

Health Libraries Australia

Volume 1, Issue 3

July/August 2001

This special issue of Health Libraries Australia brings you information on

- HLA self nomination
- Future directions for HLA
- HLA portfolios
- HLA strategic planning day
- State and territory activity

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Moving forward

Melanie Kammermann, HLA Convenor

Welcome to the first issue of *Health Libraries Australia* to be published by the ALIA Health Libraries Australia (HLA) group!

The purpose of this newsletter is to update members and other interested parties on the current and anticipated activity of HLA. In addition, reports from each of the states and territories provide an update on what's happening at the local level following the dissolution of all ALIA sections on 30 June. Activity has been pretty varied.

I'm not going to go over too much old ground but as many of you would be aware the ALIA Board of Directors endorsed the HLA self-nomination in May. And since then the group's budget submission for June-Dec 2001 has also been approved (see page 2-4). Needless to say the next step is to determine the strategic direction for the HLA group.

A considerable amount of work has been done on this to date. The 'visioning' meeting held in Sydney in January this year provided a relatively detailed environmental scan. The group that attended that meeting identified and prioritised issues considered critical to the ongoing viability of the profession, libraries and a professional group (whatever it might look like). In addition the numerous postings to the ALIAhealth discussion list can be drawn upon. Many of the more pertinent messages were collated into a document by Stephen Due last year.

Using this information, the HLA Executive, portfolio holders and state, territory, regional and sector representatives will come together on 25 August 2001 to look at the business operations of HLA as well as developing a strategic plan for the group. The decision to limit the strategic planning day to a select 15-20

people has been a deliberate one. There is a considerable amount to work through – HLA's mission, the goals and objectives for the group, governance issues, financial requirements, communication strategies and marketing. – and this can best be achieved by a focused few. Members can have their say at the Annual General Meeting, scheduled for Tuesday 27 August between 12.30 and 2.00pm, when the Executive presents the outcomes of the strategic planning day.

The planning day will be facilitated by Dr Jan Murray. Jan, who now runs a consulting and training business, and spent many years involved in LIS education, has considerable experience in this area.

Getting HLA off the ground and running is challenging but it's also pretty exciting. There are incredible opportunities available. You can read about some of them in the newsletter. The long standing work Cheryl Hamill and Titi Alexander have done with Health Online, proposals like Gillian Wood's Council of Australian Health Libraries (CAHL) and consortia initiatives are particularly attractive, however, having said that, there has already been some debate as to whether it would be suitable for such initiatives to operate under the ALIA banner. Many of us tend to think of ALIA in terms of the individual benefits membership brings and not so much the corporate, or if you like, industry benefits, CAHL or consortium type arrangements represent. It may well be that HLA can find a way of covering both individual and industry needs. My personal view is that it can. And in fact, looking through all the issues raised at the visioning meeting,

(Continued on page 12)

Health Libraries Australia - New Group Endorsed by the ALIA Board of Directors

Cheryl Hamill's message posted to ALIAHealth discussion list on 28 May 2001

The submission to form a new national group to replace the Health Libraries Section has received endorsement from the ALIA Board of Directors. Health Libraries Australia (HLA) is one of 64 new groups endorsed at the last meeting of the Board of Directors.

The submission was done in some haste and with a limited amount of consultation. However, a key first activity for HLA is to hold a strategic planning day on Saturday 25th August before the Rivers of Knowledge conference commences in Melbourne. This will be attended by office bearers and portfolio holders. If you have issues you would like to see considered at the meeting, please contact one of the office bearers or portfolio holders. More detail on this meeting will be distributed over the next few months. In the light of

some recent emails to aliahealth, it will be important to consider how HLA maintains contact with members in the absence of some state based groups - can all interests be represented via the portfolio holders and direct contact via email and mail, or should we be looking at some other models?

This is just the beginning - we need the input of all to make HLA work. The new structure however offers support - we don't have to carry all the workload associated with planning activities. We can budget for project officer support time to back up our vision and activities.

Constructive criticism of the activities planned and the structure for HLA are WELCOME - especially prior to the strategic planning day. Have your say.

ALIA Group Application Form

Prepared by Cheryl Hamill

Note: some portfolio holders have changed since the application was originally lodged with ALIA.

Name of Group

Health Libraries Australia (HLA)

Start & End Dates

July 1 2001 to June 30 2002

Purpose and Goals of Group

To support and improve the knowledge, skills, and interests of health librarians and health library technicians. (Links to ALIA objects c and e)

To foster excellence in the delivery of health library and information services in order to enhance the quality of health care, education, research, and health management. (Links to ALIA objects b and d)

Geographic Coverage

Australia wide. Health librarians who work in hospitals, research institutes, government departments, regional health services, professional colleges, universities, community organisations, or any health related organisation or business. Health libraries will also be encouraged to join as institutional members.

Current personal membership in the Health Libraries Section is around 500. A very late and quick call for expressions of interest was distributed through the discussion list aliahealth on 29th March 2001. Within 24 hours, 50 members had responded to give their support for the formation of the new national group.

