomas	4821	86%	82%
HPV	2207	45%	97%
PD-L1	1822	79%	94%
Her2	969	85%	96%

Project	Project Size (# Refs)	Used in Manuscript / AI Excluded	Used in Manuscript / AI Included
MMR-MSI	5155	15	37
Lymphoma	4929	21	9
Diffuse Gliomas	4821	9	41
HPV	2207	2	70
PD-L1	1822	4	59
Her2	969	7	76

Project	Project Size (# Refs)	(+) Predictive Value	(-) Predictive Value	False (+) Rate	False (-) Rate	F1 Score
MMR-MSI	5155	12%	99%	6%	29%	0.2
Lymphoma	4929	3%	99%	8%	70%	0.05
Diffuse Gliomas	4821	7%	99%	14%	18%	0.13
HPV	2207	7%	99%	55%	3%	0.14
PD-L1	1822	17%	99%	21%	6%	0.29
Her2	969	45%	98%	15%	8%	0.6

Conclusions

A priori acceptable results:

sensitivity = 90%

specificity = 60%

There were significant differences in the sensitivity and specificity of the studies. Possible reasons:

- Our projects vary from <1000 to >5000 articles
- Scope of projects

Project sensitivity calculations do not currently meet our acceptability threshold to allow the inclusion of this AI tool into our guideline development process. AI tools must demonstrate equivalency to be acceptable

Kearin Reid, MLIS, AHIP

Ultimately Better Healthcare Thru Interactions of an Interprofessional Journal Club

Helen-Ann Brown Epstein MLS,MS,AHIP,FMLA, Informationist, Virtua Health, Mt. Laurel, NJ

Lev Vygstoky (1896-1934)
Social Constructivism

Make meaning in a social context

When humans interact, learning takes place

Social dynamics to make decisions

Through social discourse, knowledge is analyzed, shared and constructed into new knowledge

Construct understanding through social interaction

Wisdom emerges from collaboration

Reality evolves through interpersonal interaction

Allows meaning to be represented by the understanding of the group

1st Journal Club conducted by
Sir William Osler in Britain in 1875

Interprofessional Journal Clubs

Heterogeneous team based learning opportunity

Share current knowledge and translate into evidence-based healthcare

Diverse group committed to generate Shared knowledge in forum for discussion and mutual learning

Realistic, practical and achievable way to connect, establish trust and collaborate among professionals

Create casual, nonthreatening, welcoming, supportive idea exchange, that meets monthly with food to share knowledge in an in-person, online or social media forum for discussion and mutual learning

Applying Social Constructivism Theory to the interactions of an Interprofessional Journal Club translates knowledge from a synergy of the group's wisdom to better healthcare.

This project was made possible in part by IMLS Grant

Ethics Behav 2018;28(5):393 Med Educ 2009;43:923
Implement Sci 2014;9:54 PLoS One 2017;12(1):e0168863
Am J Pharm Educ 2009;73(1):10 Fam Pract 2000;17:203

The Publication Fate of Abstracts Presented at the 2012 and 2014 Medical Library Association Conferences

Rachel J. Hinrichs[1], Mirian Ramirez[2] & Mahasin Ameen[1]
[1] IUPUI University Library; [2] Indiana University Ruth Lilly Medical Library

RESEARCH QUESTIONS

1) Which features of a conference abstract and author influence the likelihood of future publication as a journal article?

2) How does the publication rate of MLA conference abstracts in 2012 and 2014 compare to the publication rate in 2002 and 2003, as published in a previous study?
*Harvey & Wandersee study, *JMLA*, 2010

METHOD

Abstracts from the 2012 and 2014 MLA conferences were included.

- Excluded lightning talks, invited talks, and sessions missing title, author(s), or abstract

1 to 2 reviewers collected the following features from a total of 628 abstracts:

- AHIP credential of first author
- International (non-USA) author
- Multi/single institution
- Poster vs. presentation
- Non-librarian author
- Work setting
- Research method

Consensus was reached if there was a disagreement between reviewers.

To determine whether an abstract was published as a journal article, we used two methods:

1. Database search
2. Survey of abstract first authors

Data analysis:

- Chi-squared test to assess differences in publication rates
- Logistic regression to assess the influence of abstract factors on publication

Compared to 10 years earlier, fewer abstracts presented in 2012 and 2014 were later published as journal articles.

27.6% published (2002, 2003) — **21.8% published** (2012, 2014)

*Harvey & Wandersee study, *JMLA*, 2010

Research abstracts and multi-institutional abstracts were the most likely to get published.

Multi-institutional — 1.7x more likely to be published than… — Single-institutional

Research — 2x more likely to be published than… — Non-Research

None of these factors significantly impacted the odds of publication:

- Author credentials
- AHIP credential
- International (non-USA) author
- Poster vs. presentation
- Non-librarian author
- Work setting

Why would the publication rate decrease?

- Number of accepted abstracts that tend to not get published increased
- There was not a proportional increase in the number of authors willing to publish
- Scholarly journals' acceptance rates are more stringent

Why are research and multi-institutional abstracts more likely to get published?

- Research is easier to translate to a journal article and could be perceived as more important.
- Multi-institutional abstracts could involve a larger, more generalizable and "newsworthy" projects.

Is the publication rate of abstracts a good indicator of success for library conferences?

- While it is the most utilized indicator for conference success in general, we don't think it is a good indicator for practice-based conferences such as library science.

*Neves, *Health Research Policy and Systems*, 2012

How can we better disseminate non-research (e.g., successful programs, best practices)?

- Write shorter, practice-focused articles for MLA Connect or other newsletters
- Deposit posters and slides in repositories
- MLA could reward program abstracts similar to what we do for research abstracts

How do we help more research abstracts move to full publication?

- Improve librarians' research confidence
- Editors and the Research Caucus could take a more hands-on approach to encourage presenters to publish, and mentor them through the process

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Crossing the Finish Line

analyzing data
+ writing up for publication