# Journal of EAHIL

Theme Issue

Promoting and marketing library services

Health Information without Frontiers

13<sup>th</sup> European Conference of Medical and Health Libraries 4-6 July 2012, Brussels, Belgium

**EAHIL Executive Board Elections** 

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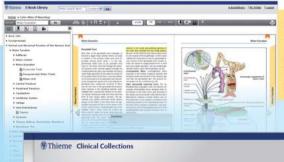
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# Journal of the European Association for Health Information and Libraries

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### **Editorial**



Sally Wood-Lamont Editor-in-Chief

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Hello Everyone,

The EAHIL 25<sup>th</sup> anniversary is almost here and there is more information in this issue regarding this memorable Brussels conference. Unfortunately I cannot be there as I shall be preparing to go to London with the Romanian Paralympic team. However, the JEAHIL Assistant Editor, Federica Napolitani Cheyne, Tuulevi Ovaska and other members of the Editorial Board will be there to meet with the winners of the Best Posters and Presentations and to collect reports of the Workshop. We hope many of you will also contribute impressions and reports of all the SIGs meetings for the anniversary issue.

The time has come round again to welcome new members for the EAHIL Executive Board. The candidates were as follows: Lotta Haglund (Sweden) for President. As members for the Executive Board the following are candidates: Tuulevi Ovaska (Finland); Maurella della Seta (Italy); Ghislaine Declève (Belgium). Thanks are due to the members of the Nomination Board, Patricia Flor, Margarida Meira and Ronald van Dieen, who did an excellent job in finding them.

The theme of this issue is: Promoting and marketing library services and we have received two excellent articles within this subject: The success story of the menu – how health libraries shared an innovative marketing tool by Tuulevi Ovaska et al which is a three pronged study covering three countries using a similar menu – Finland, Poland and Sweden and Improving the customer encounter experience at the Karolinska Institutet University Library: the 7-step program by Saga Pohjola-Ahlin, Sara Janzen. In addition, we feature an article touching on a subject that is very relevant today entitled The use and sharing of scientific information at pharmaceutical companies: copyright-related challenges and solutions by Kate Alzapiedi from RightsDirect, Amsterdam. We hope you will enjoy these original articles and find information that will have relevance in your work. Oliver has asked T. Scott Plutchak from the Lister Hill Library of the Health Sciences, University of Alabama at Birmingham to write his column this month and his article A bright future for librarians: experimenting like crazy is thought-provoking and very relevant.

The deadline for the next issue is the **30 July** as I shall be away in GB from the 11<sup>th</sup> August until the end of the Paralympics on the 10<sup>th</sup> September. Please send all contributions direct to me at swood@umfcluj.ro

I do wish you all a very good conference in Brussels and success to all the people giving papers and presenting posters. Our *JEAHIL* team will be there to encourage you to contribute as we would like to make the September issue a really special 25th anniversary issue.

## The success story of the menu – how health libraries shared an innovative marketing tool

### Tuulevi Ovaska<sup>1</sup>, Marie Källberg<sup>2</sup>, Witold Kozakiewicz<sup>3</sup>, Bogumila Bruc<sup>3</sup>

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### **Abstract**

Marketing is an essential role for health/hospital librarians. The concept of the menu as a tool for marketing and promoting library's educational services was introduced by Karolinska University Hospital Library, Stockholm, Sweden in the EAHIL 2010 conference in Estoril, Portugal. The idea has since been implemented and developed further in many health libraries. In this article we share the experiences of three different libraries in three countries, Finland, Poland, and Sweden, in putting the menu concept into action, and discuss the case of the menu as a practical, low-cost marketing approach and also as an example of sharing best practices in libraries.

Key words: marketing, hospital libraries, medical libraries, education, training.

### **Background**

The basis of every marketing plan is a product. A whole library can been seen as a product or a collection of services but a library can also market its different services, such as training sessions, as products (1, 2). It is equally important to identify customer needs (3).

During the 2010 EAHIL conference Marie Källberg presented the concept of a menu as a way to market the library and its services (4). Other medical libraries found this approach interesting. This article is about how sharing ideas can be useful. It also aims to encourage other health libraries to promote their services and gain more visibility in their organisations, as well as emphasising the importance of improving information literacy of hospital staff.

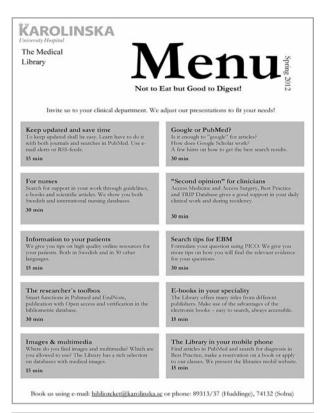
The Medical library at Karolinska University Hospital (Karolinska) wanted to find a new way for marketing the library. Previously we tried to use News from the library etc, but that did not provide us with many invitations to visit clinical departments. Then one of the librarians came up with the idea of having different topics to choose from, with different lengths of time. Just like in a restaurant – the customer can, in his/her own time, decide which dish is the most

inviting (*Figure 1*). Because some of the presentations are only 15 minutes long, it is easy to combine them and to obtain a variety of dishes at the same time or just take one.

The Kuopio University Hospital (KUH) Medical Library provides tailored library services for KUH staff, including training sessions on library resources. Though we have been active in marketing our services and visiting staff-meetings we have often felt that we were unable to reach quite as large an audience as we should. However, we were fortunate to attend the EAHIL Conference in 2010, and there we heard how Karolinska had created a menu to improve hospital staff information literacy.

The idea of the Library of the Medical University of Lodz (MUL) to use the menu coincided with the promotion of the online library resources tutorials which were created and maintained on the Moodle elearning platform. What was really needed was a marketing/promotional idea and at the right moment the menu came along. It was obvious that the concept of the menu, which was introduced at the EAHIL conference could be interwoven into our project.

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**Fig. 1.** The Menu at the Medical Library at Karolinska, Spring 2012.

### Methods

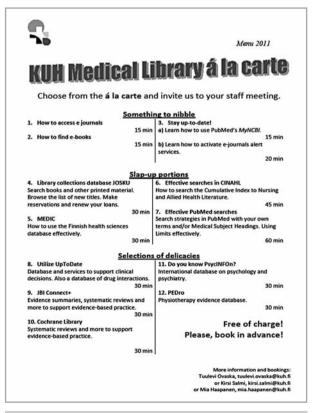
At Karolinska the menu consists of short and long presentations and by 2009 there were 13 dishes or topics, on the menu: *Keep updated!* (45 minutes), *Images-where to find and how to use* (15 minutes), *Find useful search terms and search in PubMed - an introduction* (30 minutes).

The subjects were chosen according to the FAQ from library users e.g. Where can I find pictures I am allowed to use in presentations? So before adding the topic to our menu, we started to update our own knowledge on a variety of web-sites and to learn about copyright laws. Sometimes resources were highlighted which were not widely known, but very useful, for example electronic books. So a dish on the menu was created on how to find and use e-books. Each semester the printed menus were sent to all clinics and departments of the hospital. The menu is also available on the library's pages on the intranet and all directors of studies for resident physicians have been informed as well.

Other times the clinic or department contacted us, asking us if we could arrange a specific meeting. Sometimes they wanted to combine 2-3 topics. When a

clinic contacted us we learnt that it was important to ask them what they wanted us to focus on, on which specific dish. We were also careful to ask them to give us examples of terms and topics or situations meaningful to them that could be used in our presentation. We learnt the hard way that it was better to do this as we discovered that their and our approaches differed in the interpretation of the dishes on the menu. On one occasion a clinic with many researchers wanted to book *Get started with EndNote*, but they were already familiar with *EndNote* and wanted us to tell them about advanced functions in the program instead.

At the end of each semester, we analysed the menu, removed a topic with little or no demand. In the first semesters when we had *Keep updated*, we tried to put too much into the presentation and had included not only how to save searches or to subscribe to ToC, but also about RSS and pod casts. We soon discovered that the majority only wanted to know how to save searches and subscribe to ToC, so we excluded RSS and pod casts for a time, but this semester RSS is back again. Some topics stay on the menu even if they are not in demand so much, mostly because of marketing purposes.



**Fig. 2.** Kuopio University Hospital Library's a la carte menu 2011.

We added new topics recommended by the medical or the library staff. In 2011 we added a dish called "Second opinion" for clinicians and in 2012 The Researchers toolbox.

The first versions of the menu (Figure 2) tailored for KUH staff were published and disseminated in August 2010. The menus were chosen to be marketing tools from then on. They were slightly modified for year 2011 and again for 2012 according to the feedback and the success of the different servings. Also KUH library's menu consists of shorter and longer presentations but we ended up making two menus — a la carte and buffet — and we decided to split the a la carte into three sections — parallel to starters, main dishes, and desserts of restaurant menus — called Something to nibble, Slap-up portions and Selection of delicacies. The buffets are open sessions with diverse contents.

The KUH Medical library's *a la carte* consisted of 14 different portions lasting from 15 to 60 minutes. We offered four different 15-minute *snacks*, four different 30-60 minutes *proper portions*, and six different 30-60 minutes *goodies*. The *snacks* or *something to nibble* sessions were about how to access e-journals and e-books, how to use alert services, as well as a short introduction to impact factors. The main courses or *slap-up portions* included the library OPAC *Josku*, the Finnish health sciences database *Medic*, CINAHL, and *PubMed/MEDLINE*. The delicacies were *UpToDate*, *JBI Connect+*, *Cochrane Library, PsycInfo, Pedro* and *RefWorks*.

During the autumn term 2010 the most popular dish from the *a la carte* menu was the 15-minute introduction to e-journals. The next most popular were JBI Connect+, Medic, PsycInfo and PubMed. One portion was never ordered. We attended altogether 18 meetings that often combined several portions from the menu. They were tailored to meet the needs of the specialities of the participants, who were 203 staff members during the autumn term. There were six buffets that lasted together 6 hours and 45 minutes, and had 29 attendees.

Some time ago in MUL, we came to the realization that the growing number of both full text journals and databases were not being used efficiently by our students and faculty. The reason was simple: our patrons did not have a clear knowledge of what the library is able to offer and how to use all available tools in their work. We launched the tutorials series in December 2009 as an ongoing project. Since then the librarians

have been producing user's guides explaining step by step the library services and how to operate databases. All these guides have been placed on an e-learning platform - Moodle. Although we have got a very positive feedback from people who had an opportunity to glance at the tutorials, the statistics indicated that not many users had viewed the courses.

We decided to implement the menu idea in our library and university, and prepared our own menu which contained topics using databases and other tools for searching and managing retrieval results. Moreover, we included general topics designed to discuss new trends in searching systems, changes in publishing industry, especially the open access movement and the repository concept. Our menu contained 15 topics with brief descriptions and approximate time of duration, just like the Karolinska one. We entitled this project Make friends with the library -Zaprzyjaźnij sie z biblioteką-(Figure 3). We introduced and presented the menu while attending faculty meetings in 2010/2011 academic year. Also, we wrote an article about this initiative which was published in the Information Bulletin of the Medical University of Lodz. The list of topics was published on the library web page and promotional leaflets were prepared and in addition doctoral students during scientific information classes were also notified.



Fig. 3. Medical University of Lodz Library's menu 2011

We knew that the promotion of the menu could be a crucial point for the next stages of our project development. We wanted to combine the tutorials presentations on Moodle with practical exercises to meet our clientele information needs.

At Karolinska we can say that not only has the hospital staff increased their information competence but that we librarians have also increased our competence working with the different menus. However we cannot say yet that that we have found the perfect solution to reach hospital staff. But it certainly is one useful method. The most popular dish has been *Find useful search terms* and *Search in PubMed*, with a total of 17 presentations. At Karolinska we have given 93 Menupresentations.

During the first months of using the menu concept in KUH both the number of training sessions and the number of participants grew significantly compared to previous years. The number of sessions increased about 30 %, and the number of participants tripled. Year 2011 there were 48 *a la carte* or *buffet* sessions with a total of 614 participants. Compared to the whole year of 2010 the number of training session grew by 62 % and the number of attendees grew 141 %. The menus turned out to be a very effective tool.

Most *a la carte* sessions have been 15 to 30 minutes with one choice from menu, but some have had as much as four portions and lasted 2 hours. Tailoring the sessions according to the user needs has been essential. On the other hand, also the *buffets* with the set contents have their audience as there is no enrolment.

In the MUL this initiative had received positive responses from the academic community. We were invited by some of our faculty members to conduct workshops and presentations. The number of these meetings varied from one (dedicated to a single topic) to the series of meetings during which we covered all topics (5 meetings, approx. 1.5h each). Also the number of participants of the training, varied from 3-4 to about 20. We also started to observe growing number of individual consultations given by reference librarians as well as the increased interest in attending workshops organized by different publishers.

All these activities, educational materials, meetings and workshops were prepared to reinforce our clientele's researching skills and assist them in using the library resources efficiently. However, these initiatives have also a second implication: we have been creating the new image of the professional librarian skilful in knowledge management and the expert who educates his patrons regarding the University library information system. This undertaking serves as the creation of the modern, biomedical academic library model.

### Discussion

For the library at Karolinska there have been some things that have been more important than others. The menu has been an excellent method in reaching more staff and marketing our resources and the competence of the library staff. Through the menu we have offered different topics that our users probably did not know they could learn from us. We have also noticed we received more requests from clinics and department on other customized presentations, not only the ones found on our menu.