Office Bearers

Convenor / President:

Melanie Kammermann
(on ALIA records as Melanie Foti)
Douglas Piper Library
Royal North Shore Hospital, NSW
ph. +61 2 9926 7495 fax. +61 2 9926 6292
email. melaniek@med.usyd.edu.au
ALIA membership # 040165

Secretary:

Patrick O'Connor
Librarian
Rockhampton Hospital, Qld
Ph 07 4920 6525 Fax 07 4927 4978
Patrick_O'Connor@health.qld.gov.au
ALIA membership # 043698

ALIA Group Application Form (cont.)

Treasurer

Veronica Delafosse
Health Sciences Library
Caulfield General Medical Centre, Vic
Ph 61 3 9276-6832 Fax: 61 3 9276-6135
Email: Library1@cgmc.org.au
ALIA membership # 019648

It is also planned to have a number of portfolio holders on the executive to ensure action is pursued on various issues which have been identified as priorities for members. These issues were discussed in a meeting held in January 2001 in Sydney and at the AGM held during the Hobart conference in 1999.

Portfolios

CPD Activities in evidence based health care.
Ruth Sladek (S.A.) / Greg Fowler (Qld).

Input into national health information policy (Health Online).
Cheryl Hamill (W.A.) / Titi Alexander (A.C.T.)

Anne Harrison Fund Administrators
Anne Batt (W.A.)

National Newsletter Production
Gabby Fessessey (Vic)

HLA Strategic Planning for the next 2 year cycle
Melanie Kammerman (N.S.W.)

Biennial Health, Specials, Law Conference organisation.

Majella Pugh (Royal Melbourne Hospital, Victoria and a S.A. representative for the 2003 conference to be held in Adelaide)

ALIAhealth discussion list ownership.
Cheryl Hamill and Rhonda Mayberry (W.A.)

Accreditation of library services.
Brigitte Glockner (WA.)

Health libraries and library staff census.
Cheryl Hamill (W.A.) and Stephen Due (Vic)

Collaboration / consortia / electronic networking of resources.

A priority for which no portfolio holder or action has yet been identified. To be clarified during a strategic planning process in August 2001.

Benchmarking

A priority for which no portfolio holder or action has yet been identified. To be clarified during a strategic planning process in August 2001.

Special interest groups within HLA.

For instance, academic health libraries, teaching hospital libraries, regional health libraries, etc. A priority for which no portfolio holder or action has yet been identified. To be clarified during a strategic planning process in August 2001.

Activities Proposed

Activity	Cost \$	Income \$
ALIAhealth discussion list. Currently has over 300 members nationally.	\$0.00	\$0.00
National Newsletter: Health Libraries Australia Published in April & September. Expenditure @ \$1,500 per issue \$3000 per annum	\$3,000	\$1,000
Annual meeting of executive and portfolio holders. To be done via videoconference in the year between the biennial conference. During the conference year it is to be held a day before the conference Expenditure for August 2001. \$7,500 Costs are for hire of a meeting room, some refreshments and a \$250 allowance for any executive or portfolio holder who must travel and stay in the conference city earlier than they would otherwise have done so. It is assumed that members will be attending the conference with personal or organisational funding but \$250 will cover the additional accommodation and living costs for an extra day This meeting will incorporate a strategic planning process to take the group forward through to 2003 (with the assistance of a paid facilitator).	\$7,500	

ALIA Group Application Form (cont.)

