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Merge & Converge with the NN/LM MCR

Des Moines, Iowa — October 2016

**NN/LM Pac-Man vs Ghosts: Librarians Overcome Barriers**

The NN/LM MCR staff always looks forward to the chapter meeting. We get to meet many of you, our Network members, and renew friendships in person. There’s even more to look forward to this year—we’re partnering with our new colleagues from the Greater Midwest Region for an action packed session. Be sure to attend our “NN/LM Pac-Man vs Ghosts: Librarians Overcome Barriers” during Monday’s lunch session.

Join in the fun.

NN/LM staff are the Cherries—helping Pac-Man librarians—vanquish ghost barriers—

that they encounter in being effective librarians.

We’ve come up with some challenging ghost barriers, but are confident that the in-the-trenches experience
of this crowd will prevail and overcome them.

**Technology Panel**

The NN/LM GMR is sponsoring a technology panel on Monday, October 24 from 3:30-5:00 pm titled: "Partnering with Technology Champions." Three health sciences librarians (including our very own Jean Shipman) will share narratives of technology projects they have implemented in collaboration with non-library partners. Each librarian will describe her innovative project sharing the positive and the not-so-positive moments which ultimately led to a successful technology outcome. A moderated question and answer period will follow. Please join us for an enlightening forum.

**Papers and Posters**

The NN/LM MCR librarians will be presenting the following papers and posters on NN/LM MCR programs. We hope you’ll be interested and join the audience.

- Reddit Community Finds Health Answers From Reference Collaborative – Dana Abbey, John Bramble, Betsy Kelly, Barb Jones, Jim Honour, Monica Rogers, Christian Minter, Annette Parde-Maass
- The Cost Impact of the Librarian: A Methodology Taking Us Beyond Value – Claire Hamasu, Kari Jones, John Bramble, Barb Jones
- Can a Project Blossom with Seed Money? – Dana Abbey
- Benefits of Participating in a Mobile App Evaluation Project – Alicia Lillich, John Bramble
- Journal Clubs as a Learning Method to Increase Librarians’ Knowledge of Biomedical Big Data – John Bramble, Catherine Burroughs, Courtney Butler, Emily Glenn, Alicia Lillich, Megan Molinaro
- Talking Politics: Lessons from an Advocacy Book Club Discussion Group – Darell Schmick, Barb Jones

Be sure to say “hi” when we see you at the Joint Meeting, we’ll be looking forward to catching up on the news about you, your library, and your institution.

- Claire Hamasu, Associate Director
- Alicia Lillich, Kansas/Technology Coordinator

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**New Opportunities for MCR Professional Development Funding**

The National Network of Libraries of Medicine, Midcontinental Region is now offering two awards to support professional development. We realize how essential professional development is to a librarian’s career growth and advancement, and we want to help you reach your professional development goals.

**Professional Development Award:**

In the past this award was only for librarians working in health sciences libraries. We have now expanded the eligibility to include librarians in non-health science libraries (such as academic or community college) that are providing library and information support to those involved in health sciences programs. We hope this change will enable additional librarians to enhance their ability to support the health sciences. Each award is $1,500 and the activity must take place by April 30, 2017. For more information about application requirements, visit [https://nnlm.gov/mcr/funding/profdev.html](https://nnlm.gov/mcr/funding/profdev.html).

**Consumer Health Information Specialization Certification Funding:**

This is a new funding award for librarians interested in consumer health information services. It is open to all librarians in any type of library. The National Network of Libraries of Medicine provides free consumer health classes that provide CE credit towards the Consumer Health Information Specialization (CHIS) certificate provided by the Medical Library Association. Even though the classes are free, there is a fee to become certified. In order to help remove that financial barrier, we are happy to provide this CHIS Certification Funding. It can only be applied to CHIS certifications between May 1, 2016 and April 30, 2017. For more information about application requirements, visit [https://nnlm.gov/chisfund](https://nnlm.gov/chisfund).
We still have money available for both awards, and we are looking forward to your applications. If you have questions, please contact Christian Minter, Education Coordinator at christian.minter@unmc.edu or 402-559-7226.

