

A publication of the National Network of Libraries of Medicine MidContinental Region

## Librarian Views: Points & Counter Points on Controversial Library Issues

Editor Notes: The objective of this column is to offer readers a view from both sides of controversial issues relating to librarians and libraries in the MidContinental Region and beyond. Contributors to this column come from NN/LM members and other experts in their field. The editors encourage readers to contribute their views or to suggest a topic by posting them to the MCR's Plains to Peaks Post blog. (http://nnlm.gov/mcr/news\_blog/?cat=23)

In this issue of Plains to Peaks Post, we have invited Dr. Carol Gilhooley, Director of Division of Standards and Survey Methods for The Joint Commission, and Carla J. Funk, Executive Director for the Medical Library Association, along with Katherine Stemmer-Frumento, MLA Joint Commission Representative, to discuss the Joint Commission's proposed removal of standards IM.5.10 and IM.4.10 in the hospital accreditation manual.

## Joint Commission Standards on Information Management

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The safety and quality of health care depend on effective information management and decision support systems. The availability and quality of information is vital to decision-making at the patient and organization levels, and in the creation of public policy. Technology supporting the dissemination of information should be a national priority. The Joint Commission's strategy to promote this goal is to clarify its existing information management standards and to phase in requirements related to health information technology.

Currently, The Joint Commission is involved in a Standards Improvement Initiative (SII), intended to enhance the clarity of the standards and reduce redundancy. The Management of Information chapter has been reviewed through this process. The new chapter addresses four major areas: Planning for the

Management of Information, Health Information, Knowledge-Based Information, and Monitoring Data and Health Information Management Processes. The standard on knowledge-based information (IM.5.10) was retained but streamlined and moved to another place within the chapter. The requirement for "providing access to information resources when electronic systems are down" is now addressed at the enhanced standard (IM.1.15) addressing continuity of information processes.

Another illustration of reducing redundancy relates to the deletion of the existing standard on using information in decision making (IM.4.10). The Joint Commission concluded that the components of this standard were covered in other sections of the manual. For example, the Performance Improvement Chapter addresses the collection, analysis, and use of information, and there are separate standards addressing the content and quality of the medical record. Additionally, the new 2009 Leadership Chapter contains a standard (LD.3.20) that emphasizes the importance of information management by making it the responsibility of the organization's leaders to use data in their decision making.

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The current knowledge-based information standard was written when health information technology was in its infancy. Within the last few years, The Joint Commission established a board-level health information technology strategic initiative to modernize these requirements. This initiative included convening a panel of outside experts to advise the Joint Commission on standards content. Recently, the Board of Commissioners approved a set of principles to guide the development of future standards. These principles stress the importance of technology in improving care, the opportunities for increasing efficiency and accuracy in the transfer of information, and the importance of effective implementation strategies to avoid unintended consequences. New standard development will first focus on the transfer of information.

The Joint Commission recognizes the contributions medical librarians continue to make in advancing health information management. We remain strongly committed to the use of data and expert information that they make available for both clinical and operational decision making. This concept permeates the standards. The Joint Commission's strategic objectives and the goal for future standards development will be to strengthen health information management in the interest of patient care safety and quality.

## Joint Commission Standards Improvement Initiative Changes

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The Medical Library Association (MLA) has deep concerns about the proposed elimination of standard IM.5.10 and the changes to standard IM.4.10 in the hospital accreditation manual. We believe that both access to evidence-based information and the librarians who provide it are important for positive patient outcomes based upon the results of several research studies listed below. We would like to know how the concepts in IM.5.10 will be integrated into the other accreditation chapters as has been discussed.

## **Impact on Patient Outcomes**

Research studies suggest professionally led library services have a positive impact on health outcomes for patients and may lead to time-savings for health care professionals (Health Info and Libraries J, 2005). When MEDLINE searches are conducted early in a patient's hospitalization, hospital costs, charges, and lengths of stay are significantly lower than those patients whose searches are conducted later (Acad Med, 1994). Information provided by librarians decreases unnecessary diagnostic tests, affects treatment decisions, and improves patient care. (JMLA, 2005; BMLA, 1992).

