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Building a Health System Institutional Repository: Setting Yourself Up for Success from the Start

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Recommended Citation

Martin, Heather J.; Delawska-Elliott, Barbara (Basia); and Dickman, Daina, "Building a Health System Institutional Repository: Setting Yourself Up for Success from the Start" (2019). *Books, Presentations, Posters, Etc.*. 59.
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Building a Health System Institutional Repository: ▼ Setting Yourself up for Success from the Start

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Providence St. Joseph Health

How the repository came about

- Research institutes started reaching out to library for help gathering info
- Library ran alerts and sent basic reports
- Interest in program expansion, but no funds
- Until... the Research division was tasked with **showcasing** outcomes
- Library was contacted – 6 weeks later we had a platform and approval for an additional FTE

Why it worked

- **Library was ready**
 - Alerts were in place – algorithms were updated and tested with system expansion
 - Library staff investigated what it would take to launch a repository and make it succeed
 - Relationships with vendors were maintained
- **When strategic goals for Providence St. Joseph Health included aggregating and showcasing research as an internal success metric, Library was ready with a pitch**

Investigation

- Discussions with colleagues – academic, health sciences research – who already had repositories
- Evaluation of possible platforms
 - Open source – free, though a display platform may have to be purchased – often not feasible for hospitals because server space is needed
 - Subscription – cost associated, but has "bells and whistles":
 - admin dashboard
 - attractive and easily navigable user-facing interface,
 - impact tracking and visualization
 - support services
- Staffing needed

Why bepress?

- **Expert Gallery**
- **Out of the box**
- **No server space required**
- **Individualized support for customization etc.**
- **Multiple formats can be stored**
- **Possibility of journal platform**
- **Data sets can be included**

Institutional Buy-In

- Pitch for platform and staffing
- Engaging stakeholders
- Vendor involvement
- Conversations with IT

Design & Build

- bepress Design Team created mock-ups from existing layout/design options.
- Consult with PSJH Marketing for branding guidelines, colors
- Determine architecture and metadata fields
 - Dependent on existing bepress options
 - Need to meet certain requests from PSJH Research re: Clinical Institutes
 - Create a Taxonomy (more to come on that later!!)



Launch!

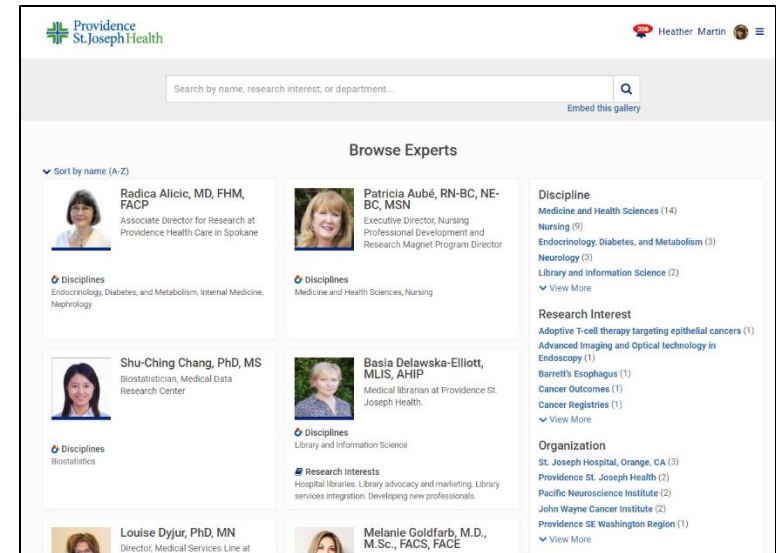
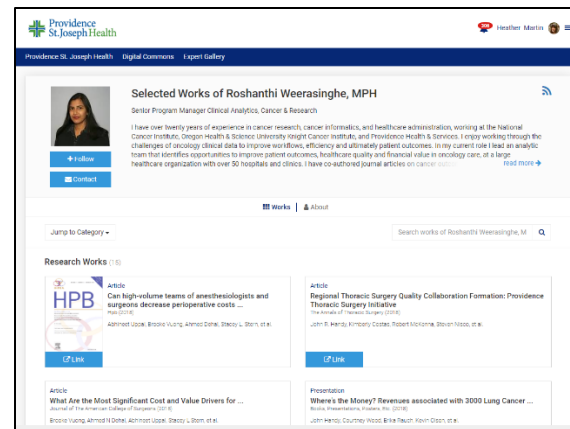
- **Create Digital Assets Library Job Description**
- **Recruit & Hire Digital Asset Librarian**
- **Identify Digital Commons scope**
 - What type of scholarly communication to include?
 - Citation level or full-text?
- **Document workflows**
- **Train additional staff**
- **Populate!**

Expert Gallery

- Getting volunteers (not easy!)
- Discovered the need to scale back on scope of profiles
- Created standardized communication for volunteers to explain scope

Group profiles?

