Healthcare knowledge needs & behaviours: a bulletin for healthcare library staff
June 2017

Aim
This bulletin is designed to help healthcare library staff deliver Knowledge for Healthcare by keeping us up-to-date with the knowledge needs, preferences and behaviours of healthcare staff, students, patients and the public.

Sources scanned
Sources scanned include ALIA, BNI, CILIP weekly news and Update, CINAHL, Embase, Emerald Insight, ERIC, Google Scholar, HLG news, HMIC, Knowledge for Healthcare Blog, LISA, Medline, MLA news, NICE Information Services Bulletin and PubMed.

Creators
This bulletin is compiled on behalf of Health Education England by Lisa Riddington lisa.riddington@nhs.net (Gloucestershire Hospitals NHS Foundation Trust) and Mary Smith mary.smith30@nhs.net (Royal Devon and Exeter Hospitals Foundation Trust).

If you have suggestions for improving the bulletin, please contact Lisa and Mary.

Usage
We’re providing this with a Creative Commons Attribution-NonCommercial 4.0 International License. Feel free to share or adapt with acknowledgement for non-commercial purposes.

Please note
All reasonable care is taken to ensure that the information we provide is accurate. We accept no responsibility for the content of, or access to, included web links or for use of the information therein. The information provided is selective; however, the inclusion of a link does not imply approval of the contents of the website.
Contents

Healthcare Workforce ........................................................................................................................................... 3


Evaluation of hospital staff’s perceived quality of librarian-mediated literature searching services .... 3

Culturally competent library services and related factors among health sciences librarians: an exploratory study..................................................................................................................... 4

Knowledge of journal impact factors among nursing faculty: a cross-sectional study ...................... 5

Creating a web-based digital photographic archive: one hospital library’s experience .................... 5

Patients and the Public ........................................................................................................................................ 6

“You Sort of Go Down a Rabbit Hole...You’re Just Going to Keep on Searching”: A Qualitative Study of Searching Online for Pregnancy-Related Information During Pregnancy ................................................................. 6

The effect of Dr Google on doctor–patient encounters in primary care: a quantitative, observational, cross-sectional study .................................................................................................................. 7

Identifying and Understanding the Health Information Experiences and Preferences of Caregivers of Individuals With Either Traumatic Brain Injury, Spinal Cord Injury, or Burn Injury: A Qualitative Investigation ........................................................................................................................................... 8

Deconstructing Cancer Patient Information Seeking in a Consumer Health Library Toward Developing a Virtual Information Consult for Cancer Patients and Their Caregivers: A Qualitative, Instrumental Case Study .............................................................................................................................................................. 9

A qualitative study of Telehealth patient information leaflets (TILs): are we giving patients enough information? ......................................................................................................................................................... 10

Patient needs and preferences for herb-drug-disease interaction alerts: a structured interview study 11

Implementing patient information for gynaec-oncology patients at a tertiary referral health service. . 11
Healthcare Workforce

Author: Alligood, Elaine
Publication info: Online Searcher ; Medford 41.3 (May/Jun 2017): 42-47.
Abstract: There's a terrific patient education program, Ask Me 3 (npsf.org/?page=askme3), which highlights the importance of understanding one's health status and care decisions: * What is my main problem? * What do I need to do? * Why is it important for me to do this? If you're considering writing website content for your own users, these two websites provide guidance, tips, and direction for creating appropriately accessible health information content: * Health Literacy Online (health.gov/healthliteracyonline/about) * Plain Language.gov (www.plainlanguage.gov/populartopics/health_literacy/index.cfm) PATIENT-CENTERED The AHRQ (Agency for Healthcare Research and Quality; AHRQ.gov) Patient Involvement website (ahrq.gov/patients-consumers/patient-involvement/ask-your-doctor/videos/index.html). Speaking of patients' rights, below are a few additional websites to use as you sleuth for the truth: * Federal Trade Commission: Buying Health Products and Services Online (consumer.ftc.gov/articles/0023-buying-health-products-and-services-online) * Stop Medicare Fraud. Stephen Barrett, M.D.'s guide to quackery, health fraud, and intelligent decisions is actually an international network monitoring health-related frauds, myths, fads, fallacies, and misconduct. Follow the money! A robust website costs money, so check the fine print at the bottom of Health (NIH) created ClinicalTrials.gov to provide a registry and results database for publicly and privately supported clinical studies of human participants conducted around the world. The National Cancer Institute (NCI) runs its own site for cancer clinical trials. (cancer.gov/about-cancer/treatment/clinical-trials/search). ALZHEIMER'S DISEASE Alzheimer's Association alz.org Alzheimer's Disease Education & Referral Center nia.nih.gov/alzheimers Fisher Center for Alzheimer's... You can read the whole article here

