

## **Clinically tested – free range: establishing a clinical librarian role at a major teaching hospital**

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**Introduction** Every moment of clinical care prompts questions about diagnosis, causality, treatment plans or medication, to name a few. From supplying immediate evidence at the bedside in the intensive care unit, through to searches that support workplace reform, major purchasing decisions for hospital equipment or clinical safety and risk projects – the ‘free range’ clinical librarian has a crucial role to ‘build and walk’ the bridge between the evidence to be found in health literature and those seeking the answers.

The presence of a clinical librarian in the hospital setting is not new and has been discussed in the academic literature since these roles were first established in the 1970s (6). Although Austin Health is a long-established institution in Melbourne’s north-east, the clinical librarian role has only been a feature of our library service for approximately 12 months.

In this formative phase, breaking out of the shell of more established models of librarianship has been exciting, and has also taught us some valuable lessons. Mobility and flexibility are the keys to delivering clinical information to support clinicians and frontline health practitioners. Creating tailored education and training programs serves to build the capacity of the organisation by equipping staff and students to be self-sufficient in accessing evidence. A clinical librarian who is not confined to the four walls of the library is a key part of the library being seen, and heard, and utilised.

### **Background**

Austin Health is the major provider of tertiary health services, professional education and research in the north-east of Melbourne, Victoria. The health service is renowned for its specialist work in cancer, liver transplantation, spinal cord injuries, neurology, endocrinology, mental health and rehabilitation; including a number of statewide services. It is an internationally recognised leader in clinical teaching and training; has affiliations with eight universities; is the largest Victorian provider of training for specialist physicians and surgeons; and supports over 800 researchers across a wide variety of research institutes.

### **Clinically tested**

There is a distinct advantage to acquiring an understanding of medical terminology and concepts through clinical experience rather than solely via health library experience. The title of ‘clinical informationist’ has been used in the library and information science literature to highlight specialists with training in both biomedicine and information management (4). Librarians with previous experience in a health field may facilitate a natural connection with nursing, allied health and medical staff.

The search for and retrieval of information by all health librarians should not simply be an end in itself. The ‘ultimate customer’ for any health librarian is the patient, and therefore improved treatment outcome through improved care is the end goal. This adds a level of significance to the clinical librarian role – assisting clinical staff with literature searches and point-of-care information to provide the best care possible. Evidence-based practice requires the latest research to reach

frontline clinicians in real-time so the correct diagnosis can be made and treatment commenced. In this way the clinical librarian is a key enabler of evidence-based practice.

### **Lessons learned**

It is a challenge to step outside the comfort zone of a health library and deliver the information service in a different setting – on someone else's turf. With every moment of clinical care prompting questions, there are many opportunities that the clinical librarian can and should be involved in. The library and information science literature has long indicated the need for librarians to change practice and adopt a more embedded librarian approach (2). At Austin we have started to invest energy and time to help the organisation see the value of including an information professional 'on the ground' at relevant times as part of their team (1). But there are constraints to this approach – Austin is a large and diverse organisation operating across three campuses, therefore the strategy cannot be for one clinical librarian to attend every specialty's ward round or clinical team meeting in this 24/7 working environment. Finding 'library champions' who can facilitate the presence of the clinical librarian is one key aspect we have learned. By being 'on the ground', the clinical librarian role brings the added advantage of a broader perspective to the library team as a whole. Being physically in the clinical space improves awareness of what is happening throughout Austin Health and it provides insights into the working conditions of others. This enables the library to shape the messages it sends back out, and to shape service delivery. It also enhances the empathy and understanding that library staff need to have for professionals in other areas, especially in acute care.

### **Information technology**

Being a free-range librarian has involved many discussions with our information technology (IT) department. How do we get resources out to the clinical staff? How do we have a roaming librarian if there is no mobile IT device supplied? How do we ensure that IT systems are updated at the locations where training sessions need to be delivered? These are not new challenges to health libraries, but they are obstacles nonetheless, and from our experiences we would encourage anyone looking to establish a clinical librarian role to consider the IT requirements in detail before embarking on delivering the service.

The pace of health care is extraordinary and for immediate clinical questions, an answer is required at the point of care. Fontelo, Liu and Uy highlight the importance of ease-of-access to evidence-based information for clinicians. Doctors indicated they will use evidence if it is readily available – especially summary evidence via mobile platforms (3) – this is why we have seen the development of point-of-care tools for clinicians. At Austin Health our experience is that while many options are available, availability of information does not automatically equal effective use. The clinical librarian has a key role here to show 'how' to access resources, not just advise on 'which' resources to access. It requires ongoing education, demonstration and marketing, and it is also about understanding – understanding different approaches to learning, understanding different skill baselines and understanding the variety of mobile platforms that are in common use.

### **More than mobility**

While mobility and presence on ward rounds is important, it is not the only test in terms of the effectiveness of a clinical librarian. There are many other demands and these require careful consideration of priorities and time and effort allocations. The 24/7 activity of a major training and research hospital does not only elicit immediate clinical questions – there are research questions, both beginner and more extensive. There are literature reviews to support professional development sessions, through to systematic reviews consuming considerable time and energy. The formation year of the clinical librarian role has encompassed:

- supporting workplace reform through literature searches and meetings – for example, contributing to an ongoing discussion about the best way to utilise allied health professionals across a seven-day week
- reliably finding timely evidence to support hospital equipment purchases – for example, supporting decision-making by looking into the pros and cons of expensive pieces of new medical equipment for the hospital
- attending clinical safety and risk meetings.

### **Education and empowerment**

Further, at Austin, the clinical librarian role is the main deliverer of evidence-based information and education sessions throughout the hospital. We have created the beginnings of a suite of education packages for Austin and this will continually evolve to remain relevant and to meet the need to build capacity across the organisation.

In addition to traditional database-searching tutorials and reference-management training, we tailor our training for different groups. In collaboration with other members of the library team, the clinical librarian has provided tailored sessions for a variety of groups from undergraduate students to nursing staff, beginner researchers, clinical educators, allied health staff and registrars. While many elements remain consistent – the importance of understanding your audience and being flexible in the delivery cannot be underestimated. This approach equips staff with skills to independently search the literature, plus the skills to know when to seek further assistance (5). Giving them the capacity to utilise our skills, and empowering them to have a go for themselves.

### **Conclusion**

There are many challenges and individual aspects associated with a clinical librarian role and all are critical to the credibility and relevance of the library, and to the relationship between the library and the organisation. A clinical librarian role requires support from library management, and others in the health library team, to extend the reach of the library across the whole organisation. In this formative phase at Austin Health we have clearly seen that a clinical librarian is strategic in the visibility and use of library resources, and in ensuring clinical practice is centred on evidence for the benefit of every patient.

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