EAHIL 2018 Abstracts

5. (Presentation) Cat Museum. A space of public health intervention

Laura Ambrogi, Greta Veronica Berteselli and Monica Bucciarelli

Objective: The aim of this presentation is to describe the building-up of an Italian heterogeneous professional network encompassing librarians, veterinarians, experts in history of art and architects using the Museum as a tool to improve the citizen quality of life through cultural and scientific approach with possible positive impacts on health promotion and illness prevention.

Methods / Description: The "Museo del gatto" (Cat Museum) was established in Teramo (Italy) in 2016 from a private donation of art objects, books and "feline souvenirs" to the Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise (IZSAM) - a national public health institute, which operates as a technical and scientific organisation of the Ministry of Health, the Abruzzo and Molise Regions in the field of veterinary public health. The infrastructure that host the exhibition has been provide by the city council thanks to some regional funding.

The Museum, particularly in the thematic and exhibition, contributes to the local regeneration recently destroyed and compromised by a severe earthquake (Abruzzo Region, central Italy) whether transforming dark alleys in urban theatre proscenium where the community plays a new learning capacity or as health-promoting organisation. The location of the Cat Museum, inside a medieval house in a hidden area of town, decentralized from the commercial streets, concurred with urban regeneration planning and design strategy.

Results: Cat Museum becomes a pretext to preserve the collection, the memory of the donor and the local culture and particularly to promote human's wellbeing through animal's health, specially involving schools and children. The first way is through human-artistic manufacture relationship, namely a proactive role of the citizen not only as the final consumer, but also as actor asked to participate actively in the construction of museum through donations, suggesting topics to explore. The second way is through the human-animal relationship based on the improvement of animal behaviour and welfare knowledges in order to promote responsible ownership and to establish a correct relationship meeting companion animals and their ethological needs. According to city council, part of the collection could become, with the facilitation of psychologists and museum operators, an instrument to touch and

talking about to overcome traumas trigging memories and associative or meaning making cognition, supported by human-animal relationship in holistic health program

Keywords: Museum, wellbeing practise, illness prevention, animal's behaviours, professional network, holistic approach

8. (Poster) Adding Value: Literature Searching Support for Funded Research
Deirdre Andre, Sally Dalton, Kirstine McDermid and Pat Spoor

Objective: Exploration of the University of Leeds experience of expanding its' charged for literature searching service, enabling it to support the University's research strategy and generate income for the library.

Methods / Description: In 2016 the University of Leeds Library expanded its charged for literature searching service, increased staffing and actively promoted it across the University. Three librarians from within the Research Support Team, experienced in literature searching for health, were given responsibility for delivering the service, alongside their other duties within the team. Marketing is undertaken on an ongoing basis to attract new customers. Face to face promotion of the service through presentations to research groups and faculties has proved particularly successful. The offer of free scoping searches in return for being costed into proposals has proved to be a winning strategy in terms of encouraging researchers to try out the service.

Results: The expansion of service has enabled the Library to better support researchers by adding value to funding proposals and subsequent successful proposals. Researchers are keen to use the service as including high quality literature searches as part of grant applications is increasing their proposal success rate. While the service initially supported health researchers, it has now branched out to support researchers in other faculties such as Education, Arts and Social Sciences. Promotion and provision of the service has resulted in the research support team developing new contacts with researchers and research support staff across the University as well as generating a revenue stream for the Library.

Keywords: Library services, Fees and charges, Research Support, Academic Libraries

10. (Presentation) Neighbourhood Co-Production- improving provision of health & wellbeing through public libraries
Norah Williams and Christine George

Objective: Demonstrate what Torfaen Library and Information Service has delivered to support the health & wellbeing of residents in our communities. Also to demonstrate that health and well-being is accepted as a core tranch of our service until 2023.

Methods / Description:

- Promoting the social, neutral space of public libraries, non-institutional, non-judgemental.
- Maintaining the core service of providing information tailored to need in a timely manner.
- Offering appropriate support, through listening, providing advocacy and sign-posting.

- Co-production - working in partnership with local services, organisations and agencies to the benefit of individual's issues.
- Co-production – working in partnership to establish the library service as a provider of regular supportive group therapies e.g. Shared reading, art & craft, knit'n'natter.
- Welcoming partners into our buildings for mult-agency promotions, education and training.
- Identifying new partners and trends to grow community participation.
- Innovative – open to new ideas.

Results:

- The positive impact on members of the local community, both individuals and groups.
- The value of the Health & Wellbeing Information &Support Service being recognised by the local council and being adopted as a core service.
- Embedded within the Strategy for the Library and Information Service from May 2018
- Recognition by the wider community of the value of support services offered by our library service.
- The continuing success of regular shared reading group sessions underpinned by partnership working.

Keywords: Community engagement; Partnership working; Responding to need; Accessible; Non-judgemental

13. (Workshop) The knowledge gap in critical care: perspectives from a patient, a doctor and a librarian

Girendra Sadera, Victoria Treadway, Ian Prothero, Sioban Kelly and Jayne Garner

Objective: To gain an understanding of the barriers to effective knowledge exchange in a clinical environment through storytelling. To explore how library and knowledge services can meet the needs of different stakeholders through the provision of targeted, personalised library support.

Methods / Description:

Ian's story:

Ian was in critical care for 3 weeks in 2007 after a road traffic incident, spending 10 days in an induced coma with two broken legs and a laceration of his small intestine which led to sepsis, peritonitis, ARDS and kidney failure. He suffered delirium and a nervous breakdown during his recovery. Ian will tell the story of his stay in critical care and his slow recovery, reflecting on how better information could have made a difference to his journey and the reasons why he has subsequently become involved in research.

Girendra's story:

Dr Girendra Sadera is a Consultant in Critical Care. He will introduce the research study that is underway at Wirral and the relationship that the department has with the Library & Knowledge Service. Girendra will present findings from focus groups undertaken with critical care patients and family members, discussing emerging themes including the format and timing of information delivery, the patients'

relationship with the bedside nurse and the importance of trust between the family and the critical care practitioner. Data from the focus groups shows there is a gap between the information that the patient / family need and the information they are given; Girendra will reflect on how library professionals can enable this gap to be filled.

Victoria's story:

Victoria is the Library & Knowledge Service Lead at Wirral and has led the delivery of embedded library support in critical care since 2010. She will offer her perspective on the opportunities and challenges faced by library professionals in supporting the knowledge requirements of the patient / family directly. Victoria will reflect on her experiences of entering the world of research and the skills that she has developed as a result. She will discuss the future plans of the Wirral research team in focusing on the knowledge requirements of critical care patients and families at risk of post-traumatic stress.

Results: The session will conclude with an opportunity for audience members to offer their perspective on the stories that have been shared and to pose questions to the presenters.

Keywords: Critical care; embedded librarianship; patient information; knowledge exchange

14. Training and Development for Arts in Health in North Wales.
Susan Liggett and Andrea Davies

Objective: This presentation/workshop will discuss a collaborative research project between Wrexham Glyndwr University (WGU) and Betsi Cadwaladr University Health Board (BCUHB) that aims to guarantee that the delivery of its arts activities have a positive impact on health, are of high quality, and are sustainable for the future generations of people living in North Wales.

The idea is to firmly embed the arts within existing healthcare structures at BCUHB through the training of artists and heath care practitioners. The competencies needed to facilitate arts projects will be identified through the testing and measuring of attributes needed by staff. It is hoped that this will lead to the development and delivery of accredited training packages that ensure that the arts within BCUHB are of the highest standard nationally and internationally.

The positive benefits of arts interventions are well known; and this research will specifically identify 'how' arts activities improve the well-being of BCUHB service users. It will assess the competence of past and current BCUHB arts practitioners, and the quality of their outputs to develop a new curriculum required for staff training. Ultimately it will establish growth in arts and health outputs within BCHU through clearly articulated role descriptors in staff recruitment that will be benchmarked against national standards. The research begins in

Sept 2018 and within three years will identify the impact of BCUHB arts activities; giving a more detailed description of how participation in the arts provides social contact, a sense of purpose, increased esteem, leads to de-stigmatisation of health conditions, increases confidence and, a sense of agency for those living with compromised health conditions.

Keywords: Arts in Health; Engagement; Agency; Well-being; Training

17. (Workshop) A Space Odyssey: A workshop on coping with change and planning for the future

Veronica Phillips, Jo Milton and Eleanor Barker

Objective: This workshop is intended to facilitate discussion of, and planning for, significant changes to library services. Participants in this workshop will identify core services in their own libraries, adapt service design to enable the continued delivery of services, and determine the most effective ways to communicate changed methods of service delivery to users and measure the impact of the changes.

Methods / Description: How well prepared is your library to cope with change? How would you adapt in order to maintain a high level of service during challenging circumstances, and how would you communicate any changes to users? How would you both measure the impact of those changes and continue to demonstrate the impact of your library service? This interactive workshop is aimed at both library managers and frontline staff interested in planning to cope with change. The workshop will consist of hands-on activities and discussions, as well as opportunities for participants to share their experiences of adapting to difficult circumstances, and learn about innovative and creative solutions undertaken by colleagues working in a variety of countries and sectors to continue inspiring, involving and informing in the face of challenges.

Results: Workshop attendees will:

• gain confidence in dealing with change in innovative ways

• learn new communication strategies

• develop techniques to measure and demonstrate the impact of the library and maintain the visibility of their service in the face of change

• determine methods to plan and prepare for future challenges

Keywords: Service design, future planning, interactive workshop, measuring impact, communication

19. Improving Participation and Physical Activity for Survivors of Brain Injury through a Library Volunteer Program

Rachel Stark and Preeti Oza

Objective: To develop a volunteer program for survivors of brain injury that increased survivor participation and physical activity.

Methods / Description: Collaboration between a local public library, a licensed physical therapist and faculty member at a local university, and a medical librarian led to the development of a pilot project that brought in community members with brain injuries to volunteer at the local library. Participants were tested for fall risk, assigned duties based on that assessment and asked to participate in monthly check ins with the principle investigators and to complete a number of measurements that indicated if the program improved their physical activity. At the end of the yearlong pilot program, participants

were surveyed to get their opinion about the program, and library staff were surveyed to ascertain any additional burdens and effectiveness of the program.

Results: The clinical measurements, BBS, TUG, ABC, and MoCA, showed no statistically significant improvement, however the survey results were positive. Program participants indicated that they enjoyed the program, and that they felt it was beneficial for them. Librarians and library staff responses indicated that the program was not a burden, and that the volunteers in this program were more helpful than volunteers in the general volunteer program.

Keywords: Collaboration; Volunteer Program; Traumatic Brain Injury

20. (Presentation) "Young Scholars Nurtured Program" of Taipei Medical University Library: Scholarship of Textbooks for Economically Disadvantaged Students

Shu-Yuan Siao, Tzu-Heng Chiu, Li-Ting Chien, Hua-Yu Hsu, Li-Chuan Huang, Hsiao-Fen Yu, Yue-Ling Wang and Chun-Hui Shen

Objective: In 2017, the definition of low-and-middle-income households of Taipei City is each family member earn less than NT$22,207 (ca. £$555.18) per month. The proportion of economically disadvantaged students accounts for 3.1% of the student population in the Taipei Medical University. In order to help economically disadvantaged students buying their textbooks, the TMU library raises fund for the "Young Scholars Nurtured Program", giving scholarship for applicants to purchase needed textbooks. This poster presents the operation and results of this program.

Methods / Description: This program was launched in August 2014. Since then, economically disadvantaged students can apply for a NT$2500 (ca. £$62.5) scholarship for needed textbooks in the beginning of every semester with the total budget of NT$250,000 (ca. £$6,250). This program is conducted in the following steps: (1) announce and accept applications; (2) organize bibliographies of needed textbooks; (3) purchase books; (4) give books to the applicants; and (5) collect feedbacks via questionnaire. The survey included 5 items :(1) Are you a first time participant of the program? (2) Do you satisfy to the timeline regarding of receiving books? (3) Does this program enrich your learning resources? (4) Overall satisfaction of this program, (5) Comments and suggestions.

