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Commentary

Cultivating Our Practice: A Reflection on Library Synthesis Review Services in the Context of Patient-Oriented Research

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Academic libraries offering synthesis review (SR) services must address researchers' needs amidst an ever-changing environment. SRs refer to various methodological review types which adhere to rigorous methods (e.g., systematic reviews, scoping reviews, realist reviews, and rapid reviews). Since the early 2000s, researchers have noted increasing numbers of systematic reviews being published (Bastian et al., 2010;

Ioannidis, 2016; Page et al., 2016), and a proliferation of SR types (e.g., Kastner et al., 2016; Sutton et al., 2019; Tricco et al., 2016). For each review type, the methods for finding literature share similarities but also nuanced differences (Sutton et al., 2019). Furthermore, health sciences research trends impact review team composition, such as patient engagement in the research endeavour.

Patient oriented research (POR) places individuals with lived experience at the centre of the research pursuit with the goal of improving the relevance and applicability of health care research (Canadian Institutes of Health Research, 2019a). The Canadian Institutes of Health Research (2019b) defines “patient” in this context as an overarching term that includes individuals with personal experience of a health issue, and includes patients and informal caregivers, such as family and friends. Patient partners, and indeed other stakeholders (e.g., Slattery et al., 2020), engage in SRs, as evident in collaborations like the Cochrane Collaboration (2021).

Patient partners can be involved at any or all stages of a review. Examples of patient partner contributions include: research agenda setting (e.g., identifying a need for reviews in particular research areas), defining the research question, identifying patient-oriented outcomes, planning the methods, writing protocols, and so forth. Patient partners can also be full collaborators on the review (Pollock et al., 2018). As SR practices evolve, there may be downstream consequences to library services. In this commentary, we explore implications for librarians who may now be engaged in supporting patient-oriented reviews and potential consequences to library SR service models based on our experience with a patient-oriented rapid review.

To understand how libraries can better support POR through their SR services, we took a two-pronged approach: (1) we initially conducted a rapid review of the perspectives of patient partners engaged in SRs, and (2) we then reflected on the experience of engaging patient partners in the rapid review process. This meant that we took an evidence-based approach to enhancing our SR supports in a meta manner. In other words, the patient partners were in a sense researching (meaningful engagement patient partners in a review) what they were experiencing (collaborating on a review as patient partners). After completing the review, we undertook a reflective process guided by

Rolfe’s (2010) framework for reflexive practice to examine our experience collaborating on this patient-oriented rapid review. Rolfe and Jasper (2010) suggest “that critical reflection can be regarded not only as a form of research, as a way for practitioners to conduct a critical inquiry into their own practice, but also as a reflexive integration of research and practice into a single act” (pp. 7-8). Thus, we employed reflection to enhance both our understanding of the research methods and the implications to practice.

Rolfe’s (2010) framework was developed for practitioners to improve professional practice. It provided a straightforward framework for reflecting and reporting on our own experience. This framework, an expansion of Borton’s earlier work (1970), asks three main questions: *What?*, *So What?*, and *Now What?*. The first stage in this framework, the *What*, is the description level of reflection and includes reflection cues such as “what is the problem or difficulty,” “what was I trying to achieve,” and “what was good/bad about the experience” (p. 45). The next stage is the theory- and knowledge-building level of reflection. In this stage, practitioners are encouraged to reflect on *So What* prompts such as “so what does this tell me or teach me,” “so what is my new understanding of the situation,” and “so what broader issues arise from the situation” (p. 45). The third stage is the action-oriented (reflexive) level of reflection focusing on the *Now What* and includes cues such as “now what do I need to do in order to improve things,” “now what broader issues need to be considered if this action is to be successful,” and “now what might be the consequences of this action” (p. 45). While this model is sequential, it is also cyclical where in this final stage one returns to the initial level to form a reflexive cycle (pp. 45-46).

Background: Patient Oriented Research Rapid Review Project

A collaboration between one author (CB) of this commentary from the University of

Saskatchewan Library and colleagues at the Saskatchewan Centre for Patient-Oriented Research (SCPOR) has focused on research capacity development activities for SRs in the province of Saskatchewan. Products of this collaboration include webinar series and in-person workshops. A self-directed learning SR toolkit was also developed (University of Saskatchewan, 2021). The addition of guidance on patient-oriented reviews is the second phase of the toolkit development, which was an impetus for the project upon which we are reflecting in this paper. We decided to employ an evidence-based approach to enhancing the SR toolkit by conducting the rapid review. This approach simultaneously enabled us to gain an understanding of the literature on patient engagement in reviews, have hands-on experience doing a patient-oriented review, and answer a specific research question on patient-oriented review methods.

