

Using the Delphi technique to gather expert recommendations about promoting and evaluating healthcare library outreach services

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Abstract

There is a gap in the literature about effective methods to promote and evaluate healthcare library outreach services. This study used the Delphi technique to gather recommendations from twenty-nine UK-based librarians about how to promote and evaluate outreach services. Qualitative data analysis of the recommendations revealed an overall lack of consensus. The most frequently recommended promotion method was to use a different method to promote each aspect of the service. The most frequently recommended evaluation method was to use questionnaires to evaluate various aspects of the outreach service. Further research is needed to determine whether consensus amongst healthcare librarians can be reached on the issue of promoting and evaluating outreach services.

Key words: outreach; promotion; evaluation; Delphi technique; librarians.

Introduction

‘Outreach’ is a term often used in the literature to refer to librarians ‘reaching out’ of the physical library building (1, 2). Outreach services in the context of a healthcare library “include participating in grand rounds or morning report, performing liaison work such as attending faculty meetings, and engaging in Continuing Education (CE) and other training efforts for practicing health professionals” (2).

This study focuses on the promotion and evaluation of healthcare library outreach services. Burroughs (3), for example, argues that effective promotion and evaluation methods are essential to preserve the *viability* of outreach services *in the current economy*. Norrey and Rao (4) write in favour of full cost-benefit analyses to be conducted to provide evidence of how practically effective outreach services are for healthcare professionals. Healthcare library outreach services in the UK are mostly state funded (NHS) and face public sector cuts (5), so questions of value and evaluation are timely. Evaluation emerges as a valuable aspect of the engagement with stakeholders in the services, and helps librarians to measure the effectiveness of outreach (6).

Evaluation generates evidence to support and defend the case for continued funding of these projects (7). The Delphi technique was used to evaluate the views of librarians (8), to gather recommendations for best practice in promotion and evaluation methods for healthcare library outreach services.

Methods

The Delphi method is a structured process “for collecting and distilling knowledge from a group of experts by means of a series of questionnaires interspersed with controlled opinion feedback” (9). It is especially useful for this research because it makes it possible to ask medical or clinical librarians to think more creatively about their outreach services, and how they promote and evaluate what they may be doing on a daily basis (9).

The Delphi technique was developed by the RAND Corporation to gather long-term forecasts during the 1950s (9). It has been used by researchers to gather opinions from experts, and has been used in library science to study issues such as research priorities for health sector libraries in the UK (10).

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The basic characteristics of a Delphi study are as follows: the relevant experts are identified; a first 'round' of questionnaires is sent to them for their initial responses; the results of this round are collated anonymously; a second round is sent out asking the same questions and including the collated responses from the first round (11). As Dietz describes, when "responses begin to stabilize across iterations, or when resources are exhausted, the results of the final round are used as the forecasts produced by the study" (12).

The Delphi method has four features: anonymity; controlled feedback; statistical group response; and expert input (10). Benefits of this research method include the systematic way in which "a wide reservoir of knowledge, experience and expertise" can be drawn upon, "instead of relying on *ad hoc* communications with selected individuals" (9).

For this study, the questionnaire, consent form and introductory letter were piloted with colleagues from the Bodleian Health Care Libraries outreach team before improvements and additions were made (following Landeta (13)). This was to avoid any *possible misunderstandings or 'fuzzy' contributions* (9). This was a valuable exercise, as for example colleagues suggested that the cover letter should refer to medical and clinical librarians, not to 'outreach librarians', as many professionals do not have this word in their job title or even in their job description, in spite of what they do in practice.

The full questionnaire asks for descriptions of the outreach service, current methods of promotion and evaluation, as well as recommended promotion and evaluation methods, using a mixed methods approach to gather a variety of quantitative and qualitative data (14). The questionnaire is designed to be completed by participants in under half an hour.

This project used only two rounds to keep the scope realistic for the timeframe and resources available (15). The first round was sent out in early May to three email listings for UK 'expert' medical or clinical librarians, and the second round was sent out directly to those who responded to round one within two months of the return of the first round of questionnaires, as recommended by Landeta (13). This

article focuses on the results from Round Two, which concentrates on recommended methods of promotion and evaluation.

Results

The respondents

Twenty-nine people responded to the emails sent via the LIS-MEDICAL, HLG-MEMBERS and CLIN-LIB mailing lists on 10/05/10 for Round One. From email addresses and email signatures, it was possible to extrapolate some additional information about the participants. The gender ratio was 27 : 2 [female : male]. Twenty-eight of the respondents were based in England, and one was located in Scotland. This information indicates that the results of this Delphi study will mainly be of relevance to those working in libraries funded at least in part by NHS England.

From the detailed answers to the first question, about half may be classified as either 'Clinical Librarians' (7 out of 29), 'Clinical Outreach Librarians' (3 out of 29), or 'Library Information Services Manager' (3 out of 29). The variety of these results tally with the finding by Spring (16) that there are seven types of health librarian: clinical librarians; health library service managers; senior strategic health librarians/ managers; academic health librarians; independent health librarians; academics; and research librarians. We therefore can be confident first that the respondents are 'experts', and second that we have a good cross-section of professionals represented in this self-selected sample.

Results from Round Two: recommended promotion methods for healthcare library outreach services

Fourteen of the original twenty-nine participants responded to the second questionnaire for Round Two. The qualitative data analysis revealed that the fourteen participants referred to twenty themes in their responses. The response which occurred most frequently, referred to seven times and similarly the most frequent response to this question in Round One, recommended the use of multiple methods of promotion. For example, a participant wrote that "...outreach needs to include a number of marketing strategies and that each organisation will be different depending on local issues and culture". The second most frequent responses were 'tailored approaches' and 'build relationships', each

receiving six references in the answers for this question. The importance of attending meetings was highlighted as a way of “building relationships with key members of staff”.