Results: During the 3 years' period, the scholarship has been carried out for six times and 227 students from 8 colleges attended this program. In total, 527 textbooks in which 400 of them are written in Chinese and 127 in English costed NT$435,194 (ca, £$10,880) have been given. The number of applicants from each college are: 69 for college of medicine, 20 for college of oral medicine, 43 for college of pharmacy, 39 for college of nursing, 8 for college of public health, 19 for college of medical science and technology, 12 for college of management, and 17 for college of nutrition. The top 10 requested textbook books are: "Handbook of National Examination: Medicine", "Biochemistry (Eng.)", "Pocket Medicine (Eng.)", "Manual of Clinical Use Antibiotic", "Community Health Nursing", "Handbook of Electrocardiography", "Adult Health Nursing", "Illustrated Atlas of the Commonly Used Chinese Material Medic", "Financial Management of Health Care Organizations" and "Practical Medical Law".

Conclusions: Based on the result of the survey, the average point of overall satisfaction was 4.77 in a Likert-Scale five- point measure questionnaire, and most of the applicants felt this program is very helpful. However, some students did express they hope the library can give them money directly to purchase needed textbooks themselves to save the processing time. In the future, the TMUL will adjust

the operating procedures and try harder to the fundraising, therefore more students can benefit from this program.

Keywords: Young Scholars Nurtured Program; Economically Disadvantaged Students; Taipei Medical University; Scholarship for Textbooks

21. (Poster) Assessment of systematic review search methods for risk of bias: common inadequacies and errors in the conduct and reporting of search strategies

Shelley de Kock, Janine Ross, Lisa Stirk, Caro Noake, Kate Misso and Steven Duffy

Background: A substantial number of systematic reviews fail to follow recommendations for the conduct and reporting of search methods despite the availability of Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and the Cochrane Handbook for Systematic Reviews of Interventions.

Objectives: We aimed to analyse the main reasons for systematic reviews being assessed as high risk of bias in Domain 2 (Identification and Selection of Studies) of the ROBIS (Risk of Bias) tool.

Methods: KSR Evidence is a bibliographic database of systematic reviews, of which a number have been critically appraised using the ROBIS tool. For our analysis, we used a sample of the critically appraised records which had been assessed as high risk of bias in Domain 2 and which also had an overall high risk of bias. All included critical appraisals were independently checked by a second reviewer so we were confident that the ROBIS assessment was accurate. This gave us 312 systematic reviews which we were able to analyse further to identify common weaknesses in the searching and identification of studies for systematic reviews.

Results: The most frequent reasons for systematic reviews to be assessed as high risk of bias in Domain 2 was the failure to report a full search strategy, poor reporting of search methods, inappropriate searching limits, not searching a sufficient number of resources and undertaking no supplementary searches. From the systematic reviews which did provide search strategies, we noticed common flaws such as no thesaurus terms, a single strategy used for all resources, a lack of synonyms, no variants for UK/US spellings and no searching for singular, plural or alternative forms of a word.

Conclusion: Systematic reviews are being assessed as of high risk of bias in Domain 2 for reasons which, in some cases, could be avoided or with a little more rigour, improved upon. For example, with the electronic provision of articles, word limits are less applicable, so it is often possible to include a full search strategy in line with PRISMA recommendations. In addition, clear reporting, such as listing the database, host provider, coverage of the database and the dates the search was undertaken ensures that a systematic review is reproducible. We maintain that a comprehensive search is fundamental to the quality of a systematic review and is the foundation of a good systematic review. To maximise retrieval of the most relevant evidence, a search strategy should include thesaurus terms (when available); there should be a range of synonyms including different spelling variations, singular, plural and different forms of a word; and the search strategy should be translated between resources to ensure that differences between resources are accounted for. A range of resources should be searched, and this should include a search for unpublished 'grey' literature as well as reference checking. In

conclusion, we believe common failures in Domain 2 undermines the overall value of systematic reviews and, in so doing, contributes to unnecessary research waste and may impact on clinical decision-making.

29. (Workshop) Open Access publishing and open science – what is the role of medical libraries?

Jasmin Schmitz

Objective: The aim of the workshop is to work out the role medical libraries can play with regard to open access and open science.

Methods / Description: Open access publishing is becoming more and more relevant especially in medical subject areas. On the one hand, there are various mandates by funding organisations like the European Commission in Horizon 2020, Wellcome Trust, NIH, WHO – just to name a few. On the other hand, in some countries open access publications play a decisive role in university evaluations (e.g. REF in the UK). Apart from these requirements the idea of open access publishing is extended to publication formats other than journal articles and applied to books, conference proceedings and research data as well. As a whole the topic is becoming rather complex and keeping up-to-date turns out to be a challenging task: Besides general aspects of open access such as the difference between the gold or green way, enhancement of the visibility of publication and improvement of access to scientific literature, further aspects need to be considered, such as finding appropriate journals for publication, differences between "pure" open access and hybrid journals, copyright and licencing issues, as well as the financing of publication charges. The effect open access can have on the career advancements of researchers is another aspect of interest.

The workshop will be basically an exchange of experience with regard to the following questions:

* Which services do medical libraries already offer with regard to open access and open science or are they planning to offer?

* Which issues and questions related to open access publishing do libraries encounter?

* Which tools (such as websites or online services like SHERPA/RoMEO or OpenDOAR) can be used either for personal information or for providing advice to researchers and other library customers?

Participants are encouraged to share their ideas, experience and (best) practices.

Results: The outcome of the workshop should be that participants get an idea which role their library can realistically play with regard to their resources.

Keywords: Open access; open science; publication services

31. (Poster) Usability testing of our library's new website revealed interesting insights into customers' search behaviour

Sabine Klein, Andreas Bigger, Nenad Milosevic, Nadine Seekirchner, Christine Verhoustraeten and Adrian Funk

Objective: Since the University of Zurich required all departments and institutes to use the same content management system, a relaunch and makeover of our Main Library's website (http://www.hbz.uzh.ch) was planned for 2017.

Following Steve Krug's book "Don't make me think, revisited", we reduced the contents of the sites and tried to build an easily understandable and straightforward navigation for the users. To verify our concept, we arranged "do-it-yourself" usability tests. To our knowledge, such tests had not been performed before at our university.

Methods / Description: We scheduled three test sessions in monthly intervals with three customers on each date. Using flyers, science, medicine, and nursing students were recruited.

One person of the web relaunch team led the user through the test. The other team members were following the test in another room, watching a transmission of the screen of the test computer and listening to the user's comments. The sessions were recorded using teamviewer software.

The tests followed a strict protocol. The purpose of the usability testing (which was not a testing of the user's abilities, but the website's functionality) were explained. We asked the users to freely tell us what they were thinking about the website, and not to worry about hurting our feelings.

After some introductory conversation, the users were asked about their first impression of the homepage: which services did we offer, who stood behind this website etc. This was followed by three to four specific questions that varied between test sessions. Questions were e.g. how do you find a text book, possibly an electronic version; in which journals could you publish an open access article; can you find and reserve a room for your study group tonight; how do you borrow books from the library; how do you become a submitter to ZORA (Zurich Open Repository and Archive)?

The web relaunch team would write down the observed strengths and weaknesses of the website during the test. Subsequently, these were discussed, prioritized, and measures to be taken until the next test round were decided. Test persons were rewarded with a voucher and Swiss chocolate.

Results: The usability tests revealed an insight into our customers' search behaviour and expectations, which helped us to improve our website. These tests were cheap and easy to do. Three persons per test were sufficient to find out what had to be improved on the website (and were more helpful than hours of discussion among the team).

Some findings were: Although the content management system allowed to use three columns, users would seldom pay attention to the third column. Longer texts would not be read. Terms needed to be clear to the customers, not only to the librarians. Links within a sentence were difficult to find for the users.

Altogether, usability testing helped us to understand our customers better, to improve our website, was entertaining and a novel way of interacting with our customers.

Keywords: website, usability, customer, feedback, interaction

34. (Presentation) Lux Humana – Bridging Science and Humanities

Martina Torppa, Tiina Heino, Line Kurki, Katri Larmo, Jussi Männistö, Paula Remes, Pertti Saloheimo, Lena Sjöberg, Sonja Sulkava and Heidi Wiikla

Our presentation covers Lux Humana, which is a successful cooperation of the medical faculty and the medical library Terkko in the University of Helsinki.

Lux Humana promotes medical humanities, which is an interdisciplinary entity encompassing humanities (literature, philosophy, ethics, history and religion), social sciences (anthropology, cultural studies, psychology, sociology, health geography) and arts (literature, theater, film, and visual arts), which have an application or are relevant to medical education or practice. The Lux Humana action group consists of medical teachers and librarians. It offers a concise, high quality collection of fiction, art and other non-medical scientific books at Terkko medical library. Equally important with the collection are the Lux Humana events: expert lectures, literary evenings with authors, performances with artists and film nights with special themes (e.g. physicians in films). Writing contests in poetry and short stories for medical students, doctors and other professionals, judged by recognized Finnish authors, have also been organized. The literature courses introduced by Lux Humana have been integrated into the curriculum and since autumn 2017 students can even get credits when participating in the Lux Humana events. The activities of the group are acknowledged among the whole medical profession in Finland, as Lux Humana book reviews are regularly published in the Finnish Medical Journal. The Finnish Medical Society Duodecim has even granted the group the Cultural Award in 2006. In 2017 Lux Humana was presented to the international audience in the AMEE (Association for Medical Education in Europe) Conference in Helsinki, with a very positive response.

The Lux Humana was founded in 2005, so over ten years, this spontaneous and voluntary action has had an impact both locally and nationally. Enthusiasm matters.

We would like to share this concept and cooperation in EAHIL community.

35. (Poster) Using evidence mapping in Public Health Wales

Amy Hookway and Hannah Shaw

Objective: The Public Health Wales Observatory Evidence Service was established in 2014 to support evidence informed decision making that underpins practice, programme development and policy. We help Public Health Wales staff and other stakeholders to find, understand and apply evidence through literature searches, evidence maps and evidence reviews. Questions relating to public health are often very broad, the spectrum of end user can vary enormously from public health specialists to stakeholders, and the purpose of the work can be different. These aspects need to be considered carefully when choosing the best approach to presenting the evidence.

This poster will describe how evidence mapping is adapted by the Public Health Wales Observatory Evidence Service to present evidence for a variety of purposes. Evidence maps are useful for exploring broad questions and to describe the evidence landscape. They use a systematic and comprehensive approach to identify, organise and signpost evidence.

Methods / Description: At the beginning of the process, Observatory Evidence Service team members discuss and formulate a search question with stakeholders using a PICO, or similarly recognised

framework. A search strategy is created from the PICO framework, including type of sources to be searched, date limits and any other limits identified. Relevant databases are searched, and results transferred into a reference management system. Once sources are identified, one member of the evidence service team will title screen for relevant articles. The included articles are then transferred into an inclusion/exclusion table where the remaining articles are screened at abstract and full text. Decisions on whether to include each source in the final evidence map are noted for transparency. In order to reduce bias, a second reviewer also screens a sample of the articles, and any disagreements between reviewers are resolved by discussion.

Results: Evidence can be presented in a variety of ways, depending on its intended use. Generally, data and key points from the included articles are extracted to develop an evidence map product. Exactly what and how much detail is extracted and how it is presented will again depend on the end product and user requirements.

Evidence mapping is a useful tool that can be easily adapted, to organise, signpost and summarise a body of existing evidence on a broad topic and present this to stakeholders for their use in public health practice, programme, or policy development.

Keywords: Evidence; Public Health; Synthesis; Systematic; Transparent.

36. (Presentation) The information and data literacy of diet and activity logging among runners

Pam McKinney, Laura Sbaffi and Andrew Cox

Objective: To assess the information and data literacy of diet and activity logging among people who run on a regular basis and compare it to that of people with specific medical complaints such as type 2 diabetes and irritable bowel syndrome (IBS).

Methods / Description: Building on an earlier study, a 12-point questionnaire was developed. The survey was distributed through Parkrun, a charity that organises free to enter, regular five-Kilometre races across the UK and internationally. 143 complete responses were received. A similar questionnaire was also distributed among people with type 2 diabetes (140 responses) and people with IBS (43 responses). This presentation will also report on preliminary comparisons across the three groups.

