



**One Department—Many Services:
Kornhauser Library's Clinical Librarianship Experience
with the University of Louisville's
School of Medicine's Department of Pediatrics**

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Abstract

Librarians at the University of Louisville's Kornhauser Health Sciences Library have struggled for years to develop a clinical librarianship program. With a limited number of librarians available to serve the schools of medicine, nursing, dentistry and public health, we feared over-extending ourselves, and were made skeptical by previous failed attempts at clinical outreach. Seeking guidance to develop a strategic approach, we consulted a staff performance development coordinator from the university hospital, part of our user base, who recommended that we focus on a single department to consolidate our resources and hopefully maximize our results. He also gave advice in identifying and selling what the department would perceive as our most useful skills.

With 150 faculty members and a staff of 500, the Department of Pediatrics represents a significant portion of the School of Medicine. A successful initial meeting with the Chair led to librarians being assigned to assist residents in the preparation of didactic presentations, attending rounds and clinical and research meetings, conducting literature searches and teaching EndNote®. This built upon an established role one librarian had as a member of the evidence-based medicine faculty group responsible for developing a curriculum and teaching evidence-based medicine throughout the Pediatric residency. Since efforts began in August 2008, integration into the Department continues, with our inclusion into four new programs. Informal feedback from attending physicians and staff is positive, and a preliminary formal survey of residents indicates that 88% are favorable to the continued involvement of librarians in their residency.

Background

For years, Kornhauser librarians have tried to develop a clinical library services program. Getting an initial foray into the clinical departments was a constant obstacle. Frustrated, we solicited help from a staff development coordinator from University Hospital. Though he didn't know what clinical librarianship is, he viewed it as a service that could be marketed as any others. We decided to:

- Focus all three librarians in one department
- Call the Chair's assistant to set up initial contact. Did not use email or a letter.
- Confidently pitch our ideas to the chair as a pilot project
- Identify roles each librarian would have
- Identify short and long-term deliverables (EndNote training, literature searching, residency and evidence-based curriculum support, research and clinical faculty support)
- Promise a one-year evaluation at end of "pilot" project, with usage statistics

Project Goals

- Introduce Pediatric Pilot Program plan to and secure endorsements from the Department Chair and other department leaders.
- Develop additional strategies for introducing and integrating specific library services within existing programs and activities in the Pediatrics Department.

- Secure invitations to assist and support various training and consultation programs, meetings and conferences, including the Chairman's Conference and Journal Club.
- Conduct a marketing campaign targeting the faculty and research staff to familiarize them with our program and services.
- Develop a timetable for the implementation of the program and its assessment and evaluation.

Services and Service Delivery

Just as "desktop delivery" has become a routine practice in the transfer of information from the library to patrons, we also see the need for librarians to take their services and skills offsite to the offices, labs, conference rooms and classrooms of our constituents. Fortunately, we did not have to start from scratch to establish our offsite services and presence in the Pediatrics Department. We built on existing relationships and activities within certain Pediatrics programs where we had provided orientations for residents, attended Morning Reports, and participated in EBM-based curriculum development. Our new plan thus focused on organizing those activities into a single program, and formalizing our relationship with the department as a whole. Additionally, we sought to incorporate two new components: providing on-site Endnote training and technical support services, and establishing a satellite office and office hours for us to work within Pediatrics' administrative facilities. Although we have yet to secure an office space, Pediatric faculty and staff have a new awareness and appreciation of our clinical librarianship services based on our presence and participation within key programs and services. Consequently, requests for assistance in the form of literature searches, citation management training, and other services have increased substantially. Our new service model, which we plan to expand to other academic departments as staffing permits, thus replaces the reference desk as the central point of patron contact and places us in the center of activities where we can respond to information needs as they arise.

Pediatrics Chairman's Conference

Every Thursday at noon the entire Pediatrics Department is invited to attend this conference in Norton Hospital, located about 2 blocks from our library. Residents present reports on cases of their choosing. The librarian emails each presenter with an offer of assistance with literature searching for background material for the talk. The aim of the collection of articles sent to residents is to make the resident the best informed person in the room on that topic. In the first year, of the 48 residents who received the email, 26 (54%) took advantage of the offer. Informal feedback was very positive. Comments included "Thank you all for preparing for my chairman's conference;" "I felt well prepared with all of your help" and "Thank you very much for your time and effort, articles are really helpful and filled (me) up with knowledge and information which will enrich my presentation." Several residents also used our services again for literature searches in support of other efforts.