‘Personal contact’, ‘word-of-mouth’, ‘email library users’, the use of a ‘current awareness bulletin’, being ‘visible’, and being ‘responsive to needs’ all were referred to a maximum of three times by respondents, signifying the importance of these methods in conjunction with those more frequently cited. The use of ‘champions’ was not as popular, which signifies the importance of differentiating advocacy, networking and word-of-mouth as promotion methods.

Six other promotion methods were mentioned by participants: ‘demonstrating how the service can help users’; ‘embedding the service’; ‘displays’; ‘demonstrating your expertise’; ‘involvement in research’; and ‘case studies’. These twenty themes and methods represent an imaginative range of responses from the fourteen respondents to Round Two, as well as a lack of real consensus about any one method of promotion in particular.

These collated recommendations from the experts therefore form the following guidelines for outreach librarians wishing to promote their services, listed in order of frequency of response:

1. *most frequently recommended method*: use different methods to promote the various aspects of your service, taking the culture of your organisation into consideration when planning promotion and marketing strategies;
2. tailor your approaches to promote your services to your target user groups;
3. build relationships with your user groups, especially influential members of staff;
4. attend meetings to promote your services to your user groups;
5. maintain personal contact with users; encourage users to promote your service via word-of-mouth; email your user groups; send out current awareness bulletins; keep visible to current and potential users at all times; and be seen to be responsive to the needs of your users;

6. *also recommended*: promote your service by demonstrating how the service can help users; embed the service within the host organisation; use displays to promote services; take opportunities to demonstrate your expertise to current and potential users; get involved in research and promote this helpful service; and promote your services through case studies.

Results from Round Two: recommended evaluation methods for healthcare library outreach services

The results for question two (*In your expert opinion, what is the most effective way to evaluate a healthcare library outreach service?*) revealed 18 themes in the qualitative data analysis. Questionnaires were mentioned nine times by participants, as the most frequently occurring theme in the data. The respondents indicated that they recommend the use of questionnaires for different purposes, to evaluate different aspects of the outreach service. Overall, this theme corresponds closely to the findings of the literature review that questionnaires are used to evaluate different aspects of services, such as assessing the impact of the Northern Outreach Program in Ontario (17), or to evaluate a literature search service (18).

The second most frequent theme was proving the ‘impact of services’, highlighting the importance of evaluation data in providing evidence of impact mainly to defend budgets, as one participant points out. There are frequent references to demonstrating the impact of services in the literature (17-22). The NHS Library Services toolkit recommends the use of four different data collection techniques to demonstrate and measure impact, including a questionnaire for the recipients of mediated literature searches (19). The other three data collection methods recommended in the toolkit are not as popular with the fourteen participants of Round Two, as interviews were referred to only five times (the third most common theme), yet surveys (online or otherwise) received just two references, and case studies were not mentioned at all in response to this question. It is interesting to note that the respondents indicated that case studies are useful as a promotion method for healthcare library outreach service, yet not as an evaluation method.

The use of mixed methods to evaluate healthcare library outreach services was a theme mentioned five times by

the respondents. One respondent commented that “a variety of methods does seem best, concentrating on the use/impact of the search or information, as well as levels of satisfaction with the service...” Just as the participants recommended using different methods to promote different aspects of outreach services to various user groups, they recommend the use of different methods for a variety of evaluation purposes. This was a theme in its own right, which was referred to three times in the data. There was, again, a very wide range of expert professional ideas and a strong result: no expert consensus about any one method of evaluation in particular.

These collated recommendations from the experts, therefore form the following guidelines for outreach librarians wishing to evaluate services, again listed in order of frequency of response:

1. most frequently recommended: use questionnaires to identify critical incidents, capture impact, to evaluate training sessions and literature searches;
2. interviews are a valuable method to evaluate aspects of the library service;
3. consider using mixed methods, a mixture of qualitative and quantitative data collection techniques, to evaluate outreach services. For instance, use statistical data as well as interviews to measure the impact of services or customer satisfaction;
4. ask external colleagues to evaluate your services to reduce and limit researcher bias; use statistical data; focus groups to explore ways to improve the service; or evaluate your service through one-to-one discussion with individuals at the point of use;

5. also recommended: The Critical Incident Technique; surveys; formal and informal feedback; formal evaluation; other qualitative research methods; personal approaches; informal anecdotes; and it is important to disseminate evaluation results to demonstrate the value of services.

Conclusions

The conclusions that we can draw from this Delphi study are that expert librarians recommend the use of a variety of methods to promote the different aspects of an outreach service, and questionnaires are recommended as the best way of evaluating that service. Further research is needed to determine whether consensus amongst healthcare librarians can be reached on the issue of promoting and evaluating outreach services.

This article concludes with two recommendations for future applications of the Delphi method to the field of healthcare library outreach services. First, this interesting and useful research method has demonstrated the lack of consensus amongst members of the clinical or medical library communities, and it would therefore be interesting to compare the emerging themes of this research project with a similar Delphi study conducted amongst public librarians or academic librarians specialising in law. Second, it would be fascinating to adjust the questions in both Rounds and ask them of European healthcare librarians, such as the members of the European Association of Health Information and Libraries (EAHIL), to compare perspectives on promotion and evaluation methods across Europe. The Delphi method is challenging and rewarding, and hopefully it will continue to be used across the library and information science communities.

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