Evaluation of hospital staff’s perceived quality of librarian-mediated literature searching services
Author: McKeown, Sandra, MLIS; Konrad, Shauna-Lee, MLIS; McTavish, Jill, PhD, MLIS; Boyce, Erin, MLIS
Abstract:
The research evaluated the perceived quality of librarian-mediated literature searching services at one of Canada’s largest acute care teaching hospitals for the purpose of continuous quality improvement and investigation of relationships between variables that can impact user satisfaction. An online survey was constructed using evidence-based methodologies. A systematic sample of staff and physicians requesting literature searches at London Health Sciences Centre were invited to participate in the study over a one-year period. Data analyses included descriptive statistics of closed-ended questions and coding of open-ended questions. A range of staff including clinicians, researchers, educators, leaders, and analysts submitted a total of 137 surveys, representing a response rate of 71%. Staff requested literature searches for the following "primary" purposes: research or publication (34%), teaching or training (20%), informing a policy or standard practice (16%), patient care (15%), and "other" purposes (15%). While the majority of staff (76%) submitted search requests using methods of written communication, including email and search request forms, staff using methods of verbal communication, including face-to-face and telephone conversations, were significantly more likely to be extremely satisfied with the librarian’s interpretation of the search request (p=0.004) and to rate the perceived quality of the search results as excellent (p=0.005). In most cases, librarians followed up with staff to clarify the details of their search requests (72%), and these staff were significantly more likely to be extremely satisfied with the librarian’s interpretation of the search request (p=0.002). Our results demonstrate the limitations of written communication in the context of librarian-mediated literature searching and suggest a multifaceted approach to quality improvement efforts.

You can read the whole article [here](#)

**Culturally competent library services and related factors among health sciences librarians: an exploratory study**

**Author:** Mi, Misa, PhD, MLIS, AHIP; Zhang, Yingting, MLS, AHIP

**Publication info:** Journal of the Medical Library Association ; Chicago 105.2 (Apr 2017): 132-139.

**Abstract:**

This study investigated the current state of health sciences libraries’ provision of culturally competent services to support health professions education and patient care and examined factors associated with cultural competency in relation to library services and professional development. This was a cross-sectional study. Data were collected with a survey questionnaire that was distributed via SurveyMonkey to several health sciences librarian email discussion lists. Out of 176 respondents, 163 reported serving clients from diverse cultural backgrounds. Various services were provided to develop or support initiatives in cultural competency in health professions education and patient care. A considerable number of respondents were unsure or reported no library services to support initiatives in cultural competency, although a majority of respondents perceived the importance of providing culturally competent library services (156, 89.1%) and cultural competency for health sciences librarians (162, 93.1%). Those who self-
identified as nonwhites perceived culturally competent services to be more important than whites (p=0.04). Those who spoke another language in addition to English had higher self-rated cultural competency (p=0.01) than those who only spoke English. These findings contribute to our knowledge of the types of library services provided to support cultural competency initiatives and of health sciences librarians' perceived importance in providing culturally competent library services and cultural competency for health sciences librarians. The results suggest implications for health sciences libraries in fostering professional development in cultural competency and in providing culturally competent services to increase library use by people from a wide range of cultures and backgrounds.

You can read the whole article here

**Knowledge of journal impact factors among nursing faculty: a cross-sectional study**

**Author:** Kumaran, Maha, MA, MLIS; Ha, Chau, MLIS, BscN

**Publication info:** Journal of the Medical Library Association ; Chicago 105.2 (Apr 2017): 140-144.

**Abstract:**

The research assessed nursing faculty awareness and knowledge of the journal impact factor (JIF) and its impact on their publication choices. A qualitative cross-sectional questionnaire was developed using Fluid Survey and distributed electronically to nursing faculty and instructors at three post-secondary institutions in Saskatchewan. Data were collected on place and status of employment, knowledge and awareness of JIFs, and criteria used to choose journals for publication. A total of forty-four nursing faculty and instructors completed the questionnaire. The authors found that faculty lack awareness or complete understanding of JIFs and that JIFs are not the most important or only criterion used when they choose a journal for publication. There are various reasons for choosing a journal for publication. It is important for librarians to understand faculty views of JIFs and their criteria for choosing journals for publication, so that librarians are better equipped to guide researchers in considering their academic goals, needs, and personal values.

