COLLABORATIVE MENTORSHIP NETWORK (CMN) LIBRARY RESOURCE CENTRE (LRC) ENTRY GUIDE

INTRODUCTION

The Collaborative Mentorship Network (CMN) provides a broad range of information in a variety of formats within its Library Resource Centre (LRC). The quality, reliability, integrity, and accessibility of these publications are critical to ensuring CMN members are informed on the best available evidence related to substance use and chronic pain. The CMN's ability to provide its members with high quality and trustworthy information depends on a standardized methodology for adding resources and tools to the Library Resource Centre.

SCOPE AND AUDIENCE

This document outlines the processes and decision-making guidelines for individuals directly involved in creating, uploading and linking documents to the CMN Library Resource Centre. The procedures outlined in this document take effect January 1, 2022, and all CMN staff are encouraged to follow this guideline as a best practice.

PURPOSE OF THIS GUIDANCE DOCUMENT

The purpose of this document is to help guide ACFP and CMN staff to make decisions on quality and research standards when adding documents that will be used as sources of evidence and practice guides for family physicians. The ACFP adheres to the following definition of 'Evidence - Based Medicine (EBM)', in order to support clinical decision making:

"Evidence-based medicine is the use of mathematical estimates of risk of benefit and harm, derived from high-quality research on population samples, to inform clinical decision-making in the diagnosis, investigation or management of individual patients" (Greenhalgh and Donald, 2010,pg. 1)

According to Dave Sackett, EBM should be used for the following reasons:

(1) To convert information into answerable questions
(2) To optimize how we access the best evidence
(3) To use critical appraisal to assess validity (truth) and usefulness (clinical applicability)
(4) To implement the results in clinical practice
(5) To evaluate our own clinical performance

Given this premise, this guidance document serves as decision making process to follow when deciding to add a document to the resource centre. See Appendix A: Map to Evidence for a visual guide.

THE OBJECTIVES OF THIS GUIDE ARE AS FOLLOWS:

- Know and apply the criteria for evaluating information and its sources and feel confident posting resources to the CMN LRC
- To provide information on how to identify different sources of evidence and how to access those resources
- How to differentiate between research evidence, other types of scholarly articles and non-scholarly articles
- Outline relevant information to guide posting to the CMN LRC.

POSTING CRITERIA (GENERAL) AND RELATED CATEGORIES

Overall, there are five general criteria for posting information to the LRC. All material must meet at least one of these criteria to be considered for posting within the LRC. After establishing the material as meeting these criteria, the user can file the document within the pre-determined categories (folders).

The CMN LRC is an information repository providing helpful resources and tools for treating chronic pain and substance use, therefor all resources for potential addition to the LRC must first and foremost have chronic pain and/or substance use as the main topic of interest. Secondary topics, such as COVID -19, are permissible but only as they pertain to chronic pain and substance use issues.

(1) Chronic Pain related
(2) Substance Use related

Sub - Folder Categories:

- Guidelines
- Resources for Patients
- Evidence Summaries and Research
- Practice Tools

(3) Mentorship

The LRC provides its members with relevant materials that will help them with various aspects of mentorship. This includes guidelines, tool kits, and process documents, etc.

Categories:

- Mentorship Tools
- Leadership

(4) Collaboration Forum and presentations, e.g. (Pain Rounds, Project ECHO)

The CMN provides its members with learning opportunities and related knowledge products. Materials related to these are added to the LRC for members to access and use.

Categories:

- Collaboration Forum
- Pain Rounds
- Project ECHO (Forthcoming)

(5) CMN Information, Updates and Newsletters

Information relevant to CMN members that does not fit other general criteria are included here. For example, the CMN harm reduction policy can be found there. Additionally, the monthly newsletters are archived there.

Categories:

- Catch-Up (CMN Newsletter)

PDF documents

- Title: provide the exact title of the document
- Library: choose Collaborative Mentorship Network for Chronic Pain and Addiction
- Folder: choose the appropriate folder then subfolder, e.g. Chronic Pain-> Guidelines
- Description: Provide a minimal description of the document and includes (at least) the following information:
- Author and affiliation
- Date of Publication
- Tags: use **at least** one of the pre-authorized tag words.
- Link the document to other library entries (if necessary and appropriate)

PPT and Video

- Title: PPT/Video: the exact title
- Examples
    - PPT: Getting Personal in the Pandemic: Getting Real About Our Own Wellness
    - Video: the Other Emergency- Meet the Disruptors
- Library: choose Collaborative Mentorship Network for Chronic Pain and Addiction
- Folder: choose the appropriate folder then subfolder, e.g. Collab Forums and Presentation-> Collaboration Forum
- Description: Provide a minimal description of the document and includes (at least) the following information:
- Author and affiliation
- Date of Presentation
- Tags: use **at least** one of the pre-authorized tag words.
- Link the document to other library entries (if necessary and appropriate)

TYPES OF RESOURCES

The following are descriptions of the types of the various resources that may be added to the CMN LRC.