Activity	Cost \$	Income \$																								
<p><i>9th Biennial Specials Health and Law Libraries Conference in Melbourne August 2001.</i></p> <p>Budgeting for this is extremely difficult at this stage. \$1500 in seed money has gone from the section to the conference already. It is expected that the earlybird conference fee for members will be \$650. The Group will receive 20% of the profits. It is not clear however what the profit will be until all costs and expenses are reconciled. Estimated Health attendees = 150.</p> <p>Expenditure</p> <p>Seed funding for the Adelaide conference</p>	\$2,000	? \$5,000 Unknown - estimate only																								
<p><i>A census of health libraries, and health library staff.</i></p> <p>It is difficult to plan effectively or benchmark, without some basic knowledge of who and where we are. There are 469 health / medical libraries listed in the National Library's Australian Libraries Gateway. The group's personal and institutional membership in ALIA should therefore be much larger than it is. A census is needed to identify our market, and to provide some information to assist in benchmarking exercises. If we aren't counted, we don't count. Sectors such as academic libraries collect such information. Access to such data would be very helpful in making contributions to the national health information policy development process. The CAUL and ARL data should be examined as models.</p> <p>http://www.anu.edu.au/caul/stats/ http://www.arl.org/stats/index.html</p> <p>Funding is needed for a project officer to plan, prepare, collect, and analyse the data. A database should also be written for data storage and analysis, and for ongoing ALLAnet web-based reporting. In 2001, this project will not attract any income but it is hoped that a better understanding of our market will enable us to attract more personal and institutional members.</p>	\$6,000																									
<p><i>CPD Activity on Evidence Based Healthcare</i></p> <p>An Anne Harrison Award project is already underway to provide a website with some self-directed learning packages that members will be able to work through.</p> <p>It is proposed to supplement this with one three day workshop in the first half of 2002 to cover some higher level skills development. The objective is to develop at least one person from each state and territory as the local leader in promoting skills development in evidence based healthcare. The workshop will be held at the Monash Centre for Clinical Effectiveness, Clayton, Victoria. Members will be invited to apply for this 'scholarship' opportunity and will be required to undertake training in their home state on return.</p> <p>Expenditure: to employ a project officer to plan the train the trainer exercise; to pay for room hire and presenters from the Monash Centre for Clinical Effectiveness; to fly 10 people from around Australia; and to provide accommodation.</p> <p>Numbers attending, paid for from scholarship (11):</p> <table><tr><td>WA</td><td>1</td><td>Qld (1 regional, 1 metropolitan)</td><td>2</td></tr><tr><td>Tasmania</td><td>1</td><td>NSW (1 regional, 1 metropolitan)</td><td>2</td></tr><tr><td>SA</td><td>1</td><td>Victoria (1 regional, 1 metropolitan)</td><td>2</td></tr><tr><td>NT</td><td>1</td><td>ACT</td><td>1</td></tr></table> <p>Available only to ALIA members. An additional 17 people may attend for a fee up to a maximum of 28 places in total.</p> <p>Costs cover:</p> <table><tr><td>Airfares from around Australia</td><td>\$5,980</td></tr><tr><td>Daily living allowance for 11 scholarship holders @ \$150 per day</td><td>\$5,000</td></tr><tr><td>Venue and lecturing fees to the Centre for Clinical Effectiveness</td><td>\$3,000</td></tr><tr><td>Project Planning Officer</td><td>\$1,020</td></tr></table> <p>Income from 17 additional places @300 per place</p>	WA	1	Qld (1 regional, 1 metropolitan)	2	Tasmania	1	NSW (1 regional, 1 metropolitan)	2	SA	1	Victoria (1 regional, 1 metropolitan)	2	NT	1	ACT	1	Airfares from around Australia	\$5,980	Daily living allowance for 11 scholarship holders @ \$150 per day	\$5,000	Venue and lecturing fees to the Centre for Clinical Effectiveness	\$3,000	Project Planning Officer	\$1,020		\$5,100
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Getting Health Libraries and Health Librarians Centre Stage

Cheryl Hamill, National Health Information Policy portfolio holder

The reconstituted Health Libraries Australia (HLA) has a lot of work ahead to prove itself relevant and important to the interests of both individual members and to our corporate members. The interests of the two membership streams are inter-related but it is important for us all to realise that different motivations affect the loyalty and level of interest each show in an organisation such as the HLA.

In the proposal to ALIA to form HLA, the sharing of responsibilities for keeping action moving on the identified areas of interest were nominally assigned to various portfolio holders.

One of the portfolio areas is a census to improve our knowledge of ourselves as individual and corporate members. As I put it in the application form – if we aren't counted we don't count. We need to be able to identify the characteristics of our members and the services they provide to clients. This basic information will feed many of our other endeavours such as benchmarking, marketing the value of HLA, and contributions to national health information policy.

Another portfolio area is to improve our input into national health information policy as it impacts on the services provided by our libraries and librarians. Some work has already been done on this. Titi Alexander from the Federal Department of Health and Aged Care Library and I have been in communication on this since last year. A document was prepared in February 2001 for submission to the Health Online policy makers. This was prepared with considerable input from health librarians around Australia. To date we have not made much impact with the process of getting our issues in the national policy agenda recognised. The strategic planning day will be an important opportunity to refocus and redirect our energies.

Gillian Wood from the NSW Health Department has proposed the formation of a Council of Australian Health Librarians (page 7) to push some of this forward. I think this is an excellent idea and it will be discussed further on the strategic planning day.

Do you want to contribute to the work described above?

On the census – do you have a view on which data elements we should include in our data set? What are the critical elements we need to describe? We have funding for a project officer to do the data collection and analysis but your contribution is most welcome in providing ideas and a critique of the proposed data elements in the dataset. We could set up a national

email distribution list of those willing to contribute in this way. The more we share the work around, the bigger range of ideas we collect, and the easier we make it on each other to achieve our goals.

On national health information policy – do you work in an area where you could lobby to have our ideas taken up by decision makers? Titi Alexander has been very active on our behalf with her contacts but no doubt many of us work in organisations where we have staff actively involved in setting the national health information policy agenda and could take on the same role. Our focus so far has been to lobby the people involved in Health Online, but there may be other organisations we should consider such as the Clinical Research Committee of the NHMRC, or the members of the National Institute of Clinical Studies. Can you suggest people or organisations we could contact?

What are the messages you would like to see delivered in such a process? Our lobbying will work best if we have clear messages to deliver and measurable objectives we are trying to achieve.