Leadership Institute for Academic Librarians at the Harvard Graduate School of Education

Lisa K. Traditi, MLS, AHIP
University of Colorado Anschutz Medical Campus
lisa.traditi@ucdenver.edu

July 31-August 5, 2016
http://www.gse.harvard.edu/ppe/program/leadership-institute-academic-librarians

I was privileged to attend the 2016 Leadership Institute for Academic Librarians (LIAL) at the Harvard Graduate School of Education in Cambridge, Massachusetts, through the generous support of the NN/LM MCR Professional Development Funds, a AAHSL Leadership Development Grant, and my library administration. As part of the Professional Development Fund application process, I met with Associate Vice Chancellor of Academic Resources and Services Regina Kilkenny, PhD, who encouraged my attendance and with whom I have shared this report.

Started in 1999 at the suggestion of Maureen Sullivan, then president of the Association of College & Research Libraries (ACRL), this Institute is geared for those who want to learn more about leadership in general and, more specifically, their own aptitude and skills for leading at any level of an organization.

Most of the learning occurred during large group sessions, where, using the Discussion Teaching Method, Joe Zolner, Joan Gallos, James Honan, Chris Dede, Maureen Sullivan, and Lisa Lahey skillfully managed our group of approximately 85, never truly lecturing, always encouraging discussion and guiding us to our "learning edge" – the place where we experience so much cognitive dissonance that we have no choice but to learn. As an educator, watching the Institute faculty manage adult learners in a large group setting was a treat that often seemed like a master class in teaching.

At least once a day, we met in a small group, selected to represent librarians with varying levels of leadership experience from a wide variety of institutions, library types, and locations. Operating within the overall LIAL cone of silence (“what happens at LIAL, stays at LIAL”), our group shared personal and sensitive experiences, prompted by the discussions in the large group sessions. We quickly developed a sense of trust and I looked forward to our daily meetings.

Why I wanted to attend

I have always believed in the power of leading in place or leading from the middle. You don’t have to be in a high level ‘official’ leadership role to provide leadership. Throughout my career I have worked to identify areas where I can influence the library’s direction and partnerships with the greater campus community. Seeking areas where the library can build new partnerships, all while maintaining our high level of service is a challenge. To do so, we often need to look at ‘sacred cows’, questioning what we are doing that no longer truly holds value for the library and our stakeholders. The Harvard LIAL offered me the time and community to explore these ideas, in a setting where my own ‘sacred cows’ could be challenged.

In my 30-something years as a librarian, I have learned a lot, by trial and error, sometimes even intentionally, about leadership. Some of that knowledge has been more in the what-not-to-do arena, much has been by openly observing excellent leaders in action and trying to emulate their successes. The Leadership Institute offered the opportunity to explore leadership issues and theories in a more deliberate and focused manner.

The best things I learned

So much of the learning is still sinking in, even several weeks later. I find myself reflecting on three learning highlights.

1. In our small group, we discussed that the constant change we all are experiencing really isn’t happening any more or less often than ever. Our reaction to change is what is, well, for lack of a better word, changing! What we really need is to embrace tools, techniques, and resources for helping ourselves and others adjust to and, even, welcome change.
2. We spent a lot of time learning about and discussing the four frames (Structural, Human Resources, Political, and Symbolic), a conceptual framework developed by Lee Bolman and Joan Gallos in 1984 and detailed for the academic setting in their book, *Reframing Academic Leadership*. We learned about our primary frame view and how to look at situations from the perspective of the other frames. This technique is helpful in trying to gain perspective. The best leaders try to develop the ability to slow down and view an opportunity or problem from all four frames using frame mapping – sorting through the complexities of an organizational situation by identifying what issues fit into which frame.

3. Many of the discussions involve the step of slowing down and/or gaining a broader perspective on a problem, difficult relationship, or opportunity to create change or propose a new path. Taking the time to stop and observe, trying to really see all aspects of a situation can provide the necessary focus needed to plan a more successful approach. When approaching an important proposal or problem, I should be asking several questions: What am I missing? Who are the people who should be involved? How am I stuck? How will this affect the library and the larger organization?