## Access to Quality Medical Information

Evidence-based medicine cannot be practiced without library resources and librarians (Nurs Econ, 2003). Only 30% of the medical literature and less than one-quarter of the medical and biomedical journals are freely available on the Internet (Serials, 2005). The majority of medical/nursing publications provide online access to their journals starting in 1994/1995. Therefore, for resources published prior to 1994, print is the only option. Also, if a hospital does not have a physical collection it may no longer be eligible for interlibrary loan services, resulting in the need to purchase materials or use commercial document delivery services, increasing costs to the institution.

Google and other Internet search engines access only 7% of available health-related information and cannot perform searches using a controlled vocabulary and extensive limits or search databases that reside behind firewalls. (CMAJ, 2005).

## Time and Skills Needed to Find Quality Information

It takes an expert searcher with the word terminology skills, command language skills, understanding of which database is best for what topic, etc. to search and find the most pertinent information for the health care provider. Many recent studies show that a majority of health care professionals do not have the time to seek information, training to do expert searches, and knowledge of multiple information sources (Portals Mag, 2003; Med Net, 2004). Librarians are more proficient searchers than other health care professionals, reducing the time spent on information retrieval and evaluating results (Nurs Econ, 2003). Difficult MEDLINE searches require the skills of librarians trained in evidence-based methods (Ann Emerg Med, 2002). Also, administration of electronic journals is one of the most work-intensive aspects of providing library services and includes negotiating licensing agreements and continual training in their use as well as other responsibilities (Online Inf Rev, 2001).

### Costs of Medical Information

Quality health care/patient care information is not free on the Internet. The companies who produce products such as UpToDate, MDConsult, and OVID databases all charge subscription fees. Additionally, the majority of journal publishers also require additional fees, above and beyond the print subscription charge, for electronic access to their materials. No one database offers access to all available electronic journals – in fact, there is little overlap among databases and few contain freely available information (D-Lib Magazine, 2002).

The bottom line is that hospital practitioners and staff rely heavily on having access to high-quality evidence-based information resources in all forms in order to make sound decisions based upon the most relevant evidence in providing quality patient care. In turn, it takes highly qualified medical librarians to select the best of these resources for their users. We strongly believe, as does the Joint Commission, that there should be no short cuts when it comes to patient care.

## **RSS Showcase**

## What Is RSS?

RSS is the "new way"  $^1$  to check for updated content on your favorite web sites. RSS works behind the scenes to automatically check for updates. You save time by only visiting sites whose content has been updated.

The three most common explanations of the acronym RSS are: Really Simple Syndication, Real Simple Syndication, and Rich Site Summary. My favorite explanation is "Ready for Some Stories," referred to as the "Oprah breakdown." You want information (stories) about what is important to you, but you are very busy. After you setup your RSS feeds, RSS will find the new stories that are pertinent to you and deliver them to you in a manner of your choosing. The following video is a good place to start for an overview of RSS: (http://www.commoncraft.com/rss\_plain\_english).

## How do I setup RSS?

Setting up RSS is a two-step process. The application that you use to collect your RSS feeds is called a reader (or aggregator). First you'll need is choose a reader. Second, gather the URLs for all the feeds you want to subscribe to, and enter them into your reader.

Choosing an RSS reader is a personal choice that is based on how you prefer to access information: through a web-based service, within your browser, with a stand-alone downloadable software program, or via email.

## **Web-Based Readers**

Both MyYahoo and iGoogle allow you to create a personal page and choose the content that you would like to include on your page. You can set either one as your home page.

#### <u>MyYahoo</u>

http://my.yahoo.com

- 1. Sign in or register for an account
- 2. Click on Personalize this page on the top of page
- 3. Type or paste the feed URL in the box
- 4. Click on Add
- 5. To add an RSS feed when you do not have the RSS URL, just enter the web site address, or search term (i.e. www.medlineplus.gov or MedlinePlus) into the Search box
- 6. Click on the Add button next to the content you want to add
- 7. To unsubscribe from a feed, click on the **X** next to the *Edit* button on the right side of the feed

### <u>iGoogle</u>

- Visit www.google.com and create an account if you are a new user
- 2. Log in to your Google account
- 3. If this is your first time signing in, the Classic Home view is
- 4. Click on My Account at top right of page
- 5. Choose iGoogle and your iGoogle page will appear
- 6. Click Add Stuff on the right side of page

- Next to the Search Homepage Content button is the Add by URL box
- 8. Copy and paste the feed URL into the Add by URL box
- 9. You will see a confirmation message
- 10. Return to your iGoogle page to view your new feed
- 11. To unsubscribe from in a feed in iGoogle, click on the  $\pmb{X}$  on the upper-right corner of the feed box

### Google Reader

Google Reader is a web-based tool that you might choose if you do not want to setup an iGoogle or MyYahoo page. As long as you have a Gmail account, you can use Google Reader for your RSS subscriptions.