You can read the whole article here

**Creating a web-based digital photographic archive: one hospital library's experience**

**Author:** Marshall, Caroline, MLS, AHIP; Hobbs, Janet, MLS, MBA

**Publication info:** Journal of the Medical Library Association ; Chicago 105.2 (Apr 2017): 155-159.

**Abstract:**

Cedars-Sinai Medical Center is a nonprofit community hospital based in Los Angeles. Its history spans over 100 years, and its growth and development from the merging of 2 Jewish hospitals, Mount Sinai and Cedars of Lebanon, is also part of the history of Los Angeles. The medical library
collects and maintains the hospital’s photographic archive, to which retiring physicians, nurses, and an active Community Relations Department have donated photographs over the years. The collection was growing rapidly, it was impossible to display all the materials, and much of the collection was inaccessible to patrons. The authors decided to make the photographic collection more accessible to medical staff and researchers by purchasing a web-based digital archival package, Omeka. We decided what material should be digitized by analyzing archival reference requests and considering the institution’s plan to create a Timeline Wall documenting and celebrating the history of Cedars-Sinai. Within 8 months, we digitized and indexed over 500 photographs. The digital archive now allows patrons and researchers to access the history of the hospital and enables the library to process archival references more efficiently.

You can read the whole article here

Patients and the Public

“You Sort of Go Down a Rabbit Hole...You’re Just Going to Keep on Searching”: A Qualitative Study of Searching Online for Pregnancy-Related Information During Pregnancy

Source: Journal of Medical Internet Research
Date of publication: June 2017

Background: The Web is becoming increasingly popular for gaining information on medical or health issues; with women in particular likely to search online for this type of information and support. Despite the increased use of the Web for health-related information, we need to question whether the Web and the ease of seeking health information that it provides leads to more (patient) empowerment. As well as being a time of joy and expectations, pregnancy can be a worrying time for women, especially first time mums-to-be, with unfamiliar experiences and symptoms and concerns for the baby as well as the self.

Objective: Our aim was to explore how and why pregnant women use the Web to gain information and support during pregnancy and what they consider a reliable source.

Methods: To meet the objectives of the study, a qualitative approach was required to gather information on the experiences of currently pregnant women who use the Web to gain information and support during their pregnancy. Sixteen pregnant women took part in a semistructured interview, either face-to-face or via telephone. The interviews took place from January to March 2016, all participants were from England, and the health professionals are all employed by the National Health Service (NHS). Qualitative analytical procedures were employed using inductive thematic analysis supported by NVivo software (QSR International).

Results: Pregnant women found reassurance from the experiences of others. This reassurance
resulted in them feeling less alone, as well as enabling them to normalize any symptoms or experiences they were undergoing. The women understood that caution was needed at times while reading the stories of others, acknowledging the potential for extreme cases or worst case scenarios. This is particularly pertinent to the Web, as this wide range of stories may not be as easily accessible if stories where confined to those in a woman's offline social circle. The interviews provide insights into how and why pregnant women search online for information and perhaps more so, support while pregnant. Conclusions: Searching for health information and advice online during pregnancy is viewed as quick, easy, and accessible. The affordances of the Web have provided women the opportunity to go online as a first port of call. Knowing they were not alone and reading the experiences or symptoms of other pregnant women enabled women to normalize their experience and was ultimately reassuring for pregnant women.

You can read the whole of this article here

The effect of Dr Google on doctor–patient encounters in primary care: a quantitative, observational, cross-sectional study

Source: BJGP Open
Date of publication: May 2017

Background Two-thirds of all patients search the internet prior to a health consultation.

Aim To explore how searching for online health information before visiting a doctor influences patients’ behaviour during the consultation.

Design & setting A quantitative, observational, and cross-sectional study of 18–75-year-old patients who used the internet.

Method Patients were recruited by social media for the quantitative study. This was followed by a qualitative study of GPs who were questioned in focus groups. Two questions were addressed: What is the effect of searching online health information on the behaviour of the patients? How does the GP handle this information?

Results Almost half of all responders (total n = 963) usually went to the doctor after the online information search but two-thirds were not reassured by the internet search. More than half of responders had more confidence in their GP after searching online. The older the responders, the more they went to the doctor after their internet search and the younger the responders, the more they were worried. The more frequently people consulted the internet for specific complaints, the more likely they reported reassurance.

Discussion Patients usually made an appointment with their GP after the internet search. New symptoms are rarely noticed and the search usually did not lead patients to distrust their GP. The majority of GPs described positive effects of the online search behaviour on the consultation.
Conclusion The emerging use of the internet for searching health information, commonly referred to as 'Dr Google', is not seen as a threat by GPs and leads to a better mutual understanding of symptoms and diagnosis.