How I will use the knowledge I gained

In addition to writing this report, I’m sharing my experience with my library and individual colleagues through a staff development session and individual coaching sessions. I created a reading list of all the books and other publications mentioned by the faculty during the week. (see box below) I’ve started reading some of those texts, the first was Edgar Schein’s book on Humble Inquiry, a harder than it seems premise of asking questions about what you don’t know, rather than always telling what you (and often your listener) already know.

Finally, I plan to work hard to embrace the naysayers, those who are eager to tell you why an idea won’t work. As difficult as it may be to hear how my brilliant idea won’t work, these honest discussions can help me polish and improve the project proposal.

The Harvard Leadership Institute for Academic Librarians was a transformative experience. I encourage anyone interested in building their leadership skills to attend.

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**Books and other readings used or referenced during the 2016 Harvard LIAL:**

Emergency Planning – Everyone!

Librarians need to be ready for disasters – I think we would all agree. It is true that a disaster has or will happen at all our institutions at some point. I vividly remember coming into work at my library one morning. The associate dean explained how she received a phone call at 2 a.m. from the campus police. Water had gushed from a broken water pipe on the 6th floor of the building and leaked all the way down to the basement. She called in other staff and they worked in the wee hours to sweep and mop-up water in the stairwells along with moving affected shelved items. Eventually many ranges of books had to be moved so that carpeting and drywall could be replaced. A few years ago the NN/LM determined that a significant number of its member institutions did not have emergency plans. If you are one of those institutions we hope you take action. A good place to start is with the One Page Service Continuity Plan Templates provided by the NN/LM Disaster Ready Initiative web site. One of our members, Angela Spencer, wrote about an experience at her institution and submitted it to the MCMLA Express Newsletter in their Winter 2016 issue – Hospital Planning for Communications Outage (page 8) It’s worth a view!

-Jim Honour, Member Services/Wyoming Coordinator

How to Talk Tech (Support):

Helpful hints for working with your IT department

Angela Spencer
St. Luke’s Hospital
angela.spencer@stlukes-stl.com

If you work in a library you most likely have to have some relationship with your IT department. This is especially true in a smaller or hospital setting. I work in a hospital library that is an independent stand alone hospital and have been at my institution for four years as a job share. These are some of the tips I have learned while working with my IT department.

1. Know how the process works, both formally and informally. This includes political factors that may be at play. My IT likes it when I go through the help desk. That being said, I know the key people to talk to, so I might start with the help desk but I may follow up directly with key people to say, “Did you get my request for x and where does this stand?”

2. Know what you have done so far. If it is an issue with your computer, have you restarted, cleared cookies or cache, etc? This is helpful. Also, be specific. Screen captures, identifying the version of IE/Windows/Chrome etc. you are running is all helpful.

3. Know the lingo. Know what a firewall or a proxy server is. If you can at least let them know that yes,
If you are new to data science or want to increase your knowledge, we strongly recommend that you attend Fundamentals of Data Science webinars, which take place each Friday through May 2017 (past sessions are archived).

1. You know the basic IT, IT staff will respect you for it and work with you. Also know when to be willing to stand up for what you need and how it will affect the IT department.
2. Develop a buddy. We have a favorite person to work with, and it doesn’t hurt that she uses the library as a reading space. I know I can ask her who to talk to or how to approach something and she will let me know.
3. Realize what the IT department is dealing with. My IT is dealing with hackers. Yours probably is, too. While I don’t like seeing web sites or attachments blocked, I understand and try to be patient.
4. Be patient. Keep trying. I have been asking for an "Ask a Librarian" button for my EHR for over a year. Besides hackers, IT has to deal with changes in multiple platforms and interoperability and the EHR and many other things.
5. Have a champion. I had to get my ER doctor to say that we needed an "Ask a Librarian" button in the EHR before they really started working on it.

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**Biomedical Big Data is The Next Big Thing! Are you ready?**

Research Enterprise is one of our new project areas. One of the focus areas for this project is to support Network members increase their awareness of issues related to biomedical big data. One of the key resources we are interested in sharing with our Network members is the NIH Big Data to Knowledge (BD2K) program. BD2K is leading the country through their support of funding innovative biomedical data science-based research, methods, and workforce development. You may have noticed the recent funding announcements and educational offerings coming out of this office.