Results: Runners reported that they were logging to improve their performance (77.6%), to manage their weight (54.5%) and to better understand how their body works (35%). They tended to be using multiple apps/sites/devices. They were often counting steps and recording runs, sometimes monitoring their heart rate as an aspect of this; and a significant minority were also using a food logging app (30%). Runners self-assessed information literacy was high: more than half (59.5%) responded that they were confident in choosing the right app, though this did not necessarily imply that it was on the basis of considerable research. They perceived themselves as being careful about data entry (81.1%) and confident in interpreting the outputs of logging (84.6%) and appeared to be comfortable sharing their online data with other people, in particular friends (55.9%). Some respondents had concerns on how the platforms might use their data (28%) or about continuing access to their own data (28.7%), which suggests a certain level of naivety in their data literacy.

Keywords: Information and data literacy; activity logging; food logging; mobile applications; runners

37. (Presentation) The impact of Clinical Librarians in the NHS: preliminary findings of a national study

Michael Heaton and Cathryn James

Objective: To evaluate the impact of Clinical Librarian (CL) services in the National Health Service (NHS); to build upon the findings of Brettle et al (2016) work undertaken in the North-West; to add to the body of evidence-based literature on the impact of CL; to identify examples of how the role of the CL has an impact in the NHS and to add value to the impact of CL across the UK.

Methods / Description: A mixed-methods approach was used to evaluate CL impact. A qualitative approach was taken with an online questionnaire, followed by semi-structured interviews. The questionnaire was adapted from the toolkit used in the Brettle et al (2016) study. Strategic Leads invited libraries in England, Scotland and Wales to participate in distributing questionnaires to their users who had received a literature search, journal club or training. This would allow for data to be gathered on a particular CL service rather than an overall impression of CL services. An email was sent to all users with a link to an online resource named Smart Survey for responses. Interview participants were randomly selected post the questionnaire returns and a selection of interviews took place.

Results: The study used a mixed methods approach. 677 completed questionnaires were returned from over 40 participating organisations which supported this study. 25 semi-structured interviews took place and were analysed using a thematic approach for supporting evidence on various aspects of impact. This study will feed into the work streams being undertaken by the Quality and Impact Group of Health Education England and support Library & Knowledge Services in developing their own clinical librarian activities.

Keywords: Clinical Librarianship; Clinical Librarian; Impact; National Health Service

40. (Presentation) Escorting doctors to the dark side: easing the transition into management

Katie Barnard

Introduction: In recent years there has been a push to increase medical leadership within NHS trusts.(1) However, medical professionals transitioning into leadership roles report difficulties arising from lack of support, their lack of experience, and a negative perception that they move over to the 'dark side' when they take on management roles. (2) To address this support gap at North Bristol NHS Trust (NBT), a leadership programme was created for newly appointed consultants. As part of this, two staff members from the Library and Knowledge Service (LKS) helped to design and facilitate ongoing discussion sets, which aimed to promote peer-to-peer knowledge sharing and to develop a community of practice.

Objective: The purpose of this paper is to outline the role that LKS staff played in facilitating organisational, technical and emotional knowledge management among a cohort of new consultants at an acute NHS trust. We will also discuss the experience of working with a complex multi-professional team, reflecting on the practicalities as well as successes, limitations, and lessons learned from the project.

Methods / Description: LKS staff collaborated with the medical directorate and the trust's leadership programme to create a development programme open to all newly appointed consultants at NBT. The bi-monthly programme started in September 2017 and will continue until July 2018. Each session includes talks from guest speakers and facilitated discussion sets using action learning techniques. All facilitators, including LKS staff, had previous action learning training. Feedback from attendees will be collected after every session and used to shape the ongoing programme.

Results: We will report and reflect on: - the evolving format of the programme, particularly the discussion group/action learning component. - The collaborative process – both the value of pooling collective expertise and the issues of cross-team working, including cultural differences. - Take-up of the sessions and feedback from attendees regarding their perception of programme content, their learning, and practical application of their new knowledge. - The implications of involvement in this project for the LKS.

Value: This is a case study of an innovative, multi-professional knowledge management project, in which LKS staff have supported knowledge needs within their organisation using non-traditional skills, notably action learning. It also demonstrates both the value and the issues that can arise in LKS collaboration with corporate and executive staff.

References: 1) Darzi, High Quality Care for All: NHS Next Stage Review Final Report. Department of Health. Report no. CM 7432, 2008. Available from: https://www.gov.uk/government/publications/high-quality-care-for-all-nhs-next-stage-review-final-report [Accessed 24th October 2017]. P.60. 2) Dickinson H, Ham C, Snelling I, Spurgeon P. Are We There Yet? Models of Medical Leadership and their Effectiveness: An Exploratory Study. Final report. NIHR Service Delivery and Organisation programme. 2013. Available from: http://www.netscc.ac.uk/hsdr/files/project/SDO_FR_08-1808-236_V07.pdf [Accessed 24th October 2017]. P.199.

Keywords: Collaboration; Action Learning; Knowledge Management; Communities of Practice; Leadership

45. (Poster) Identifying a potential for comprehensive literature review service at the Institute of Oncology

David Ozura

Introduction and aims: A number of systematic reviews (SRs) and other types of reviews published worldwide to assist in clinical decision making is increasing rapidly. A large number of these studies point to the need for expert searching as an opportunity for librarians to develop literature review search service as a key medical library service.

Recently published papers show that the participation of a librarian in a review process is a step to ensure that search strategies are comprehensive, sensitive and reproducible. Librarian-mediated searches are better, than medical staff searches in range of databases and other sources of information searched, in methodical approach, in reliability of results, and in cost-effectiveness.

The aims of the study are to analyse the Institute of Oncology Ljubljana (systematic) review practices and to identify the potential for establishing comprehensive literature review support service.

Methods: In October 2017 literature search was carried out for Institute's published SRs and other review articles in 4 bibliographic databases from 2000 onwards. After de-duplication and screening 46 SRs and 304 other reviews were selected. We conducted a quantitative analysis of Institute's publishing practices and trends as related to reviews.

Online survey was sent to researchers and other healthcare professionals of the Institute. Of 75 responses received, 45 were fully completed and analysed. The survey included questions about information-seeking and review publishing behaviours and about the needs for a librarian's involvement in the review process (consultation on formulating review questions, identifying relevant databases and other sources of information, developing search strategies, use of reference management tools, developing methodology protocol, co-authorship, etc.).

Results: Results of quantitative analysis about the review publishing practices:

• All 46 SRs published in English, of which 15% published in one Slovenian journal

• From 2013 onwards, on average 8 SRs are published per year

• from 2013 onwards, more than 20 other review articles are published per year, from 2015 that number increases to more than 25 articles per year

Results of online survey:

• 60% of respondents asked the Institute's librarian for assistance with systematic searching

• 73% already published one or more (systematic) review articles, 84% of them asked for assistance with searching

• Just 10% of respondents would not want to include a librarian in their teams, main reason being the specific nature of their professional work

• Librarian was never acknowledged as a co-author of article methodology section

• Active researchers want to include a librarian in their group, would like to undertake a course on how to write and publish a review article, and would welcome support when writing methodology

Conclusion: The results of the quantitative analysis show that the number of Institute's (systematic) review articles published is increasing. From survey responses we were able to identify the average library end-users profile with his/her high needs for and expectations from librarian's participation in a review process and in his/her research/clinical team.

The results will help the Institute's library management in planning to establish, develop, implement and promote new library service in 2018 and 2019.

Keywords: literature review service, literature search, role of a librarian, integration, innovation

48. (Poster) Efficient retrieval of clinical trial protocols: a comparison of sources & strategies

Anthea Sutton, Maria Carmen Galvan de La Cruz, Joanna Leaviss and Andrew Booth

Introduction: Registration of clinical trial protocols has become increasingly important in recent years. Various efforts have been made to improve prospective registration of trials, including the AllTrials initiative and the requirement to register trials prior to publication in ICJME member journals. In the context of systematic review, published trial protocols facilitate the identification and quality assessment of included studies. Direct links between trial registrations and published results assist with efficient retrieval, but the data recorded in trial registers is not standardised and bi-directional links are suboptimal at present. There are issues with searching potential sources of protocols, particularly trial registers, including currency, coverage, functionality and indexing. Studies have been published on searching trial registers for included trials in systematic reviews, but not specifically to identify protocols, therefore we present an innovative case study which contributes to the literature and practice of evidence retrieval in systematic review.

Methods: An empirical study was conducted in the context of a funded systematic review, to establish; (i) the proportion of trial protocols retrievable, (ii) the most effective retrieval methods, (iii) barriers to retrieving protocols, (iv) level of compliance with prospective trial registration and any factors that may influence this. Retrieval methods included searching trials registers and bibliographic databases, internet searching, checking journal websites and contacting authors.

Results: Results include; (i) number of trial protocols that were referenced in the corresponding study publication(s), (ii) percentage of protocols indexed in each checked source, including MEDLINE and trials registers such as Clinicaltrials.gov, (iii) number of authors that responded to email contact, (iv) number of authors that provided a reference to, or copy of, the protocol, (v) patterns of protocol registration related to year of publication, funding type, journal type and journal impact factor of the published trial report.

Conclusions: Based on the results of this study and the wider literature, recommendations can be made regarding the coverage of different sources of trial protocols, and the optimum strategies to search these sources. The main barriers to retrieving protocols will be discussed together with recommendations for further empirical studies. Recommendations for prioritising sources and methods will aid Information Specialists and inform future search methods guidance for systematic reviews.

49. (Presentation) From annual report bore chore to action and engagement

Alan Fricker

Objective: Annual reports are a required element for most Library Services yet these documents are frequently uninspiring and largely unread. Why not maximise them as an opportunity for engagement?

Methods / Description: This presentation will discuss how we drew on the model of departmental action plans used by some academic libraries to create a more engaging annual report for our work with hospital Trusts.

We will consider the core elements that have proved useful along with some of the difficulties encountered in pulling it together.

We will explore how the selection of content is underpinned by the principles for good metrics developed for the NHS in England.

Results: Drawing on three years of experience we will consider the difference that the use of this format has made locally. The more engaging style has prompted interest from other libraries and we will look at how it has been received elsewhere.

Keywords: Engagement; Liaison; Promotion

54. (Presentation) Collecting data and stories to demonstrate the impact of a clinical information service – challenges and successes

Anna Brown, Amber Dunlop and Andy Doyle

Objective: To describe and evaluate attempts to collect evidence of the impact and value of the Clinical Evidence Based Information Service (CEBIS).

Methods / Description: CEBIS is a small team of Information Specialists based at University Hospitals Coventry and Warwickshire (UHCW) NHS Trust. CEBIS Specialists work closely with clinicians to provide an evidence search and summary in response to queries raised, as well as facilitating discussion of the evidence and its application in practice.

Initially, collection of CEBIS impact data was ad hoc and the results underutilised. In 2014, an online survey was launched, and a process created to send it out to requestors a few months after their CEBIS referral. The survey included questions about specific outcomes and ratings of usefulness, quality and overall experience. Over time it became clear that, although a useful way of collecting some individual examples of impact, this survey was not providing enough of the right type of data to advocate for the value of the service at Trust level and beyond. In 2017 a new survey was created, based largely on one used by Brettle, Maden & Payne in their study of the impact of clinical librarian services(1), but tailored to local organisational priorities and objectives. It was also informed by Knowledge for Healthcare's Value and Impact Toolkit and request for impact case studies.

Results: An up-to-date evaluation of survey responses will be presented, alongside discussion of challenges relating to the survey's creation, circulation, and handling of response data. The ways in which survey results have been used to demonstrate value and impact will also be outlined. Impact case studies have been used in posters and presentations at national and international conference and published on the Knowledge for Healthcare website. Examples of evidence based changes in practice have been used within UHCW to advocate the recruitment of new staff and encourage engagement with the CEBIS process by clinicians. Collective data will be used in Library and Knowledge Services' annual report to stakeholders.

The new survey is more rigorous than previous attempts at impact data collection, and is based on evidence and experience from other clinical librarian services. It also provides opportunities to report outcomes relating to organisational and Health Education England objectives. Ongoing work is required to improve the response rate and proactively identify case studies for wider dissemination.

1. Brettle, A., Maden, M. and Payne, C. (2016), The impact of clinical librarian services on patients and health care organisations. Health Info Libr J, 33: 100–120.

