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

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Open Forum
NAHSL 2013
UMass Medical School’s Experience

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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 straights 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.