Special Libraries Association

93rd Annual Conference
Los Angeles, California
June 12, 2002

Integration of a Librarian
into the Curriculum via WebCT

Locke J. Morrisey, M.L.S.
Head of Collections, Reference & Research Services
Gleeson Library/Geschke Center
University of San Francisco
morrisey@usfca.edu

Introduction

All across the country the number of transactions taking place at traditional reference desks is decreasing. It has become evident that we need to try new and innovative pilot projects to bring the librarian to the client (student, professor, etc.) rather than waiting for the client to come to us, whether it's in person, by phone or via e-mail.

Over the past few years, a number of different projects and ideas have come up to increase reference librarian and patron interactions via electronic means. Things like 24/7 reference, reference chat and reference e-mail are common in many libraries today. Teaching technologies such as WebCT and Blackboard.com have also been used by librarians to reach out to students more proactively but rarely do you see a librarian as a part of an instructor's own list of participants, along with students and other resource people, in a WebCT or Blackboard.com setting. Fall semester 2001, I was given this opportunity.

Background

University of San Francisco (USF) is a moderate-sized Jesuit Catholic university in an urban setting. It is a "Carnegie Doctoral/Research Universities-Intensive" university. It has about 7500 FTE amongst the main campus and 5 distance learning centers throughout Northern California. Each satellite campus has a ½ time librarian. In the Gleeson Library/Geschke Center there are 12 librarians and the Dean.

Two years ago the Dean of the Library wanted to see a change in the way collection development was being done. The move was made from broad-based collection development done by several librarians to a library liaison model where individual librarians were selectors and contacts for each school and/or department. Beyond my administrative duties as Head of Collections, Reference & Research Services, I am the library liaison to several programs including the School of Nursing. Note that I do not have a background in nursing except that I have worked with nurses in a health sciences library and have a younger sister who is a nurse practitioner who I have assisted with her research. USF does not have a medical school and its nursing school consists of about 500

students (90% undergraduate, 10% graduate) and about 30 faculty/instructors.

The Dean of the School of Nursing has worked with the faculty to increase the research required by nursing students, particularly those students in upper division and graduate courses. There also has been a push to get nursing students and faculty to focus on evidence-based nursing, a trend that has been steadily increasing since the mid-1990s.

Approach

Soon after I arrived at USF in October 1997, I was encouraged by the new Dean of Nursing to attend a nursing faculty meeting to introduce myself. I was told by some of my librarian colleagues that the nursing faculty didn't use the library very much and there was very little outreach from the library as no one on the library staff had any background in the health sciences, or the physical and life sciences either. I came into the meeting by advertising what the library and the librarian could do for them and how I could improve the service given to the school. My reasoning was if I couldn't offer them improvements, they weren't going to listen to me.

Faculty are intimately involved with collection development at USF. I soon learned that faculty were still asked to submit book and journal orders to the library by handwriting or typing out "request to order" (RTO) cards even if they had all the information in a catalog or wanted to submit the information electronically. My first step in trying to win-over the faculty was to immediately offer them an improvement. Basically I told them don't fill out any more RTO cards! It was a waste of their time. They could send me the information in any way they saw fit and I would make sure it would be ordered even if I had to fill out the cards myself (which thank goodness I didn't have to). There were literally gasps from some of the long time faculty when I told them this. I then also offered my services to help with research and library instruction and successfully lobbied for them to get additional journals and databases.

Getting the Foot in the Door

At first, Nursing Faculty were very slow in bringing their classes over to the library for any instruction. The library did have one drawing card though, I brand new state-of-the-art electronic classroom that was the envy of many faculty on campus. I had one nursing instructor who was very keen on getting her students hands-on training in using WebCT for a couple of her lower division courses. I told her that the library classroom was only to be used for library instruction at the moment until we got a better feel as to how booked the classroom would be. Then I added, that if she could give me 10 minutes of a 50-minute session to introduce myself and give a brief library introduction, then I could also be a rover in her WebCT instruction session to help out students. She was thrilled with the chance to use the classroom and after a few classes found that my assistance as a rover helped in her WebCT instruction.

Proposal

Early spring semester, 2001 this same instructor told me that she had been asked by the Dean of the School of Nursing to develop an upper-division/graduate level class in Nursing Informatics. The instructor had just finished a Master's program in Nursing Informatics. She and the Dean convinced the curriculum review committee that new technologies in nursing were evolving so rapidly that it was important to prepare graduating nursing students to understand and use these technologies as they enter the workforce. The class was to be taught in both winter and spring semesters of the 2001/2002 academic year. The class would be classroom-based the first semester and move to a mostly online format during the second semester. For both semesters, she asked if I could give a

3-hour lecture/hands-on session on web and library database searching during one of the class meetings. She also mentioned she would be using WebCT for the course. I asked her what she thought of the idea of putting my name on the list of students on WebCT so I could participate fully with the class in any assignments, presentations, discussions, etc. She thought it was a great idea and agreed.

Between the times the instructor asked me to guest lecture and the class beginning, I thought that it might be a good idea to audit the course so I could learn the latest trends in Nursing Informatics as well as be able to communicate closely with other nursing students in the class via the WebCT interface. I wanted to see if the students found it valuable to have a librarian as one of their classmates and if I could build a closer bond so these students would continue to seek me out after interacting with me in class or online.

