Annual Report
2012-2013

Penny Logan, Manager Library Services
For the period April 2012 - March 2013
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</tbody>
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Executive Summary

Reorganization, retirements, cupcakes, movies, IPads and accessible doors - this has been a most full and exciting year for the Capital Health Libraries.

There was realignment of some departments in Capital Health, and on April 1, 2012, the Library came under the direction of Mary Ellen Gurnham, Executive Director Learning. This re-alignment opened up new opportunities for the Library. In January 2013, the Library took on the role of coordinating the patient pamphlet process. For that work, a Librarian and a Library Technician were hired, and we have begun the process of re-organizing those systems.

Two long time staff - Verona Leslie and Myrna Lawson – retired after more than 30 years with the Library. This was a blow to the library’s processes, but we took it as an opportunity to adjust the staffing levels in the Library so that we have better alignment between the kind of work we do in the 21st century and the training we require of staff.

As for cupcakes and movies - cupcakes were at the centre of a fundraiser in support of the Society for the Prevention of Cruelty to Animals and movies being made at the Nova Scotia Hospital facilities frequently involve the Library premises like the October, 2012 filming for the TV series “Seed”.

On top of the fun we have every day, the Library is seeing increases in usage in all areas. Use of paper books was down, but the use of e-books has increased our book circulation by more than 7,000 items!

Another outstanding statistic is the use of the meeting rooms at the Infirmary site. This is up by more than 57%, and despite having more and more online materials so that people can get to Library resources from their phones or laptops, we are seeing more and more people coming into the Library – this year more than 166,000 people visited the Capital Health Libraries. For the second year, we highlight the value of the libraries using the National Library of Medicine Valuing Library Services calculator. Read on to see the value and benefits provided by Library Services.
**Valuing Library Services**

In the table below, we show the value calculation for the Health Sciences Library of Capital Health for the last year. This calculates the Library’s ‘retail value’ of the service. That is, if Capital Health did not have a Library, what would the district have to pay ‘retail’ for the same services?

Here is a link to the calculator, and below that, the numbers for CDHA Library Services. [http://nnlm.gov/mcr/evaluation/calculator.html](http://nnlm.gov/mcr/evaluation/calculator.html)

<table>
<thead>
<tr>
<th>Number of Uses</th>
<th>Library Resources or Services</th>
<th>Cost of Resource or Service</th>
<th>Value of Resources or Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>33909</td>
<td><em>Print and e-Books used</em> (in house, checked out or online)</td>
<td>125</td>
<td>$4,238,625</td>
</tr>
<tr>
<td>1768</td>
<td><em>Print journals used</em> (in house or checked out)</td>
<td>35</td>
<td>$61,880</td>
</tr>
<tr>
<td>92,856</td>
<td><em>E-Journal articles accessed</em></td>
<td>45</td>
<td>$4,178,520</td>
</tr>
<tr>
<td>22,342</td>
<td><em>Document Delivery</em> (Items borrowed for/delivered to users)</td>
<td>18</td>
<td>$402,156</td>
</tr>
<tr>
<td>7919</td>
<td><em>Reference questions Answered</em></td>
<td>45</td>
<td>$356,355</td>
</tr>
<tr>
<td>200</td>
<td><em>Mediated searches</em></td>
<td>75</td>
<td>$15,000</td>
</tr>
<tr>
<td>244</td>
<td><em>Class hours taught</em> (Sum of students/class x hours/class )</td>
<td>30</td>
<td>$7,320</td>
</tr>
<tr>
<td>383</td>
<td><em>AVs used</em> or borrowed</td>
<td>150</td>
<td>$57,450</td>
</tr>
<tr>
<td>826</td>
<td><em>Meeting room use</em></td>
<td>50</td>
<td>$41,300</td>
</tr>
<tr>
<td>8760</td>
<td><em>Hours of computer use</em> (i.e. Internet, MS Word, etc.)</td>
<td>12</td>
<td>$105,120</td>
</tr>
</tbody>
</table>

**TOTAL Value calculation**  
$9,463,726

Library budget: $1,374,721

Return on Investment (ROI) calculation:  Total Retail Cost of Services ÷ Library Budget:  

$9,463,726 ÷ 1,374,721 = $6.88

Return On Investment for Library Services, fiscal 2013:  $6.88

Put another way, for every $1 invested in Library Services, Capital Health gets $6.88 in services.
The usage trend is up, up, up! Our users accessed 7,428 more books this year. They downloaded 30,063 more journal articles, and they accessed the library’s databases 15,811 more time this year over last year.

The Library maintains “Linkout” links in PubMed, so our users can easily get to the full text of an article from PubMed. In 2012, our Linkout hits were 6,164 up from 5,986 in 2011. This is a 3% increase in the times a user did not have to go to the stacks, pick up the journal, and photocopy the article. This happens because of many behind-the-scenes processes, licenses and arrangements with the National Library of Medicine and with other vendors.