When we looked at institutions being funded for innovative projects, we had great hopes that there would be lots of them. Sadly, our hopes were dashed after finding only one in our region. We would like to see more funded projects in our region and now is the time to take action. Luckily for us, we are not the only ones who would like to see growth in applications from our region. Speaking with staff at the BD2K office, we were told they are very aware of the lack of institutions from our region applying for their funds and they would like to see this change. To us, this meant they will be on the lookout for applications coming in from Colorado, Kansas, Missouri, Nebraska, Utah, and Wyoming.

Because health sciences libraries do not typically have data scientists on staff, partnering is an approach to consider. The library’s strong skills in project management could be an attractive contribution to the partnership. The question is, who do you partner with? How about the data science programs on your campus? According to the ABET, the accreditors for college and university programs in the disciplines of applied science, computing, engineering, and engineering technology, there are several in our region. We found there are five Associate degree programs, 39 Bachelor degree programs, and four Master/Post-graduate degree programs at institutions in our region.

If you have an interest in biomedical big data and are at one of our academic health sciences libraries Network member institutions, we strongly encourage you to apply for these funds. We are very interested in supporting your application, so please contact me and see how I can help.

- John Bramble, Utah/Research Enterprise Coordinator

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**Whooo Says...**

**Dear Whooo,**

I am a hospital librarian in a new position. I attended MLA in May, learned so many things and got so many good ideas for new programs in my hospital. I want to dive right in and get started, but the "voice of caution" tells me to be careful. Considering my recent hire into this hospital system, and my relative inexperiance I realized that I should ask...
for help before I make a mess of this. Do you have any advice for me?

Thank you!

Enthusiastic Ellie

Dear Ellie,

Congratulations on your new job! I hope you will continue to feel the same enthusiasm you have now for many years. Starting a new position and recognizing the possibilities and opportunities that are available is exciting. It is easy to let that excitement take over and get carried away without carefully evaluating your options.

First, I think you should make a list of all of your ideas. As you list possible programs or improvements you will start to notice that they will fall into groups. For example, you may have several ideas about increasing access to your collection, or new training ideas, or new ways to promote your services. You may also have ideas about reaching out to new groups of users in your hospital. Once the ideas are grouped you can identify any redundancies or ideas that can be combined.

The next thing anyone in your position must do is to check the mission and vision statements of your hospital and of your library, if you have them. The most important of these are the overarching statements of your hospital or health system. Your library’s mission statement and all of your activities absolutely must support the goals and mission of your larger organization. Aligning your activities in this way will help you prioritize your ideas and will also help you later when you need to show how your services have benefited the hospital.

After you match your proposed activities or programs to the mission statement and vision of your hospital, check with the hospital management to see what the current areas of interest are. Your hospital may have one or more current initiatives that you will want to focus on. Some examples of the types of priorities you may encounter include:

- a new student program (nursing, residency, etc.) is joining your hospital
- the hospital is building a new addition
- the hospital is initiating the LEAN system
- quality improvement and patient safety are the major focus

Understanding the current priorities of the hospital and participating in or supporting those priorities will bring you into the mainstream of hospital activities. You will become involved in committees, meet people interested in what you can offer, and help achieve the goals of the institution.

Your next step is to put all this information together and think, think, think. You need to analyze the information you have gathered and see which of your activities seem to fit with your environment. As you are deciding which project to select, remember that succeeding with a small project is much better than trying to “change the world” and failing. When you pick the project or activity that seems the most promising, you have some more analysis to do. Is this an internal project that relates only to library operations and will not impact your users directly? If that is the case, you will need to fit your proposed changes into your regular workload and not worry too much about people outside your library walls. Of course, you will need to communicate and work closely with your staff to keep things running smoothly, but you will probably not need to update users or outside personnel except your manager. If this is a project or activity that impacts your users, you need to plan for regular communications and possible trainings on your new service.

