March 2000



National Newsletter

Draft Standards for Australian Health Libraries awaiting ALIA endorsement

The Section's Standards Working Party has completed drafting the third edition of the National Minimum Standards for Australian Hospitals, renamed "Standards for Australian Health Libraries". Based on the second edition of the Canadian Health Libraries Association's "Standards for Library and Information Services in Canadian Health Care Facilities" the Australian document has been significantly modified to reflect local conditions and needs. It is a mixture of quantitative and qualitative criteria which seeks to meet the diverse circumstances of Australian hospitals without becoming overly prescriptive for individual institutions.

The Canadian standards took more than three years to develop and the CHLA (Canadian Health Libraries Association) kindly consented to their document being utilised as the basis for the Australian standards. This approach saved hours of work and permitted the Working Party to expedite drafting over an eighteen month period. The Working Party gratefully acknowledges the generosity of the CHLA on this matter.

At the Hobart AGM a motion was adopted that future revisions of the standards be entrusted to an ALIA paid project officer assisted by an advisory committee of practitioners. This reflects the growing difficulty of relying upon the spare time and goodwill of volunteers for projects of this scale and length.

To produce a document of the requisite complexity for standards under contemporary conditions demands a more professional approach which only a dedicated position can supply. The Working Party has undertaken a sterling job to draft this new edition but the strain was obvious and I, for one, would certainly not pursue such a task again. As editor I wish to express my appreciation to the members of the Working Party for their co-operation, commitment and stamina throughout the drafting process.

For the record members of the Working Party were;

Saroj Bhatia, (Chair) ACT Stephen Due, Victoria Cecily Gilbert, Western Australia Helen Millar, Tasmania Kay Vincent, New South Wales Lindsay Harris, South Australia

(Continued on page 2)

inside...

Hospital EBM training programme Cochrane News

page 3 page 7

(Continued from page 1)

The draft standards now go to the May meeting of the ALIA Board of Directors for endorsement. If approved the standards should be published by ALIA in the second half of 2000 for use by health librarians and administrators.

Lindsay Harris, Editor, Standards for Australian Health Libraries, Third edition. c/o North Western Adelaide Health Service Libraries.

EDITORIAL

The restructure of ALIA still looms on the horizon, I hope by the time you have read this newsletter the meeting

In this edition we have a report on the long awaited 3rd edition of library standards, a national effort which is to be commended.

This is the last edition of the National Newsletter in its current format, while Victoria holds the national executive for Health Libraries Section. We will be combining with Health Inform, in an attempt to pool resources, to reduce duplication and I hope to get a lot more material. With the help of Andrew Rooke and other interested individuals from State groups, we hope to put out the next edition in a more timely manner.

In the meantime, please keep sending me you material, we wouldn't want this to be a Victorian dominated publication! So it's up to you.

Gabby Fennessy



Report on a Hospital-Based EBM Training Programme

EBM (Evidence Based Medicine) is now an exciting part of health librarianship. Over the last 18 months the Repatriation General Hospital Medical Library has focussed on providing hospital staff with training in relation to EBM. It has provided four sessions:

Session 1: Introductory video session

Session 2: 45 minute introductory lecture on EBM (prerequisite for Sessions 3 & 4)

Session 3: Two hour 'hands on' training using the Cochrane Library

Session 4: Two hour 'critical appraisal' workshop.

Two rounds of training have been run, with high interest and attendances.

A national "Train the Trainer" Cochrane Library Workshop run by the Australasian Cochrane Centre and ALIA Health Section was held in Adelaide in October 1998. This formed the basis of Sessions 1-3.