Finally we need to consider succession planning at the strategic planning day. Portfolio responsibilities have been taken on by volunteers who happened to be in touch with those setting the direction for the new HLA. In the future we will need to have a mechanism in place to open up these portfolios to election. My suggestion is that each portfolio should have at least two members and that portfolio holders serve for two years with elections every year for half of the portfolio holders. This would ensure continuity between the serving and incoming portfolio holders.

Your ideas are welcomed and will be considered.

Cheryl Hamill
Fremantle Hospital & Health Service Library.
Tel 08 9431 2780
Cheryl.Hamill@health.wa.gov.au

Looking for a Web Site Coordinator

HLA is looking someone to work with Diane Drew in WA on the HLA Web Site Portfolio. Those working on the portfolio would liaise extensively with ALIA head office on the development of web pages specifically reflective of the needs of those working in the health library industry.

Contact Melanie Kammermann on 02 9926 7495 or melaniek@med.usyd.edu.au if interested.

Benchmarking for Australian Health Libraries

Lindsay Harris, Benchmarking Portfolio Holder

One of the projects the reconstituted Health Libraries Group shall be pursuing over the next 12 months is the feasibility of establishing a benchmark database, utilising a set of commonly accepted criteria, for Australian health libraries. For the immediate future at least, benchmarking in various guises is likely to be an important management tool for many organisations and health librarians need to be part of that process. There have been some efforts at the local level to conduct benchmarking exercises amongst special libraries but what is envisaged for this project is potentially far more reaching: a nationally based set of data derived from standard indicators collected by health libraries across the country.

Clearly there are major issues to be faced in contemplating a project of this scale beginning with a definition of health libraries and which libraries to target. For example, should such an exercise be restricted to hospital libraries only or broadened to other categories? What criteria do we use, how are they to be determined, how often and for how long do we collect the said data and how do we apply the results? Fortunately we are not alone in attempting to find answers to these questions. Aside from reports in the literature the Medical Library Association is currently engaged in a similar effort and has now created a beta database for benchmarking information. This is a possible opportunity to save re-inventing the wheel to some degree and in due course an approach to the MLA to share their experiences and conclusions may well be worth considering.

It is anticipated seed funding can be secured from ALIA to employ a project officer to perform much of the basic research and number crunching in producing a benchmarking tool and compiling the raw data. However, we must first clarify the objectives and methodologies for benchmarking in Australian health libraries, as well as the desired outcomes of the entire undertaking, before proceeding to the stage of writing a submission for funding. Exactly what means are employed to achieve all of this are yet to be decided upon and as the designated portfolio holder I would welcome any suggestions or expressions of interest from fellow health librarians. In the next few months in consultation with the Executive of Health Libraries Australia I will be preparing an action plan and time frame for the implementation of the project. The Executive will also have to decide if a working party is to be formed and its composition.

Once the fundamental outlines of the proposal have been resolved with the Executive further publicity on our direction will be disseminated to the membership of Health Libraries Australia. In the interim I may be contacted on either the phone number or email address below.

Lindsay Harris
North Western Adelaide Hlth Service Libraries
Phone: 08-8222 6161
Email: Lindsay.Harris@nwahs.sa.gov.au

Consortia

Sue Grimes, Nepean Hospital, NSW

Is there a need for a portfolio dealing with the concept of consortia within the Health Libraries Section? [Given the overwhelming response from librarians who participated in the visioning meeting held in Sydney on January 18, I would vote overwhelmingly that there is! Ed.] The formal definition of a consortium is the temporary co-operation of several powers or large interests to affect some common purpose. Are there issues where we can share our knowledge, skills and potential purchasing power to some common purpose? If so then maybe we will be able to develop a reason for this portfolio.

Over the past three years I have chaired a committee, which finally arrived at a NSW Department of Supply contract for journal subscriptions within the NSW

Health Department. The process was not without its problems and the end result has not pleased everyone but maybe if there is a next time we may be able to do better. If there is a formal group within the HLS who can collect information on collaborative efforts such as the NSW Journal contract then lessons learnt can be made readily available for the future.

Expressions of interest regarding this portfolio can be sent to me or it can be discussed at the Conference in August.

Sue Grimes
Wentworth Area Health Service Library
grimess@wahs.nsw.gov.au

A Council of Australian Health Libraries?

Gillian Wood, NSW Dept of Health

With the advent of CIAP, CIAO, Health Channel etc, not to mention the national nature of Gratisnet, it is another opportunity for us to look at a national forum for peak health library / information bodies. The lack of either a national health library, or national leadership by an appropriate library leaves a vacuum in Australia for a proactive voice on health knowledge issues. There is no grouping which can be consulted on issues of interest to all health libraries, such as the decision of the National Library to cease hosting Medline; or to discuss national issues, such as consortia purchasing, and producing a distributed national health collection.