59. (Presentation) How many search results are enough...and what can we do about it?
Andrew Booth

Objective: To explore explore norms and benchmarks for systematic reviews, around total numbers of records retrieved and numbers of records to be sifted per relevant result, in order to document the extent of variation across review teams and organisations.

Methods / Description: Analysis of data routinely collected in the form of PRISMA diagrams for a purposive sample of systematic reviews, including those that do and do not involve the contribution of an information specialist, as identified by either authorship or acknowledgement.

Calculation of standard metrics such as the number of references needed to be scanned to include one actual included study/one potential included study. Calculation of the total size of results set in order to hypothesise what quantity of results is considered acceptable for screening by different review teams.

Analysis of differences between reviews, together with possible explanations for variation. Production of tentative benchmarks for different types of reviews as identified from specific characteristics.

Results: Notwithstanding considerable variation across review types and review teams it is possible to identify some common norms or expectations that inform selection of a final search sample. The presenter will conclude by outlining a radical, controversial and innovative reconceptualisation of how search strategies could be redesigned, tailored around norms and expectations, and potentially using relevance ranking algorithms to manage the search process.

62. (Poster) Research Data Management in the Biomedical Sciences at KU Leuven: what is the role of the Biomedical Library?
Thomas Vandendriessche

The benefits of Research Data Management (RDM) to a modern academic institution have been well established. In 2014, the KU Leuven approved a policy highlighting the importance of RDM, and determining the responsibilities of both university and researchers. In support of this policy, a RDM work group and support team was gathered, mainly consisting of staff members of KU Leuven libraries and working closely together with members from the Research Coordination Office, the Research and Development Office, the ICT services, and the legal department of KU Leuven. Based on a tool developed by the British Digital Curation Centre, they built a web-based planning tool for Data Management Plans (DMP), adjusted to KU Leuven context and needs. The tool is now available to all KU Leuven researchers, and provides different templates meeting the various demands of specific funders such as Horizon 2020. The accompanying website offers extensive guidance, and is based on the project life cycle model. It is divided into three main clusters, each one containing specific information about RDM in the preparation phase, in the execution phase, and in the final stages of a research project. Since early 2017, RDM workshops on how to write a DMP have been organized for all PhD students. Sessions for senior researchers focus on the publication of data and on specific RDM demands by funders.

In cooperation with the Research Coordination Office, the KU Leuven Libraries distributed a survey to outline and assess current RDM practices and (future) needs of the research departments at KU Leuven. The survey was conducted with the purpose of mapping regional RDM practices in Flemish research institutes first. In 2018, the survey will be continued, but will focus more extensively on the researcher, so that RDM support can be tailored to individual researchers' needs. Gathering from the required feedback on sessions for PhD students, RDM needs are currently situated on three levels: policy (guidelines, legislation), education (training), and infrastructure (payable data storage).

This presentation will provide a clear overview of the development of an RDM strategy at KU Leuven, as well as its current status. Then, it will discuss the RDM needs in the Biomedical Sciences Group, as well as those of a few individual researchers. It is clear that within the Biomedical

Sciences, RDM needs vary significantly among researchers, and that RDM comes with particular challenges, such as large image files, delicate forensic data, sensitive patient information, etc. Despite claims that libraries have lost their significance in the digital age, the Biomedical Library – as this presentation demonstrates – has proven to be a key player in the entire RDM process at KU Leuven.

64. (Presentation) The potential of painting: unlocking Disenfranchised Grief for people living dementia

Susan Liggett and Megan Jones

As part of the "Creative Well" programme at Betsi Cadwaladr University Health Board (BCUHN) North Wales, artist/researchers Megan Wyatt and Susan Liggett qualitatively investigated how painting can access a means of communication for people living with Dementia. In a workshop setting within a gallery environment at Ruthin Crafts Centre, participants living with dementia were facilitated on a one to one basis the opportunity to paint alongside the artist/researchers. The participants were from a well-established art group called "Lost in Art" that is managed by Denbighshire Arts Service.

During the workshops, a number of experiences were articulated. These included experiences of illness, crisis and loss. They were captured through observations, interviews, visual art and video to contribute to new understandings and models of engagement through art for people living with dementia and their carers.

Focusing on theory and practice in arts based research and the social sciences, this paper investigates the potential of painting to unlock experiences such as disenfranchised grief for people living with dementia. The conclusions do not measure how and if participants felt disenfranchised grief but rather provide an alternative to augment the body of knowledge surrounding how people living with dementia can communicate feelings of disenfranchised grief through painting.

Objective: In this presentation I aim to outline the main findings from the above paper that is to be published in an academic journal later in the year on Illness Crisis and Loss published by Sage.

Methods / Description: PowerPoint presentation and Q&A.

Results: See above abstract

Keywords: Dementia; painting; arts based research; disenfranchised grief; Arts in Health

68. (Workshop) Passing on the benchmarking baton: workshop on cooperation methods, using new indicators, finding partners, and reporting results

Tuulevi Ovaska, Karen Johanne Buset and Ghislaine Declève

Objective:

Our workshop aims to

1) Share methods and tools,

2) encourage cooperation and new partnerships between libraries and librarians,

3) build on new indicators that were identified in earlier workshops (e.g. number of high "grade" student essays/exam papers in relation to librarian time spent teaching/tutoring; how has the literature search been used to change practice? impact on national health policies index/indicator),

4) Identify themes and methods for new benchmarking projects, and

5) Find methods and channels to report to colleagues.

Methods / Description: Participants will have the opportunity to meet new partners for future benchmarking projects. They will also have the opportunity to learn and practice tools to use in their own workshops. Findings from the workshop will be published as a paper in Journal of EAHIL. The methods of this workshop will include speed-dating, brain-storming and brain-writing. The required level of participant activity is very high. More about the project: https://benchmarkingthreehealthlibraries.wordpress.com

Results: Our benchmarking project of three European health libraries (the Medicine and Health Library at NTNU, Norway, the Bibliothèque des sciences de la santé at the UCL in Brussels, Belgium, and the Kuopio University Hospital Medical Library at the UEF, Kuopio, Finland) started in February 2013. The project aims to compare services between institutions involved in order to find out best practices in the library and information services in each of the libraries. For four and a half years, we have collected plenty of data and statistics, had dozens of online meetings and a few live meetings, made site visits each of the participating libraries, and maintained a blog where we have shared experiences and thoughts on benchmarking issues. We have also had a focus group session in EAHIL+ICAHIS+ICML 2015 workshop in Edinburgh, prepared and presented a paper at EAHIL 2016 conference in Seville, moreover, facilitated an interactive workshop session in ICML+EAHIL 2017 in Dublin. Most importantly, we have learned a lot. Now it is time to pass on the benchmarking baton.

Our benchmarking project brought us to compare different ways of organising library area and services, of managing staff and coordinate relationships within institution and outside (where to find people to discuss and find clues and solutions), and how to train users to information literacy and establish and maintain connections with faculty and hospital. Current/traditional statistics do not help: they can be compared but do not bring useful information, partly because they do not cover the same reality (e.g. economics, mostly). ISO indicators are difficult to use because countries, cultures and usages are different. We came to the point where want to investigate the value of the library, and that we need some indicators to compare this value. Impact of the project is that EAHIL members took part in our

benchmarking and collaborated during earlier workshops to propose new kind of indicators, which could better address our goals.

Keywords: benchmarking, impact, indicators, networking

69. (Workshop) Critical appraisal of search strategies – a pragmatic approach

Sarah Sutton and Keith Nockels

Objective: To enable any health librarian to look at an existing search strategy and evaluate it to see if it is likely to be effective at finding the information it is seeking to find.

Methods / Description: We will look at a range of literature searches and ways to evaluate them and share the responses of the attendees. We will consider the PRESS checklist (https://www.cadth.ca/resources/finding-evidence/press), our experience of peer review exercises conducted at University Hospitals of Leicester NHS Trust, Leicester, UK. Participants will also contribute their ideas on how this best may be done. Participants will work in small groups to critique a search strategy (possibly more than one, time permitting), using techniques that can be applied to improve their own literature searching skills and inform the ways they teach others to search.

Results: Attendees will feel increased confidence in their searching skills and what constitutes a good search for different sorts of enquiries.

Keywords: 1. Literature Searches 2. Critique 3. Critical Appraisal 4. Pragmatic 5. Workshop

70. Assessing the impact of searching fewer databases in rapid reviews

Barbara Nussbaumer-Streit, Irma Klerings, Gernot Wagner, Thomas L Heise, Andreea Iulia Dobrescu, Susan Armijo Olivo, Jan Stratil, Birgit Teufer, Stefan Lhachimi, Megan van Noord, Tarquin Mittermayr, Hajo Zeeb, Lars Hemkens and Gerald Gartlehner

Objective: We assessed whether limiting the number of databases searched leads to different conclusions about the benefits and harms of interventions compared to the original conclusions of Cochrane systematic reviews (CSR) that used more comprehensive search methods.

Methods / Description: We conducted a non-inferiority study. Our primary outcome was the proportion of discordant conclusions based on different search approaches. We also assessed the database coverage and recall of the different search approaches.

We randomly chose 60 CSR and reproduced their MEDLINE, Embase, and CENTRAL searches. In addition, we used SCOPUS to check the reference lists of relevant citations found by the searches. Using different combinations of these information sources, we assessed 14 different search approaches, ranging from using only one database to a combination of three databases plus reference list checking. If these searches did not detect all studies included in the original CSR, we recalculated effect sizes, revised the original summary-of-findings table, and asked review authors via web-based survey whether the missing evidence would change the conclusions of their report (response rate = 100%). Changes were defined as: "opposite conclusion," "same conclusion but less certainty," and "no conclusion possible."

In an earlier survey consulting more than 300 decision makers from 33 countries, we found that a 10% risk of getting a wrong or inaccurate answer from a rapid review is acceptable. Therefore, a search approach was considered as non-inferior if the proportion of changed conclusions (including a 95% confidence interval) stayed below 10%.

Results: Compared to the references included by the CSR, the median recall of searches using only one database was 75% and 86% when using two databases. Adding reference list checking improved median recall by 7% when one database was used and 4% when two databases were used.

None of the abbreviated search approaches was non-inferior to a comprehensive search. The smallest proportion of changed conclusions occurred when all three databases were combined and the reference lists were checked (8%; 95%-CI 3-18%). Conclusions changed most frequently when only Embase was used (27%; 95%-CI 16-40%). Sensitivity analyses revealed that, if only an opposite conclusion compared to the original CSR is considered a "changed conclusion," any combination of two databases would provide non-inferior results (2%, 95%-CI 0-9%).

The results of abbreviated searches differ from comprehensive searches to a higher degree than deemed acceptable by decision makers. However, using at least two databases in a rapid review search may be sufficient to accurately determine the direction of a conclusion, albeit with less certainty.

Keywords: systematic searching, rapid reviews, systematic reviews

74. (Workshop) The public's challenge to a national treasure – responding to questions posed by patients and the public
Deena Maggs

Objective: The King's Fund is an independent charity working to improve health and care in England. A key part of the Information and Knowledge Services (IKS) work is the enquiry service available to anyone with an interest in health and social care. Increasingly, the service receives queries from patients and the public which can be challenging and difficult to deal with.

The health and care landscape is constantly changing, with an increasingly complex structure, workforce pressures and funding challenges. Typical enquiries IKS receive highlight how people are struggling to navigate the system for treatment or raise concerns about their own or a relative's care. The NHS has been described as a 'national treasure' and many people express views and opinions to the King's Fund as an independent voice about how they feel the NHS could work better. We identify a link with increased enquiries from the public when significant stories about the NHS appear in the media. This parallel session aims to explore some of the issues raises, the types of question asked and how the team respond in a compassionate, evidence based and informative way.

Methods / Description: The session will start with a look at the enquiries IKS receives from patients and the public. Followed by an interactive activity where attendees are given an opportunity to take on real examples of enquiries. Working in groups, attendees will be challenged to offer ideas of how they might reply to the enquirer before looking at the responds IKS provided and what feedback we received. The session will conclude with an outline of future strategic approaches to public enquiries and why libraries, across sectors, have a key role to play in providing evidence base health information to patients and the public.

Results: By the end of the session attendees should have greater knowledge of the public's health and care policy information needs and how to respond confidently.