We also have usage statistics from the Library’s RefWorks subscription. Refworks is the citation management software that is available to all staff in Capital Health:

Total References added 2012-2013: 18,783
Total RefWorks Logins 2012-2013: 1,331
Total References since start (as of March 31, 2013): 87,044

### Health Sciences Library Budget Fiscal 2013

<table>
<thead>
<tr>
<th>2012-2013</th>
<th>Dartmouth General Hospital</th>
<th>Dickson &amp; Infirmary</th>
<th>Nova Scotia Hospital</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries &amp; Benefits</td>
<td>$0</td>
<td>$433,148</td>
<td>$96,982</td>
<td>$530,130</td>
</tr>
<tr>
<td>Books</td>
<td>$12,360</td>
<td>$52,246</td>
<td>$11,606</td>
<td>$76,212</td>
</tr>
<tr>
<td>Journals</td>
<td>$47,080</td>
<td>$535,525</td>
<td>$103,728</td>
<td>$686,333*</td>
</tr>
<tr>
<td>Supplies</td>
<td>$2,917</td>
<td>$58,694</td>
<td>$20,435</td>
<td>$82,046</td>
</tr>
<tr>
<td>Total</td>
<td>$62,357</td>
<td>$1,079,613</td>
<td>$232,751</td>
<td>$1,374,721</td>
</tr>
</tbody>
</table>

There will be $20,000 added to the Library’s budget from Research Services to cover the cost of Embase and ABI Inform databases. Research Services has been paying for these subscriptions for the past several years. A permanent transfer of funds to the Library’s budget will properly align that money with Library Services.

There will be another increase in the Library’s budget in the coming year to reflect the addition of two staff who coordinate the patient pamphlet process. This was a transfer from Professional Practice to the Library Services cost centre. This hiring was done with a neutral budget impact, as the salaries for the Librarian and Library Technician were equivalent to the salary that was paid for this work in the past.
Collections

Book collection
E-books are the major part of the collection, and we have new vendors from which we purchase. We are able to purchase packages from publishers at very favourable rates. The circulation of paper books is the one area where statistics are down – by 1427. However, our overall book circulation increased by 7,428 as our users embrace e-books.

Systems

The Library catalogue was moved to a new server, and Windows patches were applied without any disruption to service. This is very positive move as we are experiencing consistent, uninterrupted access and it is now rare for us to have to reboot the server.

The Library is now using Version 13 of Inmagic DBTextworks software, which allows us to institute some new features. Users can create lists of selected items, and then e-mail or print them. The Patient Pamphlet search page also has this capability.

Another much-anticipated feature, now available because of this software upgrade, is the ability to create Permalinks to records in our catalogue. This is an essential part of providing service to our users. In the past the links worked, but just for a few months. With Permalinks when we send a link to a catalogue record, that link will 'endure'.

The Library instituted LibGuides in May 2012. LibGuide software is widely used in libraries across North America, and allows the Library to create subject-specific web pages. This is most helpful to users who are overwhelmed with the amount of information available to them. LibGuides provide a starting point with selected e-books, journals, and library training modules focused on areas like Nursing, Physicians, Mental Health etc. We expect LibGuides will be a major part of our work in the coming years, and have instituted a system whereby Library Technicians will look after the upkeep of the LibGuide pages.

The Library is experimenting with the MARC Transformer software. This will allow us to download electronic catalogue records from publishers, and import them directly into the Library catalogue. This will give us better quality records, and reduce the time it takes to catalogue individual records.

As of April 2012, with the excellent help of Darryl Corkery and the Web team, the Library now has a journal archive site where we can post items for which we have paid, but for which the publisher does not supply a website. This will be very important over time as we get more files for which we must act as 'publisher'.
Services

Library Services took on the patient pamphlet process in January 2013. Staff were hired, and an inventory of the patient pamphlet files is underway. The loss of the Audiovisual Department means that the patient pamphlet group will take on some of the roles that Audiovisual played in this process. This is a good fit for the Library as we have been cataloguing and making the patient pamphlets available on the Internet since 2005.

<table>
<thead>
<tr>
<th>Capital Health Library Services</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2012-2013</td>
<td></td>
</tr>
<tr>
<td>Circulation</td>
<td>7889</td>
</tr>
<tr>
<td>Reference Questions</td>
<td>7919</td>
</tr>
<tr>
<td>Interlibrary Loans</td>
<td>22,342</td>
</tr>
<tr>
<td>Online Searches</td>
<td>200</td>
</tr>
<tr>
<td>Numbers trained</td>
<td>706</td>
</tr>
<tr>
<td>Traffic</td>
<td>166,976</td>
</tr>
<tr>
<td>EZ Proxy Hits</td>
<td>118,091</td>
</tr>
<tr>
<td>Website Hits</td>
<td>35,160</td>
</tr>
</tbody>
</table>

Traffic calculation: number of visitors = total count divided by two to account for entering and exiting library.

Highlights

The number of visitors to the libraries continues to climb. In 2011-2012, 162,731 people came into the library. This year that number increased by 4,245 people – an increase of 2%. Even though most of the library’s materials are available online, users continue to come to the Library to meet, to find a quiet area to study or to use the computers. The Infirmary has two small meeting rooms that are in great demand. Those rooms were booked 525 times in 2011, rising to 826 this year – a 57% increase in the use of meeting room space. Finding more meeting room space will be a priority for the library in the coming year.
Training
Katie Mclean is the Librarian Educator for Training. Katie’s report on Training and Education is attached as Appendix A.

Patient Pamphlets
Lara Killian is the Librarian Educator for Patient Pamphlets. Lara’s Patient Education Team report is attached as Appendix B.