Whether your project is internal or external, there are several steps you must complete. The first is to complete an assessment of your users (or staff if internal) to see if your idea is viewed as needed or beneficial. There is no point in implementing something that is neither needed or wanted. If your program passes the “assessment test,” then you can start gathering the support and the resources you will need to implement it. Make sure you are clear about who will benefit from your program and how will they benefit.

While you are in this planning stage, don’t forget to plan your evaluation of the program. The only way to truly judge the success of your endeavor is to plan how you will evaluate it, and what resources you will need to do that. For example, do you need to store your data in a spreadsheet? Do you know how to set up and manage a spreadsheet? Do you need help with data analysis? Will you need to code text information? Can you do that? All of these questions need to be considered and planned for.

After all this planning, you are now ready to implement your first new project! There may be roadblocks, resistance, and probably some setbacks. Keep your focus on the long haul and don’t get discouraged. If you have done a good job with your planning and have the support of your manager, you will be able to deal with any problems that may come up. And, when you have completed the project successfully, you will
know some new people and have a good track record. Make sure to communicate clearly and often and, when the benefits of your program start to emerge, be sure to communicate about that as well!

Best wishes for the implementation of your upcoming projects, Ellie. I know you will be successful.

Sincerely,

Whoo

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**Learning Elevated – Library Instruction West 2016**

Rachel Vukas  
University of Kansas Medical Center  
rvukas@kumc.edu

Due to the NN/LM MCR Professional Development Award, I was able to attend this excellent conference on library instruction. As our School of Medicine is going through a curriculum change, my instructional responsibilities have increased and I found this conference very helpful. Health sciences librarians were well represented at the meeting. If I counted correctly, there were ten of us!

Library Instruction West is held every two years and has existed since 1994. Previously known as the LOEX of the West conference, the name was changed in 2012 to avoid confusion with the LOEX Clearinghouse for Library Instruction at the Eastern Michigan University Library. **LOEX (Library Orientation Exchange)** was founded in 1971 and hosts an annual conference, but it is a completely separate organization. The Library Instruction West conference was modeled after LOEX, but is a grass roots conference put on by volunteers. The 2018 Library Instruction West conference will be hosted by Tomlinson Library at Colorado Mesa University in Grand Junction, Colorado.

This year’s conference schedule was designed to promote networking and informal meetings since breakfast, lunch, afternoon breaks, and some dinners were included in the registration. This provided a great opportunity to meet new colleagues as we dined together. Follow-up questions were often continued during meals along with in-depth discussions about the philosophy presented or the feasibility of implementing techniques at our institutions.

Some of the major themes of the conference were: distance education, active learning, pedagogical theory, instructional design, faculty collaboration, and how to employ the concepts from the **ACRL Framework for Information Literacy for Higher Education** in teaching information literacy.

Not only were there sessions on incorporating active learning, many of the sessions were presented in this manner. Instruction librarians obviously “walk the talk” and many presenters guided and enabled attendees to create their own unique learning experience.

One of the sessions I attended became a workshop on writing objectives and planning a class around one of the threshold concepts. Instead of only listening to how the presenters had done this, they guided us through the process. We were divided into groups by type of instruction: first year experience, undergraduate classes, graduate study, and professional degrees. My group included librarians working with the disciplines of law, health sciences, engineering, and a few other specialties. As we discussed our goals and objectives, it became clear we had much in common in our instructional approach. All of us agreed on the importance of identifying the threshold concepts most applicable to the discipline and the need to translate the “information literacy” terminology into the appropriate scientific or technical language. We all felt it was essential to connect the threshold concept to the students’ research and work environment in order to demonstrate its validity and to enable them to view it as more than an isolated information literacy concept, but as a vital part of their professional activities.

