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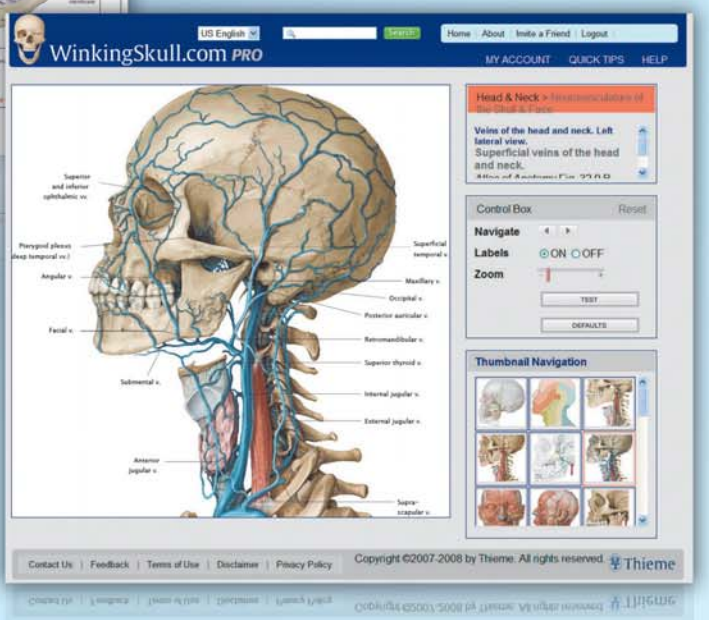

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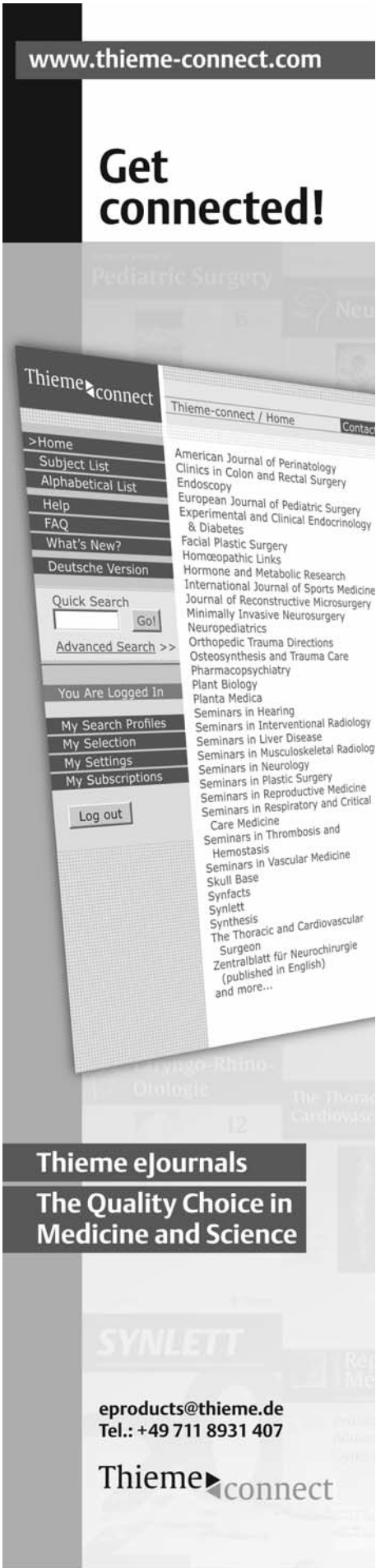

Editorial

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Hello Everyone,

The time is approaching fast for the EAHIL workshop in Turkey and unfortunately I am unable to be there this year as I have a prior committment. However, the JEAHIL Assistant Editor, Federica Napolitani Cheyne, Tuulevi Ovaska and other members of the Editorial Board will be there to meet with the winners of the *Best Posters and Presentations* and to collect reports of the Workshop. We hope many of you will also contribute impressions of the workshop and reports of all the SIGs meetings.

This issue with the theme *Coping with financial restrictions in libraries; challenges and solutions* unfortunately only attracted two articles which was really disappointing. I do hope that this is not forewarning of things to come in the *Journal* and again I stress that the *JEAHIL* can only survive if the members of EAHIL support it. Our EAHIL Editorial Board is very hardworking and put a lot of their own time into producing columns, editing, finding articles – it is team work and our rewards are seeing an interesting issue of the journal on the table.

ISSUE 2011	THEME	DEADLINE
September	Memories from the Turkey workshop	**5th August**
December	Virtual libraries: virtual librarians - what´s next?	**5th November**

The following issue will be with the theme of the EAHIL Istanbul workshop, while the December issue will be *Virtual libraries: virtual librarians- what´s next?* However, we are willing to accept articles on any subject regarding health information and medical libraries. Please study the *Instructions to Authors* before submitting articles - http://www.eahil.net/journal/jeahil_instructions_authors.html and send to me at swood@umfcluj.ro .

The EAHIL 2011 workshop scientific programme is featured in this issue along with a map of the campus pointing out the conference venue and poster area. If you require rooms for the SIGs meetings please get in touch with the organizers to arrange your meetings. The themes are attractive; the speakers and parallel sessions are interesting; the social programme is enticing, all of which are ingredients for another memorable conference.

I wish you all a very good workshop, nice summer holidays and look forward to hearing from you all in the near future.

Jointly Effective – making ends meet in the KUH and UEF library

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Abstract
The paper discusses the benefits of co-operation when providing library and information services to a university hospital. The case is based on a university's and university hospital's joint library in the Kuopio campus of Eastern Finland University. The model of managing and service provision of the joint library is discussed, as well as future scenarios of effective co-operation.

