

MCMLA Research Committee Annual Report, 2005-2006 – Cindy Schmidt

Members:

Cindy Schmidt (2006) NE
Cam Gentry (2006) KS
Whitney Davison-Turley (2007) KS
Claire Hamasu (2008) UT
Judy Fentuch (2008) MO
Ex Officio: Roz Dudden (2006)

Priorities:

Continue to increase the visibility of research within the Chapter.

Encourage submission of articles for possible inclusion in publications such as the Journal of Hospital Librarianship, JMLA, Medical Reference Quarterly, etc.

Objective 1: Raise awareness and level of knowledge of members regarding research in librarianship.

Action 1: Journal Club on the “Future of Libraries” led by Whitney Davison-Turley and Michelle Beattie

Four, journal clubs were conducted. Each journal club used a different communication method. The methods used were: 1) in person, 2) teleconference, 3) e-mail, and 4) online chat.

Action 2: Used the MCMLA listserv to acknowledge the research activities and publications of chapter members.

Cindy attempted to keep track of publications of chapter members and when aware of publications sent congratulations through the MCMLA listserv.

Action 3: Use the MCMLA listserv to make MCMLA members aware of research funding possibilities.

When aware of funding possibilities not already publicized on the MCMLA listserv, Cindy sent messages about these possibilities to the listserv.

Action 4: Use the MCMLA listserv and NN/LM-sponsored award to promote submission of research-oriented posters and presentations to the annual MCMLA convention and to promote evaluation of library programs that will make it possible to present the work on these programs as research in posters and presentations.

Cindy sent messages to the MCMLA Listserv that publicized the research awards, encouraged submission of poster or presentation proposals to the MCMLA 2006 Planning Committee, and encouraged those considering submission of poster or presentation proposals to include data analysis in their posters and presentations.

Objective 2: Keep MCMLA members involved as appropriate in MLA Benchmarking activity.

Action: No help with benchmarking activities was needed this year.

Priorities:

Continue to develop collaborative relationships with other Chapters, associations and organizations

Continue to partner with graduate schools of library science in joint recruitment, research and educational initiatives.

Plan and investigate the availability of grant and logistic support for a research project involving multiple and varied institutions served by MCMLA members.

Objective 3: Plan and investigate the availability of grant and logistic support for a research project involving multiple and varied institutions served by MCMLA members.

Action: During the Research Committee's 2003-2004 journal club, the possibility of repeating the King's study of the clinical usefulness of librarian-mediated search services was discussed (King, D. N. (1987). The contribution of hospital library information services to clinical care: A study in eight hospitals. *Bulletin of the Medical Library Association; Bulletin of the Medical Library Association*, 75(4), 291-301). Cindy Schmidt submitted a proposal for NIH/NLM funding of this project prior to the June 2005 NIH submission deadline. The proposal was not funded, but the reviewers felt the project was important and the reviewers' criticisms can be addressed. At this point, we could revise the grant and resubmit or, as some have suggested, the chapter might fund the research.

Regardless of the funding source, it would be best to consider the criticisms of the reviewers. Addressing the substantive criticisms will strengthen the study design. Two of the criticisms, criticisms that might make the study more difficult for the chapter, or less appealing to the chapter, are addressed below:

1. The NIH reviewers were worried about the possibility of bias in a study of library services conducted by librarians. Addressing this concern would require recruitment of a non-librarian advisory board or a non-librarian PI. Regardless of the source of funding, Cindy Schmidt no longer has time to serve as PI. She will

be happy to turn all project/grant-related documents over to another capable and interested investigator. Paying a non-librarian PI would be potentially rather costly and recruiting a non-librarian committee may be difficult. If an advisory board is recruited, MCMLA Research Committee members had decided it would be best to involve an expert or experts in conducting quality of care studies to serve as members of any advisory board. These experts would be especially helpful in reviewing questionnaires that would be sent to the healthcare professionals that requested librarian-mediated searches during the course of the study.

2. The NIH reviewers felt that the study statistician would need to provide estimates of the numbers of participants needed to produce representative samples. The statistician would need to estimate the number of hospitals that would need to participate per type of hospital (urban vs. rural, etc), the number of participants per profession from each participating hospital, etc. before we would know if the study would produce representative figures. We had planned to include this activity during the planning phase of the two-year grant period thinking that the study was feasible and that we just needed numbers.

Aspects of the study, as it was defined in the grant proposal, that would, potentially, make it difficult for the chapter to fund:

1. A statistician's time is absolutely required. A UNMC statistician had estimated that a 5% FTE time commitment would be required during the planning phase and a 10% FTE time commitment would be required during the data analysis phase of the project.

2. Either the PI or a grant coordinator will need to spend a great deal of time coordinating the project. In the grant proposal, Cindy had budgeted for a 50% FTE grant coordinator and a 10-20% time commitment from the PI. The grant reviewers felt the estimate for the PI commitment was overly conservative during the final year (10% estimate).

3. It will make it much easier to recruit hospital liaisons, the non-library-affiliated hospital personnel who recruit study participants, if these individuals receive an honorarium each year in return for their efforts. We had planned to pay \$200 - \$400/year to each liaison. Depending on the number of participating institutions (we had estimated 20-40) the total amount needed could be significant.