An instructional design librarian presented an intriguing idea on using WordPress as a repository for learning objects. The repository allows their librarians to not only store, but to find and reuse learning objects developed by their colleagues at the same institution. It also allows librarians to share their own materials with faculty and students and it sounded easy to set up.
Following the theme of collaboration, I presented a session titled, *Like Peanut Butter and Chocolate: Problem-based Learning and the ACRL Framework in Medical Education*. The presentation was created by Heather Collins, Assistant Director of Research & Learning, Dykes Library; Dr. Thomas Yankee, Associate Professor, University of Kansas Medical Center, and myself. The presentation described our experience team-teaching a class to instruct students in the ACRL threshold concepts and dispositions related to evaluating resources. During a case simulation activity students worked independently or in small groups, using resources we presented, to answer specific medical questions and work through the case and treatment options. The instructor and librarians alternated leading activities and worked simultaneously with individual students as needed. Content knowledge and information literacy were equally balanced. The students were required to find, present, and then defend clinical decisions based on the level of evidence obtained, the type of evidence, and the information need. Sharing our experience opened up a discussion with other health sciences librarians and how they are dealing with these issues.

There were too many good sessions to tell you about them all. But I have to give a shout-out to the excellent keynote speaker, Dr. Donna M. Lanclos, an anthropologist employed at an academic library. Her areas of research include the nature of information, digital and physical places, and higher education. She gave a great opening speech and also presented a pre-conference on *Mindfulness and Mapping of Digital Practice*. She focuses on the online world as a space or a place where we “do stuff.” The mapping exercise allows us to visualize what resources or social activities we are using and how and why we use them in that manner. The exercise can be done by an individual or an organization and allows you to understand your digital presence in a new way. More information on the topic can be found at [https://www.jisc.ac.uk/guides/evaluating-digital-services](https://www.jisc.ac.uk/guides/evaluating-digital-services). You can read Dr. Lanclos’s blog at [http://www.donnalanclos.com/](http://www.donnalanclos.com/).

My administration supports professional development and conference attendance at the national and regional health sciences library meetings, but we’re not always able to attend non-medical library meetings that also coincide with our work. Our higher administration was pleased that I was able to obtain funding to represent KUMC at Library Instruction West and was impressed that the NN/LM MCR provided funding support. Our discussion was an excellent opportunity to promote our department’s work in instructional activities and open new doors.

I want to express my appreciation to the NN/LM MidContinental Region for providing me the opportunity to attend this conference. If you are a librarian involved in instruction and want to learn from and network with like-minded librarians, this is the conference for you.

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**MedPrint: Join the Party to Preserve Paper**

The U.S. National Library of Medicine (NLM) and the National Network of Libraries of Medicine (NN/LM) are continuing their partnership in the quest to preserve print copies of biomedical journal titles through the medical serials print retention program (MedPrint.)

Medical libraries and publishers adjusted to user demands for immediate access to articles around the clock by providing digitized articles with ease through robust electronic access. Pressure is also being applied to medical libraries to cede space by their hosting institutions and thus forcing libraries to reduce or completely eliminate their print holdings in favor of electronic only subscriptions. While this development of easy electronic access was celebrated by users, it also alarmed those in the library community. This trend of digitizing articles certainly was beneficial, but not all journal titles and volumes have been digitized. Some digitization projects don’t include all the pages found in every issue of a journal, and in many cases there is no guarantee that the user will have access to electronic backfiles at the publishers’ web sites.1

The NLM initially identified 250 titles to preserve in print. The program is cooperative and voluntary. Participating libraries do not receive funding from the NLM for storage or maintenance. The NLM has seven guidelines for libraries interested in participating. Among the more notable points are a time commitment to hold a title (25 years) and that a MedPrint library has to be a DOCLINE participant. All libraries accepted into the program sign an agreement and mark each title retained as a MedPrint title in their DOCLINE holdings.

The MidContinental Region has six libraries participating in MedPrint:

- Cardinal Glennon Childrens Hospital – St. Louis, MO
- Creighton University Health Sciences Library – Omaha, NE
- Dixie Regional Medical Center – St. George, UT
Congratulations to each of these libraries on their dedication to this project!

Does MedPrint still need participating libraries? The answer is yes! As of August 2016, libraries across the country have committed to 248 titles, but the project has not met its goals yet. The NLM needs at least 12 libraries committed to each title. Currently, many titles have commitments from fewer than 10 libraries.

What does a non-participating library need to do to sign-on to the program? A good place to start is to review the information on the MedPrint homepage. You may have been thinking about participating for a while. Now is the time to take action! We’re always happy to answer any of your questions!

-Jim Honour, Wyoming/Member Services Coordinator