By visiting the hospital staff at their workplace or clinic we therefore saved their time. They appreciated that they could choose the topic and decide the length of time for each presentation. We learned that it was very important to ask for examples from their point of view to make the menu more attractive.

What needs to be paid more attention to in KUH is collecting feedback and evaluating the outcomes of the training that have so effectively been marketed. Evaluation confirms success and identifies whether aims and objectives have been achieved (2). We need to go on developing the menu according to user needs and adding new services and products. It is also necessary to develop the staff's marketing skills. One aim is also to spread the concept of the menu from the university hospital library (which is part of the university library) to the other library units of the University of Eastern Finland (UEF).

In MUL we still have to work on the promotion of the concept. The new, updated version of the menu was published on the web site and we also plan to repeat the presentation of the menu at faculty meetings. Due to feedback from the participants, new topics on citation indexes and the evaluation of the University's units scientific achievements are to be introduced. We would like to design hands-on workshops where the participants can practice newly acquired knowledge, and put it as a separate special topic into our menu.

### The success story of the menu – how health libraries shared an innovative marketing tool

Sen states that market orientation is an important concept for the survival of libraries (5). Understanding the market can help planning library services and support customer needs. According to Wakeham, marketing a library engages people in a relationship that encourages them to use the service (2). The menu is one example of putting these theories into practice.

### Conclusions

According to Bridges it is essential that libraries remind their customers that they have libraries, and there are many ways to do that, among them e.g. making a presentation at a group's regular meeting, and teaching people new ways to receive library information (1). Wakeham states that librarians should find marketing a core element of their professional role (2).

Deviating from the library's more traditional marketing methods gives libraries more visibility in their organizations. Having a menu to choose from makes it easier to choose the training needed. The menus provide tailoring tools to adjust the training according to customer needs instead of the previous, rather similar events. By using a menu it is easier to give a title to a training session, to describe the focus of each topic, to adjust the training accordingly to each group.

Key messages:

- Libraries should market and promote more. It
  must not be taken for granted that libraries will
  always be valued and financed. We have to
  promote and market our services and skills plus
  the library's value and collections etc.
- Libraries should outreach their library space and go to the customers, instead of waiting for them to come to the library.
- Libraries should share their innovations and methods. Attending seminars and conferences is not always about gaining something but also giving and sharing.
- Libraries should try out each others tools and methods. Going to conferences or reading articles is useless unless what you have heard and learned there changes something in your library and work.
- Libraries should adopt, implement and tailor the shared tools and methods, always bearing in mind their customers and their organization.

Finally some suggestions for further research:

- what are the best (most effective, yet low-cost) marketing and promoting tools and methods in (health/hospital) libraries?
- what is their impact?
- evaluate their feedback tools and methods.

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# Improving the customer encounter experience at Karolinska Institutet University Library; the 7-step program

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### **Abstract**

During 2010-2011, customer service staff at Karolinska Institutet University Library was exposed to a 7-step program in an ongoing professional development effort to improve the customer encounter experience. The project was carried out in collaboration with another academic library and a public library in Stockholm (Sweden). The methods consisted of: 1) challenge of the week; 2) reflecting in a blog about service experiences; 3) inspirational lecture; 4) discussion clubs; 5) training by using roleplay; 6) developing a toolbox and guidelines; and 7) collegial observation. Staff evaluated and reflected on the impact of each method. After having completed the 7-step program it was clear that a multiple method approach is a good strategy for developing insight into the customer encounter.

Key words: libraries, medical; library services; staff development; professional competence.

### Introduction

From February 2010 until May 2011, Karolinska Institutet University Library (KIB) carried out a project called Hur gör jag? – en utmanande 7-stegskur för medvetet bemötande på bibliotek (A challenging 7step program for improving customer services in libraries) (1). The objective of the project was to create, evaluate and disseminate a set of concrete and useful tools which could be actively used in daily interactions with customer services. The aim was twopronged: 1) to give library customers a good, professional service, and 2) to raise awareness and knowledge amongst staff of the importance of professional customer services. The aim of the project was to evaluate how well the methods tested could contribute to raising awareness and knowledge among library staff in order for them to be able to provide a good, professional customer service.

### **Background**

The momentum driving the project was the belief that customer services are a strategically important issue for libraries to work on (2). It is not only about *what* answers we give our customers, it is equally important *how* we deliver them. Customer encounters also have to do with the customer's trust for the library as an institution, and our reputation. How we treat our customers has an effect on how they respond to what we say. This goes for all organizations and professions

that work with/care for people, from librarians to physicians (3). Guidelines and tools on how to improve customer encounters are hard to find as they are often trade secrets. Based on results from a customer survey in 2007, where customers were not always pleased with staff encounters, a growing need for tools made KIB seek collaborative partners to test and evaluate different methods in order to improve customer services.

There was also a need for concrete and relevant tools for developing customer services within the library sector. If we are to achieve a commonly agreed, high-quality customer encounter, we need to continuously reflect, test and evaluate our behavior towards our customers. The theoretical basis for this project was that, in order to profoundly change our behavior when approaching customers, we needed to understand, be willing and be able to offer a good customer interaction, in order to create an enduring change within the individual (4).

### Method

The aim here was to test and evaluate a set of methods in daily practice, and evaluate them using reflection in group discussions, or individually in writing. The focus on reflection derived from previously positive experiences at KIB, as a way of generating insights and to facilitate learning amongst staff. Moon states that 'Reflective practice' [...] is used to describe a broader

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process in which there is a habit of reflecting in aspects of a subject's activity in order to improve the practice" (5, p. 192).

Reflecting therefore seemed to be a suitable method for reaching the project's aim, and improving customer encounters. Reflective writing (6) was part of this process. At KIB, a specific customer encounter blog was set up on the library intranet for sharing new experiences and insights with colleagues.

The project was carried out in collaboration with Stockholm University Library and Stockholm Public Library (Sweden). In this article, results from participating staff at KIB are the focus. Furthermore, KIB was the only library to test and evaluate all seven methods. The project was aimed mainly at customer service staff (approximately 50 of 115 staff members) but the entire staff was encouraged to participate on a voluntary basis.

### Results of the 7-step program Step one: Challenge of the week

The aim of this method was to get all customer service staff to pay special attention to a particular challenge in every interaction with customers for one week. One example of a challenge was to wear a name tag and pay attention to all customers nearby e.g., by seeking eye contact/nodding/saying hello. Participants were then asked to write down their reflections on how each challenge worked - did it have any implications for the customer contact – on the customer encounter blog. In total, six challenges were carried out and 28 blog posts written. On average, each challenge was written about 4.7 times. Participation was not compulsory, which made it difficult to estimate how many of the staff actually carried through the challenges as they did not have to write down their experiences. Our impression was that participation was higher than just those who wrote about their reflections. We based this impression on e.g., informal conversations in the lunchroom. When we evaluated the method, 25 of 46 (54%) answered that this method could have a big impact in raising the level of consciousness regarding how we approach customers.

### Step two: Reflect & share

This method went under the informal name "When I was a customer". The aim was to get staff to reflect over customer service situations they had encountered as customers themselves, outside of the library setting. They were asked to share both good and bad experiences on the customer encounter blog on the library intranet for others to read and reflect on. One important part of

reflection is that while watching others act in a certain situation, you can reflect yourself about what your own behavior would be in a similar situation. Our goal with this method was that staff would write and share experiences with each other on the blog, and that situations described by one person could evoke thoughts and discussion on what a good and a bad customer encounter consists of. This method was ongoing for most part of the project. In total, 26 stories were shared by 10 staff members. Of these, 19 were about bad customer service situations. The evaluation was only answered by 17 people. Of these 17 people, four out of five thought that the method was suitable for raising awareness of the issue, and again, the impression was that the method had raised this issue among the staff, but few had made the effort to write about it.

### Step three: Inspirational lecture

In order to raise interest and participation amongst staff, a customer service consultant from outside the library was hired. She held an inspiring two and a half hour lecture, where the audience (43 people) was activated by the inclusion of a few short exercises. Participants were asked to evaluate this method by writing comments on three post-it notes: positive, negative, and something that was interesting on the third note. The comments were mainly positive, about how inspiring and funny the lecture was, with concrete examples and tips about customer service. The lecture worked as a vitamin injection, and created a lot of positive buzz.

### Step four: Discussion club

This method is an adaption of the "Journal club" (7). Originally, the plan was to use the method "Journal club" as the fourth step. However, we came to the conclusion that the 7-step program was more about reflecting and sharing thoughts on a certain subject in a group, rather than reviewing academic articles. We therefore decided to call this method Discussion club instead. We had two separate themes. First, we read and discussed the theme "Customer Encounters". Twentyfour people from KIB discussed a book called Professionellt bemötande (Professional encounters) (8). The second theme was "Feedback", which was also the title of another book discussed (9). The Feedback theme was carried out in collaboration with Stockholm Public Library, and involved about 75 people. First, KIB and Stockholm Public Library had a joint session where ten staff members from each library met and discussed the themes together. Because of the large interest from KIB staff, a further three sessions, where 55 KIB staff participated, were held. At the Discussion club meetings, participants were asked to share something from the text that caught their interest, and then a discussion started, guided by specific questions. The Feedback discussions resulted in a list on how to use feedback as a way to strengthen and develop staff and organization.

The Customer Encounter theme was evaluated by 100% of the participants using the same method as for the Inspirational lecture. A total of 34 out of 64 participants at KIB answered a web survey evaluating the Feedback theme. Both evaluations showed that the Discussion club was a method well suited for working with customer interactions and feedback.

### Step five: Role play, practice with cases

The aim of this method was to raise the consciousness about one's own behavior when in contact with customers. By active participation, deeper reflection and understanding can follow. Thirty-five members of staff participated in a half day workshop focused on learning by acting. After listening to a psychologist talk about different communication styles, the staff improvised difficult customer encounter situations "Knowledge theatre", together with professional actors from a company called Learning4U. Afterwards, the acted situations were discussed in smaller groups. Evaluation showed that staff thought the method worked well and created high participation, but they wished for more time so more situations could have been practiced and reflected upon.

### Step six: Rules & toolbox

The aim here was to create a set of rules about how library staff should behave when in contact with a customer. We used a method called Appreciative Inquiry in an endeavor to achieve high participation, by creating a set of clear and jointly agreed rules and focuses on what we do well in order to define our success factors (10). Forty-three members of KIB's staff participated in the creation of the rules. However, only 50% answered the evaluation form about the method. A vast majority felt included in the creation of the rules, which was important for their legitimacy and usage (8). They also thought the method suited the purpose well.

### Step seven: Collegial observation

This method involved a close collaboration between two workplaces, in this case KIB and Stockholm Public Library. Originally, the aim was to help review how the other library worked, and to suggest improvements (11). Within this step, we had the additional aims of checking

if the rules we had put in place in step 6 were being followed by staff; to practice giving and receiving feedback; and to raise awareness of how one acts during a customer encounter. Four librarians from each library working in customer services participated on a voluntary basis. Each participant was paired with a person from the other library. Pairs then took turns observing each other whilst working at the customer services desk. Each observation was followed by a private talk, when the pair reflected upon what had happened, asked questions and most importantly gave and received feedback. When the observations were completed, a report was written by each library for the other library. We evaluated the method through interviewing each of the eight participants individually. Evaluation results showed the method was a success. Participants renamed it "Collegial inspiration"! It was obvious from the reports and interviews that the participants found the observations and feedback/talk resulted in the self-awareness and insight that customer interaction is a fascinating and complex matter.

### Discussion and conclusion

On average, participation varied; however, customer service staff participated in four of the seven steps. The most appreciated methods were the Inspirational lecture, the Feedback Discussion club, the Appreciative inquiry workshop held within the Rules and toolbox step, and Collegial observation. For example, the Inspirational lecture worked as a vitamin injection and created a lot of positive buzz, and the most valued outcome of the Discussion club was that staff found it exhilarating to discuss and share knowledge with colleagues from other libraries.

Challenge of the week and Share and reflect demanded a bit more of participants, and as a result, a smaller number of staff were active in writing and sharing on the blog. Nevertheless, both methods evoked much discussion and reflection amongst staff about different ways to behave professionally and how this behavior may be perceived by the customer. The evaluation showed that the methods fulfilled their function – the people who contributed were satisfied. These methods, as well as Role play – a method that was highly appreciated by the 34 daring participants – led to a high level of participation and had a clear connection to everyday work in the customer encounter.

The most important concrete results from the project were a toolbox with rules and experience-based tips on how to facilitate the customer encounter, along with a

### Improving the customer encounter experience at Karolinska Institutet University Library

list of when and how to give colleagues feedback. The Customer encounter blog, created for the project, is also an ongoing forum for reflective discussions. As a result of participation, a staff member working outside of the customer services department went back to duty at the customer service desk.

Does the 7-step program work? It is hard to measure if the customer encounter has improved at KIB. One indication of this is that a colleague commented that after having participated in six of the seven steps, she felt as though the customers had become nicer! This could be interpreted as a result of the staff's heightened awareness and improved behavior reflecting back on the customers. A new customer survey will be conducted in the near future in order to investigate if we reached our goal of providing an improved customer encounter.

After having completed the 7-step program, it is apparent that KIB staff have developed their professional customer encounter knowledge and skills. For example, through discussions, observations and reflections regarding the complexity of the customer encounter, the staff have increased their awareness about the importance of the issue. In conclusion, it is clear that a multiple method approach, such as the 7-step program, is a good strategy for developing insight into the customer encounter.

