

RTI ONLINE: Deepening Research Capacity of Health Sciences Librarians

The Medical Library Association (MLA) seeks funding from the Laura Bush 21st Century Librarians Continuing Education Program (\$225,200) for *RTI ONLINE: Deepening Research Capacity of Health Sciences Librarians*, to build upon, extend, and enhance the successful Research Training Institute (RTI) research training and support program (funded by a previous IMLS grant). IMLS funding support will enable MLA to transition the existing RTI research curriculum and learning activities to online formats, test and refine the new online/hybrid model, reduce costs for participants, enhance the effectiveness and reach of the program to new audiences, and provide the capacity to develop an infrastructure that MLA will sustain after the grant period ends. The online Institute will leverage MLA's existing educational services, software, web and communication tools, scholarship and diversity programs, annual conference services, and strong organizational alliances to maximize broad impact and long-term sustainability.

STATEMENT OF BROAD NEED

Librarian-led health information research supports quality health care ([Sollenberger, 2013](#), [Marshall, 2014](#)) and library practice ([Lessick, 2016](#)). However, access to research methods education is limited and more rigorous research training is critically needed to instruct health library professionals ([Myers, 2016](#), [Lessick, 2016](#)), early career health librarians ([Ackerman, 2018](#)), and LIS Master's students ([Luo, 2011](#)). The RTI pilot project that funded the 2018 and 2019 Institutes aimed to address this gap by delivering an immersive, 5-day face-to-face training/support model for health librarians to increase research competencies, confidence, and productivity. [RTI assessment findings](#) demonstrate that the RTI learning model is sound and effective. MLA is committed to fully funding a 3rd in-person Institute in July 2020.

Transitioning the RTI curriculum and learning activities to an online/hybrid model has several benefits. Online learning has the potential to reduce instruction, operating, and participant costs and is more convenient. Affordability and greater flexibility may encourage a wider range of health librarians to participate, such as health librarians who may not be able to attend courses away from the workplace and those with limited budgets from small, rural, and low socioeconomic regions in the country. Additionally, online learning is becoming increasingly popular ([Lederman, 2018](#); [Seaman et al, 2018](#)). MLA has seen an upsurge in participation in online learning courses by members (and a decline in participation in in-person courses) and is committed to providing online learning options that respond to the different needs of health librarians, increase access to health sciences librarian education throughout the country, and overcome barriers to effective learning.

RTI ONLINE will include new curriculum content on dissemination strategies using social media to engage research consumers. Recent studies have shown the positive relationship between citations and social media activity for newly published research ([Azer, 2019](#), [Cawcutt, 2019](#)). This new content area will be developed by expert Karen Gutzman, MA, MSLS, Impact and Evaluation Librarian, Northwestern University, and will help participants implement their own digital dissemination strategies to expand the reach of their impact and engage with other researchers and relevant end-users. Additionally, the project will have significant scholarly involvement through a training partnership with the Master's degree program in Information Science at the University of North Texas (UNT) and an academic liaison (Ana Cleveland, AHIP, FMLA, PhD, Regents Professor, Health Information Program Director, University of North Texas).

The project supports *Lifelong Learning* (IMLS project category), *Continuing Education* (IMLS project type) and aligns with the maturity level of *Piloting*. It pilots an online/hybrid training model to improve the research proficiency of health librarian professionals, enabling them to understand user needs and improve end-user services and education programs for health care professionals, faculty, students, patients, and consumers.