- From the Google home page http://www.google.com click on More (top of page) and choose Reader. You will be asked to sign in or set up a Google account. Once you have a Google account, you can bookmark the Google Reader page at: http://www.google.com/reader/
- 2. Click on Add Subscription on left side of page
- Paste the feed URL in the box and click on Add
- 4. Click on the Refresh button
- 5. To unsubscribe, click on *Manage Subscriptions* on the bottom left side of the screen
- Choose the feed you wish to remove and then click on the trash can

### **AideRSS**

http://www.aiderss.com

AideRSS is described as an intelligent assistant that uses an algorithm to rank blog articles and posts based on what people are saying about the post in other blogs. This approach helps to thin out the number of new posts that appear in the AideRSS reader.

- 1. Register and respond to an activation email
- 2. Sign into account
- 3. Enter the RSS feed URL of the page you want to track
- 4. Click the Analyze button
- 5. Click on Add all posts to my Feeds (Save and Monitor Locally)
- 6. Click on My Feeds on right side of page
- 7. Scroll down to view the new RSS subscription
- 8. You can delete a feed from Saved Feeds
- 9. To change filter level, choose the feed in Saved Feeds
- 10. Choose New Filter Level (Great Posts)
- 11. Click on the Add Great Posts to my Feed button directly under the Great Post tab
- 12. The Update Account message displays
- 13. Click on My Feeds in upper right of page
- Scroll to bottom to confirm that only Great Posts are included in new content

## Web-Based RSS Recommendations

I have reviewed four options for web-based RSS tools. Of the four, my least favorite is AideRSS, because I am not sold on the idea of letting an algorithm decide which posts are worthy of my attention. Of the remaining three choices, MyYahoo and iGoogle work the same. So, if you already have an account with Yahoo or Google, just add RSS to your personal page. I chose iGoogle because

See "RSS" on page 6

# Strategic Collaboration: 2007 Regional Advisory Board Meeting

It was break time for Creighton University's School of Medicine, but on October 12, 2007, at Creighton University Health Sciences Library/Learning Resources Center, it was anything but quiet. The library hosted the annual MidContinental Regional Advisory Board meeting with board members and RML staff tackling serious topics using strategic collaboration methods.

In the morning, Angela Ruffin provided the latest on what's happening with NLM - personnel changes, MedlinePlus improvements, emergency planning progress, and the all important budget - or non-budget - since Congress had not passed a budget for the National Institutes of Health.

## Outreach, Education, Technology, Network Member Discussion

After Angela's presentation, participants joined in earnest discussion on community outreach, education, technology, and Network members. To frame the discourse, participants were asked to keep in mind the following: What role do librarians see for themselves in the global health information universe? Do they limit their participation to their library or institution or are they members of the larger library and health information community? How does that self definition affect them and their work? And by extension, how does that self definition affect how they participate in the programs that the RML develops?

## Deeper Discussion

From ideas generated in the morning sessions, the group decided there were 4 topics that needed more in-depth discussion. The topics and a summary of the outcomes of the afternoon sessions on those topics follow.

Use emergency preparedness as an entrée to working with community organizations and find a way to provide portable, durable, cheap information distribution

One Laptop Per Child (*OLPC.com*) is an inexpensive, durable, solar powered laptop that could be used in time of an emergency if there is no reliable source of electricity. During non-emergency times the RML could use the laptops for a mobile computer lab.

Resources that are needed by health care providers and first responders could be stored on a flash drive. They are easily transported and needed information could be uploaded to a working computer. Partnering with the public health workforce, other first responders and librarians would assist the RML in determining what information should be put on the storage device.