Peer reviewed journal articles: articles that have gone through an evaluation process in which journal editors and other expert scholars critically assess the quality and scientific merit of the article and its research. Only articles that pass this process are considered 'peer-reviewed'. Peer-reviewed journals may include the research of scholars who have collected their own data using an experimental study design, survey, or various other study methodologies. They also present the work of researchers who have performed novel analyses of existing data sources or systematically reviewed previously published research.

White paper: A white paper is an authoritative report or guide that often addresses issues and how to solve them. The term originated when government papers were coded by color to indicate distribution, with white designated for public access. Thus, white papers are used in politics and business, as well as in technical fields, to educate readers and help people make decisions. In commercial use, the term "white paper" has also come to refer to documents used as a marketing or sales tool (https://www-cdn.law.stanford.edu/wp-content/uploads/2015/04/Definitions-of-White-Papers-Briefing-Books-Memos-2.pdf)

Grey literature: information produced outside of traditional publishing and distribution channels it can include reports, policy literature, working papers, newsletters, government documents, speeches, white papers, urban plans, and so on. This information is often produced by organizations "on the ground" (such as government and inter-governmental agencies, non-governmental organisations, and industry) to store information and report on activities, either for their own use or wider sharing and distribution, and without the delays and restrictions of commercial and academic publishing. For that reason, grey literature can be more current than literature in scholarly journals. Grey literature (usually) does not go through a peer review process, the quality can vary a great deal.

Guidelines: the WHO defines a guideline as, **"systematically developed statements to assist practitioners and patients make decisions about appropriate health care for specific circumstances."(**
https://www.euro.who.int/__data/assets/pdf_file/0011/118379/E53492.pdf**)**. Essentially**,** guidelines are tools to help make decisions, the tool is developed with the implementation of the decision as the main focus.

OTHER PUBLICATIONS

- The table below is provided to give some guidance on types of publications that are considered appropriate and not appropriate for consideration.

Appropriate for CMN LRC:	Not Appropriate for CMN LRC (generally not considered):
annual reports	advertising
audio recordings	backgrounders
audiovisual and multimedia productions	blog postings
booklets	calendars
charts (*)	contractual material
educational material	datasets
fact sheets	decisions (rulings, judgments, awards…)
financial reports	draft documents
guides	dynamic or frequently updated documents
handbooks	dynamic or frequently updated webpages
legislation (Acts and Regulations)	events notices
standards	forms
survey results (edited/analytical)	letters and other correspondence
Videos	licenses and permits
White papers	meeting material
	news releases
	tweets

STYLISTIC POINTS (FROM ACFP STYLE GUIDE)

ABBREVIATIONS AND SYMBOLS

- Avoid abbreviations or acronyms when possible, and use only when a term is repeated frequently enough to warrant it; define in the first occurrence in the document, then use the abbreviation consistently
- Always spell out "and" (don't use "&") in running text
- Don't use periods on abbreviations that use capital letters (e.g., ATB, YMCA) unless the abbreviation is geographical (e.g., B.C., U.K.) or refers to a person (e.g., W.O. Mitchell)

CAPITALIZATION

- Use lowercase whenever there is a reasonable choice
- Lowercase corporate and organizational titles (CMS 8.26)

NUMBERS, DATES, AND TIMES

- Spell out one to nine; use numerals for 10 and higher (CMS 9.3)
- Use commas to divide thousands (e.g., 1,512 or 23,000)
- 780-488-2395

PRONOUNS

- Use the singular pronoun (it, its) to refer to an organization or corporation (e.g., The ACFP is… It provides…)

PUNCTUATION

- Put one space after a period
- Em dash—set tight with no spaces
- En dash—use in time, date, and page ranges (e.g., 2003–2004) (CMS 6.78) and in compound adjectives where one element is an open compound or hyphenated compound (e.g., post–World War I) (CMS 6.80)
- Use the serial comma (comma before "and," "but," or "or" in a series) (CMS 6.18)
- Use commas after both "e.g." and "i.e." (CMS 6.43)
- To make the possessive of a singular word ending in s, add 's (Dickens's books) (CMS 7.16)