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### The use and sharing of scientific information at pharmaceutical companies: copyright-related challenges and solutions

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### **Abstract**

The paper presents some of the challenges multinational pharmaceutical businesses face in managing copyright compliance due to the extensive and varied use of scientific information made by their employees. The paper also discusses some of the solutions to address these challenges, identifying specific questions and issues to be considered.

Key words: collaboration; compliance; copyright; licensing; pharmacovigilance.

### Copyright at work

Awareness of copyright varies greatly from one organization to the next. In his 2011 WIPO Magazine article, Copyright Compliance in Private Companies: Challenges and Solutions, Victoriano Colodrón, Senior Director, Global Relations, of Copyright Clearance Center, summarizes the combined effects of employees' lack of copyright awareness, confusion as to how the law may apply, and the ease with which published content is shared:

The combination of low copyright awareness with fast and easy ways to access and share information has created one of the most important challenges facing companies today – copyright risk management. Low awareness can result in confusion, for example, about the exceptions and limitations to exclusive rights established in national copyright laws. These exceptions and limitations typically do not cover acts of exploitation by private companies for business purposes (1).

For those organizations where a copyright policy exists, awareness among employees varies considerably. A 2010 Outsell study on information sharing and copyright awareness revealed that 35% of respondents were aware of their organization's copyright policy, 44% were not certain of the details and 23% were either unaware of a policy or said that such a policy did not exist (2).

### Content is business critical

Collaboration is critical for research-related activities in pharmaceutical companies. Sharing published content from journals, books, newspapers and magazines throughout the organization and across national borders plays an important part in the exchange of ideas. But such collaboration poses challenges for organizations in managing copyright compliance. Below are three use cases, based on interviews with information specialists, on how content is shared both internally and externally:

- The provision of medical information by Medical Affairs Departments in response to requests from healthcare professionals and patients. The Medical Affairs Departments at pharmaceutical companies are often asked to provide their customers with scientifically-validated information, including full text articles from peer-reviewed journals. These customers can include patients, doctors and healthcare professionals. Medical Affairs Departments often work with their own company's communications departments to respond to information requests.
- Delivery of content by Knowledge Centers to global R&D project members. Information specialists working in corporate libraries, also known as knowledge centers or scientific information centers, play a key role in the licensing-in and distribution of scientific content to their colleagues. Fast dissemination of the latest scientific articles is critical to research teams to enhance productivity and speed up the drug discovery process.
- Maintaining comprehensive, updated databases of company products by the Pharmacovigilance Teams. The pharmacovigilance (or drug

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monitoring) department is responsible for the detection, assessment, prevention and reporting of adverse effects relating to its company's products. The department is also charged with maintaining databases of published information about company products in the market. Dissemination of timely information is a tool for early warning and detection of possible adverse effects, as well as for monitoring the safety of drugs in the development pipeline or already approved for marketing.

What these use cases have in common is the ongoing need to distribute copyrighted materials to perform a routine business task. From a copyright standpoint, this action requires the permission of the copyright holder – that is, the publisher or author(s). From the standpoint of a medical affairs professional, information specialist or member of a pharmacovigilance team, delivering the requested content in a timely fashion is the main objective. Therein lays the challenge of performing a business function and complying with copyright.

### Maximizing the value of content spend

Pharmaceutical companies place a high premium on, and commit a sizable share of budget to, acquiring and sharing STM content. According to a 2011 Outsell benchmark survey on information managers in the pharmaceutical industry, 63% of pharma respondents' external content budgets go to scientific, technical, and medical (STM) information. In the past two years major pharma companies have each spent in excess of \$5M (US) on content. (3)

While this study is revealing of the type of investment organizations make in content and the type of content their employees consume, the copyright implications of sharing these materials are also worth examining. While organizations negotiate subscriptions directly with publishers, in the digital world those subscriptions almost always constitute licenses to receive and use content, and the terms and conditions of those licenses often vary, resulting in confusion as to how the content may be used and shared by employees. This ambiguity around permitted types of use, multiplied across many publishers, makes it a difficult task to express those terms to employees. Further, when considering content that is found freely on the Web and the ease with which it is shared (both internally and externally) to supplement subscribed-to content, the organizations' information management professionals face the reality that employees lacking an understanding of copyright unwittingly place their organizations at risk.

### Challenges of copyright compliance

The use of copyrighted content by scientific information professionals, researchers and others at pharmaceutical companies poses very concrete challenges related to the permissions clearance process. Below are some of the more common challenges:

- Content use is generally difficult to supervise. Scientific content is available from many different sources and digital technology has made it easier to reuse and share, both internally and externally across companies;
- Researchers and other employees often lack knowledge or have misconceptions about copyright law;
- Rights licensing options for Scientific Information, Medical Affairs or Pharmacovigilance units are not always straightforward, easy or efficient;
- Given the vastly different copyright-licensing legal models from one country to the next, employees can unintentionally be exposing their organization to the risk of copyright infringement.

For organizations striving to manage compliance, copyright is often perceived by employees as an interruption to the exchange of information. According to a 2010 Outsell study:

49% of knowledge workers believe that obtaining copyright permission poses an obstacle to sharing and only the same proportion profess to taking responsibility for verifying permission to share (2).

However, the importance of copyright is on the rise, according to information managers. A 2010 study conducted by FreePint on copyright policies and practices in the enterprise (4) found that managing copyright risk has recently gained prominence as a result of both internal and external factors. Here are a few key influencers:

- Increased enforcement by rightsholders;
- Growing cost of content and the content management process;
- High-profile infringement cases;
- The inclusion of copyright and moral rights clauses within contracts;
- New staff with little or no copyright awareness.

### Current solutions for managing compliance

There are a number of options for pharmaceutical companies and other organizations to effectively manage compliance and build awareness with employees:

- licensing solutions that cover the desired works and types of use, offered by the rightsholders in the relevant publications or by third-party organizations authorized by the rightsholders to grant them on their behalf (for example, a copyright collective management organization (CMO) that has a relevant offering of aggregated rights);
- transactional, pay-per-use licensing solutions;
- rights and permissions information tools integrated with the workflows of the company's research teams and its scientific information units;
- copyright awareness and education programs to increase employee knowledge.

### **Considerations**

Organizations might consider the following when examining the copyright-related aspects of sharing scientific information:

- the issue of content purchase versus rights purchase: What rights are included or excluded with the content? Are additional licenses necessary to extend the scope of the primary content acquisition license? In most cases, the answer to the latter is yes. Additional licenses are almost certainly necessary because the types of secondary uses pharmaceutical employees make frequently fall outside the scope of the rights the initial content license grants;
- are the same reuse rights and permissions included when content is acquired through subscriptions versus document delivery? Typically the answer is no. Therefore, one would need to check the allowed reuse rights in each case;

- the efficiency of different licensing models: Acquisition of rights from individual rightsholders versus acquisition of rights from collective licensing organizations, and pay-peruse (transactional) permissions versus repertory licenses. What are the benefits of each model? Return On Investment for each licensing type has to be calculated not only on the basis of the price of the license and the value of the content, but also by factoring in the time spent in searching for and obtaining the rights in a centralized, aggregated model (repertory license) versus a transactional (pay-per-use) model;
- assessment of actual coverage of available licenses in terms of works, specific rights, types of use, and territories in which the uses can be made. Due to varying terms and conditions in subscription agreements, organizations can face the challenge of simply and straightforwardly expressing available rights to employees. A centralized, aggregated model (repertory license) can lessen this challenge by providing a uniform set of rights across rightsholders.

Pharmaceutical and health services professionals depend on their ability to disseminate critical information to employees to accelerate drug discovery, keep physicians and patients informed and monitor the safety of drugs in the pipeline and in the market. Respecting the copyright of content creators ensures the continued flow of this vital information, demonstrates corporate responsibility and minimizes the organization's risk of infringement.

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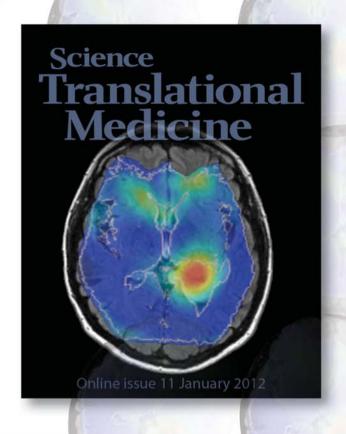
### For further reading

- European Commission Copyright: http://ec.europa.eu/internal market/copyright/index en.htm
- International Federation of Reproduction Rights Organisations: http://www.ifrro.org/
- WIPO World Intellectual Property Organization: http://www.wipo.int/portal/index.html.en
- International Copyright Basics: http://www.rightsdirect.com/content/rd/en/toolbar/copyright\_education /International\_Copyright\_Basics.html

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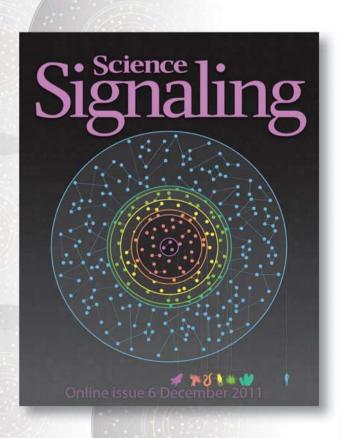
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Time	We. 4/07/2012		Th. 5/07/2012			Fr. 6/07/2012		Time
8:00	Registration open		Registration open		Registration open		8:00	
8:30	9		σ				8:30	
9:00	Opening session: EAHIL history		Plenary session + keynote address			Plenary session + keynote address		9:00
9:30					Coffee		9:30	
10:00	Coffee		Coffee		Collee		10:00	
10:30	Keynote address		Sponsor session		1 min. madness		10:30	
11:00					K:			11:00
11:30	A: Professional	B: Servicing our	E: New	F: Information	Commercial	G: EBLIP	H: Teaching information	11:30
12:00	development	users	technologies	literacy	training	G: EBLIP	literacy	12:00
12:30					session		,	12:30
13:00	Lunch		Lunch			Lunch		13:00
13:30					K:			13:30
14:00	C: Outreach	D: Global aspects	I: Library	J: Veterinary	Commercial		n: 23 things for HIL	14:00
14:30	C. Outreach	of information	management	information	training session	27		14:30
15:00 15:30	0-	#			Session	0		15:00 15:30
16:00	Coffee		Free excursion	Free excursions to libraries in Brussels and		General assembly & closing ceremony and awards		16:00
16:30	Posters exhibition		around/Round tables at the conference venue/Next workshop/conference meetings		,		16:30	
17:00	Best posters presentation						17:00	
17:30	Book posicio procentation						17:30	
18:00	Welcome reception (BOZAR)							18:00
18:30							18:30	
19:00								19:00
19:30			Gala Dinner (Aula Magna)				19:30	
20:00							20:00	
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22:00								22:00

Up-to-date version available at http://www.eahil2012.be, thumbnail "Schedule".

### Parallel session A: Professional development

- A1 Evolution of the health liaison librarian: from information literacy trainer to academic skills teacher
- A2 Implementing the critical friend method among teaching librarians in an academic setting a case study
- A3 Chameleon or health librarian? Changing roles of health librarians in Ireland:findings from the SHeLLI project
- A4 Participation of medical librarians in a national project: "Establishment of the universal, open, hosting and communication, repository platform for network resources of knowledge to be used by science, education and open knowledge society."

### Parallel session B: Servicing our users

- B1 The informatics of direct-to-consumer genetic tests
- B2 Publishing Literature Searches on the Internet what is the most user-friendly interface?
- B3 The Finnish Terveysportti Health Portal Nationwide access to quality medical information
- B4 Providing a library toolbar that interacts with the ILS for a better service to our users
- B5 E-books: what interest(s) in 2012 for life sciences library users?

### Parallel session C: Outreach

- C1 Information, promotion and training the priority for hospital libraries
- C2 Removing the boundaries of space in health information sharing
- C3 International variation in the evaluation of consumer health information. A phenomenological study.
- C4 SMH Baltic Sea Region Cooperation: "Transfer of Knowledge", partnership programme with medical libraries in Northwest Russia, 2004 2011 : an asymmetrical partnership?

### Parallel session D: Global aspects of information

- D1 International cooperation in support of "One Health"
- D2 The EHTOP: indexing Health resources in a multi-terminology/ontology and crosslingual world
- D3 Terminological model for extraction and search specialized information in Arabic language

### Parallel session E: New technologies

- E2 Information without barriers: Librarians as Support to Health related Information published in Social Media
- E3 Digital Preservation of Biomedical Documents State of the Art
- E4 Hydra's and 3D brains the wonderful world of embedding repositories to institutional services and processes

### **Parallel session F: Information literacy**

- F1 Metaphors we search by: experiences of handling information
- F2 Information Literacy User Training Project for the Faculty of Medicine of the University of Lisbon FMUL
- F3 Self-efficacy in information literacy: beliefs of a cohort of first year medical students

### Parallel session G: EBLIP

- G1 Sources of Evidence Used by Academic Librarians: A Grounded Theory Study
- G2 Using best evidence to evaluate clinical librarian services
- G3 Using Evidence to Document Our Value and Impact for Academic and Professional Accreditation Reviews
- G4 The roles of libraries in data exchange

### Parallel session H: Teaching information literacy

- H1 How can information literacy training promote awareness of information needs and realising gaps in knowledge: a perspective allowing for patients, families and healthcare providers?
- H2 Case study: are interactive tutorials an effective alternative tool for library or information literacy instruction?
- H3 Information literacy in the context of Evidence-Based Medicine: teaching and learning assessment of a course intended for 4th year students in medicine at the University of Liège (Belgium)
- H4 Limits of Evidence Based Medicine revisited

### Parallel session I: Library management

- I1 Developing e-resource licensing models for Academic Health Science Centres in England
- I2 The digital Reference Service: an essential element of the virtual library.
- I3 Everything that's wrong with e-book statistics a comparison of four medical e-book packages
- I4 Using Balanced Score Card and Key Performance Indicators in Strategic Planning.