Change the librarian model so that hospital and health sciences librarians become key players in their organizations

There are influences that affect the librarian model. These influences include expectations of what it means to be a hospital and health sciences librarian, awareness of hospital and institutional "systems," and the ability to communicate and politic within the organization. Additional materials to help the librarian connect with administrators and key players in the institution would be empowering. Suggestions for types of valuable materials included summaries designed to bring librarians up to date on current trends affecting health care and talking points that can be raised with administrators. Members could be polled for hot topics that they would like their administration to learn about.

Offer culturally appropriate and culturally specific outreach

Librarians may work with multiple cultural groups. It is a challenge to prepare to interact with them and develop appropriate resources for each. A template for presenting a product in a culturally sensitive way or guidelines for customizing presentations for different audiences would help overcome these challenges, for example, incorporating names and terminology representative of the culture.

Retool - prepare the librarian for a role in adding value to the clinical information system

The challenge is to watch trends and stay ahead in technology. A resource that distills main points for busy librarians and connects library work to the trends would enable librarians to make electronic resources available from the computerized physician entry and the electronic medical record.

## **Commercial Breaks**

The day was not all spent in seriousness. Throughout the meeting, liaisons lightened the mood by offering commercial breaks featuring NLM resources. Advisory board members were entertained and enlightened by infomercials promoting the information in Pubmed, WISER, and HazMap as tools that first responders rely on and may use to save YOUR life! Speed dating and Go Local--If your date understands the essence of Go Local they have passed the first test! How is MedlinePlus similar to shopping at Costco? Aisles of choices - what is on your shopping list of health information needs this week? Have you taken your (PubMed Central) pink pill, today's remedy for the inability to continuously and easily access electronic publications? At the end of the day we were visited by Toxella, who was standing in for her "cousin" Toxie, the mascot for ToxMystery.

The NN/LM MCR thanks the Regional Advisory Board members, who gave of their time and expertise in generating the ideas at our meeting; Jim Bothmer, Director of the Creighton University Health Sciences Library/Learning Resources Center, and his staff who hosted us for the day; and Angela Ruffin from the National Network Office for sharing the latest from the National Library of Medicine.

-C. Hamasu

Go Local - http://www.nlm.nih.gov/nno/golocal/ MedlinePlus - http://medlineplus.gov/ PubMed Central - http://www.pubmedcentral.nih.gov/ ToxMystery - http://toxmystery.nlm.nih.gov

## Strategic Collaboration Methods:

World Café - http://www.theworldcafe.com/ Open Space Technology User's Guide http://www.openspaceworld.com/users\_quide.htm

## NN/LM MidContinental Regional Advisory Board May 2007- April 2008

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# Emergency Planning with the RMLs Session at the Joint Meeting

Emergency planning is high on the list of priorities for the National Library of Medicine and for the Regional Medical Libraries. At the Joint Meeting of the MCR and Midwest Chapters, the Greater Midwest and MidContinental RMLs organized a World Café to give Network members the opportunity to think about and discuss their library's role in an emergency. About 70 participants built on each other's ideas as they tried to answer the following questions.

- A. What are the essential services that your library should be able to provide in case of an emergency? Services identified pertained to ready reference services and resources. Other services pertained to library as a place that can be used by those managing the emergency response.
- B. How will your library provide essential services if your library is non-functional?
   Many of the ideas involved using technology as a way to get information to those who need it.
- C. What can the RML program staff provide to support your planning or support your library in time of an emergency? Librarians wanted the RML to coordinate communication in a variety of formats between those who have the experience of emergency planning and dealing with emergencies with those who don't.
- D. What role can you see for other Network members, representatives from your institution, or representatives from community organizations in the development of your library plan? Most of the ideas involved working with other librarians in the community or in a consortium so that efforts are coordinated and libraries can back each other up.
- E. After this meeting, what are the steps that you need to take to implement a plan for your library?

  Ideas that were voiced included finding out about emergency plans for the home institution and community to determine how the library will fit in, learning more about emergency planning, and identifying essential services that the library will provide in an emergency.

The session raised an equal number of ideas and questions that will require investigation and follow up once participants return to their home libraries. All the ideas generated from the discussions will be made available from the MCR and the Joint Meeting web sites. Look for an announcement in the RML News.

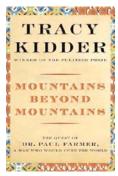
Angela Ruffin, Head of the National Network Office at NLM, introduced the session by updating attendees on the continuity of operations plan (COOP) being developed by NLM and the buddy system that the RMLs are establishing to back up each other's operations.

