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## **The (Treasure) Map to Induction: Using pirates to make a library introduction more fun- Fiona Paterson and James Atkinson**

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### **Introduction**

During summer 2015, City University London's Nursing and Midwifery Subject Librarian, Catherine Radbourne, set out to make a resources introduction for 1<sup>st</sup> Year students more exciting. Traditionally a librarian would stand at the front of a room and talk through resources while demonstrating them onscreen. Ideally, she wanted to give students a more interactive and interesting experience. The drive for a change came partly from hearing and reading about different creative teaching techniques and wanting to try these out; but also because the time for the workshop had been cut by 50%. As fellow members of the Library's Information Literacy Group, we were drafted in and the project began.

### **Planning**

The session would follow on from a general library induction and needed to be easy to replicate as various staff members would deliver it. It needed to cover a range of resources such as print and e-books, e-journals and specialist resources including Visible Body, Elsevier Clinical Skills and BMJ Best Practice. Additionally, as it has its own special login process, each session had to start with the attendees setting up Elsevier Clinical Skills accounts.

Once the parameters of the session were established, we had a brainstorm of ways to make it fun. The ideas we came up with included:

- Bingo
- Spot the difference
- Matching games
- Storytelling
- Case studies
- Metaphors
- Quizzes

An initial quiz idea developed into a treasure hunt so that it could include a storytelling element as well.

We then started to think about what software could support us best. Adobe Presenter was tested and alternatives such as Prezi were explored. Adobe Presenter seemed to offer what we required: the ability to make an online, interactive quiz that would allow the presenter to circulate and answer questions.

We felt a video would be good to introduce the treasure hunt, setting the scene and thus the story. We decided on a pirate theme, as it was a treasure hunt, but we also needed a topic. We considered diabetes and heart disease, as these are topics that come up when students undertake local community projects and went with the latter as there were associated procedures available on Elsevier Clinical Skills.

## **Production**

Quite early on we started work on the videos: one to introduce the theme and set the task, one to conclude. Catherine wrote a draft script which we helped to hone and she also made contact with colleagues in the Learning Enhancement and Development (LEaD) team who were keen to collaborate and try something a bit different. Our contact volunteered to make a short animation for the beginning. We found our location (the Ye Olde Mitre in Ely Place) after Catherine embarked on an historic pub walk. We were fortunate enough to get the funding required and started to plan the filming itself.

Simultaneously we were designing and building the quiz too. We knew what resources and questions we wanted, and, as Presenter is setup with various different sorts of questions such as true/false and multiple choice, we sought to use a variety of question types throughout to help add to the experience.

We also developed a hand out that students would use to help complete the quiz. It was designed as a treasure map that, on one side featured a map with images representing the different resources while the reverse featured guidance on finding the correct answers.

## **Trials and Filming**

With the quiz and hand out written we tested them on a group of willing librarians. Mostly this went well but we found the “pirate” font we had used in the quiz proved too difficult to read and our volunteers felt the wording of some of the questions needed a bit more clarity. We also discovered the e-book we had chosen only supported a small number of concurrent users and so we had to change it. They felt, however, that we had a good range of difficulty in the questions and liked that it would get students navigating different resources.

With script and storyboard prepared by Catherine, costumes sourced, lines rehearsed, shooting took place early the morning of a tube strike! The filming went well and we nervously awaited the results, which were really good.

Our second trial came the day before we ran the sessions and was the first time we had incorporated the video. Everything ran smoothly and we got good feedback. This gave us a lot of confidence for the following day. However, disaster struck when Visible Body stopped working in the afternoon. Fortunately, after liaising with colleagues, we were able to implement a workaround.

## **Delivery and Reflection**

On 17<sup>th</sup> September 2015, three months after the initial meeting, four people delivered a total of 12 sessions with 3 occurring simultaneously across 4 slots. Each session had one presenter, lasted an hour and took place in an IT room. The running order of each session was as follows:

- Introduction and signing up to Elsevier Clinical Skills
- Introduction video
- Quiz, including prize giving
- Conclusion video
- Gathering of feedback

Reflecting on the experience, there were a few areas that provided challenges and could be looked at for improvement. The Visible Body workaround was semi successful. Resources can break at any time and is difficult to prevent but it highlighted the need for a back-up plan.

Setting up Elsevier Clinical Skills accounts is an awkward process made worse when 40 students all try at once. A lot of students needed individual assistance and we overwhelmed the system causing confirmation emails to be delayed. We're looking at the possibility of bulk uploading student data in future, although we would still need to go through the log in process which is more complex than with other resources.

The difficulty of helping 40 students at once wasn't restricted to setting up Elsevier Clinical Skills accounts and the fact that students worked at their own pace meant it was hard to bring everyone together to highlight particular issues. This was one of the reasons that the Visible Body work around was only semi successful. If the sessions were done again, we would either need to present to smaller groups or have extra staff on hand to help answer queries.

We received completed feedback forms from 109 of the 400 attendees. Feedback was good (64 respondents thought the session was good, 23 excellent, 18 fair and 4 poor) although comments were mixed. The issues highlighted in the comments were similar to the challenges we had found ourselves, namely setting up Elsevier Clinical Skills accounts, technical difficulties and lack of presenters. 95% thought the session length was just right but from experience we found there was a large range of speeds in which people completed the quiz, with some students leaving early and others staying behind. There were some comments on the clarity of the instructions. We didn't feel the hand outs were utilised in the way we'd hoped. We really wanted the quiz to be self-led but because the resources were new, it may be that more guidance was necessary in the form of demonstration. A small percentage thought the use of the theme was childish but with the range of communication and learning styles across a group this is inevitable.

There are plans to run the sessions again but with a different theme. Other members of Academic Services also thought Adobe Presenter had great potential for creating fun and interactive introductions to resources.