Keywords: Patient, Public, Information, Health, Policy

75. (Presentation) Making an Impact: Enhancing Library Support for Researchers Funded by the Oxford Biomedical Research Centre

Elinor Harriss, Christine Urquhart, Alison Yeoman, Donald Mackay and Owen Coxall

Objective: Staff at the Bodleian Health Care Libraries conducted a research project during 2017 to explore how embedded library services could support the workflows of the biomedical and translational research community at both the University of Oxford and the Oxford University Hospitals NHS Foundation Trust. The study focuses on researchers funded by the Oxford Biomedical Research Centre and, as well as being applicable to other biomedical researchers in Oxford, the outputs will also be of interest to the wider library community supporting biomedical and translational research centres.

Methods / Description: The aim of the study was to identify the key services that should be provided to healthcare and biomedical researchers and to explore whether an embedded model, similar to that of the informationist role in the USA, would be appropriate for the Oxford context. We used a multi-method approach, triangulating a critical synthesis of the literature evidence with qualitative research (interviews and focus groups). We also looked at services listed at comparable UK higher education (HE) websites to deepen our understanding of the role and to compare and contrast the different services offered.

Results: In this presentation, we will report our findings about the core services that should be part of the standard library offering for this community; the library service and information needs perceived by the Oxford BRC staff; their perceptions of the services that could be provided by an informationist; the skills and knowledge required by library and information services staff to deliver these informationist activities; and recommendations from the BRC-funded staff about the most effective ways to promote these services to them. We will discuss the key messages that came out of the research project, and how we have implemented the recommendations into the work that we do.

Keywords: Information needs; Needs assessment; Translational research; Biomedical research; Medical librarians

79. (Presentation) Supporting evidence-based practice and policy-making: Systematic review capacity-building in librarians in low- and middle-income countries

Sarah Young, Gracian Chimwaza, Blessing Mawire and Erin Eldermire

Objective: Systematic reviews provide the critical synthesis of existing research needed to inform evidence-based decision-making and guideline development. Systematic reviews are commonly performed to address questions related to patient care in hospital settings, but more reviews are needed to address questions related to public health, agriculture, and other areas that are relevant to low- and middle-income countries (LMICs). There are current efforts by the World Health Organization and others to build capacity for systematic reviews amongst researchers in these regions. However, to

our knowledge, little attention has been given to building capacity amongst the librarians and information specialists needed to support this work. Our project aims to address this gap.

Methods / Description: We developed a four-day train-the-trainer workshop to train information specialists at the Information Training and Outreach Centre for Africa (ITOCA) in systematic review methods and delivered the workshop in November 2017. Two of the participants in this workshop then facilitated a pilot workshop for researchers at Muhimbili University of Health and Allied Sciences in February 2018 in Tanzania. The train-the-trainer workshop addressed the challenges of performing reviews in resource-limited settings, focusing on freely accessible tools and resources. In addition to addressing the learning outcomes below, this workshop involved an experiential component in the form of developing a systematic review protocol in the area of information literacy and knowledge management.

Learning for all workshops was assessed and the results can be used to improve and refine workshop materials and delivery methods. Based on these experiences, we hope to build a more formal regional training program for librarians in systematic review methods.

Results: Ten librarians and information specialists participated in the train-the-trainer workshop. The pilot workshop in Tanzania was taught to 37 researchers, including some information specialists. The pre- and post-workshop assessments revealed an increase in confidence in various aspects of systematic review methods, but a need for additional training in meta-analysis and improved access to full-text resources.

We view this project as a first step in regional capacity building amongst information specialists for systematic reviews in health and agriculture. Long-term goals include facilitating partnerships between trained librarians and researchers in sub-Saharan Africa to conduct reviews and engaging health practitioners and policy-makers in identifying needs for evidence and the translation of systematic review findings.

Keywords: Systematic reviews; Low and middle income countries; Evidence-based decision making; Capacity-building; Library and information science

81. (Presentation) Educating a Global Healthcare Workforce: A Model for International Online Degree Programmes

John Cyrus, Nita Bryant and Sonya Lipczynska

Objective: Describe an innovative model developed by librarians to support an international online degree programme.

Methods / Description: The global scope of addiction requires an international effort to ensure that future researchers and frontline professionals - MDs, nurses, social workers, pharmacists, those in law enforcement, public health and government policy – enter the workforce with core information competencies that facilitate evidence based practice (EBP) skills.

The International Program in Addiction Studies (IPAS) is an international degree program designed to meet these needs. In this paper we discuss the role of librarians from the UK, US, and Australia in an international collaboration between libraries from Kings College (UK), Virginia Commonwealth

University (US), and the University of Adelaide (AU) as well as the utility of the model for similar efforts in the future.

Over five years of working closely with the degree programme, librarians noticed gaps in student skills based largely on hidden curricular elements (i.e. skills not covered formally, but expected to be learned).

In collaboration with faculty and with funding support from one university, librarians were embedded into the online course management system (CMS) and reviewed course syllabi in order to design supplemental material and implement assignments to support faculty expectations and student learning outcomes.

Additionally, librarians created a single web portal, enabling students to access resources and services from three partner institutions. A unified site within the CMS was also designed to host training materials on information competencies and EBP. Each term, librarians added and revised content related to information competency and EBP skills.

Results: Our work designing and implementing a comprehensive support model for a single programme led us to believe that our underlying principles could be applied in other contexts. Content created and organized for specific courses is being assigned by faculty to supplement the curriculum, and librarians are actively involved in course-based discussion boards as well as individual student consultations.

While this model works well in its current form, it could be tailored to other contexts. This includes creating formal connections and delineations of expectations across partner institutions. Due to the importance of formalizing this infrastructure, we believe that any such model is best accomplished by working with a programme while in development or at least from the early stages, as it is significantly more difficult to retrofit these relationships.

International research and online degree programmes are likely to increase over the next decade to address a wide range of global health problems. Despite global interest in this work (ICUDDR, SALIS, UCONN),] the scalability of this model to larger programmes is yet to be determined. Regardless, libraries and information professionals are central to the conversation around supporting these programmes. Finding innovative ways to provide access to library resources, services, and expertise should be considered as a fundamental component of building and creating online degree programs.

Keywords: Information literacy, evidence-based practice, addiction studies, online education, international

90. (Presentation) Abbreviated versus extensive searches: a meta-epidemiological study

Hannah Ewald, Aviv Ladanie, Irma Klerings, Gernot Wagner, Thomas L Heise, Andreea Iulia Dobrescu, Susan Armijo-Olivo, Jan M Stratil, Stefan K Lhachimi, Megan van Noord, Tarquin Mittermayr, Gerald Gartlehner, Barbara Nussbaumer-Streit and Lars G Hemkens

Objective: To assess how treatment effects based on studies found with 14 different kinds of abbreviated searches agree with effects based on comprehensive searches from Cochrane reviews.

Methods / Description: Eligible were all Cochrane Reviews published between 2012 and 2016 that drew a conclusion on the treatment effect, that had a summary of findings table, that had reproducible meta-

analyses and search strategies, and that focused on priority conditions (cardiovascular disease, cerebrovascular disease, osteoarthritis, chronic respiratory conditions, or mental health) [1]. Of these, we randomly selected 60 Cochrane Reviews and determined those with at least one binary endpoint in the summary of findings (SoF) table. Of the 47 resulting reviews, we used the first primary endpoint mentioned in the SoF-table and corresponding meta-analysis.

We replicated the original searches of the Cochrane reviews and used them to search MEDLINE, Embase, and CENTRAL. We either searched the three databases alone or combined, and with and without reference list search. This approach resulted in 14 combinations of abbreviated searches and overall 658 search strategies for the 47 Cochrane reviews. For each combination, we recorded how many of the trials included in the eligible meta-analysis of each review were found. Using random effects meta-analyses, we then combined these trials to new overall treatment effects. We assessed how often the estimated treatment effects of the Cochrane reviews and the newly calculated ones deviated in direction, nominal statistical significance, and beyond chance. In a meta-epidemiological analysis we estimated the overall relationship of the effect sizes derived from abbreviated and extensive searches.

92. (Poster) Knihovny.cz - library discovery platform in the Czech Republic

Iva Zadrazilova, Lenka Maixnerova

The aim of this paper is to present new central searching platform of Czech libraries. Portal Knihovny.cz provides unified access to services offered by Czech libraries - for everyone, from everywhere and at any time. This portal allows to search catalogues of all participating libraries using a single search bar. The project belongs to the priorities of The Strategy for the Development of Libraries in the Czech Republic for years 2017–2020 and the development of the portal is supported by the grant program of the Ministry of Culture of the Czech Republic.

The 6600 libraries in the Czech Republic work in a heterogeneous environment and use various commercial, open source or proprietary library systems. The portal Knihovny.cz includes libraries of different types, such as public libraries (national, county, municipal), specialized and academic libraries as well. That is why the portal authors have to deal with deduplication issue (duplicate records of documents) as well as breaking the RDA cataloguing rules.

In 2017, EBSCO's central index was implemented into portal and will help to search in a range of quality scientific journals, specialized databases and more electronic resources worldwide. The portal is integrated with the System of National Authorities and complemented by Medical Subjects Headings thesaurus (MeSH).

There are some barriers leading to a relatively small number of involved libraries for now. The problems are particularly in the technological area, missing technical support, lack of time, money, information and unwillingness to make changes appeared within all types of libraries. There are technical requirements (OAI-PMH and NCIP protocols) for the libraries which are interested to join the portal. Many libraries are worried about planned ILS and document delivery service under the new rules. One of possible solution is to educate librarians and try to explain all advantages of participating and collaboration.

At the moment, more than 32 institutions and about 15 local sources are involved in the portal. The number of available documents is around about 13 mil. local volumes and 300 mil. Foreign records. In the field of medicine and health care, the portal includes the catalogue of the National Medical Library, the bibliographic database Bibliographia medica Cechoslovaca and the Czech translation of MeSH. EBSCO Discovery Service packages include Medline, Cinahl Complete, Supplementary Index (Elsevier, Wiley, Springer, Nature, Sage, Oxford, Cambridge, etc.). Next resources extension will cover catalogues of medical, health and pharmaceutical academic libraries, Czech translation of ICD, medical online dictionaries, MEFANET (teaching portal for physicians and students of other medical and clinical disciplines) and Digital Library of National Medical Library.

The Czech Republic has the densest public libraries infrastructure in the European Union. Knihovny.cz has the ambition to become the gateway to the most of them.

96. (Presentation) Showcasing the Impact of Health Libraries in England

Jenny Turner and Dominic Gilroy

Objective: To provide an overview of how impact evidence from local NHS library services in England has been used at both local and national level. The practical examples will help delegates to identify what may work in their own services or explore new ideas generated by the session.

Methods / Description: ISO 16439:2014 defines impact as the "difference or change in an individual or group resulting from contact with library services". As such it is distinct from feedback relating to customer satisfaction or customer preference.

For many years NHS Library and Knowledge Services have been required to demonstrate the impact of their services and evidence this as part of the annual Library Quality Assurance Process (LQAF). A variety of tools are available to assist libraries in undertaking impact assessments, not least the recently developed Knowledge for Healthcare Value and Impact Toolkit.

Collecting impact data, however, is only useful if this data is used to evidence the business-critical functions which the library and knowledge service fulfils. Library and Knowledge Services need to champion their organisational impact at local level by including data in annual reports and promotional materials and by highlighting to stakeholders at every opportunity.

At national level there is also a need to showcase the value of health libraries ensuring the role of health library and knowledge services is visible to high-level decision makers influencing thinking and policy.

Results: This presentation will provide examples of how local NHS library and knowledge services have used impact data to promote their services. It will explore how tools have been developed to capture both qualitative data from case studies and quantitative impact data from questionnaires generated by local services. Finally, it will provide examples of how this data has been used at national level in support of campaigns such as Knowledge for Healthcare

Keywords: Impact of Library services; Promoting library value

106. (Workshop) Making, Moving, Mutuality: creating Memories that Matter: The development of a person centred resource collection and programme of tailored activities, delivered in partnership with internal clinical teams and external organisations.

Caroline White, Lisa Briscoe and Emma Bailey

Objective: The Derby Hospitals Library and Knowledge Service has developed a collection of reminiscence resources with a difference. They are promoted throughout the organisation to increase patient engagement. This has provided an opportunity to engage with local organisations through their sponsorship of themed boxes, and thus increasing our partnership responsibilities.