Given the topic, it was natural that the review team should include patient partners. The review team was recruited in the summer of 2019 and comprised two librarian faculty, two patient partners, two research faculty, and two SCPOR staff. One librarian (CB) was the principal investigator, and all team members contributed to all aspects of the review. We collectively determined that the rapid review would examine patient partner perceptions of meaningful engagement in SRs. The review took place from August 2019 to September 2020, with timelines extended due to the COVID-19 pandemic. Patient partners bring their lived experience, rather than research expertise, to a review and therefore are not expected to be well-versed in the research methods. For this reason, we were very deliberate about adding training at all stages of the review. Most meetings consisted of training to varying degrees, discussion, and task allocation. Team members completed tasks between meetings and met in small groups where necessary. Prior

to March 2020, regular team meetings were held in person, and after that date the team shifted to online meetings due to public health guidelines related to the COVID-19 pandemic.

In most instances, librarians join a review team to fulfill specific needs or roles on the team, such as expert searcher (Dudden & Protzko, 2011; Gore & Jones, 2015; Spencer & Eldredge, 2018). Both authors of this paper have engaged in SRs in various capacities as researchers and in our professional practice providing SR services. In this review, we initiated and led the review which included facilitating the formation of the research question, leading the training, and not only participating in, but also managing the conduct of the review. Researchers and stakeholders we had previously provided SR services to now became part of our review team, leading to a transition in our roles from service-provider to research partner. Both authors enhanced their knowledge and skills in all aspects of an SR by engaging fully in all steps of the research project, as well as learning the nuances of POR, recognizing resource requirements, managing workload, providing ongoing methodology training, and ensuring clear communication.

On a very practical level the immediate and concrete outcomes of our engagement in this research will be the POR additions to the toolkit. We have identified key articles (e.g., Black et al., 2018; Hamilton et al., 2018) and methods for meaningfully engaging patient partners (Boden et al., 2021), and points in the SR process at which this information will be useful to researchers. In this paper, however, we wish to focus at a deeper and more generalizable level, extending this learning to the potential impacts of patient-oriented or stakeholder-engaged reviews to librarians and library SR services. Below we discuss the implications first for librarians and then for library SR services.

Implications for Librarians Providing Synthesis Review Services

Our experience, existing literature (Black et al., 2018; Hamilton et al., 2018) and the results of our rapid review (Boden et al., 2021) emphasize the importance of strong communications skills, understanding team dynamics, relationship building, and the ability to provide training, such as on literature search methods. Emotional and interpersonal skills are infrequently talked about as competencies for providing SR services (Townsend et al., 2017). However, research team dynamics are affected by relationships, power dynamics, trust, and demands on time (Thurrow et al., 1999; Whitehair & Berdanier, 2017). Key approaches for engaging patient partners and other stakeholders in reviews include relationship building, clear communication, and clarity on roles and time commitments (Black et al., 2018; Boden et al., 2021; Hamilton et al., 2018; Pollock et al., 2021). Applying these approaches requires inter-related knowledge and skills to be successful in working with review teams. These include: navigating research team dynamics; communicating to diverse audiences within a review team; and sensitivity to the 'place' (motivations, expertise, goals, perspectives, and others) from which team members are contributing. Below we illustrate the role of these competencies through our experience with this review.

The dynamics within each review team are unique and librarians providing SR services often interact with teams without the benefit of knowing those dynamics. For instance, the inclusion of patient partners in our review added different dimensions to the team dynamics as they brought unique perspectives, competencies, and experience. This kind of dynamic may heighten the need for librarians to understand their audience and tailor communications accordingly, especially when patients and other stakeholders experience the review process through different lenses and knowledge bases. This has also been noted for

other kinds of multi-disciplinary teams (Thurrow et al., 1999).

Interpersonal and communication skills are infrequently discussed and under-appreciated in regard to librarian competencies for supporting SRs. An exception is Nicholson et al. (2017) who identified interpersonal interactions as a challenge for librarians supporting SRs. They recommended clear communication as a strategy to address this challenge. Our experience highlighted the need for all team members, but particularly the individual leading a discussion, to possess skills at facilitating complex discussions and communicating clearly to a diverse audience. There were many times throughout the process where we had to recalibrate through some challenging conversations, particularly defining the research question. As the expert searchers on a review team, librarians may be in situations where there is a need to lead complex conversations through multiple points of view, for instance emphasizing the centrality of a well-formed research question and literature search to the overall SR quality (Schvaneveldt & Stellrecht, 2021). For these kinds of multi-disciplinary teams, it is all the more important to be able to communicate clearly to diverse audiences.