Equipment and Facilities

In June 2012, Diane Lawson applied the 5S principles to reorganize the Infirmary Library storage facilities. Diane used the 5S methods on her personal workspace in the past, and shared her knowledge with her library colleagues to make the storage area more efficient.

There was a water leak from the floor above, on May 24, 2012 at the Dickson Library. There was no damage to materials or collections, but as this is the second time we have had water come down the wall, this confirms our desire to get the books off the wall-hung shelving.

Each Library now has an IPad which staff can use to check the Wireless Internet connections, and to train users in the Library’s mobile applications.

The big news for the Dickson and Infirmary Libraries is the installation of wheelchair-accessible doors. This has been an identified need and our users - especially patients in wheelchairs and with IV poles - are delighted that they can now enter the library much more easily.

On November 13, 2012, we got an urgent call looking for computers and printers that staff could use. There was a flood at the Bethune Building, and the Dickson Library was happy to help save the day.

Personnel

Verona Leslie retired on May 31, 2012 after 35 years of service. Verona began at the old Camp Hill hospital, ending her career at the Halifax Infirmary Hospital Library.

Myrna Lawson retired on July 31, 2012 after 30 years of service at the Nova Scotia Hospital Library. Myrna worked in various positions over the years, ending her career at the Nova Scotia Hospital Library.

The Library will greatly miss the combined knowledge and experience of these two people.
The nature of Library work has been changing over the past few years. Gone are the days when we spent our time checking out books and putting them back on the shelves. Now a library job entails showing people how to use databases, how to manage citations, and how to comply with copyright. These kinds of jobs require trained Library Technicians.

We were able to re-align the hours assigned for Library Clerk positions at the Nova Scotia Hospital and the Halifax Infirmary. This allowed the creation of one full-time Library Technician position at the Nova Scotia Hospital and one part-time Library Technician position at the Halifax Infirmary. This re-alignment brings the library’s staffing complement in line with the work we are now doing, as well as brings us up to the current standard for employee staffing in health libraries.

Rob MacKenzie and Heather Zinn are the two Library Technicians hired to fill the two positions at the Nova Scotia Hospital that resulted from Joan Briand’s retirement on March 31, 2012 and Myrna Lawson’s retirement on July 31, 2012.

Diane Lawson, who completed her Library Technician course in March 2012, was the successful candidate for the Halifax Infirmary position that was left vacant with Verona Leslie’s retirement. This leaves one part-time Library Technician position to be filled at the Halifax Infirmary.

In the fall of 2012, Mary Ellen Gurnham provided the opportunity for the Library to take on the coordination of the patient pamphlets. This was supported with enough funds to hire a Librarian Educator and a Library Technician.

Lara Killian started work as the Librarian Educator with responsibility for patient pamphlets in January 7, 2012. Adam Keylor was hired as the Library Technician on March 18, 2012.

Library Staff, April 1, 2013: David Barteaux, Library Technician – Dickson
Kathy Keays, Library Technician – Dickson
Adam Keylor, Library Technician – Nova Scotia Hospital
Lara Killian, Librarian Educator – Nova Scotia Hospital
Katie McLean, Librarian Educator – Dickson
Bill Fancy, Library Technician – Infirmary
Vivien Gorham, Library Technician – Dickson
Diane Lawson, Library Clerk – Infirmary
Penny Logan, Manager Library Services
Rob MacKenzie, Library Technician – Nova Scotia Hospital
Heather Zinn, Library Technician – Nova Scotia Hospital
Internal/External Committees and Activities

We had a visit from Mitzu the Therapy dog.

Mitzu is a Therapy dog that ‘works’ for Capital Health visiting residents of Camp Hill Hospital. She was the guest of honour for Cupcake Day, February 2013, which raised more than $500 for the Society for the Prevention of Cruelty to Animals.


This was a successful year for progress on the Nova Scotia Virtual Health Library (NSVHL). Tracey Barbrick was appointed as the Department of Health and Wellness representative to the NSVHL Steering Committee. Peter Arnburg, from the Department of Health and Wellness was assigned to help with the work and in November 2012, a Statement of Work was developed and posted. The result was that in January 2013, the contract was awarded to Archway Consultants with Wendy Stark as the principal investigator. Penny Logan was elected to act as Chair of the NSVHL Steering Committee. Wendy Stark is working on the project now, with a final report expected in November 2013. See Appendix C for the Statement of Work.

In 2012, the Library participated first as a selected library to test the survey, then participated fully as one of the surveyed libraries in the Benchmarking Canadian Health Facility Libraries survey. Results are expected in 2013.

The Library provided specialized training for a group of Capital Health staff who are taking the Point of Care training. This program is a partnership between Capital Health and Dalhousie University, Faculty of Health Professions, School of Health Sciences. The program is supported by a grant from the Nova Scotia Health Research Foundation. The Library was acknowledged as an important partner when the students gave their presentations at the end of their training program.
Looking Ahead to 2013

We are looking forward to getting the patient pamphlet process up and running. We will use the Inmagic software to good use keeping track of when pamphlets need to be updated, the contact for each pamphlet and steps along the editing process. LibGuides will take a lot of our attention in the coming year as we identify groups and subjects that will most benefit from this software.

