The Hunter Librarian

1. Context – University of Otago
2. Changing Reference
3. Information Suite
4. Medical curriculum
5. Stakeholders
6. Conclusion

Richard German, Paul Barham
1. University of Otago

- Oldest university in NZ
  - Founded in Dunedin in 1869 (Medical School from 1874)
- Four Divisions
  - Humanities, Commerce, Science, Health Sciences
- Health Sciences has four Faculties
  - Dentistry, Pharmacy, Physiotherapy, Medicine
- Medicine has four Schools
  - Otago School of Medical Sciences
  - Clinical Schools in Wellington, Christchurch & Dunedin
- University Library consists of a central library + 6 branches in Dunedin – including Medical & Dental Libraries
  - Independent campus libraries in Wellington and Christchurch
2. Changing Reference

- Reference services inside libraries tend to be:
  - highly **passive**, waiting for someone to approach the desk; or
  - **virtual**, which often is anonymous or involves little dialogue which minimizes the relationship building needed for extended and repeated interactions (Wagner, 2004)
Roving Reference

• **Definition**
  - The practice of discreetly walking about the *(reference area of a)* library in search of users who need assistance” (Giannone)

• **Intent**
  - Provide point-of-need instruction
  - Break down barriers and limitations imposed by physical desks and mental silos

• **Build relationships with users**
  (Giannone)
The embedded librarian

• “Purposeful collaborations between librarians and teaching faculty where the librarian is more fully integrated into a course, virtual or real, than is customarily the case with “one-off” IL integration” (Shumaker and Tyler, 2007)

• The librarian becomes a member of the customer community rather than a service provider standing apart (Shumaker and Nixon, 2009)

• Cultural issues
  • Proactive - not reactive
  • Outside traditional comfort zone – of patrons as well as library staff
  • Challenge to established work flows

Richard German, Health Sciences Librarian. The Hunter Librarian
3. Information Suite

• A model developed at Johns Hopkins University
• Includes:
  – collaborative information services from a liaison librarian
  – customised training
  – tailored technology systems and toolkits

• **Does not** include a collection of print books and journals and is **not**:
  – a satellite library
  – permanently staffed
  – dedicated library space

Richard German, Health Sciences Librarian. The Hunter Librarian
4. The old medical curriculum

• Up to 2007

• Pre-clinical triennium
  • Module Programme (biomedical science and body systems)
  • Systems Integration (SI; clinical case or scenario learning)
  • Patient, Doctor, and Society (PDS; population health, psychological/social dimensions of illness, doctor-patient issues).

• Clinical triennium
  • Attachments in 4th and 5th year; final exams in 5th year
  • Trainee Intern (6th) year – full time clinical ‘apprenticeship’
A new medical curriculum

• Early Learning in Medicine (2\textsuperscript{nd}/3\textsuperscript{rd} year) from 2008
  • Four ‘streams’
    • 
    • Cases – 28 over two years
    • Healthcare in the Community
    • Clinical Skills
    • Systems Modules – ‘horizontal’ body system modules in sequential blocks of 4–6 weeks and ‘vertical’ integrated modules, including EBM, Professional Development and Hauora Maori
  • Early patient and community contact (Week 1)
  • More community-based learning
  • Clinical thinking from day 1
  • Small groups / tutorials, collaborative learning
  • Reduced formal content, more self-directed study

• Learning in context

Richard German, Health Sciences Librarian. The Hunter Librarian
The Hunter Centre

- Designed for the new medical curriculum
- Variety of learning spaces
  - Mixture of tutorial, study and social space
- Technology-enabled
  - CAL lab, wired 'e-stops', network sockets, wireless
- but no Library, by design

Richard German, Health Sciences Librarian. The Hunter Librarian
Embedding at Hunter

• The University Library set up an ‘Information Suite’ in the Hunter Centre
  • a liaison librarian was employed for the project (July-November 2008)

• Key tasks
  • work with staff and students in the Hunter Centre providing curriculum-specific consultation and training;
  • define, develop and trial the Information Suite model for information services;
  • evaluate the effectiveness of the model and make recommendations regarding future provision of embedded Library services

Richard German, Health Sciences Librarian. The Hunter Librarian
5. Stakeholders: Students

- Slower uptake than anticipated
- Cemented buy-in by:
  - **Being in their environment**
    - Direct involvement - CAL lab teaching, consultation / discussion
    - Indirect involvement – Blackboard
Stakeholders: Tutoring staff

• Cemented buy-in through:
  • Developing knowledge of tutors’ needs
  • Tutors ‘touching base’ with Librarian
  • Contributing to Tutor Case Briefing meetings
    • “meetings add an important ‘collaborative’ aspect to roving role” (Dewey p.11)
  • Contributing to the design of Tutor Case Briefings

Richard German, Health Sciences Librarian. The Hunter Librarian
Stakeholders: Academic staff

- Identified early as critical to the success of the project
  - Early collaboration on goals and design

- Project librarian established very constructive relationships with senior academic (and administrative) staff

- Academic staff introduced the project librarian to the student cohort

- Project librarian was ‘always available’ for academic consultations – often beginning over a cup of coffee

Richard German, Health Sciences Librarian. The Hunter Librarian
Academic staff comments

Pro Vice Chancellor, Division of Health Sciences

- I am very strongly supportive of continuation of [the] role and position – it has been a new way to assist learning which I believe has been very successful and of very high utility.

Dean, Otago School of Medical Sciences

- [The] position has worked well and I can only see him being used more next year should the position continue since both years of the new medical curriculum will be rolled out. Also the students are now more aware of the roving librarian position and more willing to approach him.

Associate Dean, Clinical Skills Convenor

- I am happy to add supportive comments to support [his] retention. His "roaming" commission has allowed students to meet him on their terms and I believe that with the additional presence of our incoming 3rd years we will see him in even greater demand.

Richard German, Health Sciences Librarian. The Hunter Librarian
Academic staff comments

Convener, Medical Education Committee

- [He] has served a valuable role by getting alongside students and helping them in a supportive fashion. **This type of approach is very productive and allows students to appreciate the collaborative role of library staff - this needs to be imprinted on the students at an early stage so that they can use library facilities to the maximum during the undergraduate period.**

Case Convener, Early Learning in Medicine

- **[The] role has greatly supported the type of teaching we are promoting - that of having the students search for information for themselves.** He has made himself visible and available to the students and they are seeking his assistance is increasing numbers. He has also attended many of our tutor briefings and been of great assistance to the tutors with finding background references for them.

Richard German, Health Sciences Librarian. The Hunter Librarian
6. Conclusion

- **Independent Life-long Learning**
  - *raison d’être* for new medical curriculum, the Hunter Centre and the Hunter Librarian

- **It was a work in progress** - academic staff always saw 2009 as the goal

- **This project demonstrated the effectiveness of locating an academic liaison librarian in a teaching and learning centre** (University Library Annual Report 2008)

- “To be truly integrated throughout the teaching and learning activities of our campuses is the core of being a truly embedded librarian” (Dewey, 2005)