### Parallel session J: Veterinary information

- J2 Active learning in library instruction revisited: feedback and development in veterinary education at the University of Helsinki
- J3 Process-focused quality management at the Veterinary Science Library, Archives and Museum, Szent Istvan University, Budapest, Hungary

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### [Collected during February - May 2012]



**Benoit Thirion** 

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The goal of this section is to have a look at references from non-medical librarian journals, but interesting for medical librarians (for lists and TOC's alerts from medical librarian journals, see: http://www.churouen.fr/documed/eahil67.html)

### Free full text

1. Dunne M. Barriers and facilitators to research use among allied health practitioners: a mixed-method approach to assessment

Evidence Based Library and Information Practice Journal 2011 [cited 2012 May 4];6(4)

Objectives – The disparity between what is known to be effective and what is done in practice points to barriers to research use among health practitioners. Library and information services (LIS) collect, organize and disseminate published research findings so they may be uniquely positioned to be of influence. This study aimed to identify barriers and facilitators to research use among allied health practitioners working in the alcohol and other drugs (AOD) field in Ireland, and to explore the services, strategies, and resources that may help alleviate these issues. Methods – Three focus groups were held with AOD practitioners. A survey questionnaire was then sent by post to 175 counsellors. The survey included the Barriers to Research Utilization Scale (Barriers Scale) (Funk et al. 1991), which assessed potential barriers from four factors: practitioner, setting, qualities of the research, and communication. Results – The number of responses was 71 (41%). All communication-related Barriers Scale items, and some items associated with the setting and practitioner, were perceived to be a moderate or great barrier by the majority of survey respondents. Similar issues were also raised in focus groups, where language, presentation, and time to engage with research were considered significant influences. Qualitative aspects of the study also revealed scepticism about research application and relevance. All proposed LIS were rated as moderate or great facilitators by the majority of respondents who expressed an opinion (those who choose "no opinion" or did not respond, 6-8%, were excluded). Conclusions – The high incidence of communication-related issues among top barriers and the enthusiasm expressed about proposed library services and training reveals the key role that LIS personnel can play in enabling practitioners to use research in practice. The addition of setting and practitioner factors indicates that a holistic, collaborative approach to promoting the effective use of research collections and

resources is required. Mixed-method data collection (focus group and survey) provided a rich source of

Available from: http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/11750

information, and may offer a useful approach for future study.

### 2. Lewis L et al. Employers' perspectives on future roles and skills requirements for Australian health librarians

Evidence Based Library and Information Practice Journal 2011 [cited 2012 May 4];6(4)

Objective - This study, which comprises one stage of a larger project (ALIA/HLA Workforce and Education Research Project), aimed to discover employers' views on how (or whether) health librarians assist in achieving the mission-critical goals of their organizations; how health librarians contribute to the organization now and into the future; and what are the current and future skills requirements of health librarians. Methods – Each member of the project group approached between one and five individuals known to them to generate a convenience sample of 22 employers of health librarians. There were 15 semi-structured interviews conducted between October and November 2010 with employers in the hospital, academic, government, private, consumer health and not-for-profit sectors. The interview schedule was sent to each interviewee prior to the interview so that they had time to consider their responses. The researchers wrote up the interview notes using the interview schedule and submitted them to the principal researcher, who combined the data into one document. Content analysis of the data was used to identify major themes. Results - Employers expressed a clear sense of respect for the roles and responsibilities of library staff in their organizations. Areas of practice such as education and training, scientific research and clinical support were highlighted as critical for the future. Current areas of practice such as using technology and systems to manage information, providing information services to meet user needs and management of health information resources in a range of formats were identified as remaining highly relevant for the future. There was potential for health librarians to play a more active and strategic role in their organizations, and to repackage their traditional skill sets for anticipated future roles. Interpersonal skills and the role of health librarians as the interface between clinicians and information technology were also identified as critical for the future. Conclusions - Interviews with employers provided valuable insights into the current and future roles and skills requirements of health librarians in Australia, enriching the findings of the earlier stages of the research project. The next step is to work with the stakeholder groups in this project and use the research project's findings as the evidence base on which to develop a structured, modular education framework comprising a postgraduate qualification in health librarianship and a continuing professional development structure supporting a three-year cycle of certification and revalidation.

Available from: http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/10340

### 3. Craven J et al. Recording database searches for systematic reviews - what is the value of adding a narrative to peer-review checklists? A case study of NICE interventional procedures guidance

Evidence Based Library and Information Practice Journal 2011 [cited 2012 May 4];6(4)

This paper discusses the value of open and transparent methods for recording systematic database search strategies, showing how they have been applied at the National Institute for Health and Clinical Excellence (NICE) in the United Kingdom (UK). Objective – The objectives are to: 1) Discuss the value of search strategy recording methods. 2) Assess any limitations to the practical application of a checklist approach. 3) Make recommendations for recording systematic database searches. Methods – The procedures for recording searches for Interventional Procedures Guidance at NICE were examined. A sample of current methods for recording systematic searches identified in the literature was compared to the NICE processes. The case study analyses the search conducted for evidence about an interventional procedure and shows the practical issues involved in recording the database strategies. The case study explores why relevant papers were not retrieved by a search strategy meeting all of the criteria on the checklist used to peer review it. The evidence was required for guidance on non-rigid stabilisation techniques for the treatment of low back pain. Results – The analysis shows that amending the MEDLINE strategy to make it more sensitive would have increased its yield by 6614 articles. Examination of the search records together with correspondence between the analyst and the searcher reveals the peer reviewer had approved the search because its sensitivity was appropriate for the purpose of producing Interventional Procedures Guidance. The case study demonstrates the limitations of relying on a checklist to ensure the quality of a database search without having any contextual information. Conclusion – It is difficult for the peer reviewer to assess the subjective elements of a search without knowing why it has a particular structure or what the searcher intended. There is a risk that the peer reviewer will concentrate on the technical details, such as spelling mistakes, without having the contextual information. It is beneficial if the searcher records correspondence on key decisions and reports a summary alongside the search strategy. The narrative describes the major decisions that shaped the strategy and gives the peer reviewer an insight into the rationale for the search approach

Available from: http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/11594

### 4. Ibegwam A et al. Factors affecting the use of indigenous publications by medical and dental students in Nigerian universities

Chinese Librarianship an International Electronic Journal 2012 [cited 2012 April 6];33 (1)

This study examined the indigenous medical publications used by medical and dental students in Nigeria with a view to discovering factors that affects their usage. Data was gathered through a questionnaire survey. The population of the study was 1,264 undergraduate medical and dental students from ten universities in all the geopolitical zones of Nigeria. Data gathered was analysed using SPSS to obtain the summaries of the variables in form of frequency distribution and other descriptive statistics. The findings reveal several factors affecting the usage of indigenous medical publications. In spite of all the inhibitors, 88.2% of the respondents indicated that they need indigenous medical publications for a well-rounded medical education.

Available from: http://www.white-clouds.com/iclc/cliej/cl33IOf.pdf

### 5. Câmara Siqueira J. **The notion of the term 'Information': literature review**Brazilian Journal of Information Science Review 2012 [cited 2012 Mars 9]; 5(1)

The literature review of the term 'information', starting from a terminological approach, has the aiming to identify traces which help in a better delimitation of the Information Science field. The comprehension of the identity characteristics of the Information Science is a conjectural need, observed in the context of the post-modernity on which the field tries to 'consolidate itself'. The use of the guidance of the Terminology Communicative Theory, which considers the pragmatic and social aspect of the terms, was an important resource to stress out how the different perspectives of the term 'information' corroborate the construction of a thematic view of the Information Science area.

Available from: http://www2.marilia.unesp.br/revistas/index.php/bjis/article/view/1264

### 6. Tyagi S. Use of electronic information resources at the Indian pharmacopoeia commission

DESIDOC Journal of Library & Information Technology Review 2012 [cited 2012 Mars 9];32(2):171-8 The present study sought to study the user experience and perception of using different types of electronic information sources (EIS) by the scientists, pharmacopoeia associates and scientific assistants; to analyse the different purposes for which the EIS is used by the respondents and to access current user characteristics associated with use of online resources and databases at the Indian Pharmacopoeia Commission (IPC). The study is based on questionnaire method. A questionnaire was distributed among the scientists, pharmacopoeia associates and scientific assistants to collect desired data. Total 40 questionnaires were distributed to the selected sample for the current year, 37 valid samples were collected and analysed. The result showed a growing interest in online journals among the users at IPC. The survey showed that majority of respondents marked that library possessed useful online journals and databases for the scientific community. The data scanned and preserved in document management software play an important role to access relevant information. Awareness among the users about the availability of online journals was found highly satisfactory. Online journals were mostly used for research needs and similarly pharmacy and pharmacology discipline-based journals used widely. The EIS is better for accessing current and comprehensive information. Available from: http://publications.drdo.gov.in/ojs/index.php/djlit/article/view/1604

### Abstracts only

### 1. Prusina T. Laboratory office Hours as outreach in the health sciences: better research skills for better careers

Public Services Quarterly 2012 [cited 2012 May 4];8(1)

Medical librarianship is changing in health care environments. Since 1996, by which time the standards that determine how hospitals acquire accreditation changed, many hospitals have been acquiring accreditation without a qualified medical librarian on site. For that reason, it has become even more important that health care professionals, doctors, nurses, and other clinicians learn to access and evaluate quality information as an integral part of their academic training. Medical clinicians now must begin their careers with strong research skills. These skills must be attained during their academic matriculation, and studies in the field of librarianship have shown that departmental outreach hours are an extremely effective way to promote library services to university students and faculty. Other methods, such as technology applications, are useful but have their limitations. This paper reviews current literature on the vital importance of in-person outreach to future health care professionals and illustrates these insights with a discussion of my personal experiences as a health sciences librarian at Georgia State University.

Available from: http://www.tandfonline.com/doi/abs/10.1080/15228959.2011.562110

### 2. Acadia S. Academic research journals in medical sociology, medical anthropology, and contemporary social medicine: a focus on public and global health

Behavioral & Social Sciences Librarian 2012 [cited 2012 April 6];31(1):39-75

A bibliography of 31 academic journals in medical sociology, medical anthropology, and contemporary social medicine with a focus on public and global health is provided. Along with basic identifying information, the bibliometric measures of Eigenfactor, Article Influence Score, SCImago Journal Rank, and H-index have been specified for each journal when available. Brief annotations along with both Library of Congress and medical subject headings are supplied. Though some limitations are acknowledged, this bibliography serves as a valuable tool for locating and selecting a wide range of periodical scholarship devoted to the social and cultural features of health and medicine.

Available from http://www.tandfonline.com/doi/abs/10.1080/01639269.2012.657603

### 3. Tang MC et al. A user study of the effectiveness of map (multiple-access to PubMed): A MeSH based query suggestion tool for PubMed

Journal of Educational Media & Library Sciences 2012 [cited 2012 April 6];49(3)

An interface, MAP (Multiple-Access to PubMed) was proposed here to provide MeSH term suggestion for PubMed bibliographic search. This paper reported the results of an experiment comparing users' search behaviors and performance between MAP and regular PubMed interfaces. A total of 44 graduate students in Bio-medical domains in Taiwan participated in the study. They were asked to ask for two information problems of their own alternately with the two interfaces. Comparison were made between the interfaces in terms query "goodness", result quality, and impact on users' querying behaviors. Information regarding the attributes of their information problems was also collected through questionnaire so that the effectiveness of the interfaces with different tyOpes of information problems can be explored. The results show that 1. Topic familiarity would influence users' querying behaviors; MAP had a high impact on users' queries when searching for unfamiliar problems. 2. MAP was shown to be helpful, especially when searching for search requests that the users had not attempted before. 3. MAP was most helpful in generating new research ideas. 4. MAP was shown to be able retrieve documents buried deep down in the initial returned results.

Available from http://joemls.dils.tku.edu.tw/detail.php?articleId=49353&lang=en

### 4. Myongho Yi. Effective medical resources searching using an ontology-driven medical information retrieval system: H1N1 case study

Electronic Library 2012 [cited 2012 April 3];30(2):248-63

Purpose – As international users increase rapidly, multilingual systems have become a very important service for global users. The purpose of this paper is to design and implement an ontology-driven medical information retrieval (OMIR) system by building a medical ontology based on the Centers for Disease Control and Prevention's (CDC) medical records. Design/methodology/approach – A traditional cataloging scheme is used as a navigation menu in the CDC system. This traditional cataloging scheme is transformed to a unique medical ontology for global users in the OMIR system. An experimental study was conducted on both an ontology-driven medical information system (OMIR) and the CDC system. Findings – The medical ontology can be used to filter out unsuitable resources based on semantic relationships. In addition, the recommended resources can be categorized and provide the patron with different languages to access resources. The OMIR system provides better relevancy and shorter search times compared with alternative systems. Research limitations/implications – The OMIR system is currently implemented for medical resources from the CDC. The developed method may also be applied to other domain areas. Originality/value – This paper represents a practical method of building a multilingual medical information retrieval system and explains the functional use of ontological knowledge. This study provides insights into medical information seeking performance on the medical database systems.

