Out of the Library and into the Ward: Clinical Librarianship Programmes at University Health Network

> EAHIL Workshop Krakow, September 12-15, 2007

Boguslawa Trojan Library and Information Services University Health Network, Toronto, Canada

Agenda

- University Health Network (UHN)
- Health Sciences Libraries at UHN
- Implanting clinical librarians in selected programmes at UHN
- Limitations
- Lessons learned



University Health Network (UHN)

- Fully Affiliated with University of Toronto, Canada
- 3 sites
- Tertiary and quaternary level of patient care
- Research and patient areas include: transplantation, cardiology, neurosciences, oncology, surgical innovation and genomic medicine



University Health Network (UHN)





Health Sciences Libraries at UHN

- 3 health sciences libraries
- 9 librarians; 4 library technicians; 4 evening assistants
- Virtual Library 2001-
- Our challenges:
 - maintaining face-to-face connection
 - monitoring clients' needs and their changing information-seeking behaviour
 - > staying relevant to their medical practice
 - need for stronger alignment of library services with the hospital's programmes supporting evidence-based practice



Toward clinical librarianship programmes

- Programmatic model of library services
- Pilot study in General Internal Medicine Clinical Teaching Units at Toronto Western Hospital
- Kardex Rounds in General Surgery
- Quality of Care Rounds in General Surgery
- Tuesday Morning Report in Family Medicine
- Genitourinary Tumor Board in Oncology



Lessons Learned from the Pilot

- Clinical librarian's participation at clinical meetings should be limited to 1-2 meetings a week
- Successful setting should include opportunities to lend expert searching skills as well as provide educational training on the available information resources
- Face-to-face interaction between residents and the librarian would be preferable
- Library scheduling might have to be adjusted to accommodate the clinical librarian's attendance at the meetings

General Surgery, Toronto General Hospital

Kardex Rounds, January 2005

- 1-hour weekly case rounds, on Friday afternoon
- Multidisciplinary team: representatives from 3 surgical resident teams, nurse manager, nurse practitioner, clinical pharmacist, social worker, occupational therapist, physical therapist and staff surgeon



Kardex Rounds

Challenges

- Less than ideal in securing interaction between the librarian and Rounds participants due to:
 - > emergent patient care issues
 - ➤ understaffing
 - > severe time constraints and scheduling conflicts



General Surgery, Toronto General Hospital

Quality of Care Rounds, March 2005-

- 1-hour weekly clinical meetings
- Facilitated by the Division Head of General Surgery
- Attended by: all surgical residents, general surgery staff, senior medical students, clinical fellows and other health professionals
- All mortality and selected cases with strong educational merit are reported by residents



Quality of Care Rounds

Survey (June 2007)

- Key findings:
 - >84% aware of the clinical librarian attending Rounds
 - 25% worked with the librarian on topics resulting from Quality of Care Rounds
 - ➢ 84% agreed that the information delivered by the librarian changed the day-to-day management and care of their patients



Family Medicine, Toronto Western Hospital

Tuesday Morning Report in Family Medicine In-Patient Service, June 2005-

- Attended by: Family Medicine residents in their In-Patient Service rotation, a staff physician, a nurse practitioner
- Residents discuss and provide updates on each patient
- Clinical librarian takes over for the last 10-20 minutes
- 1-2 clinical questions generated from the patient status reports
- Clinical librarian uses networked computer to navigate through different information resources, to provide mini teaching sessions, market new tools
- "real time" searching



Oncology, Princess Margaret Hospital

Genitourinary Tumor Board, January 2006-

- Friday, 1-hour noon meetings
- Attended by: radiation, medical and surgical oncologists, imagers, medical and surgical oncology residents and fellows, senior students on electives, nurses, clinical trial staff, drug company representatives
- Facilitated by the chair or his delegate
- Attendees aware of the presence of the clinical librarian
- Cases presented by fellows or residents; occasionally by senior oncology clinicians, pathology and imaging experts



Genitourinary Tumor Board

Distinguishing Features

- The group demonstrates an excellent command of the current literature and exhibits superior database searching skills
- Expertise of the clinical librarian is sought prior to the presentation at the Board
- The primary objective is to reach a consensus and make a decision
- The grilling of residents on their knowledge is not the objective in this meeting



Next Steps

- Evaluate the three programmes
- Better integrate the librarian's skills into the clinical meetings
- Establish a clinical librarianship programme in nursing and allied health clinical meetings



Lessons Learned

- Find a champion
- Be flexible and able to adjust to the existing dynamics of the group
- Align your project with the strategic directions of your institution to demonstrate your relevance and unique contributions
- Start your programme with a librarian who is enthusiastic and who likes to be challenged
- Support your clinical librarian



Lessons Learned

- Teach in small bytes
- Have a "flexible" master plan of where you want to be in 2-3 years
- Invite your boss and your CEO to the Library's Strategic Planning Retreat or Library Open House to showcase your team's skills
- Invite clinicians and residents to share their experiences of the clinical librarianship programme with their colleagues
- Market your new and existing services at every opportunity



Conclusions

- Each clinical librarianship programme at UHN was unique to establish
- Specialties were chosen by design
- Each programme utilizes the librarian's skills differently
- Degree of interaction varies
- Librarian offers unique contributions at the point of care or clinical need
- Health professional is able to pose a clinical question and have it researched by an expert in a timely manner
- WIN WIN WIN



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