It may be argued that this role could / should be taken by ALIAHealth as our professional body

Titi Alexander and Cheryl Hamill have worked with the Health Online initiative to raise the profile of health libraries, services and collections throughout Australia. This proposal is designed to complement their work: to form a "Council" of peak representatives from each state, and possibly different sectors. At present, these are rough ideas, and I do not wish to invent an unnecessary committee or bureaucracy, but I do see the need for us to have a strong and legitimate avenue for future co-operation. In addition, there is need for representation from those with access to the highest levels.

My vision is that where we all agree on a plan of action (an example may be jointly purchasing some resource) we can each take through to our state bureaucracy, thus getting national agreement and endorsement at the highest level.

This is framed in the context of Government libraries and departments, since they are the largest number throughout Australia. The role of universities in this is yet to be discussed.

A possible agenda?

- Act as a consistent voice on health library / information matters in Australia, particularly to Government
- Initiate / negotiate national consortia agreements
- Initiate / negotiate / co-ordinate national network and resource sharing initiatives
- Seek funding for national initiatives
- Represent health libraries as a whole to all levels of government
- On the highest level, oversee resources in health libraries across Australia – ensuring that existing unique resources are not lost

Gillian Wood
Library Manager, NSW Dept Health
Email : gwood@doh.health.nsw.gov.au

aliahealth – join today

Get with the strength - join the 317 already on aliahealth, THE discussion list for Australian health librarians. Benefits: quick and easy contact with your colleagues nation wide; ask questions that have you stumped; share your experience and knowledge with list members; advertise jobs or CPD events; read the messages filtered for you and forwarded from other discussion lists some members (/information junkies) have joined.

Not dipped your toes into the discussion list waters? (Fingers may be the more anatomically correct appendage in this context.) When you join, suspend, or leave a discussion list you are sending your email to a computer program - not a person. All you need to know on email discussion lists can be read at <http://www.alia.org.au/e-lists/>

To join aliahealth: send an email to:
listproc@alia.org.au

Put nothing in the subject line and remove your automatic signature from the body of the message. In

the body of the message type:

subscribe aliahealth yourfirstname yoursecondname

You will get an email back telling you that you are subscribed to the list. Whenever any other list member sends a message to aliahealth you will receive a copy of that message.

If you want to send a message to all of the members of aliahealth, you address your email to
aliahealth@alianet.alia.org.au

Good netiquette when sending messages to aliahealth.

If advertising a job or CPD event, put the city and state name in the subject line so that those to whom it is irrelevant can delete the message.

Don't send file attachments to emails - many people's email servers block these or have message size restrictions which cause them to be rejected. It is also a virus infection risk. Copy and paste your information directly into the email or offer in your

(Continued on page 8)

Evidence Based Healthcare

Ruth Sladek, EBH Portfolio Holder

In recognition of the need for ongoing professional development in the area of EBH (Evidence Based Healthcare), there are two key initiatives within the Health Libraries Association. Gabby Fennessy and Greg Fowler are working on an Anne Harrison Award project to develop a website with some self directed working packages for members. This resource will no doubt be invaluable to our profession as we try to progress our knowledge and skills in this area of professional practice.

It is intended that a 3-day workshop will be run in 2002 to progress knowledge and skills past the initial 'introductory' level. This Workshop will provide at least one person from each state and territory with the opportunity to become a local leader in promoting skills development in EBH.

Whilst still in its pre-planning phase (!) the scope of the Workshop is likely to include:

- History and development of EBH and its controversies, including differences between EBM, EBH and EBP and what these might mean.
- Understanding new sources of information (origins, development, profile, relative merits)

- Causal relationships in research and what constitutes good evidence/levels of evidence
- Key research designs for treatment, diagnosis, prognosis and aetiology and implications for locating the evidence
- Exploration of Systematic Review Methodology/ Comparison with narrative reviews in more depth
- Methodological, reader, publication, indexing bias and why they matter
- Answering Reference Queries using an Evidence Based Approach (including experience in selecting and applying quality filters) – changing our practice
- What matters to clinical staff/facilitating knowledge transfer to non-librarians
- Discussion of librarians' roles - what does EBH mean for our profession and daily practice?
- Overview of the NHMRC and research processes in Australia; scholarly publication processes
- Identification of relevant further education options for formal knowledge progression
- Discussion of key aspects in development of a National Strategy for CPD in EBH HLA and opportunities for the Adelaide 2003 Conference

(Continued from page 7)

email to forward a file to anyone who requests it directly from you.

Don't go on holidays without suspending yourself from the list - it gets a bit tiring for list members to read 300 times over the course of your four week holiday that you are away having a good time every time an aliahealth message goes to you. Simply suspend your membership and reinstate it on your return.

Allied with this, don't set your email to tell you when a message has been delivered - this means the list owners (me and Rhonda Mayberry) get error messages back from every list member when they read your email - sigh.

Consider before hitting the reply button that you will be replying to everyone on the list - is this necessary or appropriate? Reply directly to the person who sent the message and only to all list members where it will be of interest to all.

If you're having problems joining the list, contact one of the list owners.