You can read the whole of this article here

Identifying and Understanding the Health Information Experiences and Preferences of Caregivers of Individuals With Either Traumatic Brain Injury, Spinal Cord Injury, or Burn Injury: A Qualitative Investigation

Source: Health Expectations: an international journal of public participation in health care and health policy
Date of publication: May 2017

Background: In order to meet the challenges of caring for an injured person, caregivers need access to health information. However, caregivers often feel that they lack adequate information. Previous studies of caregivers have primarily focused on either their time and emotional burdens or their health outcomes, but the information needs of caregivers have not been thoroughly investigated.

Objective: The purpose of this investigation was to identify the preferred sources of health information for caregivers supporting individuals with injuries and to explore how access to this information could be improved.

Methods: A total of 32 caregivers participated in semistructured interviews, which were used in order to develop a more in-depth understanding of these caregivers’ information needs. Digital audio recordings of the interviews were used for analysis purposes. These audio recordings were analyzed using a thematic analysis or qualitative content analysis. All of participant’s interviews were then coded using the qualitative analysis program, Nvivo 10 for Mac (QSR International).

Results: The caregivers endorsed similar behaviors and preferences when seeking and accessing health information. Medical professionals were the preferred source of information, while ease of access made the Internet the most common avenue to obtain information. The challenges faced by participants were frequently a result of limited support. In describing an ideal health system, participants expressed interest in a comprehensive care website offering support network resources, instructive services about the injury and caregiving, and injury-specific materials.

Conclusions: According to the participants, an ideal health information system would include a comprehensive care website that offered supportive network resources, instructive services about the injury and caregiving, and materials specific to the type of patient injury.

You can read the whole of this article here
Deconstructing Cancer Patient Information Seeking in a Consumer Health Library Toward Developing a Virtual Information Consult for Cancer Patients and Their Caregivers: A Qualitative, Instrumental Case Study.

Source: JMIR Cancer  
Date of publication: May 2017

BACKGROUND Cancer patients and their caregivers want information about their disease and are interested in finding health information online. Despite the abundance of cancer information online, it is often fragmented, its quality is highly variable, and it can be difficult to navigate without expert-level knowledge of the cancer system. The Patient & Family Library at the Princess Margaret Cancer Centre offers a broad collection of high quality cancer health information and staff are available to help patrons refine their questions and explore information needs that they may not have considered.

OBJECTIVE The purpose of this research study was to deconstruct patrons' information-seeking behaviors in the library to assess the feasibility of replicating the services provided in the library through a Web app, extending the service beyond the walls of the cancer centre. The specific aims of this research were to understand (1) how patrons approach information seeking in the library (interface design), (2) how patrons communicate their informational needs (information categorization and metadata requirements), and (3) what resources are provided to address the patrons' information needs (collection development).

METHODS We employed a qualitative, instrumental case study to deconstruct patrons' health information-seeking behavior. The study population included patients, the librarian, and library volunteers. Ethnographic observation was conducted at the library over 3 days and key informant interviews with library staff were conducted to address the first aim. A closed card-sorting activity was conducted to address the second aim and the library shift logs and Search Request Forms (SRFs) were reviewed to address the third aim.

RESULTS A total of 55 interactions were recorded during the ethnographic observation and nine semistructured interviews were conducted during the key informant interviews. Seven library patron personas were identified: (1) Newbie, (2) Seasoned, (3) Direct, (4) Window Shopper, (5) Collector, (6) Information Seeker, and (7) Distressed. A total of 83 participants completed the closed card-sorting exercise. The participants' conceptual clusters within the similarity matrix overlapped with the groupings created by the librarian, with a few differences. A total of 161 entries in the library shift log and 65 SRFs were analyzed to determine what resources were given to patrons. Most resources that patrons received were available online (61%), although almost half of these required special access (47%).

CONCLUSIONS The study findings suggest it is possible to replicate library functions in a Web app with a few exceptions that cannot be replicated online. These elements include access to journal articles or other content behind paywalls and the librarian's ability to encourage
further discussion through empathy and active listening. Discussion with the librarian could serve to refine and predict needs through observing information seekers and to provide immediate connection to spiritual care and psychosocial support for patrons in distress.

You can read the whole article here

A qualitative study of Telehealth patient information leaflets (TILs): are we giving patients enough information?

