

**LAUC GRANTS PROGRAM
END OF FUNDING REPORT FORM**

NOTE: Information included in this report may be reprinted or posted on the LAUC website for dissemination to UCOP, other UC Libraries, and future potential LAUC grant applicants.

Primary Applicant

Co-Applicant(s)

Campus of Primary Applicant

E-Mail and Telephone of Primary Applicant

TITLE OF PROJECT

Award Amount

Original Abstract as Submitted

ACCOMPLISHMENTS AND EVALUATION

Please respond to the following as appropriate:

- Describe what was achieved during the time period of the grant.
- What aspects were completed as proposed? If your study could not be completed as proposed, explain how your plans were altered.
- Did the project accomplish what it intended? Did it make a difference?
- Include any relevant quantitative data, if applicable (e.g. How many individuals have benefited from this project? In what way? This may include various output measures such as circulation, reference transactions, program attendance, survey responses, etc. as appropriate.)
- Include any anecdotes, if applicable.
- What would you do differently next time, if anything?

Is your project completed?

Yes

No

If No, what is needed to complete the project? More time, funds?

FINANCIAL STATEMENT

Please explain how the funds received were spent. Attach your original budget and indicate how well your estimates matched with actual expenditures. Receipts are not necessary.

SHARING YOUR PRODUCT/RESULTS

What are your plans for disseminating the results of your work? If it will be a web page or product, or published article or book, when will it be available to the public? Include citations/URLs if known.

Original Abstracts as Submitted, Capdarest-Arest:

- 1) **Envisioning Success: Breaking Down Silos to Engage throughout the Library and Grow Institutional Impact** - Megan G. Van Noord & Nicole Capdarest-Arest [paper presentation]

Background: In the academic library landscape, it can be challenging to work across multiple units to create programmatic innovations. At a university with a large library system, including two health sciences libraries operating within the larger organizational construct of the main campus library, we had come to a place wherein, due to organizational structures and “habits of comfort,” groups were not connecting as departments functioned largely as disconnected silos. A reorganization and contiguous personnel changes provided opportunities to bridge the gaps across silos, resulting in better teamwork across units, and also significant impacts to establishing new services to the library’s communities.

Description: Breaking down silos in the library and intentionally seeking out cross-functional partnerships to meet service goals catalyzed our services to our external constituents in a way that would have not been possible for each unit/silo individually. We worked across campus libraries - using videoconference as an integral tool - and research units to create a multi-unit service framework model to launch: a systematic review service with enhanced meta-analysis/text analysis features, a bibliometrics service, and health science data services - all in under a year’s time. This ability to co-create with groups within and external to the library to create multiple new projects that positively impact the university mission are notable and appreciated, as exemplified by this feedback: “...has made a difference at our university, exemplified the mission of institutional cross-partnerships, and has positively impacted our research mission.”

Conclusion: It is easy to become ingrained in institutional structures and to function in comfortable silos. By re-envisioning organizational challenges as opportunities for innovation, we created new user-centered service frameworks that facilitated service growth and demonstrated impact of the library to the institution. Keys to success included: administrative and team member buy-in that user needs are best met through interdepartmental collaboration; creating shared goals and gaining team consensus around project vision and scope; willingness to craft teams based on experience and skillset, rather than by department, and/or including team members external to the library; openness to different perspectives and problem-solving approaches.

- 2) **Setting Your Sights on an Interprofessional Library Team? Make Way for a Health Library Informaticist!** Nicole Capdarest-Arest & Christy E. Navarro [paper presentation]

Background: Health sciences libraries are hubs offering centralized resources and services to expand the knowledge and efficiencies of their communities. Increasingly with the growth of big data, open data, and the electronic health record (EHR), clinical and translational researchers must be more data literate. At our biomedical campus, we noticed an increased need for data literacy training, including assistance with navigating health system components related to data across the research lifecycle. Engaging with key stakeholders, we advocated and garnered support for our desire to facilitate fulfilling this need, framing conversations around meeting significant institutional objectives, maximizing efficiencies, and achieving growth potential.

Description: Just as the communities in which we exist are interprofessional in nature in order to achieve all needs of research, patient care, and education, our libraries also need to have personnel with skillsets reflective of the 21st century information environment where “information” includes not only literature, but data (including EHR data). We worked with leadership in the school of medicine and the clinical and translational science center to co-fund a new librarian position (the “informaticist”) focused on meeting the needs for data literacy training and health sciences data landscape navigation. We recruited across a variety of professions – information science, public health, informatics, and more – to achieve our goal of filling this informaticist role with a person knowledgeable in the complexities of privacy, compliance, data systems, and the research data lifecycle.

Conclusion: Advocating for co-sponsorship of this interprofessional role increased the library’s visibility as an important campus partner in meeting strategic goals of increasing institution-wide data literacy and preparation for conducting and navigating data-driven research, which in turn increase institutional competitive advantage and provide efficiencies in research and education. Capitalizing on interprofessional expertise of an informaticist, such as in informatics and privacy, brings more breadth and depth of partnership opportunities to the library. We already see that successes in this role solidify the library’s position as a vibrant hub for growing knowledge around compliant and evidence-based data creation, use, and dissemination.

3) **Envision Yourself in the Electronic Health Record: What You Need to Know to Embed Library Services** – Nicole Capdarest-Arest, Frances Drone-Silvers, Alison P. Gehred, Judy Hansen, Erica Lake, Shawn Steidinger [immersion session]

Objective: For many years, librarians at MLA have discussed their role with clinical workflows and the electronic health record (EHR). However, many still do not have access to the EHR and many hospitals and medical centers still do not offer library services from the EHR or in clinical services. This interactive session will offer participants the opportunity to learn about barriers to library integration into clinical workflows, specifically the EHR, and gain tips for achieving stakeholder buy-in and

building clinical informatics integrations through advocacy and learning from others' achievements in this arena.

Instructional Methods: Participants will be guided by the presenters, who each have experience in EHR and clinical integrations. Through interactive small-group discussions using "Liberating Structures"-style themes and processes, groups will explore topics, learning from each other and the presenters who will guide the discussions. Themed topics will relate to the session's learning outcomes and will be highlighted for the entire group throughout the session. In this way, participants will have the opportunity to broaden their individual knowledge and skills around the learning outcomes in a cooperative learning-focused environment.

Participant Engagement: Participants will actively participate in guided small group discussions throughout the immersion session; these discussions will vary in process using "Liberating Structures"-style models such as "Impromptu Networking," "Wicked Questions," etc. Breakout rooms will create opportunities for novices to learn from those with more experience. Using these structured discussions, participants will work to create an action plan to integrate or grow library knowledge in the EHR. There will also be opportunities to share across groups so that knowledge generated can be assimilated by everyone.

Sponsors: Medical Informatics Caucus; Consumer & Patient Health Information Caucus; Clinical Librarians and Evidence-based Healthcare Caucus; Hospital Libraries Caucus