The development of the Trust Dementia Strategy and the emergence of new roles including the Dementia Key Workers and the Arts and Activity Co-ordinators, provided us with the timely opportunity to develop this service. This has helped us to optimise staff roles both within the Library team, and also those emerging clinical roles in order to support their interactions with patients. We have developed a strong working relationship, with the Library delivering relevant and timely support when needed most.

Methods / Description: For the themed boxes, organisations were approached with historical relevance to Derby such as; Derby County FC, Royal Crown Derby, Boots Pharmaceuticals, Rolls Royce and Derbyshire Wildlife Trust. We continue to develop the collection, by approaching organisations for support.

More recently we have jointly developed a ward-based programme of tailored activities with the Arts and Activities Co-ordinators, to enhance that collection. This is delivered in active partnership with internal clinical teams and external organisations. All sessions are patient participatory, and include; storytelling, horticultural therapy, singing and aromatherapy.

We feel that we have a custom made collection reflecting the needs of the local population. Further, we often provide advice to neighbouring hospitals and care homes sharing good practice. We exchange resources on a reciprocal basis, in order to maximise usage. Additionally we have found a wider scope to the resources outside of dementia, with other patient groups.

Results: Gathering feedback from all stakeholders has helped to demonstrate impact from patient, staff and carer perspectives. Establishing feedback on patients' work histories, interests, hobbies and family lives has helped us to build on our resources and activity sessions going forward.

Demonstrating positive patient and staff outcomes has been vital in gaining future funding and helping to ensure sustainability, and thus ensuring that patient well-being and experience continues to be enhanced. Longer term, by integrating ourselves within clinical teams and strategy groups, we can help to influence decisions, inform practice, and support Trust wide objectives. Our work has been recognised with awards both locally and regionally.

This workshop aims to provide an overview of the barriers, opportunities and challenges associated with introducing such a collection, our collaborative working and the longer term commitment involved. This will be a lively interactive session demonstrating the versatility and scope of our resources, which will include a visual art activity exploring the objects from the box. So, get ready to roll up your sleeves and experience through the eyes of a patient!

109. (Workshop) Improving the quality of care, efficiency and encouraging the spread of innovation - getting people talking

Alison Day and Rachel Cooke

Objectives:

* Learn more about a range of knowledge mobilisation tools and techniques to help people to learn before, during and after everything they do

* Consider how use of a Self-Assessment Tool can help frame a conversation with an organisation about how they use evidence and knowledge

* Consider how librarians can facilitate the use of knowledge mobilisation tools to support the spread of innovation and improve the quality of care

* Use a tool, espresso café, to discuss how knowledge mobilisation techniques can improve the health and wellbeing of the citizens of Europe

* Create a personalised action plan to put a knowledge mobilisation tool into practice within your own organisation

Methods / Description: The Deloitte 2017 Global Health Care Outlook stated that to meet the challenges facing global health systems of aiming to improve care and health whilst reducing spending "innovation is a clinical and cost imperative for health care". Use of knowledge mobilisation tools and techniques by healthcare professionals to spread innovation, improve the quality of care and productivity is a way that this can be achieved. The role of librarians and knowledge specialists to facilitate knowledge mobilisation is a key goal set out in Knowledge for Healthcare, the National Health Service (NHS) in England Library and Knowledge Services development framework.

During 2017 Health Education England undertook a programme of education and training to support facilitation of knowledge mobilisation by library and knowledge specialists. This was conducted via a series of train the trainer events and development of supporting materials to be delivered at regional training sessions – including access to a knowledge management toolkit.

The Mobilising Evidence and Knowledge Self-Assessment Tool was also piloted in 2017 and is now being rolled out by NHS Library and Knowledge services across England.

Results: The training events run in 2017 started to build the confidence and capability of librarians to facilitate knowledge mobilisation within their organisations. The next step is to encourage widespread adoption of knowledge mobilisation by the health workforce in England to encourage shared learning to improve the quality and efficiency of care and the spread of innovation. A suite of e-learning modules have been developed to help promote the benefits of using these techniques.

For some services, use of the Self-Assessment Tool and subsequent action plan has changed the way they view evidence and knowledge:

"Completing the Board tool has completely changed the way we will work and our use of knowledge"

Ben Mearns, Chief of Medicine, Medical Division, Surrey and Sussex Healthcare NHS Trust

It has also led to the Library and Knowledge Service being more directly involved in the work of their organisation supporting improved health and wellbeing of patients.

Keywords: Knowledge Mobilisation, Knowledge Management, facilitation, Mobilising Evidence and Knowledge, health improvement

123. (Presentation) Producing reliable consumer health information: challenging but rewarding

Maurella Della Seta, Arianna Gasparini and Editorial Board of Issalute

Background: Results of several projects developed to assess the health literacy level in Europe showed the need for improving population understanding of health-related information, to make appropriate health decisions. In the authors' country, over the past ten years, Internet users have gone from less than half to almost three quarters of population. Almost 90% of people under 30 is constantly web-connected by smartphones, but the spread on the Net of fake news and misleading health information, amplified by social media, could lead to incorrect or dangerous behaviour or habits.

Objective: The need for providing reliable health information for the public lead to developing an official health portal, following long-standing existing examples in other countries, such as NHS Choices in the UK and MedlinePlus in the USA. Medical doctors, researchers, communication and medical information specialists joined their forces in a common effort to give birth to a product with the following characteristics:

* Trustworthy and detailed health information, revised by scientists and experts

* Plain language, understandable by people with different cultural background

* Eye-catching multimedia information, attractive for younger population, or for specific user groups

* Updated health news section, carefully selected on the basis of reliability, significance and relevance

Methods / Description: The Scientific Board of the portal is in charge of proposing health topics and revising the contributions developed by the Editorial Board. The work of the Editorial Board is organised into subgroups, each focused on specific aspects:

* Video and tutorial production

* Social media diffusion

* search engines optimization (SEO), information tags, keywords, and links

* Fake news and false beliefs

* Pictures and photographs

Each member of the Editorial Board writes a monthly contribution on a health-related topic, ranging from diseases to issues having a major impact on health status.

Results: So far, the Editorial Board issued about 500 contributions on frequently-searched health topics, including drug and vaccines, infectious diseases, cardiovascular diseases, cancer, nutrition and diet, autoimmune diseases, diagnostic tests, and rare diseases. The Scientific Board revised the contributions that were all indexed with MeSH, tagged, and optimized for SEO. Pictures, photographs and videos were selected or produced to complete record information. The new health portal (ISSalute www.issalute.it) was launched in February 2018, after testing by a group of consumer representatives. Portal impact will be assessed before the end of 2018.

Keywords: Consumer Health Information; Health Literacy; Internet; Information Services

124. (Presentation) Training in communication and health information literacy to improve the quality of care of HIV patients in Ethiopia: CASA project results (2014-16) and future plans (2017-19)

Paola De Castro, Raffaella Bucciardini, Vincenzo Fragola, Teshome Abegaz, Atakilt Halifom, Eskedar Tadesse, Michael Berhe, Katherina Pugliese, Stefano Lucattini, Roberta Terlizzi, Luca Fucili, Massimiliano de Gregorio, Marco Mirra, Michela Campagnoli, Paola Tatarelli, Teame Zegeye, Stefano Vella, Loko Abraham, Hagos Godefay

Introduction: CASA is an operational research and training project financed by the Italian Ministry of Health (2014-2015) and Italian Development Cooperation (2015-2019) to improve the quality of care of HIV/AIDS patients in the Tigray Region (Ethiopia). Research, mainly focused on the improvement of retention in care of HIV patients (Bucciardini et al, PLoS One 2015:e0136117; Bucciardini et al, BMJ Global Health 2017:e000325), is closely associated with training in communication and health information literacy.

Objective: Developing communication skills and basic knowledge on clinical aspects of HIV to contribute improving retention of HIV patients and show the value of a multidisciplinary approach.

Methods / Description: A multidisciplinary team including scientists, librarians, and experts in communication and IT was involved in all phases of the process leading to the definition of the training strategy. The strategy was co-developed with local experts, health workers and communities and was addressed to two target groups: nurses and community health workers (CHW). Training topics for both groups included clinical aspects of HIV/AIDS and communication but a specific program was designed for each group keeping into consideration their different information needs. Ad hoc material was produced for training. The train-the-trainer method was adopted to maximize the training effort and specific tasks were assigned to CHW to apply what they learned. The project activity was scheduled according to two stages: 2014-2016 and 2017-19. Based on the results of the first stage and on experience acquired, an advanced training program was developed for the second stage.

Results: In the first stage (2014-2016), training needs were examined and training material produced (4 booklets, memo cards, USB containing selected articles). All material was tested in focus groups before implementation (two booklets were translated in local language). Training officially started in April 2015

and terminated in October 2016.Three vis-à-vis training sessions per year were organized and distance learning, as well as 4 workshops on specific topics, including trainee's presentations. Training implementation was supported by 4 local staff and 1 Italian facilitator. Detailed data will be reported. In brief: 122 people (49 nurses and 73 CHW) registered for training and 59 were admitted to oral examination but only the best 34 (20 nurses and 14 CHW) were selected for further training, according to project second stage training program (2017-2019) which was designed taking into consideration results achieved and lessons learned.

Discussion: The multidisciplinary approach to training and co-creation of training programs was essential to reach the project goals. The first stage of the project contributed to create awareness on communication and HIV prevention and care to improve retention in care. Results from the training questionnaires provide evidence of newly acquired knowledge, but the effectiveness of the overall training strategy need to be reconsidered at least one year after the training implementation, through the overall analysis of the project data. The second stage will help re-inforce acquired knowledge, develop new knowledge and allow to achieve better results in a life-long perspective.

Keywords: health communication, information literacy, HIV, AIDS, Ethiopia, training

125. (Presentation) Adding another Dimension to Your Library Value Proposition through Benchmarking

Esther E. Carrigan and Heather K. Moberly

Objective: This presentation explores the use of established library benchmarking tools in the development of library value propositions. How can the data points generated by existing annual surveys such as those conducted by the Association of Research Libraries or the Association of Academic Health Science Libraries enhance an individual library's value measures?

Methods / Description: The principal investigators reviewed published data gathered about space, services, collections, reporting relationships, and librarian assignments in academic health sciences and academic veterinary libraries. Data sources included the Annual Statistics of Medical School Libraries in the United States and Canada published by the Association of Academic Health Science Libraries (AAHSL) and ARCIVAL: Annual Report on Changes in Veterinary Academic Libraries published in the authors' institutional repository.

Results: Using their own library as an example, authors compiled samples of data points from the published surveys and how they could be used to add another dimension to localized, individual library data that connects the library's contributions to the institutional and client group missions and strategic priorities. Both quantitative and descriptive data are included. Presenting data via a "composite academic medical library," derived by AAHSL from the mean and mode values of all responses for a data point and benchmarking against a specific peer or aspirational peer institution are explored.

Keywords: (Please list up to 5 keywords to describe your workshop); value proposition; benchmarking; health libraries

128. (Poster) Information sources consulted by women in Africa to manage menopausal symptoms - A systematic review conducted within a global library-linked collaboration

Alison Weightman, Kathe Hofnie-Hoëbes, Menete Shatona and Mark Kelson

Background: Despite an abundance of information regarding menopausal women in western society, African menopausal women have been almost overlooked in menopausal research. Additionally, issues of menopause such as sources of information are underexplored. Since inexperience and inadequate health-related knowledge on menopause negatively affects the understanding of and coping with menopause and related symptoms, it is important to determine where women in Africa obtain their information about menopause. A global partnership of academic researchers and librarians in Namibia and the UK was established to explore this policy-relevant issue.

Aim: To conduct a systematic review to identify and analyse the information sources consulted by menopausal women in the African region. Method: Embase, Google Scholar, MEDLINE, MEDLINE in Process, Scopus, Africabib.org, African Index Medicus and African Journals Online were searched for publications from January 2000 to April 2017. Additional search methods comprised reference list checking, citation tracking and contact with authors of included publications. All types of study design were included to identity data that were both quantitative (numbers of women consulting each source) or qualitative (women's expressed preferences for information sources). 15 studies met the eligibility criteria and were independently appraised by two authors using appraisal checklists from the Centre for Evidence-Based Management.