An initial trial session was held with 5 key hospital staff, and honest criticism was invited. Training was advertised in our in-house newsletter and email system. Training had three components:

- 1. The video "Too Much Medicine", which was Part 3 of a Series screened on the ABC, was purchased and used for Session 1. Its purpose was to satisfy 'casual interest' in EBM, and to provide an easy 30 minute introduction to the subject. Several public screenings were held at lunch times, and it was offered for 'team' staff development sessions in individual areas. It was then made available for overnight loan from the Medical Library.
- 2. Session 2 consisted of a 45 minute introductory presentation on "Evidence Based Medicine". This was also presented independently to individual Departments who held regular staff development days. This presentation introduced a definition of EBM, and covered concepts such as indexing bias, publication bias, odds ratio diagrams, the Cochrane Collaboration, and Systematic Reviews.
- 3. Session 3 consisted of a 2 hour 'hands on' training session on how to use the Cochrane Library, held in our computer training room. A restriction of 4 participants per session applied due to the licence restrictions of our networked version of the Cochrane Library.

This initial training programme ran over 4 months. Sessions 1, 2 and 3 were attended by over 80, 90 and 105 participants respectively. Allied Health, Nursing, Medical and Research staff categories had the highest number of participants.

Pre-training and post-training questionnaires were used to evaluate the training. Due to low 'response rates', the methodology was changed part way through the training, making it difficult to combine all the results for evaluation. However, some of the key results from 77 responses were:

- 87% had never received formal training (eg, lecture, training course etc) on either EBM, critical appraisal skills or the Cochrane Library.
- 94% were either 'unaware of', 'aware of but not used' or 'read only' the journal called 'Evidence Based Medicine'. 6% responded that it was 'used to help decision making or for research'.
- 97% were either 'unaware', 'aware but not used' or 'search or previewed only' the Cochrane Database

(Continued on page 4)

of Systematic Reviews. 3% responded that it was 'used to help decision making or for research'.

In July 1999, after attending an International "Train the Trainer" CASP Conference in London, I developed a training session (Session 4) on critical appraisal skills, which I then ran as a trial with a group of 10 staff (including 2 librarian colleagues). This was then offered across the hospital with a further 40 staff, predominantly clinical, nominating to attend the workshops. There is currently a growing waiting list for this training. No assessment of this training has yet been undertaken as it is still in progress, but feedback is encouraging so far.

Session 4 uses Session 2 as a prerequisite, but it was modified slightly from the initial training to cover more research methodology. Session 4 also includes a 10 minute introduction to critical appraisal and statistics, before we actively appraise a systematic review as a group activity.

There have been many lessons learned and I offer the following summary:

- Health professionals are interested in acquiring these new skills in regard to EBM, and little training is available elsewhere to meet this need.
- Health librarians are able to provide some EBM training successfully.
- Offering training gives the librarian and library a higher profile.
- Introduce participants often staff have not met other staff from different disciplines.
- Use Powerpoint but have a backup. Clinical staff often have to cancel clinics or arrange relief to attend, and there may not be a second chance to provide the training if something goes wrong.
- Confirm participants' attendance in writing, providing details, and remind participants 2 days beforehand. Ask people to advise if they are unable to attend.
- In larger groups, if 10 clinical staff have nominated, allow for at least 1 cancellation and keep a 'waiting list' to fill any last minute cancellations.
- Be flexible about starting times. If clinical staff are attending, then it is likely they will be late.
- Use multi-disciplinary groups where possible it enables better discussion and fertilization of ideas.
- Speak with staff to find the best possible days/times to run training. If your target groups are clinical, it is more likely they will attend if they have nominated suitable times.
- Trial a new training programme with some people you trust for honest comments. I incorporated many 'improvements' as a result of the trials I ran, but importantly gained confidence in what I was proposing.
- Plan an evaluation and read responses as you progress through your schedule you can continuously improve the training.
- Admit what you don't know and undertake to find out. Throughout training I received many questions
 which I could not immediately answer. I confirmed the answers and posted them publicly for all to read.
- When advertising, link training's usefulness to clinical or research activity, e.g. 'Did you know that the Cochrane Library registers over 250,000 RCTs but Medline only references ...? So if you are looking for background information for a research grant, you will miss RCTs if you don't search the Cochrane Library'.

I am confident that this training has been beneficial to participants, the library's reputation, and to me professionally. I would be pleased to speak further about my experiences with anyone contemplating running such training.