Available from http://dx.doi.org/10.1108/02640471211221368

### 5. Van Kessel K. Gertrude Lamb's pioneering concept of the clinical medical librarian

Evidence Based Library and Information Practice 2012 [cited 2012 Mars 18];7(1):125-8

Objective – To determine if "the medical librarian with special skills and training in tested methods for approaching medical literature serve a valuable interface between the professional who is taking care of patients and the knowledge explosion in medicine wherein lies the key to better patient care" (p. 78). Design –

Qualitative study involving the participant librarians keeping a reflective journal of all interactions with the subjects involved in the first 6 months of the study (September 1974 - March 1975). Setting - Hartford Hospital, Connecticut. Subjects – Teaching physicians, house staff, and medical students at Hartford Hospital. Methods – This pilot project, funded by a two-year grant from the U.S. Public Health service and the National Library of Medicine, placed three medical librarians (two full-time and one part-time) on rounds with pediatrics, medicine, and surgery teams. The librarians kept diaries to record "critical incidents" (p. 86), including the "acceptance of the program, its impact on patient care, its potential for changing the information seeking behavior of health professionals, and its usefulness for developing a core collection of clinical readings" (p. 86). Main Results – Despite a few physicians' initial apprehension, each of the three clinical librarians recorded indications of acceptance by clinical staff, including a dramatic increase in literature search requests; increased phone calls, drop-ins, pages, and requests for research assistance; and gestures of acceptance from house staff and students. More broadly, the literature searches in Lamb's report identifies direct patient care (including to "resolve a debate" (p. 84)), medical teaching/education, and searching techniques for clinicians. It is implied that these interactions resulted in a higher profile of the resources and services offered through the library; as one patron queried, "Would you show me how to find articles and where everything is in the library sometime?" (p. 83). Conclusions – The authors state that while their conclusions are only preliminary and no firm conclusions can be drawn, there are four observations of note: 1. The clinical librarian can be accepted as part of a patient care teaching team by contributing to educational activities. 2. The clinical librarian provides quick and useful information to assist in the decisions and management of patient problems. 3. There is an opportunity to strengthen and modify the information seeking behavior of the health professional. 4. As patient care questions recur, there is a need for a "patient care information system" which can be initiated and supported through the provision of photocopied articles (p. 86). Available from: http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/11766

### 6. Trends in health sciences and biomedical sciences information provision guest editor, Ramune Kubilius Against the Grain Review 2012 [cited 2012 Mars 9];23(6):1-46

Trends in Health Sciences and Biomedical Sciences Information Provision – p. 1 by Ramune Kubilius – Ramune and her colleagues have done an excellent job of catching us up on the successes, issues, trends, challenges and opportunities for information provision in the health sciences and biomedical arenas. The National Library of Medicine: 175 Years of Information Innovation – p. 16 by Maria E. Collins, Martha R. Fishel and John Doyle — NLM is 175 years old and looks forward to another 175 years of innovation. Immersed in Patient Care: Mission Critical Decisions for Hospital Libraries – p. 22 by Patricia A. Hammond — Patricia illustrates how collection development for the individual hospital library has changed in the networked, larger multi-facility health care environment. Assembling the Orchestra: The Role of Librarians in an e-Science Environment – p. 26 by Sally A. Gore — e-Science is an orchestra made up of researchers, computer scientists, librarians and publishers who have new music to learn or instruments to play. Medical Education and Mobile Technology: The Next 100 Years – p. 32 by Stephanie C. Kerns — In 1910 the Flexner Report called for sweeping reform in medical education. We started to see the same reform in 2010. In the clinical realm, mobility is key. Mutual Advocacy: Developing Shared Outreach Programs with Institutional Partners – p. 36 by Heather J. Stecklein and M. Nathalie Wheaton — The Rush University Medical Center Archives has capitalized on existing outreach initiatives to bring its collections to a broader base. eBook Access via a Library-Developed Full-Text Search Tool: A Five-year Reflection - p. 42 by Leslie Czechowski and Nancy Tannery — Early in 2005, the Health Sciences Library System (HSLS) at the University of Pittsburgh introduced a federated search tool for their collection of over 2,500 eBooks. Available from: http://www.against-the-grain.com/2012/02/v23-6-table-of-contents/

### 7. Jacsó P. Google Scholar Author Citation Tracker: is it too little, too late?

Online Information Review 2012 [cited 2012 February 20];36(1):126-41

Purpose – Seven years after the release of Google Scholar in 2004, it was enhanced by a new module, the Google Scholar Author Citation Tracker (GSACT), currently a small subset of the complete Google Scholar (GS) database. The aim of this paper is to focus on this enhancement. Design/methodology/approach – The paper discusses the Google Scholar Author Citation Tracker, its features, potential benefits and problems. Findings – GSACT allows registered users to create and edit their scientific profiles and some bibliometric indicators, such as the h-index, total citation counts, and the i10 index. These metrics are provided for the

entire academic career of authors and for the most recent five-year period. The new module also offers some long overdue essential options, such as sorting result lists of the documents by their publication year, title, and the citations received. Originality/value – The paper shows that, at present, GSACT may be too little, too late. However, with an extension of the current clean-up project it could possibly become a really scholarly resource in the long run.

Available from: http://dx.doi.org/10.1108/14684521211209581

8. Brewster L. *et al.* Legitimising bibliotherapy: evidence-based discourses in healthcare Journal of Documentation 2012 [cited 2012 February 27];68(2):185-205

Purpose – The purpose of this paper is to explore how the use of self-help bibliotherapy developed from a local pilot scheme to become national policy in Wales. Analysis aims to focus on the use of evidence-based practice (EBP) as a justification in the process of policy creation. Design/methodology/approach – A mixed methodological approach was used to gather data, incorporating semi-structured interviews, documents, and descriptive statistics. Actor-network theory (ANT) was used as a critical lens to frame analysis. Findings – The study finds that the translation from local pilot to national initiative was achieved using legitimising discourses including EBP. These discourses were used selectively, and in response to the needs of the focal actors in the network. The complex relationship between EBP and self-help bibliotherapy is explored in connection with healthcare policy, concluding that the use of EBP legitimises a lack of patient-centred evaluation. Research limitations/implications – Limitations of the research include a lack of engagement with patients using the scheme, and future research should aim to present a more patient-centred account to complement this policy-focused work. Originality/value – Little in-depth work has been conducted on the strategy behind the introduction of bibliotherapy schemes in the UK or elsewhere, and this paper presents an in-depth theoretical analysis of the first nationwide bibliotherapy scheme in the world. Available from: http://dx.doi.org/10.1108/00220411211209186

9. Pedramnia S. *et al.* An analysis of service quality in academic libraries using LibQUAL scale: application oriented approach, a case study in Mashhad University of Medical Sciences (MUMS) libraries Library Management 2012 [cited 2012 February 20];33(3):159-67

Purpose – The main purpose of this paper is quality assessment of services provided by the MUMS libraries and determining member satisfaction and expectations of library services in the LibQUAL dimensions. Design/methodology/approach - This research used the survey method for collecting data. Library service quality was measured by using 22 items taken directly from the 2004 version of the LibQUAL scale. Findings - The highest average score was "Service affect" with 6.39 and the lowest score 5.75 belonged to "Library as place". Total results emphasised the importance of librarians' specialised knowledge level in presenting appropriate services in circulation and reference sections. A significant outcome, is in the "information control" dimension, and appropriate working hours; classification system for searching and accessing to information and appropriate time for loaning resources. The biggest gap related to updated multimedia databanks, appropriate number of computers and adequate facilities like laptops/PCs and broadband networks for better access to subscribed electronic resources through the MUMS central library web site. Practical implications - The results of this study emphasise the importance of librarians' specialised knowledge level in presenting appropriate services in circulation and reference sections as well as identifying strengths and weaknesses of MUMS schools and hospitals libraries for improving decisions affecting the library service quality. Originality/value - The findings show all highly important aspects of the "Service affect" dimension in academic libraries such as understanding user needs and presenting perfect service. Available from: http://dx.doi.org/10.1108/01435121211217144

### A bright future for librarians: experimenting like crazy



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When I was editor of the *Journal of the Medical Library Association* (2000-2005) I would spend my Saturday mornings sprawled on the living room couch going through stacks of manuscripts. I loved editing. I loved focusing on the words and I loved helping authors find the words to say what they really meant. And it was through that focus on words that I began to notice something that troubled me. So often the articles talked about the wonderful things that "the library" was doing, as if the building or the collection was animated on its own and the people involved were invisibly behind the scenes. I started advising authors that they should rewrite those sections, being more explicit about the contributions that librarians were making.

When I did my keynote presentation at the UKSG conference in 2007, and again last year when I gave the Janet Doe lecture at the annual meeting of the Medical Library Association, I used this idea as a jumping off point. I wanted to emphasize that I believe that the future for librarians can be quite bright, but that we have to focus on our own abilities and accomplishments as librarians rather than letting the discussion be dominated by concern for libraries.

My library, here in the American deep south, is a large, four-story building right in the center of campus. My university, the University of Alabama at Birmingham (UAB), is one of the top research institutions in the United States, with a strong focus on the biomedical sciences. When I came to UAB in 1995, the most important people who walked through the doors were the clinicians and the basic science researchers. We tailored all of our services and procedures to make things as easy as possible for those people to do their work.

Now, those folks almost never come into the building. This is a good thing. I don't want the clinicians to be spending their precious time leaving their clinics and walking over to my building when I can deliver resources and services to them right where they are.

These days, the most important people to come into the building are the students. They come singly, looking for quiet places to study, or they come in groups to collaborate on projects. So we've reshaped and refashioned how we use the physical space, to make it as efficient and comfortable and inviting for the students as we can.

Similarly, when I first came to UAB, all of the most important work of the librarians took place inside the building. Now, much of that important work takes place outside. We connect to our community with our website, with instant messaging, with Facebook, and with Twitter. More important though, than the virtual connections, are the in-person connections. It used to be that you could get to know the heaviest users of the library's resources by sitting at the reference desk and talking to people as they came through. No longer! So librarians hold office hours in the buildings of the various schools we support (medicine, nursing, optometry, health professions, public health, dentistry, as well as the hospital and the clinics). They attend faculty meetings and participate in classroom sessions. They are members of research teams and they represent us on university committees and in the faculty senate.

Our library building is still very important, but it doesn't define us in the way that it did during the great age of print. In this incunabula period of the digital age, we need to be newly creative about how we meet our responsibilities to our communities. If we focus our attention on our collections and on getting people into our buildings, we're going to miss the point.

Several years ago, I wrote a blog post in which I tried to get at the essence of what we do as librarians. I said:

We connect people to knowledge. We bring people together with the intellectual content of the past and present so that new knowledge can be created. We provide the ways and means for people to find entertainment and solace and enlightenment and joy and delight in the intellectual, scientific and creative work of other people. This is what we have always been about. For all those centuries, the way that we could best do that was by creating places and collections – but along the way we lost sight of the fact that those were only tools. We allowed our tools to define us (1).

Librarians worry about how to make the library more relevant. I'm not interested in that. I think "the library" is, in fact, less relevant than it used to be, and we need to accept that. Given the plethora of online information resources, the niche that the library used to fill has changed dramatically. But that wealth of information has also created new challenges for people that librarians are uniquely equipped to help solve.

I had a meeting with a department chair the other day. He said that one of the things that he feels an increasing need for is better training for his faculty on what resources are available and how to use them effectively. I hear this from all over campus. My problem is that I don't have enough librarians. But when I have department chairs clamoring for more services, I have a better chance of making a compelling case to the Provost for more funding. I need more funding for collections, to be sure; but even more importantly I need more funding for librarians.

If it is true, as I said in the blog post that I quote above, that our fundamental purpose is to connect people to knowledge, then we need to rethink almost everything that we do on a day to day basis. In the print world that I grew up in, during what I think of as the Great Age of Libraries, the processes and procedures that we developed were all rooted in the notion that we were trying to track the movement of physical objects (books and journals, mostly) in and out of our buildings. But in the digital age, when information is not confined by physical objects, those processes and procedures are too often anachronistic and inadequate. We need to be bold in devising new ways to deal with the advantages and complexities of digital objects.

From time to time, as we ponder this changing future, someone brings up the question of what to call ourselves. If we're no longer focused on building collections and taking care of our buildings, should we still be calling ourselves librarians? Doesn't the word conjure up stereotypical images of unattractive spinsters telling people to keep quiet? I can assure you that the faculty in my university have no such image of their librarians. Language is a funny thing, and more malleable than we sometimes recognize. To make the point, I like to ask people if they're carrying a miniature multi-purpose wireless computer with them. They'll look puzzled for a minute and then they grin, still somewhat puzzled, and pull it out of a pocket. "And what do you call that," I ask them. "That's my 'phone," they'll say. Yes, indeed. The little handheld mobile device that we still call a "phone", though it bears much less resemblance in engineering and purpose to the rotary dial telephone that was in my house when I was seven, than the brightest of my young reference librarians bears to one of her circa-1950s colleagues. "Librarian" may carry some connotations we're not happy with, but it carries more that are positive and worth hanging on to.

