An update from Health Libraries Australia



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Where did 2020 go? For those of us in Australia who lived through the past year's uncertainties and fears about COVID, weathering the restrictions of lockdowns and working-from-home (and for some, schooling from home); trying to make sense of the patchwork of state border controls, testing and quarantining requirements; and on top of all that, a faltering vaccination roll out, it was unthinkable that 2021 would bring more of the same. But more than half way through this year, it seems that we were overly optimistic that 2021 would see it all resolved. This is 'take-two', and we are getting used to a new COVID-normal.

For health librarians in Australia there were many adjustments to be made. Because the effects of COVID were different in different states, some were able to continue in their normal workplaces, but for others, the libraries were closed for the lockdown periods. Some libraries were repurposed and used as call centres for contact tracing or other public health facilities, and even as vaccination hubs. Some librarians themselves undertook training in contact tracing, while other versatile ones were redirected to the front lines where, dressed in full PPE (personal protective equipment), they took on new roles in emergency departments, testing sites and other public reception areas. Along more traditional lines, our reference librarians used their expert literature search skills to inform their organisations' responses to the pandemic, and shared their expertise to contribute to international calls for help.

HLA very quickly made a statement to support our health library colleagues everywhere.

We coordinated our collective outputs and produced a list of COVID literature searches: https://aliahla.wikis.alia.org.au/COVID-19_Live_Literature_Searches

HLA's online seminars – 'Future Gazing - Innovation, Disruption, Transformation!' and 'Now, Next and Beyond' COVID-19 – Health Librarians' Experiences' record some of the experiences of Australian health librarians (recordings are available here:

https://aliahla.wikis.alia.org.au/HLA_Professional_Development_Education_and_Training)

Another big adjustment for HLA was the difficult decision to cancel our plans for an annual in-person conference for the second year running, as many organisations have had to do. In 2021 we have instead run a series of topical lunchtime smorgasbord events, scheduling a couple each month. All the pieces were in place – health librarians hungry for knowledge and professional support, willing presenters, an online platform, and a program committee who knew how to organise events; but it took a pandemic to provide the stimulus to bring it all together.

The seminars and workshops have proven to be enormously popular and show that there is a real thirst for accessible, high quality, affordable (free for our members) and relevant professional development. (The program is here: https://aliahla.wikis.alia.org.au/HLA_Professional_Development_Education_and_Training) Of course,

we miss our face-to-face networking opportunities, the online equivalent just doesn't cut it. Without the annual conferences as a focal point, it's been much more difficult to develop relationships, learn from each other, and further discussions about joint projects, and almost impossible for international collaborations with groups such as EAHIL.

The HLA committee held our annual strategic planning meeting in May this year, and re-assessed our strategic priorities for the coming years. I'm pleased to report that we have reinforced our goal of developing our international collaborations. We have recently expanded our HLA committee and our JoHILA Editorial Board membership to include a representative from the New Zealand Health Libraries Group. We will be talking with our NZ colleagues in November about joint initiatives.

Developing a systematic approach to education and ongoing professional development for health librarianship is a major strategic priority for HLA, and likely to be so for at least the next four years. Our parent association (ALIA) has announced what has been referred to as a 'bold' new approach to developing the workforce, known as the Professional Pathways Initiative. Moving from its original focus on the future of library education, the initiative has been expanded to encompass workforce goals of diversity and inclusiveness. Mechanisms are proposed that will change the 'entry points' into the profession (currently it is the education providers who decide who is eligible to enter a course of study). Non-LIS qualified individuals may be directed into alternative training routes (such as certificate and microcredential units), enabling some without LIS professional qualifications to be certified as library and information 'professionals'.

For health librarians, this is a big shift, as we have for many years, modelled our education on the model used by the clinical health professions. For professional recognition (registration), health professionals must have an initial generalist or base tertiary qualification (whether medical, nursing or any of the allied health professions), and then channel into one of the specialist areas of practice through professional association or college-based training and ongoing CPD. Removing the initial LIS academic qualification is likely to place health librarians with administrative and other non-professional workforce groups.

Profiling health librarians as an integral part of the health information professional workforce has been a strategic goal for a number of years and HLA has collaborated in research that has led to the census of the HIDDIN (Health Information, Digital, Data, Information and (K)Nowledge) Workforce. The researchers have collaborated in the production of a book entitled *The specialist digital health workforce: now and in the future* (edited by Butler-Henderson K., Day K., & Gray,K. Doi: 10.1007/978-3-030-81850-0_5; due to be launched in September this year). Two case studies (in the chapters *Working as a health librarian*, and *Working as a health research information specialist*) have been written by EAHIL members.

A third chapter, co-authored by two of our HLA committee members, is entitled: Competencies, education, and accreditation of the HIDDIN workforce, builds in part, on the competency review of the health information professions that HLA presented in a poster at the EAHIL conference in Basel in 2019 (https://aliahla.wikis.alia.org.au/images/9/94/HLA Competencies review poster 2019.pdf)

The chapter concludes:

Our analysis has found a paucity of competency-based tertiary education programs for the HIDDIN professions, which may have led to the apparent mismatch between the content-based education and training programs offered by education providers and the needs of employers for graduates who are a good fit for the available jobs, as well as programs for upskilling current employees. Alternative education pathways that may be competency-based include certificates and microcredentials. These are emerging as a more agile response to the needs of the workplace and it remains to be seen if they will replace the more traditional model of academic education, or develop in parallel or in partnership with it.

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NEWS FROM HLA

Other projects that we have on the go include the revision of our *Guidelines for Australian Health Library and Information Services* (the previous edition was published in 2008) which will update the evidence base that informs the objectives in the four Guideline Areas. These standards could form the basis of a framework for accrediting health libraries, similar to the system of hospital accreditation.

So what next, is there a future beyond the world of recurrent pandemics? There is no doubt that we in Australia have been relatively lucky, largely due to our being a geographically isolated island. We are not, however, out of the woods yet; we are seeing rising numbers of each day's new cases in our two most populous states; less than 16% of the total population are fully vaccinated, and only half have had the first dose; on the positive side, the vaccination rates are rising.

With the media channels and commentary dominated by news about Covid, the Olympics have been a welcome diversion in lockdown, and a positive effect beyond the excitement and exhilaration of watching one of your country's athletes win an event. The pervasive tragedy of the pandemic has changed our national psyche forever; everyone will remember their personal losses, re-directions and 'gaps' in the expected courses of their lives, protracted isolation from family who can't come home, and general feelings of powerlessness. But we cannot revert to the populist patriotism of a previous political era, narrowly focusing on local concerns and giving in to simplistic, insular and nationalistic thinking.

The Olympics have allowed us to feel less isolated, and more like a society that can work together to achieve big, common goals. For health librarians, we must continue to connect online, expand our horizons, share our knowledge with our international colleagues and collaborate where there is potential to achieve common goals.