

Academic Medical Library Services Contribute to Scholarship in Medical Faculty and Residents

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Peace Ossom Williamson

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Evidence Summary

Academic Medical Library Services Contribute to Scholarship in Medical Faculty and Residents

A Review of:

Quesenberry, A. C., Oelschlegel, S., Earl, M., Leonard, K., & Vaughn, C. J. (2016). The impact of library resources and services on the scholarly activity of medical faculty and residents. *Medical Reference Services Quarterly*, 35(3), 259-265. <http://dx.doi.org/10.1080/02763869.2016.1189778>

Reviewed by:

Peace Ossom Williamson
Director for Research Data Services
University of Texas at Arlington Libraries
Arlington, Texas, United States of America
Email: peace@uta.edu

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Abstract

Objective – To assess the impact of academic medical library services and resources on information-seeking behaviours during the academic efforts of medical faculty and residents.

Design – Value study derived from a 23-item survey.

Setting – Public medical residency program and training hospital in Tennessee, United States of America.

Subjects – 433 faculty and residents currently employed by or completing residency in an academic medical centre.

Methods – Respondents completed a 23-question survey about their use of library resources and services in preparation for publishing, presenting, and teaching. The library services in the survey included literature searches completed by librarians and document delivery for preparation of publications, presentations, and lecture material. The survey also included questions about how resources were being accessed in preparation for scholarship. The survey sought information on whether respondents published articles or chapters or presented papers or posters in the previous three years. If respondents answered in the affirmative to one of the aforementioned methods of scholarship, they were provided with further questions about how they access library resources and whether they sought mediated literature

search and document delivery services in preparation for their recent presentations and publications. The survey also included questions concerning what types of scholarly activity prompt faculty and residents to use online library resources.

Main Results – The study was provided to 433 subjects, including 220 faculty and 213 residents, contacted through an email distribution list. The response rate to the survey was 15% (N=65). Residents comprised 35% of the respondents, and faculty at each of the three levels of tenure comprised 60%. The remaining 5% of respondents included PhD and non-clinical faculty within the graduate school. Over 50% of respondents reported use of library services in preparation for publishing and presenting. These library services were literature searches, document delivery, and accessing online resources. Faculty and residents reported use of PubMed first (71%) and most often, with 56% of respondents reporting weekly use, followed by Google or Google Scholar, with 20% of respondents reporting its use first and 23% of respondents reporting weekly use.

However, regarding responses to the question concerning how journal articles are accessed, “using a search engine” was chosen most often, at almost 65%, followed by (in order) clicking library links in a database, contacting the library directly, searching the list of library e-journals, clicking publisher links in a database, using personal subscriptions, searching the library catalog, and using bookmarks saved in a web browser. Based on survey responses, faculty reported higher use of library services and resources than residents; however, residents reported higher use of library services and resources when preparing posters and papers for conferences and professional meetings. In addition, several comments spoke to the importance of the library for scholarly activity, many indicating the critical role of library assistance or resources in their academic accomplishments.

Conclusion – This study provides evidence in support of library resources and services for medical faculty and residents, which

contributes to discussions of the contributions of medical libraries. As hospital libraries close and academic medical libraries see reductions in budgets, this study contributes to the value of a library’s presence, as well as the role of the health sciences librarian in medical research and scholarly communication. This academic medical library was reported to be first and most often used, in comparison with other resources or none, in preparation for publication and presenting. The results of this and similar studies can contribute to the generalizability of its findings relating to the value of medical libraries. In addition, PubMed, UpToDate, and Google were the resources used most often by respondents, along with search engines and library links in databases. These findings can be incorporated into future outreach, marketing, and instructional curriculum for this library’s users. The survey results also provide additional support for the library’s role in the academic research lifecycle, and free-text comments about the critical role of library services furthered those findings. The authors state that further research is necessary for improving awareness of library resources and services in the role of scholarship at institutions.

Commentary

The assessment of library integration in key areas of academic medical centres is integral to exhibiting ongoing value and to determining areas of potential growth. Assessment of library use varies largely in methods of research on this topic. In other research, libraries are analyzing patron data (Nackerud, Fransen, Peterson, & Mastel, 2013) and patrons’ journaling of the resources used over a period of time (Brennan et al., 2014), as well as using many other methods. In the case of this study, user response to survey questions provided the data used to analyze library impact.

The study was evaluated using the CRiSTAL checklist for appraising a user study (n.d.). Strengths of the study include the use of a clearly focused issue (i.e., the evaluation of library services and resources use by medical

faculty and residents at an academic medical centre). The authors of this study also used the Rochester Study (Marshall, 1992) as a benchmark to which they compared methods and results. Data collection was described in detail along with findings; however the questions in the survey show signs of bias. For example, library resources at that particular campus were described, but not the resources of other libraries to which their users may have access.

In this study, there were no interventions implemented, but there were clear outcomes defined, including the frequency, prevalence, and ranking of online resources, the use of literature searches by librarians, and document delivery. However, conclusions from self-reported survey responses may be limited in usefulness, as Gross and Latham (2009) found that undergraduate students demonstrating poor information literacy skills greatly overestimated their proficiency before and after being tested. Therefore, the research would benefit from follow-up studies evaluating library interactions through patron data, including information from the library management system, interlibrary loan, proxy system reports, and other data points with patron characteristics tied directly to library services.

The results of the study were described in detail and are likely repeatable, but the study did not mention any bias, limitations, or further analyses that could be completed. The study had a low response rate; incentives may be of benefit for future studies to encourage broader participation. The use of incentives may also reduce submission bias, or a higher rate of responses from heavy library users than non-library users. Further follow-up of the data in this study could include quantitative analysis of the relationship between the independent and dependent variables as well

as statistical significance. Follow-up involving the integration of other data points, as previously mentioned, would also strengthen and help verify the results of this study.

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