There's no clear road map for what we need to be doing. We need to experiment like crazy. We need to be willing to be almost recklessly creative, willing to try things out, evaluate them, and then abandon them if they don't give us the results that we want. But we need to keep our focus on that critical element – how do we do the best job possible of connecting people to knowledge in a world that is flooded with information in digital forms. Libraries are indeed less relevant in this digital world. But the need for smart, creative, risk-taking, knowledgeable Librarians is greater than ever.

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### **Letter from the President**



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Dear Colleagues,

In the March issue of the Journal I wrote about some Open Access (OA) topics that were attracting a lot of media attention (principally regarding the proposed Research Works Act in the US, and the boycott of Elsevier by researchers). I speculated that these developments might make some impact and concluded with the words "watch this space!" As those of you who did just that will already know, there has indeed been further significant progress perhaps more than all but the most optimistic advocates of OA might have expected; so I make no apology for returning to the subject, because the questions that are being asked, and the answers that are gathering support, seem increasingly likely to have a permanent impact on the way scientific knowledge is transmitted, shared, and re-used. For those of us working in the field of health information this is an issue of central importance, with huge implications for the way both we and the users of our services will work in future.

First of all, let's recap recent events. The researchers' boycott of Elsevier continued to gather support (there are now more than 11,000 signatories) and prompted the company to issue a series of public statements designed to reassure the academic community that it was willing to listen to their concerns. Elsevier then withdrew its support for the RWA, which had received further heavy criticism both within and outside the US, and the Act was in turn withdrawn by the two members of the House of Representatives who had sponsored it. But if those under attack had expected these withdrawals to silence their opponents they were disappointed, as by this time the news media had become interested, and further articles about the OA movement and its criticism of the established scholarly publishing industry appeared in a wide range of influential newspapers suchas *The New York Times* and *The Times. The Economist*, sensing that some form of revolution was in the air, described the gathering momentum of the OA campaign as "the Academic Spring". It was no coincidence that in April the press gave a lot of publicity to "eLIFE" (1), the new OA journal announced last year by the Wellcome Institute in collaboration with the Howard Hughes Medical Institute and the Max Planck Society, even though the originallaunch announcement had attracted little attention outside the research community.

At about the same time the international nature of this debate was being emphasised by Nellie Kroes, Vice-President of the European Commission responsible for the Digital Agenda, who gave a speech entitled "What does it mean to be open?" (2) in which she reiterated her vision of accessibleinformation and observed that "We must also be open to different online business models. The Internet potentially offers not just new forms of content, but new ways to distribute it, new ways to make it accessible, and new ways to be rewarded for it. If we are to benefit from the Internet's enormous innovation we must be open to new ideas here."

In the UK politicians have also been making pronouncements indicating growing government support for OA, justifying this by citing the wider public interest in obtaining access to the results of publicly-funded research. (Note,

### **News from EAHIL**

by the way, that "publicly-funded" should also be extended to include research funded by philanthropic organisations such as the Wellcome Trust, since their activities are subsidised by the public purse through the tax relief available to charities.) The UK's Minister for Universities and Science, David Willetts, provided a practical example of how what Nellie Kroes termed "the Internet's enormous innovation" might be enlisted - and captured many media headlines - when he announced that the UK Government had invited Jimmy Wales, founder of Wikipedia, to advise them on how to facilitate OA (3). The response has been mixed: the move has been welcomed as an imaginative way of harnessing expertise from an acknowledgedinnovator, and criticised because Wikipedia is seen as lacking the quality standards that underpin the peer-reviewed research literature. There is, however, widespread agreement that the publicity generated by this announcement will have helped to ensure that OA remains highly visible on the political agenda and that the debate is no longer just a matter for discussion within the scholarly research.

While the general principles of OA and the implications for the established publishing industry have commanded most public attention in these last few months, one particular area of activity, text- and data-mining, has become the subject of a lively discussion. As Nellie Kroes said, "sometimes it's not about changing the rules at all, but about changing a mindset... we're going through that process ourselves for open data; where we need new legislation that enables a new mindset". An example of this approach has emerged from a recent consultationon the reform of the UK's existing copyright legislation. Following the 2011 Hargreaves Review of Intellectual Property, the UK government's response includes a proposal that "seeks to introduce a new non-commercial research exception that permits copying for text and data analytics, to the extent that this is possible under EU law." (4) While advocates of "open mining" have argued that this proposal does not go far enough, not least because some scientific data re-use would be hampered by the non-commercial restriction, the fact that legislation is now under consideration does show how OA has now progressed in securing official recognition. There is a widely shared view that the speed with which the OA debate has moved beyond scholarly communities in the past few months indicates that we have reached a social and cultural tipping point, and that the momentum of the OA movement is becoming unstoppable.

Of course, there are still many problems to be resolved, and OA advocates are by no means united in their views about the best routes towards achieving their goals, or indeed about exactly what those goals are. The complexity of the issues, which have scientific, political, economic, social and cultural implications, are well illustrated in a recent lecture given at the University of California, Berkeley, by the philanthropist Lisbet Rausing, of the Arcadia charitable foundation, who has been a strong champion of OA. Dr Rausing's lecture and the panel discussion held the following day are available on YouTube (5, 6), and they make rewarding (if lengthy) viewing for anyone who is interested in the broader picture of why OA is important.

Open Access is of course only one of the major issues that currently occupy our thoughts and plans as health information librarians, but it is one that fits particularly well with the "Health Information Without Frontiers" theme of the 2012 EAHIL Conference in Brussels on 4-6 July. I'm sure that this and other topics will be the subject of much discussion when we meet in Brussels in July for the 2012 EAHIL conference, and I look forward to greeting many of you there to celebrate our 25th Anniversary conference.

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### **News from the MeSH Special Interest Group**

# Attitude and practice of ISS Italian researchers towards indexing their publications with MeSH

### Alessandra Ceccarini, Maurella Della Seta

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### Introduction

The Istituto Superiore di Sanità (ISS) is the Italian National Institute of Health. ISS researchers publish an average number of about 1,700 papers per year; they are asked to use MeSH terminology (both in English and Italian), for indexing publications related to their activity within ISS. These range from journal articles to technical reports, conference proceedings and research projects. MeSH headings are searched in ISS application that includes English and Italian terms.

ISS also holds and maintains a MeSH indexed database of publications which serves as an open repository, where the whole ISS production is collected.

In this paper the authors wish to focus on the difficulties experienced by ISS users in searching and retrieving the Italian MeSH heading that reflects the topic of their activity.

There are a few major causes for failure in finding the required heading:

- Italian concept not expressed in MeSH
- Lack of entry term translation
- Failure in searching (misuse or failure to use asterisks for truncation)

### Italian terms not expressed in MeSH

### Disbindina/Dysbindin (Substance Name)

Since research projects may be original and pioneering in some research fields, the existence of relative MeSH for indexing is not always granted. One of the major problems is related to searching specific substances not included in MeSH but only present in the substance name list, which has not been translated nor uploaded in English in the ISS database.

For instance, the substance name *disbindina* is not present in our Italian translation, while searching NLM Mesh Browser (http://www.nlm.nih.gov/mesh/MBrowser.html) for dysbindin, you will get the following suggestions:

DTNBP1 protein, human dysbindin protein, human Dtnbp1 protein, mouse dysbindin protein, mouse dysbindin protein, Drosophila dysbindin-1 protein, rat

If you select dysbindin protein, human, you will get the record shown in figure 1.

Human dysbindin is mapped to Carrier proteins, that is *Transport proteins that carry specific substances in the blood or across cell membranes*. The scope note clearly indicates a large family of proteins, while dysbindin *Plays a role in the biogenesis of lysosome-related organelles such as platelet dense granule and melanosomes; binds dystrobrevins in brain in muscle*, being a specific protein involved in pathologies such as schizophrenia, and rare disease Hermansky-Pudlak syndrome. Therefore, if you work on dysbindin and your paper focuses on *the role of* 

### **News from EAHIL**

Name of Substance	DTNBP1 protein, human				
Record Type	C				
Registry Number	0				
Entry Term	dysbindin protein, human				
Entry Term	dystrobrevin binding protein 1 protein, human				
Entry Term	Hermansky-Pudlak syndrome 7 protein, human				
Entry Term	My031 protein, human				
Heading Mapped to	*Carrier Proteins				
Source	J Biol Chem 2001 Jun 29;276(26):24232-41				
Frequency	177				
Note	Plays a role in the biogenesis of lysosome-related organelles such as platelet dense granule and melanosomes; binds dystrobrevins in brain in muscle; RefSeq NM_032122				
<b>Date of Entry</b>	20010810				
<b>Revision Date</b>	20060516				
Unique ID	C432416				

Fig. 1. MeSH Browser Record for DTNBP1 protein, human

dysbindin in Hermansky-Pudlak syndrome you can only use Carrier proteins and Hermansky-Pudlak syndrome, which gives a poor indication of your specific field of research. Hence, we should consider the possibility of translating substance names, starting with those of major interest for ISS researchers.

### Lack of entry term translation

### Dosimetria/Radiometry (Entry Term: Dosimetria delle radiazioni/Dosimetry, Radiation)

If you search for *Dosimetria* in the Italian database you need the symbol of truncation "\*" to retrieve Dosimetria delle radiazioni.

### Biobanche/Biological specimens banks

The term Biobanks is not present in NLM MeSH Browser, where it is represented under Biological specimens banks and its entry terms

Bank, Biological Specimen

Bank, Biological Substance

Banks, Biological Specimen

Banks, Biological Substance

Biological Specimen Bank

Biological Substance Bank

### ISS Italian researchers indexing their publications with MeSH

Biological Substance Banks Specimen Bank, Biological Specimen Banks, Biological Substance Bank, Biological Substance Banks, Biological

Similarly, in Italian MeSH, the term *Biobanche* has not been considered for translation. If you search for *Biobanche* your result will be null, but searching with left/right truncation for \*banc\* you'll get *Banche di campioni biologici* on the first results page. To overcome this problem, our database has been implemented with the addition of *Biobanche* and *Biobanca* as entry terms. This will be visible in the next translation release.

### Lack of entry term translation

Medicina Translazionale (Ricerca Medica Translazionale/Translational Medical Research)

Medicina translazionale is an entry term for the MeSH Heading Ricerca Medica Translazionale/Translational Medical Research, a modified 2012 term. Originally, not all entry terms have been translated, therefore you should search for \*translazionale\* and get Ricerca Medica Translazionale. This issue will be solved by completing the Entry Term translation. So far, almost 25,000 Entry Terms out of over 100,000 have been translated.

### Sostanze d'abuso/Droghe d'abuso

Substances of abuse is not present in MeSH as it. However, the concept is scattered through Street Drugs and, after 1988, Designer Drugs, both referring to illegal use substances. Drugs of Abuse, similar to the Italian *Droghe d'abuso*, is an entry term for Street Drugs, *Droghe da strada*, together with Illicit Drugs and Recreational Drugs, while Designer Drugs has a single Entry Term, Customized Drugs.

Therefore, searching the Italian database you'll get no hits for *Sostanze d'abuso*. You should search \*d\*abuso\* alone, inserting \* in place of ' or *Droghe*\* and you'll find *Droghe da strada*/Street Drugs in the first case and both *Droghe da strada*/Street Drugs and Designer Drugs/*Droghe di sintesi* in the second one. However, to understand links between terms and their scope it is essential to see the original English record in NLM MeSH Browser.

### **Conclusions**

The Italian translation of MeSH strives to facilitate the work of our scientific investigators. A careful analysis of pitfalls and weakness of the translation, together with a closer examination of researchers attitudes and practice towards the indexing process, can provide invaluable feedback for translators work. Scheduling Help desk meetings on Italian MeSH database could be helpful for refreshing users searching abilities and updating the translation Help page on the basis of recurring questions and issues.

### Elections for the EAHIL President (2013-2014) and Executive Board Members (2012-2015)

Following the call for nominations for President and Executive Board members published in vol. 8 (1), March 2012, of the Journal, the EAHIL Nomination Committee comprising Patricia Flor, Margarida Meira, Sally Wood-Lamont and Ronald van Dieen has facilitated the elections by co-ordinating the search for candidates who are representative of the membership across Europe. The results were that we have one nomination as President, Lotta Haglund (Sweden) and three nominations for Board Members Tuulevi Ovaska (Finland); Maurella della Seta (Italy); Ghislaine Declève (Belgium). All of them are well known long-standing EAHIL members and below are their election manifestos.

The elections will take place in early June and will be held online as usual, so keep checking your e-mails for details. To be able to participate in the elections, please make sure that you have your userid and password for the membership database. Even if the number of candidates are the same as the vacant positions, please remember to vote, it is your right as a member!

### Candidate for President (2013-2014)



Lotta Haglund

Karolinska Institutet University Library Stockholm, Sweden Contact: lotta.haglund@ki.se

### **Professional Career**

I am responsible for internal communication in the library, with a focus on management communication. In collaboration with the Library Director I plan and organize the work of the management board in the library. I am also responsible for national and international contacts, with medical libraries and others. I have worked in health libraries for most of my professional career, starting at the Spri Library in 1992 and moving to the Karolinska Institutet University Library (KIB) in 2000. My main area of work has been the marketing of the library to all our users, from organizing events and presentations, to producing news items for our web site and writing texts for various in-house publications. I have been a member of the library management board since my first year at KIB.

My first EAHIL meeting was the 4th EAHIL conference in Oslo in 1994, and since then I've participated in ten EAHIL events, presenting papers at several, and been on the International Program Committee of two events. I am also the Chair of the upcoming EAHIL Workshop in Stockholm in 2013. I've been a member of the EAHIL Executive Board since 2009.