The Library’s priorities are to investigate link resolver software, and to see how we can accommodate more learners with more meeting areas and a mobile computer lab.

Penny Logan, Manager Library Services, Capital Health
Appendices

Appendix A. Training & Education Program - 2012-2013
Submitted by Katie McLean, Librarian Educator

Appendix B. Patient Education Team report
January 7 2013 – March 31 2013
Submitted by Lara Killian, Librarian Educator

Appendix C. Nova Scotia Virtual Health Library Business Case/Plan
Statement of Work. Revision December 12, 2012
Appendix A. Training & Education Program - 2012-2013

Submitted by Katie McLean, Librarian Educator
# Training & Education Program - 2012-2013

## Statistics Snapshot

### Attendance & Time Spent:

<table>
<thead>
<tr>
<th>Metric</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of Sessions</td>
<td>91</td>
</tr>
<tr>
<td>Total # of Pre-Scheduled Sessions</td>
<td>57</td>
</tr>
<tr>
<td>Total # of Custom Sessions</td>
<td>34</td>
</tr>
<tr>
<td>By Profession</td>
<td></td>
</tr>
<tr>
<td>Physician</td>
<td>199</td>
</tr>
<tr>
<td>Nurse</td>
<td>111</td>
</tr>
<tr>
<td>Dietitian</td>
<td>52</td>
</tr>
<tr>
<td>Rehabilitation Therapist</td>
<td>2</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>1</td>
</tr>
<tr>
<td>Management</td>
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</tr>
<tr>
<td>Public Health</td>
<td>45</td>
</tr>
<tr>
<td>Social Worker</td>
<td>9</td>
</tr>
<tr>
<td>Mental Health -- Social Worker</td>
<td>16</td>
</tr>
<tr>
<td>Mental Health -- Physician</td>
<td>15</td>
</tr>
<tr>
<td>Mental Health -- Nurse</td>
<td>15</td>
</tr>
<tr>
<td>Other</td>
<td>227</td>
</tr>
<tr>
<td>Total Attendance</td>
<td>706</td>
</tr>
<tr>
<td>Time Spent in Sessions (Librarian Educator)</td>
<td>120</td>
</tr>
<tr>
<td>Time Spent Preparing Sessions (Librarian Educator)</td>
<td>124</td>
</tr>
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### Relevant Website Statistics:

<table>
<thead>
<tr>
<th>URL</th>
<th>Pageviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>/healthscienceslibrary/events</td>
<td>2,476</td>
</tr>
<tr>
<td>/healthscienceslibrary/librarytraining</td>
<td>2,354</td>
</tr>
<tr>
<td>/healthscienceslibrary/refworks</td>
<td>1,243</td>
</tr>
<tr>
<td>/healthscienceslibrary/resourcesresidents</td>
<td>1,117</td>
</tr>
<tr>
<td>(Removed December 2012 replaced by Starting Point Guides)</td>
<td></td>
</tr>
<tr>
<td>/healthscienceslibrary/resourcesnurses</td>
<td>1,012</td>
</tr>
<tr>
<td>(Removed December 2012 replaced by Starting Point Guides)</td>
<td></td>
</tr>
</tbody>
</table>
Participant Evaluations
Based on training evaluations, the vast majority of participants either strongly agreed or agreed that sessions:

- met expectations
- were effectively organized
- were an appropriate length of time

The majority of participants also either strongly agreed or agreed that handouts were useful and that they would likely use the information they gained through sessions again.

Top additions or changes suggested by participants include:

- Lack of time in relation to individual learning needs (computer skills, access to information skills, etc.)
- More time for searching through example questions
- Faster computers; up-to-date systems and software would allow for a better use of time

Participants found the instructor:

- approachable
- knowledgeable
- helpful overall

Selected Core Session Feedback Quotes:

- Interactive and helpful
- Good to know there is ongoing support
- Excellent follow-up access
- Lots of questions and need for more capacity in this area
- It is great to be able to get more online
- A lot of information! It is good to offer private sessions
- Great pace, love that it was individualized for us

Participants heard about training opportunities through a number of avenues.
Participants cited the following top sources:
Custom Sessions, Research & Special Project Groups
As a complement to regular core sessions offered, the Training and Education Program also develops and delivers custom sessions on demand. The below selected sessions developed in 2012-2013 provide an overview of the regular needs of departments, research and project groups within Capital Health.

Public Health – Understanding Communities Unit
*Great that we can get it online!*

- The Library has worked with Public Health on several occasions in the past to develop and support searching of the evidence. This year, the Librarian Educator partnered with the Understanding Communities Unit to support the Population Health Status Report. Several sessions were offered throughout the year in an effort to support group members locate and evaluate the evidence on topics such as smoking, obesity and dental health.

Early Psychosis Program
*Very informative and helpful.*

- Two sessions were offered to the Early Psychosis Program research group, who were looking at predictors of long-term disease course/outcomes and genetic links. The sessions focused on effective search strategies and appropriate resources and citation management in RefWorks.