At the first class session, students all introduced themselves. I informed everyone that I was the library liaison for the Nursing program and would be auditing the class. After the first two class sessions, the instructor suggested that I should enroll in the class so I could get credit for all the work I would be doing. This meant taking online quizzes, writing papers, working on group projects and a giving a final presentation. I agreed to enroll in the course as USF gives tuition remission for full-time employees.

Learning Experience

Fully participating in the course was of tremendous value to me as I learned a great deal about current issues in nursing and new technologies that nurses are dealing with. It was especially valuable to hear first-hand experiences from student nurses' clinical rotations of experiences they had with the technologies in their hospital as well as attitudes towards new technology by physicians and registered nurses. It gave me good insight on how people deal with new technologies in a library setting and what things should be considered.

For one of my assignments I had the opportunity to review a hospital information system. The instructor had provided a list of criteria to help me evaluate the system but other than that it was an area I new nothing about. Sitting down with the main system administrator and asking how the system operates, I saw many applications that could be applied to library and information systems. Things such as standardization of data, ease of data transfer from one part of the system to another, warning signals if the data entered are nonsensical, and using metadata to study trends in healthcare costs for particular procedures.

But as a librarian, what really piqued my interest was a discussion of nursing and health care taxonomy. In fact my final presentation was titled "Health care esperanto: promises and pitfalls of developing a unified health care taxonomy." In healthcare, what is driving the standardization of taxonomy is money. For example, the Health Care Financing Administration has already come up with "Current Procedural Terminology"(CPT) and a "Common Procedure Coding System" (HCPCS) that is used by insurance companies and Medicare/Medicaid to report services and procedures as well as get reimbursements. If the proper terminology and codes aren't used, no check is issued. Looking at all of the different, many proprietary, thesauri that exist amongst all of the different research databases, it's the lack of standardization of terminology that is putting money into the pockets of these database producers. NLM's Unified Medical Language System® (UMLS®) project is an attempt to deal with varying terminology from different groups/databases by creating a metathesaurus, but again, some of these thesauri are proprietary and require a license to use. Wouldn't it be nice to search across all health related databases with just one set of terminology?

Evaluation

There was a significant time commitment involved in the project as not only was I attending class 3-hours a week, I was also spending 1-2 hours per week working on assignments or participating in WebCT discussion groups. In subsequent terms, the time commitment would be less as there would be no need to be present (in person or online) for every class session.

Using WebCT as a "student" allowed me to better understand the information needs and issues that nurses are currently facing. I was able to share with the instructor and student nurses the librarian/information specialist point-of-view on a lot of issues. I frequently would post references to current newspaper and newsletter articles dealing with health care technology or current nursing issues to help get an online discussion going. Students had a chance to see me as a colleague on the same side of the desk, so-to-speak. By the end of the course students felt more comfortable sharing with me their frustrations in finding research to assist them in what is becoming more and more an evidence-based nursing practice.

One thing I did not expect was the instructor's reluctance to let me formally ask the students to evaluate my participation in the class. The instructor explained that she felt that by asking students to evaluate my instruction that I was attempting to take on a co-teaching role in the course that she wasn't willing to give up. By both lecturing in the course (teaching) as well as enrolling as a student, it blurred my role in the class both to myself and to the instructor. I should have thought through my role in the class more thoroughly and made sure the instructor and I were on the same page before proceeding.

One could argue that students also teach in classes. I know that I learn at least one new thing every semester from an instruction session I've presented to the class. This was this instructor's first attempt at an upper division/graduate level course. Courses she typically taught were in pathophysiology, which for nurses can be pretty cut-and-dried or clinicals, where you are really training the nursing students. In a course on Nursing Informatics one would expect students to have more questions and dissenting opinions on different theories and ideas presented to them. But I found that often, the instructor didn't take student opinions seriously or found them faulty when the majority of the class thought they had merit.

Although I was not allowed to formally get feedback from students in class, I did get a chance to informally talk to a few students outside of class. These students found that having a librarian in this class was a big asset in two ways. One is that as a librarian I could bring my own information/technology expertise into the classroom and share with others as a student. And secondly, students identified me as a readily available resource for any research assistance needed for other classes.

After speaking with the instructor at the end of the fall semester, she felt that the only way she wanted me to participate in the spring semester was to bring the class in for an in person guest lecture one evening during the term. She did not want to have me participate on the student WebCT list for spring semester.

Success?

I do see integration of a librarian into the curriculum via WebCT as a viable option but with a few caveats. The course should be one where a librarian's presence (in person or online) is warranted; a course in health care informatics or a research methods class would be good examples. You should have a strong working relationship with the faculty member teaching the class and make

sure that the instructor is willing to have the librarian as a full participant.

I'd like to end on a positive note. After I finished my instruction session for the spring semester class, the instructor commented to me that the students in her class seemed to have a wide variety of proficiencies using and evaluating information resources. She saw a real need for standardized, lower division, one-unit course in library instruction that all nursing students would have to take before advancing to junior level. This would potentially put all nursing students on the same information research playing field as they advanced to upper division and graduate courses. This idea is currently being presented to the Dean of the School of Nursing.