Results: A semantic thematic analysis was conducted, with the retrieval of the themes on the basis of conceptual content (i.e. not looking beyond what the participant stated), and a mathematical assessment of the quantitative studies was undertaken via meta-analysis. Meta-analyses exhibited high levels of heterogeneity but provided valuable estimates of preferences for information sources. Friends were the major source, being reported by 44% of women across seven studies (95% Confidence Interval (CI): [35 to 54%]) followed by relatives, as reported by 35% of women across five studies (95% CI: 22 to 50%). Medical providers were sources of information for only 30% of participants across nine studies (95% CI: 15 to 50%). TV/radio, books/magazines/journals and religious sources were less used, being reported by 20% (6 to 48%; 5 studies), 19% (11 to 31%; 9 studies) and 5% (2 to 14%; 5 studies) of women respectively.

Conclusion: Information regarding menopause among African women emanated primarily from friends and relatives, suggesting that women perceive menopause as a natural process whereby information is best gleaned from informal sources. However, health care providers should aim to increase public awareness of menopause education and strengthen efforts to provide accurate, timely and helpful information for women and their friends and families.

A collaborative study linked to the Phoenix Project: http://www.cardiff.ac.uk/phoenix-project

132. (Presentation) Handy tools to better serve library users

Els Kloens

Objective: We'd like to share our experiences with: LibAnswers, LibCal, LibGuides, LibStaffer and LibWizard.

Description: In recent years, we are increasingly using the following handy cloud tools from Springshare (www.springshare.com): LibAnswers, LibCal, LibWizard, LibStaffer and LibWizard. These tools are specifically geared toward librarians, are easy to use and are also affordable (always important for libraries!).

* LibAnswers is a reference platform that can be used to answer user questions via chat or social media and to create FAQs.

* LibCal has a number of components: we use the Calendar, My Scheduler and Spaces. With LibCal, our users can:

1. Register for workshops (Calendar)

2. Schedule an appointment for a literature search (My Scheduler)

3. Reserve a room (Spaces)

* LibGuides some of our LibGuides are about specific topics, such as Open Access, or about the use of databases, like PubMed, or library tools, like RefWorks. Other LibGuides contain overviews of resources for a specific target group, such as researchers or nurses. It's also possible to

Make LibGuides for internal use only.

* LibStaffer LibStaffer can be used for creating and managing multiple schedules, e.g. for lending desk shifts or interlibrary loan shifts.

* LibWizard LibWizard enables you to create forms, surveys, quizzes and interactive in-frame tutorials and assessments. The questions in a tutorial or assessment can be accompanied by embedded content such as a video or even a live database.

Keywords: LibAnswers, LibCal, LibGuides, LibWizard, LibStaffer

142. (Workshop) How to run a Wikipedia edit-a-thon
Marshall Dozier

Objective: The main objective of this session is to give participants experience of editing Wikipedia and build confidence using Wikipedia as part of the learning experience for students and others. Edit-a-thons are valuable opportunities for collaborating with subject experts, and to involve students and the public. Good quality Wikipedia articles contribute importantly to the body of openly available information – particularly relevant for improving health information literacy. Poor access to information contributes to negative health outcomes globally. (5) There are many ways in which EAHIL's international community can contribute – for example, WikiProject Medicine (6) are working to publish articles in as many languages as possible.

For some time, Wikipedia has been shown to be a resource to engage with, rather than avoid. (1) Wikipedia is heavily used for medical information by students and health professionals (2) - and the fact that it is openly available has been crucial, notably during the Ebola crisis when it was used for finding

reliable information. (3) Writing for Wikipedia brings together the development of skills of relevance to medical students, clinicians as well as the general public: information literacy, digital skills, and communication skills. For students in particular, all of these skills contribute to good academic and clinical practice, and a call has been made for greater engagement by medical schools with writing for Wikipedia. (4)

Methods / Description: In advance of the session, delegates will be asked to do a small amount of preparation, including creating a Wikipedia account, following an initial online tutorial, and identifying a topic of interest for working on during the session.

During the session, a short training period will allow delegates to experience a demonstration of training in an edit-a-thon. A short editing practical with support from tutors will give delegates experience of editing Wikipedia articles. A wrap-up and action-building discussion will allow delegates to share experiences, reflect on their own learning, and identify actions that they can take at home to run Wikipedia edit-a-thons at their own institutions.

At each stage – in advance, during and follow-up - delegates will be made aware of what the organisers are doing, so that all the steps and processes of running a Wikipedia edit-a-thon are transparent and may be more easily adapted or adopted for delegates' local context.

Results: As a result of the session, delegates will:

* Know the key steps involved in designing, preparing and delivering a collaborative Wikipedia edit-a-thon

* Have basic Wikipedia editing skills

* Know the principles of creating a good-quality Wikipedia article

* Have exchanged experiences with others and gained ideas for application in their own context

Keywords: Wikipedia; Digital Skills; Information Literacy; Academic skills; Public engagement

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143. (Presentation) Demonstrating the value and impact of literature searches conducted for Public Health England (PHE): collecting Impact Stories

Nicola Pearce-Smith

Objective:

* To discover how our Knowledge and Library Services (KLS) literature searches contributed to the knowledge, research and policy-making of our users

* to have access to a collection of stories enabling KLS to demonstrate the value and impact the library service has on informing public health decision-making

Methods / Description: The PHE KLS record statistics on the number of literature searches conducted each month, but what are these searches used for? Do they contribute to policy making or research, do they lead to cost or time savings, do they result in a new service or programme – ultimately, what is their impact? KLS began collecting case-studies in an effort to reveal the impact of our literature searches. We adapted a case-study template produced by CILIP, the Library and Information Association, which we called an Impact Story template. Instructions, an example completed template and standard email text were produced to enable KLS staff to undertake a consistent approach to obtaining completed Impact Stories. KLS staff contacted users who had been sent literature search results more than 3 months ago (to allow time for the search to have impacted on their work), with a request to fill in an Impact Story.

Results: KLS staff and√ PHE users collaborated to produce Impact Stories, using the template, which were made available on our library webpages. Targeting users who had already given us feedback about the literature search they received proved successful in getting users to complete an Impact Story template. Tips on how to complete each template heading proved useful especially if they were tailored to the specific literature search

Keywords: (Please list up to 5 keywords to describe your workshop); Impact; Value; Collaboration; Case-studies

146. (Presentation) The librarian as an antidote: discover relation among bad arguments on health information for patients and scientific literature

Sara Francescon, Paola Cantù, Emanuela Ferrarin, Carlo Bianchini, Ivana Truccolo, Laura Ciolfi, Ettore Bidoli and Mauro Mazzocut.

Introduction: The mix of scientific data and unsubstantiated claims creates a favourable environment for the diffusion of misinformation and misleading marketing strategies. Especially for controversial topics

such as Complementary and Alternative Medicine (CAM) (1–3). This is particularly true on the web, which is often the primary source of CAM information among patients (4–6).

At the CRO Aviano National Cancer Institute, the Scientific and Patient Library and the Pharmacy Clinical Desk are involved in Cancer and Medicine information services (7). One of the emerging topics requested by patients and relatives to these services is the Curcumin. This phenolic compound is increasingly used by cancer patients to relief treatment side effects or fight cancer. But there are no evidence about its effectiveness for any of these purposes. We considered the use of Curcumin in pancreatic cancer treatment because today some human studies have been conducted, but the data about its effectiveness and safety are still poor (8–10). Strategies are needed to recognize the online misleading information about CAM addressed to patients, and in particular, those with positive preliminary data of efficacy.

To do this, a multidisciplinary research group (2 pharmacists, 2 librarians, and 1 logician) analysed the case study of Curcumin and pancreatic cancer by classifying the web documents communication purposes, the correctness of the scientific contents and the logical force of the arguments exploited to sharpen persuasion strategies. Preliminary results have been presented in a poster last year at the 16th EAHIL Conference in Dublin (11). In particular, the argumentation analysis suggested that the "Argument from expert opinion" (AEO) - whose evidence is based on reference to expertise - was the most frequent argumentation scheme in our sample. But we also observed that half of the arguments analysed were either fallacious or very weak. This means that most of the collected documents are not sufficiently reliable. But it means also that - if there is a correlation between poor argumentative quality of a document and its truth - sometimes no medical knowledge is needed to identify false information, but logical knowledge of the argumentative scheme from expert opinion might suffice.

Objective: usually the references to the sources is considered as a quality standard in providing online health information for consumers. We aim to identify possible subtle persuasion strategies in citing the sources using AEO schema and to test whether there is a correlation between poor argumentative quality and truthfulness of the online medical information.

Methods / Description: We performed a cross-sectional observational study to analyse a sample of web documents about curcumin and pancreatic cancer.

Search engines (Google.it, Bing.it, Yahoo.it, Virgilio.it), metasearch engines (Metacrawler), Facebook Search were queried with basic research strategies in Italian language. We used a browser (Oryon C) that prevents the tracking of the online activities, to avoid results conditioned by the search engine users profiling. We considered only the web documents addressed to laypeople where Curcumin was directly related to the treatment of pancreatic cancer.

Open Source Intelligence (OSINT) techniques and online free tools (e.g. Buzzsumo; Whois DNS service; National Business Registers; National Medical Registers) have been exploited to analyse the web documents collected in the sample: e.g. count the number of shares for each document; check the real owner of the website domain; check whether the authors of the web documents who declared themselves as professionals were actually enrolled in their professional associations. The resulting web documents have been classified by author typology, owner activity, and commercial or non-commercial purpose. A logician developed a qualitative analysis of the documents, identifying and reconstructing premises and conclusions of arguments, as well the argumentative context they occur in. Since it was

the most frequent argumentative schema emerged in our sample, we have focused the analysis on the AEO arguments.

Douglas Walton's set of critical questions (12) has been used to evaluate the degree of validity of the AEO arguments. A logician evaluated which critical questions were answered by each argument. This allowed a classification of arguments into:

* Evidently fallacious arguments: either no specific source of expertise is mentioned (not even implicitly); or the source is not credible or not sufficiently expert in the relevant field; or the expert's assertions do not coincide with the argument's claims.

* Valid arguments: arguments that are correctly built according to the AEO schema, but have different degrees of persuasion

* Valid and sound arguments: arguments that are correctly built and well founded, i.e. have acceptable or true premises that have not been patently refuted or are supported by independent evidence, so that the conclusion can be considered as acceptable.

To help the logician in classifying the degree of validity of the AEO arguments, the librarians collected and identified the scientific sources used in the documents analysed. To do this, they queried PubMed, Scopus, and Web of Science starting from the explicit bibliographic information cited in the texts, or taking advantage of some characterizing elements, such as description of experiments, data concerning the results, chemical processes, etc.

Each scientific paper identified was submitted to an accurate reading of the full-text by two pharmacist's expert in oncology and integrative medicine, with the aim to compare the consistency between the information provided in the scientific paper and in the web documents.

Finally, a bibliometric analysis has been performed by librarians querying PubMed, JCR, Scopus, Web of Science, Altmetrics.com e Plum Analytics in order to measure the quality and the impact of the scientific publications used in the sample. The web search has been performed on January 13th, 2017. The count of the social network's shares for the collected web documents was made on February 13th, 2017. The counting of citations for the scientific articles identified as sources was made on February 28th, 2018.

Results: The sample consists of 60 web documents published between 2007 and 2016: 31 web pages and 29 Facebook posts. Half of the web pages collected were positioned within the first 5 pages of the results of three search engines (Google, Yahoo and Virgilio) out of five. Half of the 60 documents collected have obtained at least 5 shares in social media, which become 60 if we look only at those obtained by the web pages. Thirty-two (55%) web documents have a commercial purpose. Most of the times (23; 38%) the author is unknown. The web documents retrieved were published mostly by CAM products suppliers (15%) or CAM practitioners (10%). Today, 38 documents (63%; 14 Facebook posts and 24 web pages) out of 60 have been analysed, because the other 22 appear to be copies of the first ones. However, these will also be independently analysed in the future, because even small copy and paste variations might result in different arguments.

