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Open Forum (on strategies for advocacy) NAHSL 2013: UMass Medical School's Experience

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Authors	Martin, Elaine Russo;Fama, Jane;Levin, Len L.
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Open Forum NAHSL 2013


UMass Medical School's Experience

Elaine Martin, D.A.
Director of Library Services

Len Levin, MS LIS, MA, AHIP
Head, Education and Clinical Services

Jane Fama, MSLS, AHIP
Associate Director

Lamar Soutter Library



Outline

- Context
- Library Trends
- 4“Rs”
- Fellows Program
- Reference Model
- Changing Space
- Rejuvenation



Context

UMMS

- \$20 million deficit institution wide
- 5% cut across the board FY 2014 (all departments except those involving public safety)
- Hiring freeze
- Rising cost of journals
- Sequestration- resulting in mandatory 5-10% cuts to all NIH-funded research grants
- Loss of revenue from Commonwealth Medicine
 - Reduced contracts with state agencies including correctional health
- Clinical partner in financial straits as well
- Institution is preserving mission critical programs
- UMMS proposed operational goals mandates all departments to decrease expenses by anticipated 10% before FY15.

Library Trends

LSL Mirrors National Trends

- Declining Statistics
 - Circulation
 - ILL
 - Binding
 - Cataloging
- Self-Service
- Move to Single Service Desk
- 24/7 Access to the Library
- Library Work is Changing

Professional Work Is Changing

The professional work is increasing in volume and becoming more complex and technology focused:

- Participation in systematic reviews, chart rounds, IRB
- Developing custom portals for departments
- Website consultation service
- Library as publisher
- Participating as primary staff on research grants
- In-depth reference requests such as
 - Developing complicated search strings for requests from the Office of Research or the Dean's office.
 - Getting people started with research
 - Helping people decide where to publish
- Complex IR work (Institutional Repository is expanding)
- Complex cataloging work / metadata
- Library professionals are spending more time bringing services off site to locations such as Memorial and Mass Biologics.

The 4 Rs

- Reject (the old)
- Rethink (the model)
- Redo (implement new model)
- Rejuvenate

Rethink the Librarianship Model

- Rethinking the Library in “mission critical” terms leads us to a totally professional model that better meets the needs of faculty, students, and staff of UMMS.
- As we take a more universal view of what it means to be a librarian, we concentrate in new areas:
 - Data services
 - Embedded librarians
 - Focus on UMMS programs
- Questions to address?
 - Will our library continue to be “equal access” ?
 - Will we provide baseline service, but move to an entrepreneurial chargeback model “pay to play”?
 - Will our budget fluctuate based on who uses our services and who can pay?
 - What changes do we need to make to morph into a Library that continues to meet the needs of the medical school as it changes?

Summary of Staffing Changes

- Transition staffing from current non-MLS support staff to recent MLS graduates
 - Layoff 5 support FTE
 - Cut 2 vacant support FTE
 - Recruit 3 MLS degreed Library Fellows
- Layoff copyright and licensing services librarian. (1 professional FTE)

Summary of Library Fellows Program

- Incorporates training, professional development, and research.
- Guides the fellow toward a professional career in academic medical Librarianship.
- LSL is the learning laboratory for exploring the ins and outs of assisting clinicians, researchers, educators, and students with their information needs.
- Fellows contribute to LSL by performing meaningful projects and assignments and bringing passion and new ideas about librarianship to the organization.
- Provides a two-year work experience emphasizing hands-on learning and research into topics of information management, medical librarianship, and the biomedical sciences.

Developing the Fellows Program

- Curriculum Task Force
 - Overall plan for a two year integrated curriculum
 - Foundations
 - Rotations and Projects
 - Research
- Research Task Force
 - Research ideas database
 - Develop criteria for research projects, including approval process
- Reference Task Force
 - Eliminate pager and “on call”
 - Develop appointment based model

Current Reference Model

- Desk – “Library Service Point”
(staffed, until recently, by library assistants)
- Triage Model including pager
- Librarians “on call” in the Library
- Some librarians conducting
“embedded” liaison work