Ruth M Sladek Chief Librarian Repatriation General Hospital Ruth.Sladek@rgh.sa.gov.au

ALIA Restructure: a WA Section Proposal

A working group of the WA Health Libraries section has considered the various models for the ALIA restructure. At our February meeting, the section endorsed the following model. We submit it for members to consider, and welcome open discussion on the aliaHEALTH list.

Model

Top Level Board of Directors

2nd Level Board of Education

National Policy Congress National Sections Executive

3rd Level State forum

4th Level Sections state groups or regional groups = Members

Structure

State sections and regional groups are the basic unit of the Association. Each stream is co-ordinated by a national executive comprising representatives from each state. The national executive works electronically, but may also meet face-to-face (perhaps twice a year). There is no state or territory branch; the state forum is a loose affiliation of sections and groups which may meet 3 - 4 times per year to discuss cross-sectional issues and encourage networking. Funding is allocated to the national sections directly from the Board of Directors. Each section or group is supported administratively as required from a central office for all sections.

Accountability

- * Each section would have clear aims and objectives.
- * Funding to the sections comes directly from the Board of Directors, based on an annual program budget.
- * Performance should be assessed over a longer period (2 3 years) to account for biennial conferences and similar activity.

Advantages

- * Section structure clearly addresses new and existing members' desire to link with colleagues in same industry or sector.
- * Sections can plan and budget on a national basis with a long-term focus.
- * Funds accounting can be managed centrally.
- * Administrative support relieves workload of local members in organising, publishing and communicating with others.

Background

With our framework:

- * We recognised the "corporate value" of ALIA's work in lobbying (on copyright and federal law, GST, etc.), interlibrary vouchers, accreditation of libraries, accreditation of library training courses, advice on industrial issues, endorsement of library standards, and continuing professional development.
- * We were less certain that ALIA is seen to provide strong benefits to the individual member. (For example, ALIA membership is not a prerequisite

Page 5

March 2000

to employment in the library sector.) However, existing members well know that their efforts and participation decide the success of local branches and sections.

- * We believe that members' strongest allegiance is to the section(s) they have joined. The section provides a forum for shared interests and a community whether real or virtual of colleagues.
- * If the Association is to attract and retain individual members, then its structure should reflect their key interests.

The working group examined the six models circulated by ALIA, the Brudenell proposal, and the model proposed by WA Branch Council. However, it felt that none of the suggested models adequately represented the viewpoint of a national section.

We look forward to your comments.

Treasurer's Report to the Annual General Meeting 24th August 1999

This information was omitted from the last newsletter

Opening Balance as at 12/1	10/98
----------------------------	-------

\$7360.46

INCOME

Sale of publications	\$.	59.50
Advertising in Newsletter	\$20	00.00
Newsletter sponsorship	\$13	186.00
Interest	\$	8.45
Cheque book refund*	\$	6.00
Shares	\$	2.00

TOTAL

\$1461.95

\$8922.41

EXPENDITURE

Newsletter – Printing	\$	1974.90
Newsletter – Postage	\$	964.70
Stationery	\$	59.00
Bank charges and taxes	\$	30.97
Postage	\$	25.20
Grant to 2001 Conference	\$1	1500.00

TOTAL

\$4554.77

BALANCE AS AT 10/8/99

\$4267.64

*these items were credited to the account before it was closed and the balance was transferred to a new account in Melbourne

Veronica Delafosse Hon. Treasurer



Cochrane News

Cochrane Library Survey

As mentioned in the last National Newsletter, a survey on the *Cochrane Library* was circulated to health libraries in November last year. The purpose of the survey was to identify the level of knowledge about and use of the *Cochrane Library*, and to identify the training needs of librarians and other health information professionals. Over 300 libraries and other information centres were sent a copy of the survey, with non-responders sent a follow-up in February.

Encouragingly, there has been a 75% response rate, so thank you to everyone who returned their survey. (If any of you still have a copy of the survey - first coloured blue, the second green - languishing at the bottom of a heap a paper somewhere, it's still not too late to retrieve it and send it in!)

