

More than skin deep – Role of a Clinical Librarian in secondary care Dermatology

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Abstract

Clinical librarians (CLs) have been part of the multidisciplinary team (MDT) for over 40 years. The role of the clinical librarian (CL) can differ widely, but the central aspect is to provide a range of information services for the members of the team within which they are embedded. With use of electronic resources rapidly replacing the traditional print versions, the role of the CL has had to evolve and adapt to help guide clinicians on best approaches to evidence-base medicine. We describe the impact and benefits of having a clinical librarian as part of secondary care dermatology services at a busy teaching hospital in United Kingdom.

Key words: clinical librarians; libraries; hospital; dermatology.

Background

Clinical Librarians (CLs) help to provide “quality assured information to health professionals at the point of need, to support clinical decision-making” (1). CLs provide a range of information services for their users, from literature searching and training opportunities to facilitating current awareness services. Exact roles and job titles of CLs differ widely and responsibilities may vary considerably, with some CLs working in hybrid positions which may be partly integrated with more traditional library services. The role of the CL primarily differs from more typical library services through their involvement within the clinical department. CLs can be embedded within their user teams, spending considerable time outside of the library (2-5). Being part of a clinical team helps improve understanding and provides context for CLs of the clinical work being undertaken. This aids the CL service information provision by allowing clinicians easier access to evidence based research which is representative and can translate to clinical practice.

Although, CLs have been working within the international health sector for over 40 years, there is little published discussion of their role in relation to secondary care dermatology services.

Overview of CL role for secondary care Dermatology

The CL has been part of the Dermatology team at a large and busy teaching hospital since 2011. The original purpose of the role was to help overcome the lack of library facilities or access at the hospital where dermatology department was based. This distance had grown following the relocation of the physical library services to new, purpose-built premises at the new teaching hospital, whilst the Dermatology department remained primarily based at the organisation’s other community hospital site, approximately 3 miles away. The role aimed to support the Dermatology team through attendance at one quarterly complex cases clinic, where it was envisaged that literature search queries were most likely to arise.

Since then, the CL has developed into a more inclusive role in offering the clinical team additional information support. Working in partnership with the team, the CL delivers patient centred information, and with information retrieval and critical appraisal skills helps provide research evidence to support the clinical work of the team. As well as supporting direct patient care and clinical decision-making, this work has been used to aid Continuing Professional Development (CPD) of individual team members.

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Presently, the CL work includes:

- participating in a monthly regional Dermatology complex cases clinic;
- provision of a full literature searching service to all members of the multidisciplinary team (MDT);
- delivery of training to MDT members, postgraduate trainees and undergraduate medical students, either in one-to-one or group settings, to help with literature searching, accessing e-resources and critical appraisal;
- facilitating staff in keeping up-to-date with new developments and increasing awareness, through sharing electronic Table of Contents (eTOCs) for specialist dermatology journals;
- offering regular journal club support to all members of the MDT, in particular, postgraduate dermatology trainees and dermatology Consultants

The CL forms part of the induction programme to support Consultant staff and guide postgraduate trainees and undergraduate medical students attending dermatology on how to access and research clinically relevant topics of interest.

Examples of impact of role of CL in dermatology are described below.

Literature searching

The primary focus of the CL role is the provision of literature searching services. In the monthly regional cases clinic, working alongside the Dermatology team, the CL provides literature searching support for individual cases and general patient care, as required, following case-based discussions. The CL is able to participate fully in the clinic, ensuring that questions arising in clinical encounters or from ensuing discussions are answered on the basis of evidence from the published literature, in a timely fashion, saving the clinical team time and assisting in provision of best practice patient care.

During the past 5 years, the CL has completed over 70 literature searches, covering a range of topics supporting patient care and management, research, writing for publication and professional development. Over the last financial year, (April 2017 - March 2018), 34 searches have been undertaken for the team by the CL. For these 34 searches, the CL has utilised relevant databases and resources to review the evidence base for a range of specific dermatology topics. Of the 34 searches conducted, 28 were related

to direct patient management, including work on specific treatments, diagnoses and investigations and adverse effects. Four searches were conducted for publication in peer-reviewed journals and/or in relation to guideline development, and one search supported work on a service development project. One final search, related to general patient care and potential guideline development, remains ongoing (*Figure 1*).

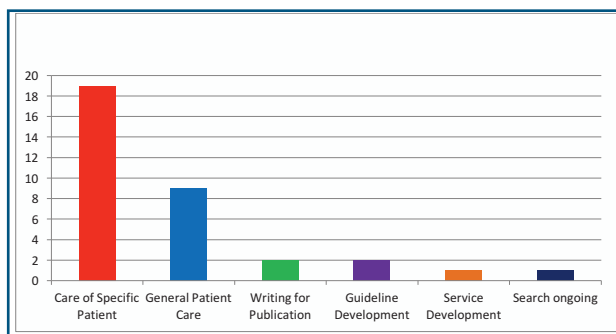


Fig. 1. Literature searches 2017-2018.