PROJECT DESIGN - Project activities, goals and outcomes:

This project will:

1. Design and pilot two (2) 12-month, cohort-based, online, blended learning opportunities at reduced costs for participants (\$750 per participant instead of \$1,000 for in-person Institute);
2. Increase cohort size from 20 to 30 participants (2 cohorts/60 participants for duration of grant);
3. Augment curriculum through capstone presentations (in-person and online) at special RTI sessions at the Medical Library Association Annual Meetings (May 2022; May 2023);

4. Create new curriculum content on research dissemination strategies using social media to engage research consumers, increase usage, and impact over time;
5. Increase research output of participants through mentorship, peer coaching, networking, and support for one year while participants complete their research projects (potentially 60 projects for duration of grant);
6. Support curriculum and active student engagement through the current RTI Community of Practice to maximize participants' learning, productivity, and collaboration;
7. Enrich and extend program with new peer coaching program; recruit, select, and train 5 peer coaches with diverse backgrounds and experiences from previous RTI graduates;
8. Train and embed five (5) LIS Master's students into the *RTI ONLINE* program, learning activities, and RTI Community of Practice, through a new academic partnership with the University of North Texas (UNT);
9. Offer 4 scholarships per Institute for health librarians working in small/rural libraries with limited budgets and librarians who propose research that explores diversity, equity, or inclusion in health library services, and 2 other general scholarships per Institute;
10. Employ assessment methods (successfully tested for in-person RTI program) to understand the effectiveness and impact of the program and improve the *RTI ONLINE* model; and
11. Disseminate *RTI ONLINE* value, information, processes, outcomes, and products to a broad range of audiences using in-person, print, and online strategies.

PROJECT DESIGN - Project timeline:

- **Year 1** (8/2020-7/2021): Convert curriculum; promote RTI program, secure scholarship donations, and select applicants and scholarship recipients; and begin pilot of 1st *RTI ONLINE* (June 2021-July 2022).
- **Year 2** (8/2021-7/2022): Complete pilot for 1st *RTI ONLINE*; evaluate and assess effectiveness of program; use findings to improve 2nd *RTI ONLINE*; promote program, secure scholarship donations, select applicants and scholarship recipients; and begin pilot for 2nd *RTI ONLINE* (June, 2022-July, 2023).
- **Year 3** (8/2022-7/2023): Complete pilot for 2nd *RTI ONLINE*; assess effectiveness and impact of program; share results, products, and outcomes for IMLS reports, broad dissemination, and future planning.

DIVERSITY PLAN

Diversity, equity, and inclusion (DEI) are [core values of MLA](#). This proposal will specifically support DEI in health librarianship in several ways. The online delivery format with reduced fees will open the project to a more diverse group of librarians. We will also seek partnerships and scholarship support with MLA Chapters located in different areas of the country, the Association of Academic Health Sciences Libraries (AAHSL), and the National Network Libraries of Medicine (NN/LM) to maximize the diversity of participating librarians and library staff. We will recruit librarians via MLA caucuses, NN/LM network members, and affiliated organizations that foster and support librarian diversity, equity, and inclusivity. Additionally, IMLS funds will provide scholarships for health librarians working in small libraries with limited funding and those who propose research projects that explore diversity, equity, or inclusion in health library services.

BROAD IMPACT

The RTI learning model - improving research skills and confidence and spurring the creation of quality of health information research - has great potential for helping current and future health sciences librarians achieve professional success, become more effective health information providers in meeting the needs of health care user communities, and strengthening the knowledge base of quality health information research. RTI staff will assess results and share data/outcomes broadly through the [RTI website](#) and with the wider library community, so others can replicate and build upon our work. RTI information will also be archived for reuse in the NIH/NLM institutional repository, [PubMed Central](#).

BUDGET SUMMARY

RTI ONLINE project team will consist of a leadership team working with faculty, guest lecturers, mentors, peer coaches, and an instructional designer. The estimated budget for this project is \$225,200. This will cover: 0.25 FTE project director (\$39,000); 0.25 FTE MLA administrative support (\$60,000); 0.05 FTE instructional design (\$10,000); faculty (\$52,600); peer coaches (\$5,000); 0.05 FTE digital dissemination coordinator (\$4,800); 0.05 FTE academic liaison (\$4,800); scholarships (\$9,000); Institute operating expenses (\$6,000); fringe benefits (\$15,000); and indirect costs (\$19,000).