In addition, librarians must be cognizant of and sensitive to the personal needs and experiences of all team members, including the patient partners involved in the review. Patient partners often engage in research with specific motivations and share their lived experience. Librarians need to be aware of these factors as these may direct, influence, or impact the research process, such as formulating the research question, and the team dynamics (e.g., when delegating tasks). The choice of language and terms should be chosen carefully as language that may be appropriate for some circumstances may be perceived as too blunt or insensitive for individuals who have a personal stake or experience with the research topic. To illustrate, Vale et al. (2012) describe the surprise

of a patient partner to the blunt and scientific communication about the disease used by a clinician in a research setting as compared to the bedside (p. 5). This means not only being aware of patient partners' or stakeholders' motivations for being on the research team, but also being cognizant of their emotional engagement, personal goals, and reactions to the experience of being involved in the review.

In light of the reflections above, we considered the competencies and associated upskilling of librarians supporting patient-oriented SRs. Librarians who are new to POR or stakeholder engagement would benefit from an introduction to the nuances of engaging in this form of research. We believe there is a need for librarians supporting patient-oriented or stakeholder-engaged reviews to have additional training in various areas related to interpersonal skills and communication. These areas include: understanding why and how patients (or indeed other stakeholders) may engage in the review; the ability to adapt to the unique needs of a particular team, particularly that of the patient partners who may come to the project with a diverse and unique skill set; knowledge and skills at facilitating discussions; and understanding of research team dynamics. Libraries providing SR services can support librarians by providing formal support, such as mentoring or training in these skills beyond the technical or methodological kinds. Recognizing that these skills are important and there is increasing interest in patient-oriented and stakeholder-engaged SRs, these skills should be explicitly included in librarian competencies for supporting SRs.

Implications for Synthesis Review Service Models

In addition to reflecting on the relevance of our experience to individual librarians conducting POR SRs, we also reflected on the provision of library SR services. A common factor with most SRs is that the process takes time (Bullers et al., 2018). Patient and stakeholder approaches to

reviews may increase the unpredictability of review timelines, increase the time demands, or lengthen the timelines. In our review, timelines were affected by a variety of factors, including the need to provide training to all team members as an integrated element of the review process.

While it was not our own experience, the literature (e.g., Oliver et al., 2019) suggests potential challenges for researchers involved in stakeholder-engaged research, some of which may also impact librarians supporting POR. Co-producing research can introduce tensions for researchers and stakeholders between the individual consequences and the potential positive impacts on health research (Oliver et al., 2019). A recent qualitative study suggests some researchers and patient partners report a degree of ambivalence in their experiences and perceptions of engaging in POR; they see value and reward, but also the need for additional support and infrastructure to manage some of the complexities (Boylan et al., 2019). While a patient-oriented approach offers the promise of enhanced health research, it also comes with complexities that researchers and patient partners must consider. In describing realist reviews, Abrams and colleagues noted a need for researchers and patient partners to clarify how and why they would be involved (Abrams et al., 2020). They provide reflection prompts to engage researchers and patient partners in examining their own expectations, expertise, scope of commitment, communication needs, and so forth prior to committing to the project. Although their focus was on realist reviews, we believe this can be applied to other kinds of SRs. In our view, these questions shed light on some of the complexities of engaging in patient-oriented reviews and may also be appropriate for librarians providing SR support or entering into these types of collaborations.

To address some of the additional complexity of engaging patient partners in SRs, libraries should consider developing guidelines to manage boundaries and expectations of the SR

services (e.g., time, ethical, legal), particularly if their librarians are supporting patient-oriented or stakeholder-engaged SRs. Especially in light of time demands, this could improve the sustainability of the SR services. These guidelines could include agreements on the average allowable time per project (e.g., based in hours or months, depending on the level of involvement) and articulate the extent and nature of the role of the librarian on the research team. These guidelines or policies at the library level, formalize, or at least recognize, ways of partnering with stakeholders or stakeholder organizations to manage expectations, outcomes, ethical issues, and legal issues.

Conclusion

By engaging in an evidence-based approach, we not only contributed to the research on patient-oriented reviews (Boden et al., 2021), but also enhanced our understanding as it applied in our practice (e.g., will provide guidance on patient-oriented reviews to our synthesis toolkit). Employing a reflective approach (Rolfe, 2010) allowed us to consider the broader implication of these kinds of reviews to library SR services and models. We believe competencies in navigating research team dynamics, clear communication to diverse audiences within a review team, and sensitivity to the “place” from which team members are contributing (motivations, expertise, goals, perspectives, and others) should be recognized. Awareness of the unique attributes of patient- or stakeholder-oriented reviews can prepare libraries and librarians to offer services that accommodate the requirements of this methodology. We argue in this commentary that while technical competencies for librarians providing SR services are well described in the literature, additional knowledge and skills deserve consideration, and that SR services should include policies, guidelines, and training to support librarians who engage in this ever-evolving area of researcher support.

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