Analysis of the results is currently underway, but among hospital libraries over two thirds of libraries either have a copy of the CD version of the *Cochrane Library*, or are able to access it through state-wide initiatives such as the CIAP project in New South Wales.

Cochrane Library Training

The survey also highlighted the high level of demand for *Cochrane Library* training. With the advent of the Clinicians Health Channel in Victoria and a similar project planned for South Australia, we anticipate a growing number of libraries will soon have access to the *Cochrane Library* for the first time. In addition, there is already a trend away from the CD version to the Online version, and this too has implications for training.

Two full-day training sessions have recently been run for librarians in Melbourne, giving participants the opportunity for some hands-on searching. The Australasian Cochrane Centre (ACC) is exploring ways of delivering training to other states, and I would be interested in hearing from people who have the facility to hold a training session, and would be prepared to make the local arrangements.

Further down the line, the ACC is looking into developing a web-based tutorial for the *Cochrane Library* and providing access to training resources.

Consumer synopses of Cochrane reviews

A careful look at the reviews on issue 1, 2000 of the *Library* will reveal that some now contain a consumer synopsis – a 100 word summary of the review written in plain language. This is a new initiative, and although only 50 or so synopses are available so far, it is intended that by the beginning of next year all Cochrane reviews will have one. The synopses (where available) can be found towards the end of each review.

Review Alert

The Australasian Cochrane Centre website now offers an alerting system so that you can register a list of topics of interest. As each new issue of the *Cochrane Library* is released, you will be automatically sent an email alerting you to any new reviews which match the interests you have registered. There is also the option to receive details of all new reviews regardless of the topic area. To use the alerting system, follow the link to **Review Alert** from the Centre's homepage:

www.cochrane.org.au

(you will need to click on the Australasian Cochrane Centre box that appears on this page)

Centre Newsletter

For those who are interested in other activities of the Australasian Cochrane Centre, the Centre's newsletter (Continued on page 8)

Page 7

March 2000

is also available (in PDF) from the website.

If you have any comments or questions about the *Cochrane Library* or the Collaboration in general, I'm always happy to try to provide answers. Just contact me at the address below.

Steve McDonald
Australasian Cochrane Centre
steve.mcdonald@med.monash.edu.au

This information was omitted from the last newsletter

Anne Harrison Award: Fund Administration Report to the Annual General Meeting 24th August 1999

1. Operating Account

Opening balance \$191.18

<u>Income</u>

Transfer from investments \$2921.53 Interest \$0.19

Total Income \$2921.72

Expenditure

Payment of award \$3000.00

Current Balance \$112.90

1. Funds Invested as at 15 August 1999

\$12961.04 @5.75% due 8 February 2000 \$5691.45 @5.75% due 20 February 2000 \$13000.00 @5.55% due 8 August 2001

Total Investment Accounts

\$31652.49

All funds are invested with the Health Services Credit Union, membership number 189587

The funds include \$3412.37 (plus interest accruing at 5.75% from 1/1/98) for the 'alternate year' Awards in 2000 and 2002

The Fund Trustees will make \$1900 available for the Award in 2000, leaving \$1904.79 (plus interest) available for the final 'alternate year' Award in 2002 Fund Trustees

Anne Batt Brigitte Glocker Susan Lutley

National Executive Health Libraries Section, 2000

President

David Lloyd

Regional Health Services Library

Bendigo Hospital

Phone: 03 5441 0424 Fax: 03 5441 0543

E-mail: dlloyd@bendigohealth.org.au

Treasurer

Veronica Delafosse Health Sciences Library Caulfield General Medical Centre

Phone: 03 9276 6832 Fax: 03 9276 6135

E-mail: vcgmc@vicnet.net.au

Professional Development Officer

Vacant

Minutes secretary

Lorena Smirneos

Health Sciences Library

The Alfred

Phone: 03 9276 3042 Fax: 03 9276 3411

E-mail: libalf1@vicnet.net.au

Correspondence secretary

Vacant

Newsletter Editor

Gabby Fennessy

School of Information Management and

Systems

Monash University Phone: 03 95947535

Email:

gabby.fennessy@med.monash.edu.au