Rhonda.Mayberry@health.wa.gov.au
Cheryl.Hamill@health.wa.gov.au

This Workshop should be an excellent precursor to the Adelaide 2003 Conference, with a core number of professional staff who would then be available to assist in further skills and knowledge development opportunities for others at that Conference.

Any colleagues interested in contributing their ideas to the scope of the Workshop are encouraged to email me.

Ruth Sladek
Repatriation General Hospital
Ph: 08 8275 1702
ruth.sladek@rgh.sa.gov.au

Newsletter Editor Required

- Do you have an ear to the ground and a nose for a story?
- Do you enjoy desktop publishing?
- Do you have an eye for proofing and editing?
- Are you looking for a rewarding challenge?

If you answered 'yes' to 3 out of 4 questions, then maybe you'd be interested in producing and editing the HLA newsletter, Health Libraries Australia.

Contact Melanie Kammermann on 02 9926 7495 or melaniek@med.usyd.edu.au

State & Territory Round-Up

QUEENSLAND

Successful self-nomination of the ALIA Queensland Health Libraries Group

The ALIA Queensland Health Libraries group was formed to provide a forum for information professionals in the Queensland health sector that would enable them to engage in professional development activities. The group has set itself the following goals:

- to improve networking amongst Queensland health information professionals
- to lobby to raise the profile of the profession
- to focus upon issues that impact upon health information services, in particular rural health information services
- to improve professional development opportunities for those in isolated rural health services
- to collaborate with other groups

To date the group is largely composed of information professionals working in the teaching hospitals of the University of Queensland and other hospitals in the Brisbane region. We will be proactive in promoting our goals. It is hoped that the group will eventually include information professionals working in other sectors, including rural areas. The group will provide videos of sessions on request for those working outside the Brisbane area. Further volunteers to take on Committee Membership would also be welcome. This is an excellent opportunity for all health information professionals to get involved in working for the betterment of their profession.

Planned activities include:

- Monthly meetings. The venue varies and may include a tour of the host library prior to the meeting.
- Seminars
- Feedback sessions from conferences and training courses
- Visits/tours of different Qld Health Libraries
- A short seminar on coping with health e-resources
- Patient use of libraries/information services – opportunities and challenges (including a debate)

The following activities have been organized for 2001:

The e-healthcare portal.

A number of interesting projects are being undertaken at the University of Queensland's Centre for Online Health. In July the group is hosting a presentation that will outline the Centre's projects in telemedicine, homecare, health education, mobile nursing and e-

healthcare courses. There will be a live demonstration of the e-healthcare portal being developed by the Centre. Discussion on the scope, selection standards, technology and ongoing management issues of the portal will also be covered. The session will be available remotely via teleconference and will be followed by dinner.

Conference Capers

The group will participate in this seminar, organised as part of the ALIA CPD series to be held on 4th September

Evidence-Based Healthcare Seminar

A full day seminar in December designed to suit different knowledge levels and include talks/workshops/panel discussions by a biostatistics educator, relevant clinicians and evidence-based healthcare educators in various professional disciplines. Topics to be covered include a clinician's view of EBM in Queensland, what works in changing professional practice, the NHMRC levels of evidence, and the involvement of nursing staff in EBH.

Office bearers for the group include Janice Michel, Director of Med-Info, as President (email: michel@fan.net.au), Jackie Chamberlin, Senior Librarian University of Queensland Mater McAuley Library, as Treasurer (jchamberlin@library.uq.edu.au) and Lisa Kruesi, University of Queensland Health Sciences Librarian, as Secretary (email: lkruesi@library.uq.edu.au).

We would be pleased to receive any further expressions of interest in the group and contact from other colleagues.

Janice Michel

WESTERN AUSTRALIA

The end of the Health Libraries Section (WA)... but not the end of a Health Libraries Group

The Health Libraries Section (WA) decided at its meeting in February this year that it would not be nominating to form a group under the new ALIA structure. This came about after much discussion at previous meetings on the future of HLS in WA. The reasons for this decision were:

- Members agreed that it was necessary to have a national group representing health libraries, as many issues affecting all health libraries such as standards and CPD needed to be dealt with at this level. It was felt it was best to use our available time and resources to contribute to the national group, rather than duplicate work at a state level.

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State & Territory Round-Up (cont.)

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A person will be nominated to act as liaison between the national and local group.

- The amount of work required to submit a proposal for a new group, including estimating costs and activities for the year ahead, seemed like too much work for little or nothing in return. As in other states it was getting difficult to get members to nominate for positions on the HLS committee, and there was no one who was enthusiastic enough to do the work required to propose a WA health group.
- The activities of the HLS WA had always been conducted on a cost recovery basis. Any funds received from ALIA in the past only covered mailing and stationery costs to distribute the minutes and agenda of meetings. Under the new structure groups were expected to recover all costs and even make a profit to be returned to ALIA. There didn't seem to be any advantage in this for us.