-C. Hamasu

## It's Good to Pick Up a Book . . .

In today's libraries, there is a lot of emphasis on technology and digital resources. This new column, "It's Good to Pick Up a Book," is focused on taking a different tack, reading a real book, just for fun. I suspect there are many of us out there who still enjoy recreational reading. This series, then, will bring you quick reviews on interesting books, that have something about health education in them. They're chosen to get us all to "think outside the box," to challenge us, and inform us.

And should you have thoughts to contribute about an interesting book you've read, I'd invite you to share that here as well. We all grow by sharing, so this time, let's do it for fun!



My first choice is a book by Tracy Kidder, Mountains Beyond Mountains. Few biographies have gripped me like this book. Kidder is adept at making his topics appear as easy reading narratives, and this is no exception. In this book, Kidder examines the life of Dr. Paul Farmer, a man who has chosen to make a difference. Farmer created, with the help of a wealthy Boston philanthropist, an organization called Partners

in Health. His efforts began in Haiti, following a stint there prior to enrolling in Harvard Medical School. And central to his story is the description of Zanmi Lasante, (Creole for Partners in Health), a compound Farmer created primarily to address treatment of tuber-culosis for the poorest of the poor. What stands out is his approach, realizing that most need more than treatment, they need clean water and healthy food. In Haiti alone, they're feeding 2000 people a day at Zanmi Lasante. Where these people in Haiti may make one dollar a day, the initial policy was to charge each patient eighty cents a day. Farmer agreed, "except for women and children, the destitute, and anyone who was seriously ill." Farmer knows how to work the systems, to avoid policies he does not like, but to do so without alienating his supporters.

From his unconventional childhood, being raised on a bus and a boat, to his undergraduate studies at Duke University, to Harvard Medical School, he chooses his own paths. His degrees in medicine and anthropology direct him to take a more holistic approach to medicine, looking at not just cures for infectious disease, but cultures that affect these diseases. He knows what it takes and gives his all in starting and maintaining these daunting projects worldwide for the most destitute of people. When not traveling worldwide, Farmer practices at Brigham and Women's Hospital in Boston. One gets the impression that as he works there, he is filling his pockets with drugs to take to Haiti to treat his patients, and that his superiors know this and look the other way - the Robin Hood approach.

This is a story of a man who is doing "the right thing." It reminds me that there are good people out there who know what medicine really is, for the whole soul. It is more than the cliché. It is what this man, with his endless energy, lives and models everyday.

-M. Magee

## "RSS" continued from page 3

MyYahoo has large ads on the page, and iGoogle does not. Google Reader is similar to AideRSS (except it doesn't use an algorithm) in that it is a dedicated RSS reader and does not give you the option to add other types of content, as MyYahoo and iGoogle do.

## **Browser-Based Readers**

#### Internet Explorer 7

- Click on the RSS button for the feed to which you want to subscribe
- 2. Click the *Subscribe* to this feed button on left side of the page



- 3. A menu will appear. Choose Subscribe to this Feed
- 4. A box will appear. You may rename the feed if desired
- 5. Click on Subscribe
- 6. To view your subscribed feeds, click on the Star icon



- 7. Refresh feed to view updated pages
- 8. To unsubscribe from a feed in IE7, right click on the feed name and choose *Delete* from the drop-down list.

### Mozilla Firefox

- 1. Click on the RSS button for the feed to which you want to subscribe
- 2. Click on Subscribe
- 3. Add Live Bookmark box opens
- 4. Choose New Folder to create a folder for your RSS feeds

- 5. Give your new feed a meaningful name
- 6. Click OK
- To unsubscribe from a feed in Firefox, locate your RSS Feed folder in your Bookmarks, right click on the feed you want to delete and choose Delete



#### Browser-Based RSS Recommendation

I have reviewed two options for browser-based RSS tools. Internet Explorer currently has the lion's share of the browser market. In working with a student population, I find that many of them use FireFox. I recommend incorporating your RSS subscriptions into whichever browser you currently use or whichever browser your institution supports.

## **RSS Software Downloads**

Two freely available, downloadable programs that you can use to establish and access your RSS feeds are SharpReader and RSSOwl. The appearance of both of these programs is very much like the Outlook Express email program. They both make it easy to tell the difference between read vs. unread posts.

