



Chapter Council Presents

Sharing Roundtables

MLA Annual Meeting

Chicago IL

Sunday, May 18, 2008

Final Report Form

Table #16 and Table #16a

“Issues in Hospital Librarianship”

Participants:

Table 16: Julie Esparza, Facilitator, Kolleen Olsen, Recorder;
Kate Flewelling, Susan Fowler, Anne-Marie Kaminsky, Donna McCloskey, Cynthia Phyllaier, Barbara Slavinski

Table 16a: Janet Cowen, Facilitator, Jim Bulger, Recorder;
Catherine Mary Boss, Yalan Guan, Rita Neri, Zoe Pettway Unno, Amy Picard

In a brief format, please list topics discussed and ideas shared. Use the back of this sheet or an extra sheet if necessary:

**Please see attached report compiled and submitted by Jim Bulger (Table 16a) and Kolleen Olsen (Table 16).*

Recorder: Please send your report (MS Word file attachment preferred) by Monday, June 9, 2008 to:

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Chapter Council Sharing Roundtables
Issues in Hospital Librarianship – Tables 16 & 16a
May 18, 2008

What's Good?

We feel appreciated by many within our organizations, especially those we serve directly, and believe that we make a difference in our hospitals. Some are involved with the Magnet journey or Evidence-Based Practice programs. Some, from one-person libraries, like being their own boss. We value the personal relationships we're able to have with various members of the hospital staff.

Nursing Issues

Nurses don't use the library a lot. They lack time; however, that means they often rely on us more for assistance. Some lack search skills. Questions from nurses can often be more difficult to search. Some librarians are included in nursing orientation and/or are included on nursing committees.

Space Issues

We face a variety of space issues – from being 3 years in a “temporary location,” to locations that are in less than desirable traffic areas, to being downsized because “everything is going electronic” so the library needs less physical space. One institution is adding a new facility across town, with little library space being considered. Residents using the library as a lounge, and conducting conversations around patient care, can result in patient privacy issues. For some, more group meeting space within the library would be helpful. Some are finding less traffic in the library as online resources become more available. Questions on after hours access and security were raised. Several libraries have 24/7 badge access, with a number reporting no issues with this; others raised concerns with food left behind or missing materials.

Public Access Issues

About half of us are open to the public. Some have experienced inappropriate use of computers. Some have segregated computers to avoid this (e.g., e-mail & Internet-only workstations). Most libraries are available to all hospital staff, not just clinical staff or doctors. A question was raised about what opportunities there may be for improving health literacy within our own employee population, which is broadly diverse, including immigrants in most locations.

IT Department Issues

Apart from “blocked” websites, most of us seem to experience good relationships with our IT departments. A couple libraries previously reported to the IT department. Most felt the institutional servers were stable.

Materials Issues

Some of us don't buy many books anymore. We felt that the list of “core journal titles” might vary from one institution to the next. There is a variety in the mix of electronic and print journals, with some moving to nearly all electronic. We all face challenges with e-resource negotiation and licensing. Another question is whether to catalog electronic journals. Some include electronic journals in their OPAC, others rely on a journal A-Z list. Solo librarians struggle with how to keep up with cataloging.

Financial/Budgetary Issues

We run the gamut from having lost ½ our staff & resources, to feeling that our budget is currently sufficient. Being understaffed and underfunded was a lament of several librarians. Hospitals increasingly face reimbursement issues; the state of New Jersey recently cut all payments to hospitals for charity care. Hospital administrators do not understand the financial realities of online resources and

multi-site licensing. Many administrators feel it is all “free” on the web, without realizing that their access to a particular journal is because of a library subscription. What can we do to improve branding and awareness of library services?

Reporting Structure Issues

Hospital librarians have a wide variation in their place within the organization, including reporting to medical affairs, human resources, pharmacy, guest services, or the chief medical officer. In some cases, the reporting structure changes frequently. This affects how the library is perceived, funded, and supported.