Create-Your-Own profiles?



After Launch

- Marketing and outreach – determining proper channels, finding champions
- Refine display, metadata options
- Identifying future directions (videos, data sets, journal, events, ETD collection)
- Make use of PlumX

Health System Challenges

- Don't have defined departments or consistent terms
- Difficult to get buy-in/submission from non-tenure track working clinicians
- Inconsistent affiliation names
- Scale (119,000 employees, 25,000 physicians)

Providence St. Joseph Health Digital Commons

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- Expert Gallery
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Digital Commons serves as an institutional repository to collect and present Providence St. Joseph Health's research and other scholarly activity in one convenient, easily navigable location. Digital Commons aims to activate the voice of PSJH and share our research accomplishments as a world-class research organization.

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Reader from: Hue, Thua Thien-hue, Viet Nam

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- Link** [False-positive screening events and worry influence decisions about surgery among high-risk women](#), M Robyn Andersen, Beth Y Karlan, Charles W Drescher, Pamela Paley, Sarah Hawley, Melanie Palomares, Mary B Daly, and Nicole Urban
- Link** [Isthmohalamic Vasoresection Produces Tumors Often Inaccessibly, Duresis But Occasionally Cures Disease](#), Sylvia L Aza, Shereen Ezzat, Daniel F Kelly, Peiman Cohan, Yuki Takasumi, Gami Bankhoudatan, Anthony P Heaney, Revena Ridout, Constance L Chik, Lester D R Thompson, Fred Gentili, and Ozgur Mete
- PDF** [Eradium: Author Correction: Surgical Standards for Management of the Axilla in Breast Cancer Clinical Trials with Pathological Complete Response Endpoints](#), July C Boughey, Michael D Alvarado, Rachael B Lancaster, W Fraser Symmans, Rita Mahtkar, Jasmine M Wong, Cheryl A Eving, David A Potter, Todd M Tuttle, Tina J Heenan, Josh M Carter, James W Jakub, Henry O Kaplan, Claire L Buchanan, Nora T Jaskowiak, Husain A Saffar, Jeffrey Mueller, Rita Nanda, Claudine J Isaacs, Paula R Pohlmann, Filipa Lynce, Eleni A Tournis, Jay C Zeck, Catherine Lee, Julie E Lang, Paulette Mhaweck-Faucoglia, Rosini Rao, Bret Taback, Constantine Goodellas, Margaret Chen, Kevin M Kalinsky, Hanna Hershosh, Ergul Kiliyas, Tara Sant, Gillan L Hirst, Smita Asare, Jeffrey B Matthews, Jane Penninger, and Laura J Esseman
- Link** [Initial safety analysis of a randomized phase II trial of neoleptomycin-D-GM-CSF and trastuzumab compared to trastuzumab alone to prevent recurrence in breast cancer patients with HER2 low-receptor tumors](#), Travis Citron, Kaitlin M Peace, Jarrod P Holmes, Timothy J Vreehan, Diane F Hale, Garth S Herbert, Jennifer K Litton, Rashmi K Murthy, Jason Lukas, George E Peoples, and A Mitendorf Elizabeth
- Link** [A phase II trial of intraarterial nab-sirolimus in the treatment of advanced malignancies primarily confined to the central nervous system](#), Mhaela C Cristea, Paul Frankel, Timothy Synold, Saul Eugene Rivkin, Dean Lim, Vincent Chung, Joseph Chao, Mark Wakabayashi, Benjamin Paz, Ernest Han, Paul Lin, Lucille Leong, Amy Hakim, Mary Carol, Neal Prakash, Thanh Delinger, Min Park, and Robert J Morgan

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Christina Barlow, Shawna Blix, and Sarah Seachoo

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