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#### SharpReader

http://www.sharpreader.net

- 1. Download the program
- 2. Paste the RSS URL into the *Address* window and click on *Enter*
- 3. The Subscribe button on the top left of the screen will now be active
- 4. Click on the Subscribe button
- 5. To unsubscribe, right click on the feed name in the left pane and choose *Unsubscribe*

### **RSSOwl**

http://www.rssowl.org

- 1. Download the program
- 2. Click on New on the top left side of the screen
- 3. The *Properties* box opens up
- 4. Enter the RSS feed URL
- 5. You can choose how often you want to update the feed by clicking on *Update Automatically*. Choose frequency from the drop-down menu
- 5. Right-click on the feed name and choose *Reload Favorites* to refresh the feed
- 6. To unsubscribe, right click on the feed name in the left pane and choose *Delete*

#### **Thunderbird**

http://www.mozilla.com/en-US/thunderbird

Thunderbird a hybrid program, the best of both worlds. You can use it for your email, as well as your RSS feeds. Therefore, if you

are in your email program frequently throughout the day, Thunderbird makes it very convenient to check on your updated RSS feeds.



- 1. A download is required
- 2. Click on News & Blogs on the left-hand panel
- 3. RSS News & Blogs will appear in the main panel
- 4. Click on Manage Subscriptions
- 5. Click on the Add button
- 6. A Feed Properties box will appear, enter the feed URL
- 7. To unsubscribe from a feed, choose the feed and click on the *Remove* button

#### NewsBliss

http://www.download.com/3000-9227\_4-10723220.html If you are able to download at work, you might want to try this one. NewsBliss is a Windows-based desktop media streamer. In other words, it is a cool toy. A news ticker spools across your computer screen and shows the highlights of your RSS feeds.

- 5. NewsBliss will verify the URL and then display a Subscription Complete box
- 6. To unsubscribe, click on the large **N**, choose *Organize*; highlight the feed you wish to delete and then click on *Remove*

#### RSS Download Recommendation

There is almost no difference between SharpReader and RSSOwl. That said, I would choose RSSOwl, because it includes function buttons along the top of the interface that make it easy to add feeds, view history, etc. Thunderbird offers you the option of using the program for your email as well as your RSS feeds. Therefore, if you are looking for a new email program, then you might want to consider adopting Thunderbird as your new RSS and email client.

## **Email Based RSS Tool**

## Watch that Page (WTP)

http://watchthatpage.com

This is a one-item category and is not a true RSS reader. WTP emails you notification when the pages to which you have subscribed are updated. WTP offers a special feature that allows you to enter the URL for a page that does not offer RSS, and WTP will check for updates and notify you via email. WTP works well for people who are heavy users of their email program or want to subscribe to a page that does not offer RSS.

- 1. After you register, click on Your Pages on the left-side bar
- 2. Add the URL for any page (not the feed URL, but the page URL) into the *Add Page* box
- 3. The *Profile* section of the page is where you setup your email preferences
- 4. Choose daily or weekly (you can specify the day)
- 5. Choose the time of day to check for changes
- 6. Choose what you wish to receive via email: "Show Changes" or "Only show me which pages have changed"
- 7. To unsubscribe, check the box after the name of the feed, and click on *Delete Selected*

For more information on RSS visit RSS Specifications at http://www.rss-specifications.com/rss-tools.htm.

This article was adapted from the August Breezing Along with the RML session. The archived event can be viewed at (https://web-meeting.nih.gov/p98867688/).

If you have any questions or would like help implementing RSS, please contact me.

-R. Brown



- 1. Click on the large N on the upper left side of your screen
- 2. Choose Subscribe (a subscription wizard appears)
- 3. Choose Enter feed URL and then click on Next
- 4. Enter the URL in the Feed Address box, check the Download and Verify box, and then click on Next

<sup>1</sup>CommonCraft. RSS in Plain English. April 23, 2007 [Available from http://www.commoncraft.com/rss plain english]

<sup>2</sup>Back in Skinny Jeans. How to explain RSS the Oprah way. August 9, 2007 [Available from http://cravingideas.blogs.com/backinskinnyjeans/2006/09/how\_to\_explain\_.html]

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