Source: BMC health services research
Date of publication: May 2017

BACKGROUND The provision of patient information leaflets regarding telehealth has been perceived by potential consumers as a strategy to promote awareness and adoption of telehealth services. However, such leaflets need to be designed carefully if adoption and awareness among potential users is to be promoted. Therefore, the aims of this study were: first, to see how telehealth was portrayed in some of the existing telehealth leaflets (THLs). Second, to explore patients' perceptions of the existing THLs and their engagement with the concept and how THLs can be optimised.

METHODS A two-step approach was employed to address the aims of this study. The first phase involved the use of discourse analysis to compare 12 electronically and publically available THLs, with the existing THL guidance "Involve Yorkshire and Humber". The second phase involved conducting 14 semi-structured interviews with potential telehealth users/patients to gauge their perception and engagement with the concept, using the two leaflets that were mostly matching with the guidance used. Six interviews were audio-recorded and eight had detailed jotted notes. The interviews were transcribed and thematically analysed to identify key themes.

RESULTS The discourse analysis showed certain gaps and variations within the screened leaflets when addressing the following aspects: cost of the telehealth service, confidentiality, patients' choices in addition to equipment use and technical support. Analysis of the interviews revealed patients' need for having clear and sufficient information about the telehealth service within the THLs; in addition to, patients' preference for the use of simpler terminologies for telehealth description and the provision of clear simple texts with pictorial presentations. The interviews also revealed certain limitations against adoption of telehealth by the participants, such as: lack of privacy and confidentiality of information, fear of technology breakdown and equipment failure, loss of face-to-face contact with healthcare professionals and being too dependent on the telehealth service.

CONCLUSION The current study showed a great variation among the screened THLs and highlighted certain gaps within the content and presentation of these leaflets. However, the study also highlighted certain key issues to be considered when designing THLs in the future to enhance telehealth uptake and use by patients.
Patient needs and preferences for herb-drug-disease interaction alerts: a structured interview study.

Source: BMC complementary and alternative medicine
Date of publication: May 2017

BACKGROUND While complementary and alternative medicine (CAM) is commonly used in the United States and elsewhere, and hazardous interactions with prescription drugs can occur, patients do not regularly communicate with physicians about their CAM use. The objective of this study was to discover patient information needs and preferences for herb-drug-disease interaction alerts.

METHODS We recruited 50 people from several locations within the University of Utah Hospital to participate in this structured interview study. They were asked to provide their preferences for the herb-drug-disease interaction alerts. Qualitative methods were used to reveal the themes that emerged from the interviews.

RESULTS Most participants reported they had previously used, or they were currently using, CAM therapies. The majority had made the effort to inform their healthcare provider(s) about their CAM usage, although some had not. We found that most respondents were interested in receiving alerts and information about potential interactions. Many preferred to receive the alerts in a variety of ways, both in person and electronically.

CONCLUSIONS In addition to conventional medicine, many patients regularly use complementary and alternative therapies. And yet, communication between patients and providers about CAM use is not consistent. There is a demand for interventions in health care that provide timely, integrative communication support. Delivering the herb-drug-disease alerts through multiple channels could help meet critical patient information needs.

Implementing patient information for gynae-oncology patients at a tertiary referral health service.

Source: International journal of evidence-based healthcare
Date of publication: May 2017

AIM To ensure that gynae-oncology surgical patients receive relevant written information, in their preferred format, and at a time that suits them, according to the best available evidence.
METHODS This project utilized an audit and feedback design and was conducted over a 9-month period from August 2015 to May 2016. Twenty-nine patients were audited prior to two strategies being implemented. The first strategy was a standardized e-mail letter to all patients (containing links to surgical information, cancer support websites and a short video introducing hospital staff, and the second was a discharge information sheet detailing wound care, signs of complications, actions to take and follow-up instructions. Thirty patients were audited postimplementation to evaluate the success of these strategies.

RESULTS There were significant increases in the number of patients who said they received written information on their diagnosis, surgery and potential complications at initial consultation and a significant increase in the number of patients who said they were provided with written follow-up information on discharge. Pre-audit, 83% of patients stated they would like to receive a list of reliable websites to access and post-audit, 89% of patients stated they found the websites provided were useful.

DISCUSSION Although gynaec-oncology surgical patients did previously receive relevant verbal information, little or no written information was provided. The pre-implementation audit provided insight into the information these patients required. The e-mail was generally well received by patients; however; there was a minority who did not have internet access and therefore a paper version was provided.

CONCLUSION This project identified deficits in the provision of written information for surgical gynaec-oncology patients. Two strategies were implemented to address this deficit with positive results in the number of patients receiving written information; however, further investigation is needed to establish patient satisfaction with this information.

If you have access to this journal you can read more here