A total of 187 hours of CL time has been utilised for searches over the past year to help provide best practice in busy clinics, thus saving the clinicians' time. 158.5 hours of this time was utilised for searches supporting direct patient care.

Topics covered within these searches include:

- safety of medication choices for patients with co-morbid conditions;
- genetic causes for specific dermatological conditions, such as hyperpigmentation;
- use of cryotherapy, light therapy, topical treatments and/or systemic therapies in a variety of conditions, including: androgenetic alopecia; lupus pernio; melasma; granuloma faciale; and urticarial pigmentosa.

Benefits of this literature searching service were the assistance for the clinical team in delivery of most recent up-to date research evidence on the condition, best quality care for patients and the saving of clinician time, enabling their time to be utilised more effectively. This potential cost-saving to National Health Service (NHS) Trusts would benefit from further research studies to help quantify the monetary impact in terms of clinician time saved and used in direct patient care. For example, the comparison could be made of UK CL salaries per hour versus UK medical staff salaries per hour, in relation to the number of hours spent searching. A clear cost

differential could be seen here. However, in detailed analysis, provision would need to be made for a number of limitations and other factors, such as the likely number of hours spent searching by clinical staff – potentially less than professional librarians, and the value of the hours re-purposed by clinical staff through not spending time searching. These factors could make calculating any potential cost-savings and cost-benefits problematic and not necessarily reflect the full impact. For example, focusing on cost-savings through time spent searching does not reflect any savings made through avoidance of investigations or indeed the wider potential impact that may be made on delivery of patient care, as highlighted by Brett et al. in their study of the impact of CLs on patient care and organisations in one region of the UK (6). The complexities of analysing the financial impact that clinical library services have as a whole may have are discussed by Madden et al. (7) who report on a systematic review in which a range of methods of evaluation were identified, including return on investment and contingent valuation. Madden et al. recommend that improved validation of analysis methods and standardisation of approach are required for further robust research to be able to better demonstrate any financial impacts.

Education support

As well as literature searches being an essential role, improving access to educational resources has been a priority. The GMC's recent standards documentation, *Promoting Excellence: standards for medical education and learning* (8) advocates that learners have a good educational experience and there is an organisational commitment to, and support for, learning. The CL provides a fortnightly introductory training session for medical students attending dermatology attachment, covering over 300 medical students per year. The training sessions involve small groups of up to 16 medical students in their 4th year. The students are made aware of online educational resources available to them, including specialist dermatology journals, healthcare databases and point-of-care tools. The students are taught to navigate through these sites and are given introductory tutorial about conducting literature searches and the tools available to aid in critical appraisal. This session supports students in finding relevant best evidence and guidance, including topics relevant to their undergraduate dermatology

curriculum, and helps supplement their knowledge. Further educational support by the CL is provided by presentations at quarterly journal clubs and monthly education meetings. These include latest guidelines or dermatological articles published in non-specialist journals. The CL also supports other members of the team to present in these and other forums, such as national meetings, conferences, medical grand rounds and for publications. The CL helps source appropriate papers during the writing process for their presentations, ensuring copyright compliance, and/or provision of literature searching training. Thus, the CL supports local registrars of the postgraduate Speciality Dermatology Training Programme, in their research skills development through the training programme. The focus on education and CPD is not limited to medical staff and students. Following the recent revisions to the UK nursing revalidation scheme, (9) the CL also aids specialist dermatology nurses in fulfilling their CPD requirements, through training and searching support, provided on an as-needed basis.

Feedback on role of CL in dermatology department

The CL service has received excellent feedback from the Consultants, trainees, nurses and medical students, with some comments as below:

- "Invaluable"
- "These reviews/searches are great"
- "Library intro helpful"
- "This is brilliant. Really helpful"
- "Very interesting, will read more of the papers, but may well be offering a different therapy to the patient"

The role of the CL continues to grow in the busy department, indicating the value placed on the service by the clinical team. Feedback from the Dermatology team has also contributed to the current UK based Health Education England national CL impact research project, (10) due to report preliminary findings over the next few months.

Conclusion

The role of the CL has been invaluable to the secondary care dermatology team at a teaching hospital, with benefits appreciated by Consultants, post graduate trainees, medical students and specialist nurses. The inclusion of CL in the dermatology team helps saving of clinicians' time and bridges the

literature-practice gap. Through robust review of evidence in literature, dermatology patients, often with chronic, debilitating skin conditions benefit from evidence-based management and individualized care. The role of CL in medical education and CPD contributes ultimately towards clinical teams achieving and providing high standards of patient care thorough use of evidence-based practice.

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