Evidence-based Medicine Curriculum

One librarian was already a part of the Department's Evidence-Based Medicine Faculty Working Group with Pediatrics faculty. Evidence-based medicine is taught as a thread that runs throughout all three years

of residency and strives to bring the resident from a consumer to a contributor to the world of medical knowledge. It involves:

- A rolling, three-year cycle of EBM journal club, held monthly, which includes lecture and hands-on literature searching in a computer lab. The curriculum includes epidemiology, biostatistics, and information literacy.
 - An EBM morning report, held twice each month, which involved critical appraisal of an article and discussion of biostatistics and information literacy.
 - Table of contents reviews of primary journals, with monthly brief reviews of articles. This is done to get residents accustomed to using the literature.
- All attending physicians participate in all activities and act as role models.
- ## Infectious Diseases Clinical Conference
- A librarian attends the weekly Division of Infectious Diseases case conference, which encompasses journal club, board review and case management. During the conference, the librarian conducts literature searches of PubMed and a variety of resources to answer clinical questions in real time. This activity is recorded as part of the Division's ACME evaluation. Attendance is a mix of attending, fellows, residents, students, laboratory personnel, and nurses.

EndNote Instruction

UofL Libraries serve as the central provider of training for faculty, staff and students in the use of Endnote citation management software, which is available campus-wide via the University's site license. Classes are offered monthly on and off-site. The popularity of Endnote training has provided yet another means for us to integrate our services into the existing training regimes in Pediatrics. In addition to providing basic and advanced Endnote instruction, we offer Endnote "Housecalls" to assist faculty and staff in software installation, and the configuration of their Endnote libraries to connect to our library's resources for finding full text articles, or requesting "document delivery" or interlibrary loan services. Technical support also is available upon request to troubleshoot and solve basic operating problems and issues. Recently we began expanding the concept of the program from "citation management" to "knowledge management" by instructing users how to create, organize and manage their own electronic libraries. We also have introduced a new "information delivery" service using Endnote libraries as the platform for delivering the results from patron-requested literature searches. We are currently investigating additional ways to customize Endnote training and services to meet the information, research and publishing needs of our patrons.

Challenges

As always our biggest challenge is always a shortage of librarians available to provide these kinds of intensive, directed information services. We have only 3 librarians who can participate. This makes expanding this service to other departments almost impossible. In fact, a Pediatrics' faculty member stated, "We don't want to share you with other departments. You have the perfect skill set to support our research and teaching."

Such expansion is also hampered by our inability to make inroads in other departments. This is a consistent problem in all liaison efforts. The

ability to connect to a department seems to rely on serendipity, meeting the right person at the right time.

We have found that half the battle is won by just showing up, that being visible is essential, that it is our continued and ongoing presence that generates comfort with our inclusion in the group and hence more inclusion in the work of the department. It is hard for many librarians to endure the initial discomfort of strangeness and anonymity in this new environment.

Evaluation

A preliminary survey (n=17) of residents indicates that the librarians' involvement in the Pediatrics residency is highly valued. 74.5% indicate that their literature searching skills have improved. 52.9% report that involvement of a librarian in preparation for Chairman's Conference saved them time. 68.8% indicate that their knowledge of information resources has increased.

88.2% indicate that librarians should remain involved in the Pediatrics residency program

On a broader scope, overall, the number of literature searches librarians perform for the Pediatrics department has increased by XXX. The number of email or telephone calls received from the department has increased by XXXX. The number of EndNote sessions, as compared to those in other departments is X to Y. Finally, anecdotal feedback is encouraging:

"You might not have a PhD, but you are worth it."

"You saved me hours of time."

"I learned a lot more than I thought I would. I've been wondering about this for a long time."

Lessons Learned:

Being visible is essential. Word of mouth is the best form of building awareness.

It is better to concentrate efforts in one department.

Our assertiveness in selling our services and interest was received eagerly. Waiting for someone to call us didn't work. .

Next Steps

We need now to review the status of this relationship with the Department Chair. We need to cement this relationship at the highest level to ensure its continued success.

Four new programs have been initiated in the Department in forensics, autism, sleep and obesity. We need to decide if there are appropriate opportunities for our services here and if we are in a position to expand our services by offering them.

We need to develop further evaluation tools to document the value of our services and help determine ways we can improve what we are doing. Feedback on literature searches is very rare and we would like to develop an evaluation tool for that which could then be used as the basis for evaluating our library instruction classes.