### **Aims for EAHIL**

As Europe is facing severe financial difficulties, affecting everyone both personally and professionally, collaboration and networking has increased in importance. Medical librarians need to learn best practice from each other, both when it comes to our actual work, but also to learn how to prove the value and importance of library services in our organizations; be it hospitals, universities, pharmaceutical companies or other. We also need to share new ideas in many areas of library services. How can we achieve this with shrinking budgets, when there is little or no funding for conference participation or professional development for staff? We have to work together to find new and innovative ways to meet and learn from each other, as well as encouraging EAHIL members and others to share their ideas and knowledge in the JEAHIL and other channels. The EAHIL web site could be a very important tool for this exchange. Work has been going on for some time to modernize the web site, enabling social media functions, and it is very important that we proceed with the next step in this work.

### **Candidates for EAHIL Board Members**



Tuulevi Ovaska

Contact: tuulevi.ovaska@uef.fi

### **Professional roles**

I currently hold the position as Head of Services in the *Kuopio* University Hospital Medical Library at the University of Eastern Finland Library, Kuopio, Finland. I have been a librarian since 1990 and a medical librarian since 2003. I have been a member of the Editorial Board of the *Journal of EAHIL* since 2005. I was a Councillor of EAHIL 2009-2010 and am currently a co-opted member of the EAHIL Executive Board 2011-2012. I am the Chairperson of Bibliothecarii Medicinae Fenniae (BMF, the Finnish Association for Health and Medical Librarians) since 2011. I have presented papers and posters at six EAHIL conferences and workshops (2005, 2006, 2007, 2008, 2009, 2011), in ICML2009 and in EBLIP6 (2011). In 2008, I was a member of the Local Organising Committee and the CEC working group of the EAHIL conference in Helsinki. I am a member of the International Program Committee for the 13th EAHIL Conference, Brussels, Belgium, 2012, and the International Program Committee for the EAHIL workshop 2013, Stockholm, Sweden.

### **Professional Interests**

I am interested in promoting professional development, advancing horizontal career development, information retrieval and information literacy training, marketing and promoting libraries and information services, and national and international cooperation.

### Aims for EAHIL

If elected to the EAHIL Board, I would promote the association's goals to unite and motivate information professionals working in medical and health libraries in Europe by using both traditional (conferences and workshops) and modern (social media) tools. I aim to improve cooperation and enable the exchange of experience amongst EAHIL members especially by utilizing novel innovations.



Maurella Della Seta

Settore Documentazione, SIDBAE Istituto Superiore di Sanità Viale Regina Elena, 299 00161 ROME, Italy e-mail: maurella.dellaseta@iss.it

She graduated in Spanish and English literature at University "La Sapienza", Rome, Italy and has a postgraduate diploma in Library Sciences of the same university. She has been working at the Documentation Service and at the Library of the Istituto Superiore di Sanità, the Italian National Institute of Health, since 1985 and is responsible for the Acquisitions Department of the Library, one of the largest biomedical libraries in Italy.

### **News from EAHIL**

At present she is the Director of the Documentation Service, the Italian MEDLARS Center, being in charge of the online activities, Internet research and database project and maintenance. Maurella organizes the development of a website www.iss.it/sibi and a database collecting Italian literature and legislative sources in the field of bioethics www.bioetica.iss.it and is responsible for the Italian MeSH translation www.iss.it/site/mesh, participating in European projects and lifelong learning partnerships. Her research interests are end-user education, electronic information sources in all public-health-related fields, official publications and indexing and she is an active member of AIB (Italian Libraries Association). Maurella has been a Council member of EAHIL (European Association of Health and Information Libraries) for the years 2001-2008 and 2011-2014.

### Her objectives for EAHIL are:

- to foster the participation of young European librarians;
- to create a professional network of possible partners in European projects;
- to empower EAHIL training initiatives addressed to librarians and information specialists.



### Ghislaine Declève

Head of Library of Health sciences, Université catholique de Louvain Brussels, Belgium Ghislaine.Decleve@uclouvain.be

### **Professional career**

- Master of Letters, Romance Philology, Letters and Linguistics from the University of Brussels (1991)
- Teacher and lecturer of French as a mother and foreign language (1990-1997)
- Master of Advanced Science, Library and information science from the University of Brussels (1995).
- Deputy Librarian at Université Libre de Bruxelles, central library of medicine (1995 –1997). In charge of the management of the Medline network implemented on the biomedical campuses by the University Libraries
- Assistant at Université Libre de Bruxelles, information science department. In charge of seminars on special questions in librarianship, librarianship, special librarianship (1995 – 1997)
- Head of academic library of health sciences at Université catholique de Louvain (1997 )
- Chair of the local organizing committee of 13th EAHIL conference, in Brussels 2012.

### **Professional interests**

- library management (member of ISO TC 46 SC8 WG 10: Methods and procedures for assessing the impact of libraries)
- library buildings (member of ISO TC46 SC 8 WG 8: Statistical data for library buildings)
- evidence-based librarianship and information practice (EBLIP)
- user education
- professional development (member of EAHIL 2011, 2012 and 2013 IPCs).

### Aims for EAHIL

- support exchanges between EAHIL members sharing their experience and knowledge
- promote EAHIL activities among Belgian and French-speaking health and medical information and documentation specialists.

#### Medical Library Association report for EAHIL



**Bruce Madge** 

MLA representative to EAHIL London Upright MRI Center, London, UK Contact: Bruce.Madge@uprightmri.co.uk

#### MLA 12: May 18th-23rd Seattle, Washington, USA: Growing Opportunities; Changing our Game.

By the time you read this the Seattle MLA meeting will have been and gone – so watch this space for a report about the conference in the next issue.

#### ICML/ICAHIS/ICLC

The year 2013 will provide a unique opportunity to explore the global interdependency of health information at a federated international meeting incorporating the 2013 Annual Meeting and Exhibition of the Medical Library Association (MLA '13), the 11<sup>th</sup> International Congress on Medical Librarianship (ICML), the 7<sup>th</sup> International Conference of Animal Health Information Specialists (ICAHIS), and the 6<sup>th</sup> International Clinical Librarian Conference (ICLC).

Come participate and celebrate the information aspects, rich diversity, and global interdependencies of "One Health." General meeting topics include trustworthy and authoritative publicly available information, new methods of publishing, global data sharing to advance science, and environmental aspects of global health. The international meeting will be a federated meeting incorporating MLA's extensive continuing education and section programming as well as offering an intriguing palette of international papers and posters that underscore our global information interdependency.

Mark your calendar for May 3-8, 2013, in Boston, MA!

The schedule for the meeting is now available at: http://mlanet.org/am/am2013/pdf/2013\_schedule.pdf

#### The Cunningham Fellowship

For 2013 only, the Cunningham fellowship will be replaced by Cunningham grants to allow health sciences librarians from countries other than the United States and Canada to attend the combined MLA '13, 11<sup>th</sup> International Congress on Medical Librarianship (ICML), 7<sup>th</sup> International Conference of Animal Health Information Specialists (ICAHIS), and 6th International Clinical Librarian Conference (ICLC), to be held in Boston, Massachusetts, May 3–8, 2013. These grants are supported in part by the 11<sup>th</sup> ICML.

#### Call for Papers: Association for Health Information and Libraries in Africa

The Organising Committee for the 13<sup>th</sup> Congress of the Association for Health Information and Libraries in Africa (AHILA-13), October 15–19, Cape Verde, invites papers for presentation at the conference. Papers should reflect the theme "Enhancing Access to Health Information in Africa: Research, Collaboration and Innovation." Abstracts

should be sent to Osvaldina Brito at dina1982@hotmail.com and copied to bsmcec@yahoo.fr and chipo@itoca.org by May 31.

#### **Public Policy Update**

#### **MLA Submits Testimony in Support of NLM Funding**

MLA and the Association of Academic Health Sciences Libraries (AAHSL) have submitted joint testimony to the House and Senate Appropriations Subcommittees on Labor, Health and Human Services, Education, and Related Agencies supporting the National Library of Medicine's (NLM's) fiscal year 2013 funding. The statement recommends increasing NLM's funding levels to \$372.6 million, the amount contained in the president's budget proposal. It also recommends that the committee continue to support the medical library community's role in NLM's outreach, telemedicine, disaster preparedness, and health information technology initiatives and the implementation of health care reform.

#### Joint MLA/AAHSL Legislative Task Force Makes Capitol Hill Visits

On April 11, members of the Joint MLA/Association of Academic Health Sciences Libraries (AAHSL) Legislative Task Force met with congressional staff providing support to members of several House and Senate committees. The task force addressed two high-priority issues during these meetings: securing the highest possible funding level in fiscal year 2013 for the National Library of Medicine (NLM) and the National Institutes of Health (NIH) and encouraging members of Congress to cosponsor the Federal Research Public Access Act (FRPAA). Briefing packets included fact sheets on NLM programs and services and FRPAA.

#### **Publications**

Have you added the latest MLA publication to your professional library? Be sure to check out *Position Descriptions in Health Sciences Libraries: Traditional and Emerging Roles* (available in ebook and print editions). This essential resource includes more than 150 current, complete job descriptions collected from nearly 30 academic and hospital health sciences libraries across the continent. It also features results of a survey conducted by the authors on trends in health sciences libraries positions and a comprehensive list of new and revised job titles for health sciences library positions.

The April issue of the MLA News is now online.

The April 2012 issue of the Journal of the Medical Library Association is online at PubMed Central.

#### The many roles and tasks of health information professionals



Tuulevi Ovaska

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Changing Roles and Contexts for Health Library and Information Professionals. Editors: Brettle, Alison & Urquhart, Christine. Facet, London 2012. ISBN 9781856047401. 224 p. 49.95 GBP

#### Introduction

The book titled *Changing Roles and Contexts for Health Library and Information Professionals*, edited by Alison Brettle and Christine Urquhart, and written by an impressive list of contributors, has been published at a time when health sector librarians and other information professionals are facing many challenges. Information technology and the provision of information develop rapidly; and while organizations are in a constant state of change, so are the health professions in their process of adopting evidence-based practice.

The collection presents, via a theoretical background and with practical cases, how library and information professionals have met these challenges and how they have been affected their professional roles. The book includes dozens of roles for health professionals and studies them in the context of their work. The collection is encouraging and inspiring in covering e.g.: providing information, managing knowledge, undertaking research and evaluation, supporting research and practice, and evidence-based library and information practice. Leading experts explore and explain the changing and new roles of health information professionals.

The book covers, or at least mentions, most aspects that have influenced and do influence the profession, such as open access, changes in higher education, the demand for lifelong learning, evidence-based professions, and changes in publishing style, cycle, and amount

#### Discussion

In their Overview, Alison Brettle and Christine Urquhart give a clear picture of what the collection is about and where it aims – not to predict the future but to provide food for thought. The collection has two parts, Context and Roles. Part 1, Context, has four chapters. The first chapter examines the changing context of health for library and information professionals, and the part that I believe many readers of *JEAHIL* will be interested in, is the section regarding health library and information professionals in Europe written by Suzanne Bakker.

In the second chapter Jenny Turner, Louise Goswami, Neil Ford, Sue Lacey Bryant and Christine Urquhart cover changes in information generation and use. As in most chapters, cases from the National Health Services (NHS) of the United Kingdom (UK) receive a lot of attention. The third chapter exploring the technologies to meet clinicians' information needs is authored by Nicholas R. Hardiker, Joanna Dundon and Jessie McGowan, and again NHS has a big role, rightly, e.g. with their clinical librarians. Influence of governance, consumers and evidence-based practice are discussed in chapter 4 by Gareth Lawrence, Alison Yeoman, Alison Brettle and Prudence Dalrymple. They explore what information management for clinical governance involves, write about the context of consumer health information, and explain what evidence-based practice means for health library and information professionals.

For me, the second part concerning the roles is more of interest than the first part about the contexts. Five chapters cover a truly wide range of roles, and almost make me out of breath, but the personal touch given by the cases is really attractive. To start the second part, Christine Urquhart introduces the skills, competencies and knowledge needed in the many roles, and the expectations related to them. The librarian as an information provider and educator is the topic of the chapter authored by Pat Spoor and Debra Thornton, and again the point of view of the UK and NHS is strong.

The title of chapter 7 – The librarian who analyses information and manages knowledge – first puzzled me: are there librarians who do not analyse information and manage knowledge, I wondered. However, having read it I learned a lot, as the chapter draws a broad picture of the wide variety of several interesting roles in information management and analysis.

For me, the collection was very cleverly organised, as it became more and more interesting chapter by chapter. The eighth chapter, talking about the librarian within research and evidence-based practice, and written by Alison Brettle, Andrew Booth, Olwen Beaven, Andrea Lane, Helen Seeley, Rebecca N. Jerome, Taneya Koonce, Annette M. Williams and Nuzia Bettinsoli Giuse, was one of the two most inspiring ones, demonstrating how research and practice are inseparable in our profession.

The last chapter about librarians as decision makers was my favourite and gave me most food for thought. Written by Jackie Cheeseborough, Katherine Dumenil, Ann Wales, Kim Montacute and Lotta Haglund, this section is about thinking forward, understanding change, and leading the way. More than other parts of this professional centred collection, this chapter, and especially Haglund emphasises the user's viewpoint.

The book attempts to cover almost all aspects of the health information profession, and succeeds in covering them very well from a certain point of view. Though there are many cases also from outside the UK and NHS the proportion is somewhat unequal, looking at this from a Finland point of view.