Infection Control
*This [training session] was very helpful and it's good to know that there is ongoing support.*

- An introductory session and resource guide was developed for the Infection Control Department at Capital Health. This coincided with the launch of LibGuides in December 2012, making this group one of the first outside of Physicians and Nurses to get a new resource page - [http://libguides.cdha.nshealth.ca/InfectionControl](http://libguides.cdha.nshealth.ca/InfectionControl)

Food & Nutrition Services
*It [session on searching for food additives] was very unique for us and [the instructor] made it extremely relevant and productive.*
Dieticians working in Food & Nutrition Services at Capital Health requested a series of sessions focused on searching for food allergies and additives. Two sessions were delivered, focused on searching evidence-based resources such including Natural Standard and PubMed: Dietary Supplements.

Nurses of 9A General Surgery – Education Day
Good to know about the apps available to download!

The Library was invited by Nurse Educator Laura Carmichael to participate in the Education Days for 9A General Surgery. Three sessions to different groups of front-line nursing staff were offered, focused on quick access to condition overviews and drug values. How to access and use Library-provided mobile apps was also covered.

Dalhousie Family Medicine Clinics – Continuing Faculty Development
I will try the applications and the PICO page which are now on my phone.
I feel I can ask questions to librarians if I have any. Keep them [librarians] coming!

The Library visits Dalhousie Family Medicine Clinics once each year for Continuing Faculty Development. This year’s session focused on finding the evidence using point-of-care tools, accessing Library-provided mobile apps and locating patient pamphlets.

Orientations
Increased demand for orientation sessions offered through the Library’s Training and Education Program was observed this year.
A Library Services overview has been added to the general employee orientation package.
Currently, the Library regularly participates in orientations for:

- New Mental Health Nursing Staff
- Graduate Dietetic Internship Program
- Residents
- Clinical Clerks

The Graduate Dietetic Internship Program is the newest group to request Training and Education Program involvement as a regular part of yearly orientation. Participation in the Dietician Internship Program has proven very successful. The Librarian Educator holds three separate sessions throughout the Internship (Resources & Searching > Access & RefWorks > Critical Appraisal). Since all interns are expected to produce a project to complete the program, the Library has seen an increase in interns accessing
the library for article requests and individual meetings with the Librarian Educator to assist in project focus and literature searches.

**Special Events**
Several key training events did not occur this fiscal year, most notably Capital Health Week and the Physicians Spring Fling. Organizers were contacted by the Library as to why, and both events are hoped to resume in 2013-2014.

**Core Session Revisions**
In the past, attendees to pre-scheduled sessions opted more towards the introductory courses: Skills for Life, PubMed Essentials, RefWorks: Getting Started. The regular schedule of “Core” sessions has been adapted to reflect this. A group of new “Special Topic” sessions, which focus on new technologies (eBooks, Apps etc.) and patient information have been added on a rotating basis.

**Current Regular Offerings (Once a month, September - June):**

* Becoming a Savvy Searcher: Ten Steps to Literature Searching
  - Develop an answerable question (PICO)
  - Use Boolean logic and related search concepts
  - Navigate the Health Sciences Library web page

* PubMed Essentials
  - Carry out an effective search
  - Apply limits
  - Access and order articles

* RefWorks Bootcamp
  - Create a RefWorks account
  - Create folders and add references
  - Import and export references

**Special Topics:**

* eBooks at the Library
* Getting the Most out of Google
* Keeping Current
* Mobile Apps at the Library
* Evaluating Web-based Information

**Recommendations for 2013-2014**
Based on the above data collection and reflection, there are several areas that would
benefit from improvement and development. The following points are provided as a suggestive list of areas where work needs to be done. This list is ordered by number to convey priority.

1. **Development & Promotion of LibGuides**

   A large portion of training program users are groups working on projects (research, patient care related projects, guidelines, etc.). It is much easier for both instructor and learner to focus in on the appropriate resources using questions that are applicable to the group according to clinical discipline or project purpose (i.e. nurse, physician, physiotherapist, etc.). The LibGuides content management system allows the Library to showcase essential databases, eBooks, etc. and organize these resources by subject or clinical specialty. A need for this type of outreach and access by speciality is also seen in our website statistics (via Google Analytics), as “Resources for Residents” and “Resources for Nurses” were regularly in the top 10 pages for hits. While only launched for a short period of 2013, the Starting Points/LibGuides section of the Capital Health website has surpassed other, long standing webpages. Having sessions throughout the year on using specific LibGuides will promote the service, make searching and using library resources even easier, and introduce new groups to using our service by encouraging staff to request a LibGuide for their department, clinical discipline or project.

2. **Access to Adequate Computers for Learning Events**

   Training participants often commented on the state of computers to use for learning within Capital Health. It is very difficult to instruct on computers that have very different set-ups across the organization, let alone in the same computer lab. A solution may be to investigate mobile lab options, with hardware and software being maintained by library staff.

3. **Increased Learning Opportunities for General Computer and Software Skills**

   Attendance to Computer Skills Drop-ins varied greatly in 2012-2013. Library technicians have taken on the role of hosting and assisting clients during these sessions. There is a real need for constant and easy access to both software and computer support.
4. **Standardize User Groups for Statistics Gathering Across Library Services**

More meaningful statistics could be gathered if similar categories were captured across Library services. It would be easier to draw connections between increases in certain services if data categories, such as user groups, were standardized. As LibGuides are developed, it is recommended that client categories be standardized and captured across services such as Training events and Literature Search requests.