The future

We are going to continue meeting as a group on a bimonthly basis. The networking opportunities are one of the most useful aspects of meetings. Most of us will retain our membership of ALIA so that we can continue as members of the national group and any other groups that we want to join locally. We also acknowledge the value of being a member of ALIA, for ALIA's work in areas such as lobbying (on copyright and federal law) interlibrary loan vouchers, accreditation of libraries, and industrial issues.

Our first meeting, reminiscent of the old Medical Librarians Group, will be in August. There will not be a formal structure, with libraries taking it in turns to host a meeting and to provide the theme or topic for discussion. Notice of the meeting will be distributed electronically and minutes will not be kept. If we wish to organise any major CPD or other functions in the future, it is envisaged that we can form an ad hoc ALIA group to get seeding funding and any other assistance available. This is one advantage of the new structure, but we are yet to see how it works in reality.

Marjory Taylor

ACT

ALIA ACT and District Health Forum

Health library and information services staff in the ACT have been meeting as a society since the 1970s. We successfully ran an independent group (AAHLIS Inc.) during the 1980s and we were the last of the State medical librarians' groups to join the ALIA

Health Libraries Section (early 1990s). With the recent ALIA restructure, we decided that it would be best to remain under the ALIA umbrella. We wanted to maintain a distinct presence because of the importance of major issues in health librarianship - for example, ensuring that we have an acknowledged role in the Health Online agenda. Hence, despite our small size, we self-nominated as an ALIA group.

The Forum will be kept fairly informal but with members ready to participate on ad hoc issues (national or local) when required. For example, we have identified members who have close links with other groups (ACT Specials, Australian Society of Indexers, Health Informatics Society of Australia) and we aim to hold joint meetings with these groups.

The Forum covers the ACT and District, from Goulburn to Cooma. The first convenors will be Jill Buckley Smith and Prue Deacon (HealthInsite, Commonwealth Department of Health and Aged Care). Email contact: jill.smith@health.gov.au, prue.deacon@health.gov.au

Prue Deacon

NORTHERN TERRITORY

Happenings in health libraries in the Northern Territory.

Territory Health Services is the NT Government Department that has responsibility for the whole gamut of health services from hospitals to community care. There are hospitals in Nhulunbuy, Darwin, Katherine, Tennant Creek and Alice Springs. There are Libraries at all the hospitals, all are staffed except the library at Tennant Creek which is supported from Alice Springs.

All the Libraries are managed from Darwin and some functions are centralised in Darwin, eg purchasing, cataloguing etc. The staff (17 of us but not all full time) work as a team, and resources are shared between libraries. The Library is part of the Department's Wide area network, and our catalogue (on "Horizon") and the health databases (Silverplatter on an ERL) are networked across the Intranet. The Library also maintains a comprehensive and up to date Intranet site with New Book Lists, subject guides, suggested Internet links, information about who to contact for Library assistance, and "how to do it" information.

As well as our Government clients, we are the Library for the Menzies School of Health Research and the Northern Territory Clinical School (which is part of the Flinders University of South Australia). There is a constant stream of medical, nursing and allied health students through our hospitals. As the only medical

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libraries for the Northern Territory, we are also available to health professionals in the community and postgraduate students and researchers who need medical information.

Our libraries are health libraries - we have a strong core of up to date clinical information, but also have information on topics such as Indigenous health, alcohol and other drugs, health economics, primary health care, health promotion and social and community health.

Our libraries are extremely busy and our Inter-Library loan traffic is high. We are affiliated with South Australia in our membership of Grátisnet. If any of you are in the NT on holidays, call in and see us.

Ann Alderslade
NT Health Libraries

SOUTH AUSTRALIA

The Health Libraries of South Australia resolved to continue, and with many members busy with the SA DHS Libraries Consortium business and the beginning of planning for the 10th Asia-Pacific Specials, Health & Law Librarians Conference, to be held in Adelaide in 2003, the section will soon submit its proposal to the ALIA Board for nomination.

The new section began its new identity at the AGM and Annual dinner on Wednesday 4 July. Over the previous eighteen months, there had been seven major functions that had been well attended. Two notable items from the Annual Report deserve noting in this report.

In July 2000, Lindsay Harris, Editor, Standards for Australian Health Libraries, and the members of the Standards Working Party were pleased to see the endorsement of the Standards <<http://www.alia.org.au/sections/health/guidelines/>> by the ALIA Board of Directors.

In early 2000, Mary Peterson completed the South Australian Health Libraries Directory <http://www.imvs.sa.gov.au/library/healthlibs_directory/> which provides information about South Australian health libraries: their resources, hours of opening, contact persons and telephone numbers. It also contains details for community members indicating whether or not they are able to access the collections.

The new Health Libraries of South Australia office bearers are:

Philip Keane, President
Jenny Hanisch, Secretary
Jenni Burgess, Treasurer

Caryl Armstrong, Specials Section representative

The Organising Committee for the 10th Asia-Pacific Specials, Health & Law Librarians Conference (to be held in Adelaide in 2003) has held a number of open meetings this year and the theme and logo for 2003 have been decided. Details and promotional material will be available at the ALIA stand at "RIVERS OF KNOWLEDGE" 9th Special, Health & Law Libraries Conference, 26th - 29th August, 2001.