The attempt to cover so much is both positive and negative. Trying to read the book from cover to cover is very demanding. I started to wonder if it might make a beginner or student feel anxious; which brought me to think what the target groups of this collection are. We, librarians and other information professionals, naturally, and as important as students – especially those in the process of choosing their expertise area in the profession – but, definitely the decision makers and managers of the organisations employing us, too, should read it.

#### Conclusion

The book has a very clear structure. The long, comprehensive reference lists of the articles also provide a treasure chest on each of the topics for anyone willing to explore any of them in (more) detail. The index is disappointingly limited regarding the range of topics. The book attempts to cover almost all aspects of the health information profession, and succeeds in covering them very well from a certain point of view. Though there are cases also from outside the UK and NHS, the number is proportionally unequal, from my point of view.

Each chapter is like a presentation or an article which requires careful study, but perhaps the whole book cannot be digested easily. Also, some aspects are interesting to some readers, some are only relevant to others, and of course, not everything interests all. Depending on their own country, their type of library or service, their education, their background, their tasks, the length of their career etc., readers of *JEAHIL* will find lots of relevant information about e.g. competencies and obtain new ideas for continuing professional development. The collection is essential reading for health information professionals wishing to be familiar with current changes in the field.

On the whole, reading the book makes me envy those who have a job where they can concentrate on only one or two roles, but at the same time it makes me feel content with the dozens of roles I have. The key messages, in my opinion, are cooperation, flexibility, professionalism and continuing professional development.



Giovanna F. Miranda

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Dear Colleagues,

Some questions that continue to arise regarding the future of publishing.

#### Will traditional scientific journals follow newspapers into oblivion?

Unlike newspapers, scientific journals are not facing the economic collapse that forces change. Scientific journals remain very profitable. Few industries manage a profit margin of 35.7% but then few industries are given scientific studies – not only for free, but also in a form that needs minimal processing. Despite calls for boycotts, scientists continue to send their studies to familiar journals; and, although open-access publishing is flourishing it isn't denting the incomes of traditional publishers. Scientific libraries, the prime customers of scientific publishers, despite grumbling at price increases, continue to be obliged to buy traditional journals (R. Smith. The Scientist. 2012; April 1)

#### Text and data mining. Gold in the text?

Publishers should agree that scientists who have already paid for access to research papers may text-mine content at no extra cost and publish their findings. Even freely accessible papers may not come with permissive licences: of the 2.4 million abstracts listed by PubMedCentral, only 400,000 (17%) are licensed for text-mining. The International Association of Scientific Technical and Medical Publishers says that it is working to agree a shared position on text and data mining, which it expects to resolve by the summer. (Editorial. Nature. 2012;483:124. R. Van Noorden. Nature. 2012;483:134)

#### Digital information can reduce greenhouse gas emissions?

A lifecycle analysis approach has been used to identify various factors that are responsible for greenhouse gas emissions for printed as well as digital information resources. The replacement of printed content with digital information services can help libraries and institutions save the environment (G. G Chowdhury. Online Information Review. 2012;36:4).

#### Disclosure is preferable to nondisclosure?

Disclosure is generally considered preferable to nondisclosure, but the overemphasis and reliance on disclosure policies leaves the real problem of the conflict of interest unaddressed. Disclosure alone merely shifts "secret bias" to "open bias" and disclosure may be perceived as absolving a person from their responsibility for managing their conflict (The PLoS Medicine Editors. PLoS Med 2012;9(4): e1001210).

Giovanna F. Miranda

#### Journal issues

Since the Journal of March 2012, the following journal issue of Health Information and Libraries Journal has been received: Vol. 29 Number 1.

#### Grant M.J. Disseminate your findings. Editorial. p. 1-2

## Lasserre K. Expert searching in health librarianship: a literature review to identify international issues and Australian concerns. Review article. p. 3–15

The purpose of this review is to establish health librarians' views, practices and educational processes on expert searching.

## Greyson DL, Cunningham C, Morgan S. Information behaviour of Canadian pharmaceutical policy makers. p. 16–27

This study explores the reported information behaviour of pharmaceutical policy decision-makers in Canada, a country highly associated with evidence-based practice

## Golder S, Loke YK. Sensitivity and precision of adverse effects search filters in Medline and Embase: a case study of fractures with thiazolidinediones. p. 28–38

The objective of this study is to measure the sensitivity and precision of available adverse effects search filters in Medine and Embase.

## Sutton A, Booth A. What type of leader am I?: a training needs analysis of health library and information managers. p. 39–46

A training needs analysis of the specific aspects of leadership skills required by health librarians and information managers.

## Kai S, Chu A, Woo M, King RB, Choi S, Cheng M, Koo P. Examining the application of Web 2.0 in medical-related organisations. $p.\ 47-60$

The aim of this research is to study the use of Web 2.0 among medical-related organisations worldwide to investigate whether medical-related organisations find Web 2.0 beneficial.

## Zach L, Dalrymple PW, Rogers ML, Williver-Farr H. Assessing internet access and use in a medically underserved population: implications for providing enhanced health information services. p. 61–71

To understand the nature of the information-seeking component in patient, a team of library and information science researchers undertook an assessment of patients' level and methods of access to and use of the Internet.

#### **Books review**

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The Cybrarian's Web. An A-Z guide to 101 free Web 2.0 tools and other resources. Ed. C. A. Peltier-Davis. Facet Publishing, London UK, 2012; ISBN: 978-1-85604-829-3; paperback £44.95 (Price to CILIP members £35.96).

A guide to the best of free Web 2.0 tools and their practical applications in libraries and information centers. The book is supported by a website (www.cybrariansweb.com) which lists URLs to all the tools and other resources covered in this book and provides summaries of new sites and resources.

**Reaching underserved communities in your library.** Eds. Tonya Garcia Badillo and Kathryn Angelo. ALA Editions 2012; ISBN-13: 978-0-8389-1099-3; Softcover \$55.00; 208 pp.

This book shows public libraries how to reach patrons despite tight budgets and reduced staff.

#### Papers review

#### Reading into the future. Will traditional scientific journals follow newspapers into oblivion?

Smith R. The Scientist. 2012; April 1http://the-scientist.com/2012/04/01/reading-into-the-future

#### Gold in the text?

Editorial. Nature 2012;483:124

http://www.nature.com/nature/journal/v483/n7388/full/483124a.html

#### Trouble at the text mine.

Noorden R. Van. Nature 2012;483:134

http://www.nature.com/news/trouble-at-the-text-mine-1.10184

#### How digital information services can reduce greenhouse gas emissions

Chowdhury GG. Online Information Review 2012;36 4

#### Does conflict of interest disclosure worsen bias?

The PLoS Medicine Editors. PLoS Med 2012. 9(4):e1001210

http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1001210

#### Library and informatics skills competencies statements from major health professional associations

Eldredge JD. et al. Medical Reference Services Quarterly 2012. 31(1) 34

#### New journals

**eLife.** eLife is a researcher-driven initiative. The first aim of the initiative is to launch a top open-access journal covering basic biological research through to applied, translational, and clinical studies. The Howard Hughes Medical Institute (HHMI), the Max Planck Society and the Wellcome Trust are supporting this new open access online journal. The editorial team will be editorially independent of the funders. http://www.elifesciences.org/

#### News

**Health Information and Libraries Journal** announces that is launching a new regular feature "**Dissertations into Practice**" aimed at engaging with those new to the library and information sector. Edited by Audrey Marshall, University of Brighton, Dissertations into Practice will encourage students to help close the research/practice gap and engage in disseminating their project findings. Dissertations into Practice will provide a safe and structured environment for students, be it at undergraduate, postgraduate or PhD level, to summarise their research findings, describe their research methods and illustrate how the implications of their study could inform practice (http://bit.ly/9RMH6S).

Moreover Health Information and Libraries Journal, to mark the launch of the journals dedicated twitter account -@HILJnl - has initiated a 'Writing Tip of the Week' to complement the tweets about new and forthcoming manuscripts (https://twitter.com/#!/HILJnl).

**Japanese Publishing.** According to the Nature Publishing Index 2011, Japan retains its scientific leadership in the Asia-Pacific in 2011. It is a strong performance, given the March 2011 earthquake and tsunami, which caused over US\$1 billion damage to science infrastructure in Japan. Japan is the most productive of the Asia-Pacific countries, followed by China, Australia, Korea and Singapore.

http://www.nature.com/press releases/npi2011ranking.html

**Chinese Publishing.** The Chinese government and publishing industry are determined to weed out misconduct and bad publishing practices from the more than 5,000 of the country's scholarly journals by committing to be more vigilant and implementing punishments such as blacklisting and the public disclosure of misconduct. http://the-scientist.com/2012/04/26/cleansing-chinese-publishing/

#### Information sources... web based

**UK Biobank**. Hosted by the University of Manchester and supported by the National Health Service (NHS), UK Biobank is a major national health resource with the aim of improving the prevention, diagnosis and treatment of a wide range of serious and life-threatening illnesses – including cancer, heart diseases, stroke, diabetes, arthritis, osteoporosis, eye disorders, depression and forms of dementia.

UK Biobank recruited 500,000 people aged between 40-69 years in 2006-2010 from across the country to take part in this project. They have undergone measures, provided blood, urine and saliva samples for future analysis and detailed information about themselves and agreed to have their health followed. Over many years this will build into a powerful resource to help scientists discover why some people develop particular diseases and others do not. http://www.ukbiobank.ac.uk/

**PowerKids Life Science** is an online resource specifically designed for learners in grades 3 to 6. Comprised of curriculum correlated content, PowerKids Life Science promotes digital literacy and 21st century learning skills, while offering research, report, and homework help. http://www.pklifescience.com/

#### **News from publishers**

**Interactive Biology Textbook.** Nature Education has launched the *Principles of Biology* a "born digital" textbook, with all materials designed specifically for consumption by students via browsers on desktops, laptops, tablets, and smartphones. Each of the 196 modules in the text is a self-contained learning experience, integrating text, images, interactive, and continual assessment, which feeds an automatic gradebook through which instructors can track student progress. Instructors can customize *Principles of Biology* to meet their curriculum by rearranging modules, turning sections within modules on and off, adding their own material, and integrating the textbook into their campus learning management system. In addition to accessing all materials online, students can download a Desktop Edition for use when not connected to the internet as well as printable versions of each module. http://www.nature.com/press\_releases/interactive-textbook.html

**BioMed Central.** The Japan Journal of Physiological Anthropology has been transferred to BioMed Central's portfolio of open access journals. JPA is an official journal of the Japan Society of Physiological Anthropology and publishes research on the physiological functions of modern mankind, with an emphasis on the bio-cultural effects on human adaptability to current environment. http://www.biomedcentral.com/

**Springer** is adding six new quarterly clinical review journals to its existing medicine portfolio in March 2012. These new journals will expand the publisher's medical specialty coverage, focusing on dermatology, geriatrics/gerontology, nutrition, obesity, obstetrics/gynecology and respiratory care. http://www.springer.com/about+springer/media/pressreleases?SGWID=0-11002-6-1357323-0

#### Forthcoming events

### 10 – 14 June 2012, Washington, DC, USA JCDL 2012

#### The ACM/IEEE Joint Conference on Digital Libraries

For further information: http://jcdl2012.info/

#### 11 - 13 June 2012, Copenhagen, Denmark

#### Structural frameworks for open, digital research

Strategy, policy & infrastructure

For further information: http://conference.nordbib.net/index.php?id=113

#### 14 - 15 June 2012, Guimarães, Portugal

#### 16th International Conference on Electronic Publishing

For further information: http://www.elpub.net/Elpub 2012/Main Page.html

#### 30 June - 1 July 2012, Barcelona, Spain

#### 10th International Conference on the Book

For further information: http://booksandpublishing.com/conference-2012/

#### 4 - 6 July, 2012, Brussels, Belgium

#### EAHIL 2012. 25th anniversary Conference

#### "Health information without frontiers"

For further information: http://www.eahil2012.be/

#### 9 - 13 July 2012, Edinburgh, UK

#### OR 2012. Seventh International Conference on Open Repositories

For further information: http://www.ed.ac.uk/schools-departments/information-services/about/news/open-repositories-2012

#### 15 - 18 July 2012, Chicago, IL, USA |

#### **SLA 2012**

For further information: http://www.sla.org/content/Events/conference/ac2012/index.cfm

#### 22 - 24 July 2012, Graz, Austria

#### ICBO 2012

#### 3<sup>rd</sup> International Conference on Biomedical Ontology

For further information: http://user.meduni-graz.at/stefan.schulz/icbofois2012/icbo.htm

#### 8 - 9 August 2012, Turku, Finland

## Library's Efficiency, Impact and Outcomes: Statistical Evaluation and Other Methods as Tools for Management and Decisionmaking

For further information: http://kirjasto.utu.fi/ifla2012

#### 11 - 17 August 2012, Helsinki, Finland

#### 78th IFLA General Conference and Assembly

For further information: http://conference.ifla.org/ifla78

#### 1 - 3 August 2012, Düsseldorf, DE

#### Conference on Science and the Internet 2012

For further information: http://www.nfgwin.uni-duesseldorf.de/de/cosci12

#### 5 - 7 September 2012, Graz, Austria

#### 12th International Conference on Knowledge Management and Knowledge Technologies

For further information: http://i-know.tugraz.at/i-science

#### 23 - 27 September 2012, Pafos, Cyprus

#### The International Conference on Theory and Practice of Digital Libraries

For further information: http://www.tpdl2012.org/

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