5. **Critical Appraisal Focused Sessions / Evaluating Information & Critical Thinking**

Clients looking for assistance or facilitation with Critical Appraisal continues. This usually occurs as a result of working with a specific group over time. It is recommended that Critical Appraisal tools (checklists) are kept on hand, included in LibGuides, and the option of a Critical Appraisal component be made available to groups/individuals who are working with the library on skill development and/or a specific project. A focused research page for Critical Appraisal should also be considered.

Submitted by: Katie McLean, Librarian Educator
Appendix B. Patient Education Team report
January 7 2013 – March 31 2013

Submitted by Lara Killian, Librarian Educator
For 2012-2013 Library annual report
January 7 2013 – March 31 2013

Patient Education Team report

In late 2012 the Health Sciences Library took over the task of managing the patient education pamphlets process. In January 2013 a Librarian Educator, Lara Killian, was hired to lead the Patient Education Team. The transition involved reorganizing thousands of files from multiple sources, including those of the outgoing Patient Education Coordinator, Library Services, and the former Audio Visual Department. No organizational principles of records management had previously been applied to the files that documented the creation and revision of thousands of pamphlets, dating back to approximately 1997. Physical as well as digital files needed to be reorganized in a consistent way. As the transition occurred there were approximately 1150 active pamphlets in the system, used across all areas of Capital Health.

In order to ensure a consistent and appealing look to the pamphlets, the Library purchased Adobe InDesign software, the industry standard for graphic design work. Lara completed extensive video-based training to learn how to effectively use InDesign for pamphlet projects through the online tutorial service Lynda.com.

In mid-March 2013 the Library hired a new Library Technician to make up the rest of the Patient Education Team and assist in getting the process back up to full speed. Adam Keylor spent considerable time checking active pamphlet files and folders for missing PDFs and filling in some of the gaps in the records that the Team inherited from multiple sources. This file management work was critical to getting the files organized so that inquiries about pamphlet status and editable files could be answered in a timely fashion.

Also in early 2013 Lara worked through revising the comprehensive Capital Health Patient Education Guidelines to reflect the closure of the AV department and transition of printing services to Dalhousie University’s Print Shop. The revision was completed in March 2013 and includes information about the current process of creating and revising patient education materials, and approval forms for individual projects.
Appendix C. Nova Scotia Virtual Health Library Business Case/Plan

Statement of Work. Revision December 12, 2012
Nova Scotia Virtual Health Library
Business Case / Plan

Statement of Work (SOW)

December 4, 2012
Revision 1: December 6, 2012
Revision 2: December 12, 2012
Introduction

Library Directors for the IWK, Capital Health, and Dalhousie University’s Kellogg Health Sciences Library, and the Nova Scotia Department of Health and Wellness’s Director of Policy and Planning have formed a Working Group for the Nova Scotia Virtual Health Library (NSVHL). With financial support from the interested members of the Academic Health Council, the Working Group is exploring the development of a provincial consortium of health libraries and knowledge services.

In 2009, a survey was used to collect information from potential members of the consortium to determine if:

- A need exists for a consortium
- A consortium is feasible and to assist with the planning and development process

The survey was sent to all organizations thought to provide health knowledge and information services to health care workers and health care students in Nova Scotia, including district health authorities (DHAs), post-secondary education institutions, Department of Health and Wellness, associations for health professionals and regulatory bodies for health professionals with 24 valid questionnaires returned. A final report on the survey results was presented to members of the Academic Health Council in June 2010.

The purpose of the consortium is to provide economical, electronic access to key electronic resources for practitioners, DHAs, students, and government employees (e.g. staff of the Department of Health and Wellness) in the province. Currently, Nova Scotia health libraries and services outside of the University and College environment are not well positioned to cooperate on purchases or to speak with a common voice. The creation of the consortium would enable the health libraries to pursue opportunities such as a proposed off-site repository, consortial digital collections initiatives, and partnering with the broader library community. Similar projects are well underway in other provinces to support the demand for health literature by professional groups and health organizations outside the academic milieu.

The purpose of this SOW is to invite interested and qualified consultants/firms to submit a proposal for the development of a business case / plan, including a business / project plan funding, acquisition and implementation of the an automated solution for the Nova Scotia Virtual Health Library. The proposal must build on the results and recommendations of the Nova Scotia Virtual Health Library Survey: Final Report, 2009. The proposal is to be fixed price and not to exceed $100,000 in total.

The contract will be through the Health Association Nova Scotia (HANS) who will be the financial and legal representative for the consortium. The Working Group for the Nova Scotia Health Library (Working Group), as identified earlier, will advise and liaise with the successful proponent.
Nova Scotia Virtual Library
Statement of Work

**Situation Overview**

The proposed Nova Scotia Virtual Health Library (NSVHL) is built upon the work of the Atlantic Health Knowledge Partnership (AHKP). The AHKP is an informal partnership of libraries including academic, public, association, government, hospital and health authority libraries, which has networked health knowledge and library resources for both Nova Scotia and Newfoundland and Labrador. The informal and voluntary nature of the AHKP partnership is challenged by a lack of operational and decision making infrastructure, representation by potential stakeholders and a plan for moving forward.