Philip Keane
Royal Adelaide Hospital Library

TASMANIA

ALIA Tasmania 2001/2

After careful consideration the ALIA Health Librarians (Tas Branch) decided it was no longer viable to be a separate group. While some of us have decided to become members of the Health Librarians Australia (HLA), most of the librarians in Tasmania have decided to join together to become ALIA TASMANIA.

The following members have been elected to the ALIA Tasmania committee for 2001/2.

- Convenor: Jane Coatman
- Vice Convenor (North): Val Bromfield
- Vice Convenor (South): Margaret Malpas
- Secretary/Treasurer: Jane Jeppson
- Membership Services Officer (North in 2001/2): Sally Vandenberg

The committee's role is to coordinate the activities of the group. All members are invited to be involved in the planning, organising and hosting of events and activities. Please let Jane Jeppson know what you can contribute! ph 036231 9511 or email alia@education.tas.gov.au

Mary Fraser
Dept of Health and Human Services

NEW SOUTH WALES

The Health Libraries Group (NSW) has not nominated to form a state-based self-nominating group. At the AGM held on 6 July 2001, there was a unanimous vote in support of a motion to officially close off the ALIA NSW Health Libraries Section with the understanding that should the need arise, a group could self-nominate for the duration of any special interest event, short-term specific purpose or function specific project.

There were a number of reasons put forward for not
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self-nominating a group at the state level. These included: wanting to invest efforts in the national group, committee burnout and the existence of other state based library networks, such as GRATIS NSW, Department of Health Libraries, and ALIA NSW (Branch Council).

Melanie Kammermann
Royal North Shore Hospital

VICTORIA

The following is an extract from an editorial that appeared in the Victorian group's newsletter, Health Inform.

After much thought and discussion, the executive committee of the Victorian HLS has decided that our future is not with ALIA, and we intend to set up a distinct group of health librarians, technicians and others interested in health libraries.

We will be incorporating a separate body, and holding a general meeting as soon as possible in the new year, at which we will call for nominations for the executive. We have moved away from ALIA because we couldn't see any benefits in staying within the restructured organisation. All it was going to do was to add another layer of bureaucracy to our operations, without helping us in our goals, which are to deliver useful continuing education activities to people working in health libraries.

I must stress that this group will be separate from the new health libraries group that is being formed under the ALIA structure: although we will cooperate with the new ALIA group, membership of ALIA will not entitle you to membership of the new Victorian group.

David Lloyd
Library, Bendigo Health Care Group

Response:

It was personally and professionally disappointing to learn of the Victorian HLS Executive's decision, especially having been actively involved in the Victorian HLS Executive for a couple of years during my time at North West Hospital (now Melbourne Extended Care and Rehabilitation Centre).

Space does not permit the entire *Health Inform* editorial to be published and it would be unfair at this stage to respond in full to all the reasons held up by the Vics for not remaining within the ALIA structure. It would appear that the prime focus of the new Victorian group is CPD. Albeit important, librarians cannot live on CPD alone. There are some big picture issues that the national group is endeavouring to address and much of our strength will lie in numbers and a coordinated, united approach. Let's hope this

crack in the armour is just a small one.

Melanie Kammermann

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often there isn't a clear distinction between what is a benefit to the individual and what is a benefit to the industry. Many go hand in hand.

HLA has been driven forward over the last few months by a group of individuals who, for their own reasons, are particularly committed to the future of the profession. What I would like to stress is that it is by no means a closed clique and we need to get as many people involved in HLA as possible. I landed the job of convenor of the group simply because I was asked and I agreed. Not terribly democratic, I agree, and largely based on tight timeframes for getting the self-nomination into ALIA head office. It is one of the little anomalies the strategic working party will need to address.

One of the beauties of the new structure, with the portfolios and special interest groups, is that it allows individuals to put their energies into areas of real interest and to draw on personal strengths. If your strength is marketing, then the HLA can gladly make use of those skills – not your minute taking skills, not your stamp licking skills but your marketing skills. If you have a particular interest in web design, there's a portfolio just waiting for you. Ruth Sladek has been doing some outstanding work in her organisation teaching critical appraisal skills. What better person could you have to be a co-coordinator of an EBHC portfolio? Many of us have complained of committee burnout. I think the new structure will go a long way to eliminate this. Think about what your particular strengths and interests are. Think about how you might like to contribute.

I expect we'll attract some hecklers along the way. That's okay. It will keep us on our toes. The real success of a group like HLA will be determined by how well we can pick up on those issues that are really impacting on the profession and work together to address these. Ask yourself, are you doing more with less each year? Have you thought about the benefits of consortia? Have there been occasions where policy issues were crying out for input from librarians only to find that as professionals we've been overlooked or too slow off the mark? Are you struggling with information overload? Would some form of formal library accreditation increase your library's standing within the organisation? If you answered 'yes' to any of these questions then maybe HLA has something to offer you. Give it some thought.

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