The AEO is largely the most recurrent schema: 95 (61%) out of 154 arguments identified in the sample are AEO, and 16 (42%) out of 38 web documents analysed use exclusively the AEO schema. Forty-three

(46%) AEO contained elements useful for identifying the source of the information provided. Only 7 AEO (16%) had an explicit reference to the source (link or bibliography). Eighty-two (86%) out of the 95 AEO identified are evidently fallacious, 7 (7%) are valid and 6 (6%) are valid and sound arguments.

We identified 65 sources overall: 59 (91%) were scientific papers published between 1971 and 2013: 17 (45%) clinical trials; 16 (42%) original articles; 4 (11%) reviews and 1 (2%) comparative study. Twenty (53%) out of 38 papers were related to Neoplasms, but only 9 (24%) were indexed in PubMed using the "Pancreatic Neoplasms" MeSH term. The cited sources are mostly published in reliable journals and had a high impact in terms of citations. According to JCR, the paper identified were mostly published in journals with a mean IF of 2.727 (calculated on the current IF in the year of publication of the paper) and belonging mostly to the 2nd quartile of the related category. The citation mean without self-citations is 231, and the half of papers had more than 90 citations at the time of the survey. The mean Altmetric score was 27, and the score of the shares on FB detected on Plum

Analytics is 24. Nine papers were implicitly or explicitly mentioned more than one time in the web documents collected. The time elapsed between the publication of the paper and its first mention in the sample is 9 years. The complete analysis of the results will be presented at the EAHIL Conference (Cardiff, 2018).

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Keywords: consumer health information; patient education & empowerment; multidisciplinary approach; online misinformation; complementary and alternative medicine

153. Talking about professional failure: what can we learn from each other?

Elinor Harriss and Tom Roper

Objective: "Professional failure" is a concept mentioned in the literature, but we don't talk about it very much at work or at conferences. In this workshop, we will introduce the topic by talking briefly about this literature. We will then talk about our professional failures as clinical or outreach librarians, the moments in our careers when we have made mistakes, and our solutions. We will draw on the information needs assessment literature; 'soft' or interpersonal skills (confidence, resilience, persistence) for dealing with the emotional side of life at work; and the literature around imposter syndrome to share experiences.

Methods / Description: After this introduction, we will work in small groups, introducing ourselves to each other to discuss these three topics: our moments of professional failure; the skills required to manage failure; and recommended solutions. Using the Chatham House Rule, we intend to encourage open discussion, enabling participants to start to feel comfortable talking about this aspect of our work.

Results: Participants will be invited to provide feedback from their groups, with the workshop presenters writing down the main points to summarise the discussions.

Keywords:

* Professional development

* Inter-personal skills

* Imposter syndrome

* Innovation

* Collaboration

159. (Presentation) Can we innovate how we measure scientific impact?

Valeria Scotti, Luigia Scudeller, Annalisa De Silvestri, Chiara Rebuffi, Funda Topuz, Carmine Tinelli and Moreno Curti

Objective: The concept of Impact on scientific community and on society has been rapidly evolving in the recent years: Altmetrics take their place alongside well-known terms as H-index or Impact Factor (IF). A new scenario for the evaluation of science opens, where the interaction between scholarly work and social networks and, more widely society, can be explored. Understanding and learning these new indices opens the way to a progressively web 2.0 oriented library, able to interact with this new changes.

Methods / Description: Our aim is to measure the broad impact of our researchers in the academic community and on the society in a different way from what has traditionally been done. Each year, all the Scientific Institutes of Medical Research in Italy communicate the complete list of scientific publications in their research areas to a central database at the Ministry of Health (MoH), which is necessary for funding allocation. With FileMaker 11 software, we have created a dedicated database that collect citations and Altmetrics of all research articles produced by our researchers at the Foundation sent to the Ministry. The DOI (Digital Object Identifier) and Web of Science Accession Number and Scopus EID Identifier have been inserted for each article. Launching the update, the system is able to connect to both Web of Science, through the Accession Number, to Scopus, by EID identifier, and to Altmetric.com through API codes based on DOI. Data can then be broken down by year, department, or unit. The system included data from year 2011 to 2016 (for a total of n.3.756 articles).

We plan to assess the correlation between Altmetrics, citation counts and traditional indexes, by Spearman's rank correlation coefficient, by department and by author. Also, we plan to analyse trend over time of both Altmetrics and traditional indexes, to assess whether a temporal lag exist between paper publication and actual impact. Furthermore, the possibility to have the citations of all articles from the two traditional databases (Scopus and Wos) will allow us to study the differences in the h-indices between them.

Results: Our system allows us to monitor citations (WoS and Scopus), IF and Altmetric Score over time, yielding a complete picture of the impact of our scientific output. We plan to use this wealth of data to better understand the impact of our researchers. In particular, we would like to explore the possibility of combining the Altmetrics to traditional indicators in a possible multidimensional model, to assess the impact of scientific works over a given period of time, and to assess the reliability of such a complex model. Last but not least, the system delivers real-time data in a single interface, speeding up data collection and comparison.

Keywords: Bibliometrics, Almetrics, Impact Factor, H-Index, Research Impact

165. (Presentation) Dissecting PubMed: which content is covered by the Library? and Open Access?

Floriane Muller and Pablo Iriarte

Objective: Our project aims to uncover accessibility to PubMed's contents. By downloading all PubMed metadata, enriching it with missing DOIs and confronting it to our e-journal and paper collection and Open Access tools we dissect the full-text accessibility at our institution: How does the library fare, with its online subscriptions and paper collections of journals? And which portion of PubMed is accessible to the general public via Open Access (OA)?

Methods / Description: We parsed the whole XML content of PubMed metadata and extracted all reusable identifiers (such as PMID, DOI, ISSNs, PubYear, Volume, Issue, Pages, etc.). We stored them in a Python/Pandas DataFrame in order to mine, query, merge and enrich it with external relevant sources of data.

Confronting PubMed metadata and extractions from our paper and electronic collection holdings allowed us to evaluate the coverage provided by our institution.

Despite the efforts of the publishers to rescan the journal archives and the implementation of a commercial offer on backfiles, the proportion of DOIs remains very low in PubMed metadata of articles published before 2000 (9%), leading us to believe that some articles might be disconnected from their identifiers. Indeed, a first analysis revealed that only 43% of articles in PubMed contain DOIs (11'931'616 of 27'836'723 citations). Most of OA tools relying on DOIs, we first had to try to reconnect PubMed's articles with their DOIs to make sure as many OA versions as possible were found.

Missing DOIs were obtained by merging CrossRef and PubMed metadata. A dataset published by EuropePMC (discovered midway through our research) proved to be a wealth of information and allowed us to evaluate and complete the DOIs found. OA information was obtained from Unpaywall, PMC and DOAJ, evaluating full-text availability for the public and practitioners not affiliated with the university. We finally used the NLM e-utilities "ELink" API to import all the links provided by publishers and displayed in PubMed references, in order to compare our results.

Results: PubMed metadata enriched with DOIs and OA information provided us with precise breakdowns of PMIDs accessibility, either through institutional access, or through Open Access sources.

With its print or electronic collections, our university library provides its users with access to the full-text of 73% of PubMed's articles. This precise indication gives us a much more informed insight into adequacy and efficacy of our past and present collection choices and can provide an effective tool for future development of our collection but also for the promotion of our library resources and services (Institutional repository, ILL services…).

Moreover, our research allowed us to identify 7'510'309 DOIs that could be added to PubMed's data. Those missing keys sometimes link to OA versions of the articles and we hope that our work of finding/locating missing PubMed DOIs can be useful to the community at large.

Merging all DOIs (available in PubMed metadata and those found by EuropePMC or by our method) with Unpaywall, we found that 33% of PubMed's content is available to everyone (gold or green OA). More

detailed figures and the distribution of different access roads by publication date will be presented at the conference.

Keywords: PubMed; Digital Object Identifiers; Open Access; Data mining; Subscription coverage

166. (Presentation) Rapid reviews drive us crazy!

Alicia F. Gómez-Sánchez and Rebeca Isabel-Gomez

Objective: Rapid Reviews (RR) are increasingly being used by clinicians, policy makers and healthcare decision makers, and are becoming a more significant resource for health policy, and to identify evidence gaps.

RR definitions, methods, and applications are numerous and also vary substantially. There is no a clear definition so it's possible to get RR explained as "a type of systematic review in which components of the Systematic Review (SR) process are simplified, omitted or made more efficient in order to produce information in a shorter period of time, preferably with minimal impact on quality", as well as "a type of knowledge synthesis in which components of the SR process are simplified or omitted to produce information in a short period of time", among many others. Furthermore, there are several types of RR, and there is either no agreement on that. Our main is to compile and review the wide vary of methods and types of RR that are available in the literature, and try to analyse the value of each one focusing on the information specialist role.

Methods / Description: In order to achieve that, we selected some of the main institutions or agencies (AHRQ, CADTH, KCE, WHO...) who have publicly available their methods about this area. We checked the different recommendations and searched for some basic elements of special interest as, for instance, the presence of protocol, time or development, number or researchers, information specialist as member of the team, databases searched, etc.

Results: Despite the large and assorted amount of RR, it seems that there are also some common points: they should assure high quality bearing a special relevance to the transparency of methods, as well as the importance of engagement or the recommendation of counting on the collaboration of information specialists to perform these kind of studies. Additionally, they all agree that a RR should be performed in less time than a systematic review. On the other hand, there are significant differences on how to abbreviate processes: limiting search strategies by database, by dates, updating literature search of previous reviews, excluding assessment of the quality of included studies, or the type or factors to consider contextual factors affecting the studies. In brief, there is no accordance within the different typologies of RR, in the time that should be spent for their production, or in the recommendation to use text mining, among many others. The short-term expectations seem to be similar, and new RR recommendations are already being announced (e.g. from Cochrane).

Summarizing, the current landscape of RR is quite chaotic, and there're lot of discrepancies between methods, and no consistency or agreement amount producers. It would be recommendable to work on a consistency and uniformity of this kind of documents, in order to make easier basic aspects for the reporting and the quality assessment of RR.

Keywords: Rapid Reviews Methodology Review literature as topic Knowledge Synthesis Health Technology Assessment Evidence-Based Practice

170. (Presentation) "An inclination... to serve Mankind": the University of Pennsylvania Biomedical Library and the Penn Compact with West Philadelphia.

Richard James and Aman Kaur

Presenters will discuss the evolution and current status of consumer health-related programming by the U. Penn Biomedical Library. The City of Philadelphia has significant public health issues and health care disparities and the University of Pennsylvania is a major provider of health services through its teaching hospitals and healthcare system. Penn is an elite, highly selective university located in a particularly deprived part of Philadelphia, with prestigious nursing, medical, dental, and veterinary professional schools with significant community engagement, and multiple other units and initiatives within the University focused on building community partnerships and improving public institutions. Many of our most successful and well supported initiatives are health-related. Partnerships between the health sciences disciplines and the Free Library of Philadelphia, which has more than 50 community branches throughout the city and fulfils a critical role as a provider of health resources to the public, are well-established, including the creation of clinical placements for required "nursing in the community" sections at several public library branches located in parts of the city with well-documented health disparities.

The Biomedical Library is one of the 12 departmental libraries at Penn, serving the Schools of Nursing and Medicine, and the Biomedical Sciences programs. Our community health goals look to extend our services both to support the community health-related curricula of the professional schools, to develop partnerships and provide useful services to the University organizations currently most engaged with community health, and to use our own expertise to create independent programming- offering librarians' expertise in instruction, health information seeking skills, and consumer health and health literacy knowledge. Staff has developed consumer-facing presentations on health literacy and information in collaboration with the School of Nursing's public library clinical placements. In 2015 the library procured a grant from the National Network of Libraries of Medicine to create "Health Corners" at public library branches where student nurses had been placed- providing dedicated computer access along with curated print resources and educational materials oriented to the specific health needs of the local community.

This year, a new position of Community Health Librarian was created dedicated to engaging and partnering with organizations within the university and community. Plans include providing direct consumer health education in the community, in partnership with the Netter Centre's developing partnership with West Philadelphia high school's adult education program, identifying collaborative opportunities with the Free Library's new consumer health focused community health and literacy centre in South Philadelphia and connecting clients at the Sayre Health Clinic with high-quality health information through an "information prescription" partnership- connecting patients to a university librarian working out of a public library branch.

Keywords: Inter-departmental collaboration, community health, Public-Academic Library Partnerships, Social Responsibility