The virtual library system is expected to address the issues of:
- "oversubscribing" to particular titles by multiple institutions
- Lack of province wide support for the information/knowledge needs of Nova Scotia health professionals
- Inequitable access to electronic health knowledge resources, across the province
- Information demands of researchers and policy analysts who partner across institutions
- Lack of Library support and training for users of electronic resources
- Implementation of the infrastructure i.e. a portal for transitioning health knowledge electronic support across the province
- Opportunities for linkage and integration between the electronic health record, electronic research and clinical decision support point of care tools that libraries can provide and clinicians need
- Lack of resources to support health professionals graduating from increasingly evidence-based curriculums into practice situations with limited access to decision support tools, etc.
- Best practice for library/knowledge services

**Objective and Scope**

The purpose of the SOW is to hire a consultant(s) to develop a business case / plan for implementation of a technology solution for a virtual library. This will include the development of a provincial consortium of health libraries and knowledge services to provide economical, electronic access to key electronic resources for practitioners, DHAs, students, and government employees (e.g. staff of the Department of Health and Wellness) in the province.

Additional phases of work, such as the implementation of the NSVHL are outside the scope of this SOW.
Overview

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Nova Scotia Virtual Health Library Business Case / Plan</th>
</tr>
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<tbody>
<tr>
<td>Client Department</td>
<td>Health Association of Nova Scotia</td>
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<tr>
<td>Project Lead</td>
<td>Penny Logan</td>
</tr>
<tr>
<td></td>
<td>Manager Library Services</td>
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<td>Capital Health</td>
</tr>
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<td></td>
<td>Halifax</td>
</tr>
<tr>
<td>Contact e-Mail</td>
<td><a href="mailto:Penny.Logan@cdha.nshealth.ca">Penny.Logan@cdha.nshealth.ca</a></td>
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<tr>
<td>SOW Contact</td>
<td>Peter Arnburg</td>
</tr>
<tr>
<td></td>
<td>Director, Project and portfolio Management</td>
</tr>
<tr>
<td></td>
<td>Department of Health and Wellness</td>
</tr>
<tr>
<td>Contact Phone</td>
<td>902.424.6833</td>
</tr>
<tr>
<td>Contact e-Mail</td>
<td><a href="mailto:Peter.Arnburg@gov.ns.ca">Peter.Arnburg@gov.ns.ca</a></td>
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<td>January 28, 2013</td>
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<tr>
<td>End date</td>
<td>June 28, 2013</td>
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Service Requirements

The development of a comprehensive business case / plan for the NSVHL.

Business Case/Plan Requirements

Specifically the business case / plan must include, but not be limited to:

- Executive Summary
- Situation assessment and problem statement
  - Description of current business state
  - Problem to be addressed
- Solution Description
  - Proposed future business state
  - Gap Analysis
  - Change management approach
  - Approaches of other Canadian jurisdictions
  - Needs assessment and desired outcomes
- Cost benefit analysis
  - Financial
  - Intangible / Non-quantitative
- Operational plan, including costs
- Options analysis and recommendation
Nova Scotia Virtual Library
Statement of Work

- Risk analysis
- Project plan with tasks and timelines
- Operational Plan
- Marketing and Communication Plan
- Evaluation and reporting framework

Detailed Requirements

The Business Plan must guide the development and implementation of the NSVHL. It must document and clearly define a detailed framework for the successful development of the NSVHL. It is to provide recommendations and specifications for the establishment, infrastructure, operation, staffing, governance, an evaluation framework and a sustainable funding formula which can lead to implementation of the NSVHL.

The Business case / plan will use the Nova Scotia Virtual Health Library Survey: final Report 2009 (see Appendix A) as a starting point and the scope of the work will include, but not be limited to:

- Consultations with key stakeholders and potential network users
- Analysis of existing models which display a range of alternatives for funding and service delivery
- Innovative ideas for managing library resources differently e.g. Integration of electronic resources with electronic health record
- Analysis of best practices
- Analysis of the unique provincial and jurisdictional context in which the NSVHL will operate

The work must include:

- Develop a project charter and plan
- Undertake a strategic environmental analysis (SWOT) of approaches used by other Canadian jurisdictions.
- Detailed descriptions of the services, staffing, operational requirements and resources to be delivered through the NSVHL and how this will complement existing health libraries and knowledge services in Nova Scotia
- Infrastructure planning/development i.e. a portal to enable the NSVHL to link electronically with other established entities
- Models for training and support of end users of library/knowledge services
- Evaluation framework including outcomes measurement
- Analysis of stakeholder roles, responsibilities and commitments
- Governance framework
- Marketing and communications plan
- Sustainable funding plan for the first 2 full operating years, including capital and operating costs, revenue sources, return on investment and identification of possible options for reducing costs
- Detailed implementation plan including timelines
- Identification of the potential membership of the consortium
- Results of consultations with potential funding bodies, partners, groups and individuals impacted by the development of the consortium
Opportunities for integration of electronic library resources with electronic health records
Explore opportunities for collaboration with the work being done in the university sector around Shared Repository and Library Services

**Deliverables**

The desired outcome of this work will be to provide the Academic Council with a finalized version of the Business Case / Plan. Your proposal is to identify other deliverables which will include but not be limited to:

- Project Charter
- Governance Structure
- Regular status reports and other reports as required
- Business Case/Plan

All project deliverables are to be presented to the Project Lead and/or their designated representatives for review, approval and acceptance by the Working Group. The Project Consultant(s) will report to the Project Lead.

