Library Support for Research & eScience: Drawing upon Health Sciences Models

Librarians & eScience: Focusing Towards 20/20 CIC Center for Library Initiatives Conference May 12, 2008 Purdue University

Neil Rambo University of Washington Libraries ARL Visiting Program Officer



□Patient care mission

□Influence of sponsored research

□Connection between professional training & practice



□Patient care mission

- Human life
- □ Time critical
- □ Highly regulated environment
- □ Cost factor

Influence of sponsored research

Connection between professional training & practice



□Patient care mission

□Influence of sponsored research

- □ Time pressures
- □ Competition
- □ Accountability

Connection between professional training & practice



□Patient care mission

□Influence of sponsored research

□Connection between professional training & practice Undergraduate medical education → clinical rotations → residency → professional practice



Impact on health sciences libraries

Heightened focus on user needs

Health professional

Patient

□Early adopters of technology

□Focus on problem solving

- \Box Discovery/access \rightarrow analysis/application
- \Box Bibliography \rightarrow evidence



□Clinical medical librarian

Liaison librarian

[Integrated advanced information management systems]

Informationist



Clinical medical librarian

□ Piloted in 1970s

□ Literature Attached To CHart (LATCH)

 \Box Paper \rightarrow EMR

 \Box Evolution from searching \rightarrow teaching EBM techniques

□ Scalability issue

Liaison librarian

[Integrated advanced information management systems]Informationist



Clinical medical librarian

Liaison librarian

Librarian assigned to unit/department

Learn professional language, issues, culture

Less selector and more consultant/trainer/team member

Look for opportunities to connect & add value

□ Scalability issue

[Integrated advanced information management systems]Informationist



Clinical medical librarian

Liaison librarian

□[Integrated advanced information management systems]

□ 1980s-90s, Nina Matheson

Library as part of an enterprise information system

Library integrated in a technology/organization nexus

"…context-appropriate information, linking the published biomedical knowledge base with clinical, research, educational and administrative information…"

Informationist



Clinical medical librarian

Liaison librarian

[Integrated advanced information management systems]

Informationist (information-specialist-in-context)

- 2000, Valerie Florance & Frank Davidoff
- Dual track professional training
- □ NIH pilot funding for individuals/institutions (2003, 2006)



Clinical medical librarian

Liaison librarian

□[Integrated advanced information management systems]

Informationist



From service to added value

Environment

- Ubiquitous access
- Ubiquitous technology
- Ubiquitous content
- ↑ Time pressures
- ↑ Funding competition
- \checkmark Attention
- Awash in information chaos

Service → Added Value

Save time: synthesized results
Improve research productivity
Improve compliance
↓ Costs (?)
PIM
Publication assistance
Data management



(a little of...) What I don't know

□*How transferable are these models to other environments?*

Basic idea is to embed within user environment

Do different professional/academic environments require different models of engagement?



Knowledge transfer life cycle

QuickTime[™] and a TIFF (Uncompressed) decompressor are needed to see this picture.

Research Library focus

Charles Humphrey, "E-Science and the Life Cycle of Research" (2006) available online at http://datalib.library.ualberta.ca/~humphrey/lifecycle-science060308.doc



Knowledge transfer life cycle

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Research Library focus needs to shift "up stream"

Charles Humphrey, "E-Science and the Life Cycle of Research" (2006) available online at http://datalib.library.ualberta.ca/~humphrey/lifecycle-science060308.doc



How do we get there?

The organizational structure of our libraries needs to be reconceived.

Our libraries need to be nimbler and faster to respond, while simultaneously being the conservator of record.
 Balancing risk averse with risk capable

□ We need new kinds of staff with new skills.

□*We need to invest in high risk programs/services …* without damaging our reputation for trustworthiness