Reference Desk – Today



"Organic" Library Liaison Service

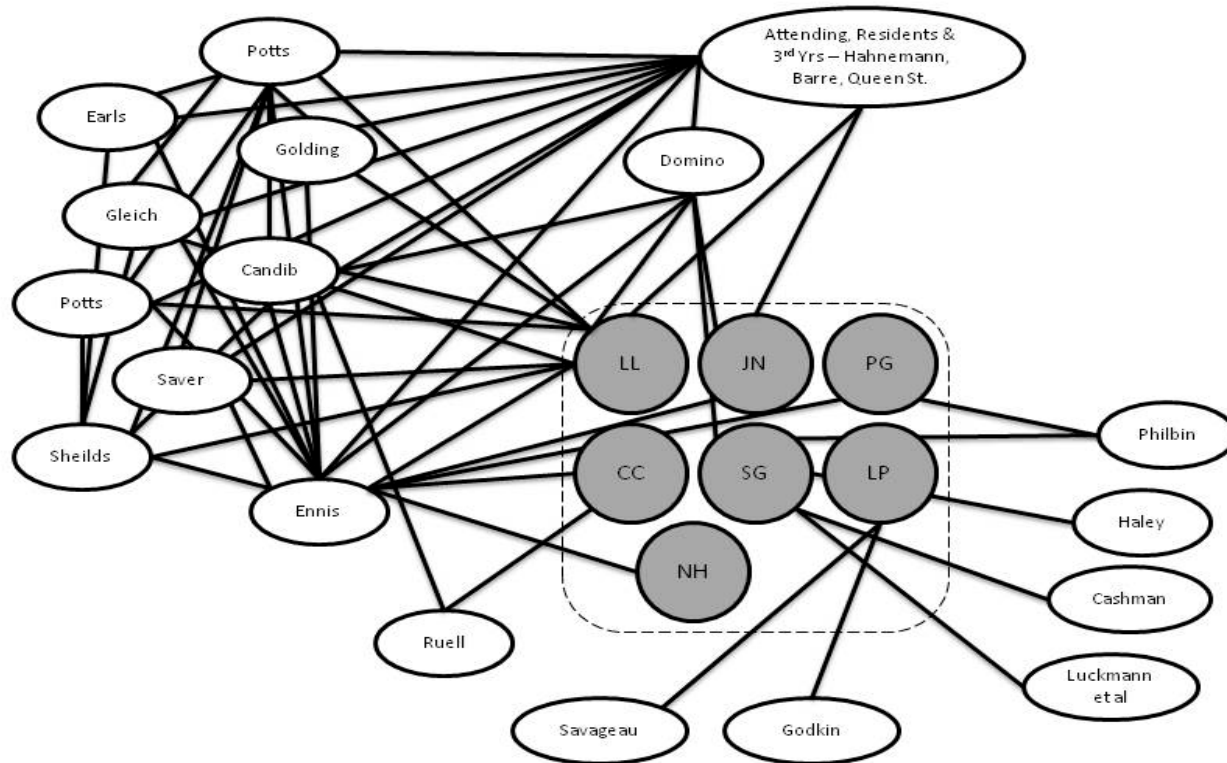


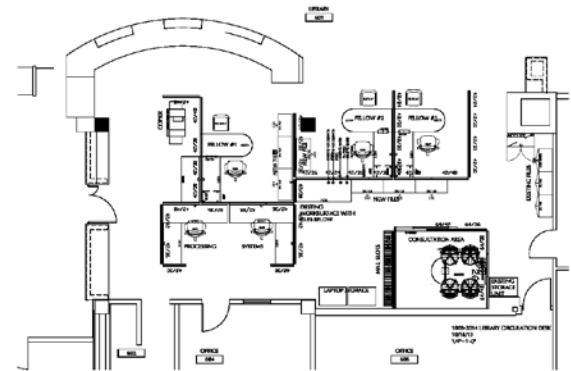
Figure 1: LSL Staff Connections to Family Medicine & Community Health
(example; not exhaustive)

New Service Model

- No Desk, Paging System or “On Call” Librarians
- New Model:
 - Consultation service model; appointment based
 - Librarians off-site; assigned to specific projects or departments (The “Informationist”)
 - Less “library as place” based service
 - More librarians going out of Library to provide service.
 - More grant funding for partial salary support – charge back model of reference service.
 - This will include a) a review of what we collect for statistics, b) how we market ourselves to our users and c) how we communicate amongst ourselves.

Changing the Space

- Remove reference desk
- Remove single service point desk
- Create open space inviting patrons to work with Librarians
- Move reserves to floor for self service



Rejuvenate

- New, optimistic view of the Library.
- Flexible and ready to change as needed to meet current needs.
- Opportunities for individual growth
- Creating an environment that promotes contributions to the profession of Librarianship.