**Questions**

The proponent is responsible for obtaining any needed clarification of the SOW requirements while the SOW is open.

To facilitate a clear understanding of what is required the proponent is invited to meet with the Working Group for 1 hour between 8:30 am – 4:30 pm Atlantic:
- Wednesday, December 11, 2012

Each proponent is invited to provide background on their experience and how it pertains to this SOW. Remaining time can be used to seek clarification on the Statement of Work. The meeting can be in person or video conference (or some equivalent electronic means).

Please let the person designated as SOW Contact know if you are interested no later than 4:30pm Atlantic on Thursday, December 6, 2012

Questions subsequent to the individual meetings are to be directed via e-mail to the Project Lead and SOW Contact.

All questions and responses that are thought to materially affect the SOW requirements, project scope, time lines, etc. or are of interest to all proponents may be made available to all proponents via e-mail.

**Conflict of Interest**

Proponents are required to disclose potential or perceived conflict of interest issues prior to the closing of this SOW by sending an e-mail to the SOW contact.
Confidentiality
All information gathered from stakeholders or others interviewed during work on this project is confidential. It must not be used by the proponent for work on other projects or disclosed to others without the prior written consent of the Working Group.

Personal Information
The proponent agrees to safeguard any personal information pertaining to individuals in accordance with all applicable legislation/regulations e.g. Personal Information Disclosure Protection Act (PIIDPA), the Freedom of Information and Protection of Privacy Act and any other applicable statute or regulation.

Contract
After the evaluation, the successful proponent(s) will be expected to sign a contract (Appendix B) that will constitute the legal agreement with the Health Association Nova Scotia for this program and govern all aspects of the services to be delivered. It will incorporate the content of this RFP and the successful proposal, and any other relevant terms. This document will be updated as a part of the award process to reflect the proponent’s name, contact information, address, applicable schedules, etc.
It is important that you have read and understood the contract as the expectation is that the terms will be accepted and the contract signed as is. If you have any questions or concerns, it is important these be brought to the attention of the SOW Contact before the closing date for consideration. It is also to be understood that HANS may want to introduce some contract changes if it believes these changes are necessary.

Primary Work Location
The Working Group is not responsible for the provision of workspace or associated services to the successful proponent and, as such the successful bidder must supply their own space. It is recognized that some of the bidders may be out of province and in their submission (Approach) must address how and where the work will be done and identify all on-site visits.

Approach
The vendor is to propose an approach and appropriate resource (s) to successfully complete the work and estimated costs, including travel and accommodations, not to exceed $100,000 exclusive of taxes. If you feel the work cannot be done for $100,000, please provide an alternative plan that can be done within that budget.

The time line has been determined by the Working Group and is considered reasonable. Please include in the project approach challenges and mitigation to ensure the end date, previously noted is met. If you feel the timeline is not achievable, also please provide a plan which you feel is reasonable as well as an alternative plan that will meet the end date. All work will be directed to one vendor who can successfully provide a satisfactory approach / solution and acceptable candidates.

Relevant Experience and Qualifications
The successful candidate(s) must have:

- extensive business case and planning experience;
- demonstrated research and analysis experience;
- project management experience as it pertains to a business case / plan;
- strong facilitation and oral and written communication skills;
- experience working with groups consisting of a diverse membership
- experience with Microsoft Project

Preference will be given to those with demonstrated library and health care experience.

**Responding Information:**

The Working Group is seeking a proposal as per the chart below:

Please provide a response by 2:00 pm, December 21, 2012. When responding please provide the following information:

I. Executive Summary
II. Understanding of requirements in your own words
III. Project Approach and Plan including risk mitigation plan to ensure the deadline date is met
IV. Proposed project team including name and role
V. Relevant Experience and qualifications of each team member
VI. Demonstrated experience with comparable projects
VII. References – 3 per consultant
VIII. Pricing – total fixed price and per diem and Nova Scotia Procurement service code of each project team member
IX. Declaration of Contract Intentions
X. Availability to begin and conclude work within the dates in the Overview

The response is to be in Microsoft Word or pdf and is to be sent electronically by email.

For more information, contact:

Peter Arnburg, Director, Project and Portfolio Management at 902-424-6833.
### Evaluation Criteria:

The evaluation table is divided into mandatory criteria and desirable criteria. Failure to meet any of the mandatory requirements will result in disqualification of the bid. The Working Group reserves the right to have oral presentations at the end of qualifying scoring.

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<tr>
<th>Mandatory Criterion</th>
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<td>Proponent must be listed on Province of Nova Scotia Standing Offer List.</td>
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<td>Price of the bid must be $100,000 or less</td>
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<td>Proposed consultant(s) must have demonstrated experience doing business cases / plans.</td>
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<th>Desirable Criterion</th>
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<td>Relevant Experience / Qualifications</td>
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<td>Financial Proposal</td>
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<td><strong>TOTAL (minimum score of 109 or 70% to qualify)</strong></td>
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</tbody>
</table>

**Presentation (optional)**

*Please submit your response by 2:00 pm, December 21, 2012 to Peter.Arnburg@gov.ns.ca*

Included as a separate Document.
Appendix B: Contract

Included as a separate Document.