Key words: economic recession; government financing; hospital libraries; Finland.

The effect of the economic downturns and structural changes to the academic libraries

Academic libraries have gone through both evolutionary and adaptive phases during the past two decades. Evolutionary solutions have been sought in order to increase the effectiveness of the dissemination of scientific information. The adaptive solutions have been triggered mainly during the economic downturns that our country has experienced twice in living memory: during the 1990's and 2010's. Thus we are facing again the situation when the libraries have to cope with fewer resources but at the same time are expected to provide better services for academics and students (1).

The main evolutionary driving force has been the digitizing of the scientific process. This can be traced to the initial dissemination of printed scientific journals via the internet in the 1990's. This first phase was very much printed-culture oriented, but it lead up to one of the largest outsourcing projects experienced by libraries. At present we are living in a technological environment that could almost allow a library to divest itself of its printed journal collection and be able to rely on an outside actor to maintain source availability as well as it knowledge organization. This has had a major impact on libraries, i.e. they are able to provide a larger collection of titles with fewer staff to manage it.

This contributed to another development in the library system, i.e. a shift to a culture of self-service, which has also changed the role of the librarians. The dusty image of a person who carries around piles of printed documents has been replaced with that of a person who is able to manage different types of digital information systems, and most importantly, who is able to teach and tutor the library's patrons in the skills required in a rapidly evolving digital environment.

One can clearly see that the next paradigm shift of the digital scientific culture has already begun. The digitally *savvy* generation has arrived in the universities, i.e. people who have lived all their lives with personal computers and networks connecting those computers.

This will most likely radically change the working environment, with more and more activities being carried out in order to improve an individual's learning with the scientific results being published and managed digitally. This not only means networking, modern technologies and multicultural communities but it also will lead to the production of mountains of scientific data and publications which libraries will somehow need to manage and disseminate effectively.

The evolution of societies has led to the point where higher education has become one of society's most treasured resources and university policy has both national and international dimensions. This is especially true within the health sector. Since modern medicine is resource consuming both when considered as a science and as a therapy, the struggle for resources is particularly intense. Although the libraries are seen as a vital part of academic community, too often when economic crises are encountered, cutbacks are initiated from its services.

This has meant that libraries have also faced a change in their management policies. There seems to be an ongoing shift from traditional librarianship towards a

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more professional oriented type of managing the library (2). This is clearly is happening in Finland where the recent university reform lead to the merger of older universities into larger units. There is a continual cry for more and more efficiency also in the academic world. One reason is the retirement of the so-called baby-boomer generation, which in Finland will pose a considerable challenge to the whole national economy during the following two or three decades.

In Finland, the funding model of the University Hospitals where distinct state grants are provided especially for clinical studies and tuition has created special challenges for the academic libraries that co-operate with these hospitals. This funding provides a possibility to acquire extra finances from hospital management for the academic library services within the hospital, but at the same time it needs to be based on undisputable facts as to the justification of this funding, because there is intense competition for this type of funding.

In the following section we shall discuss the joint service provision of the library services at the University of Eastern Finland (UEF) and at the Kuopio University Hospital (KUH). The special aim is to describe the management of the joint academic library and in cost-effective service provision for academics, students and the hospital staff.

KUH and UEF - effective together

There are numerous solutions of organizing library services for hospital staff and a medical faculty. In Finland, the five universities with medical faculties and connections with university hospitals (teaching hospitals) all have organized their library services slightly differently. Not only are there many common factors, but there are important administrative differences. Universities operate under the authority of the Ministry of Education and Culture, while hospitals – even university hospitals – are financed by the Ministry of Social Affairs and Health. Most have faculty libraries that serve also the hospital.

In Kuopio, there have never been separate faculty libraries, simply one university library, and KUH Medical Library has always been a part of it. In fact, in historical terms KUH is the core of the university library, i.e. when the first agreement between the new Kuopio University and the Kuopio Hospital District was signed in the 1970's, the foundation of the library collection was created from the collections held by the Central Hospital of Kuopio – since medicine was one of the strongest disciplines in the university. It proved necessary and effective to cross organizational and administrative barriers in order to provide medical and other health professionals, researchers and students with the best possible library and information services from very limited resources.

There is effective collaboration and networking between libraries in Finland. Two excellent examples are the National Electronic Library (FinELib) – a consortium that supports research, teaching and learning in universities, research institutes and polytechnics, as well as helping public libraries – and the National Repository Library (NRL). FinELib acquires the better part of all e-resources (e-journals, e-books and database) in Finnish libraries – within the university libraries, it provides about 80% of e-acquisitions (3). Each member organisation decides to which electronic resources they wish to subscribe. Proposals for new acquisitions are coordinated and prioritised by subject-specific expert groups whose members are the staff of the consortium member organisations. FinELib not only negotiates affordable subscriptions at a national level but also enables the member libraries that working time is free from these kind of negotiations with publishers to be used locally for other purposes, e.g. training users.

The NRL (founded 1989) is a repository for all libraries in Finland. It receives and stores the material transferred from all other libraries and then offers the material for the use of other libraries. This is an economical and effective way of storing library material as it diminishes the need for building new library space for collections. NRL has over 1,300,000 book titles (i.e. more than 24 shelf kilometres), over 80,000 periodical titles (over 40 shelf km), over 500,000 dissertation titles (27 shelf km) (4). The NRL serves as a repository for both KUH/UEF libraries. Thus the need for library space for storing in the respective libraries, lesser used books and journals is insignificant. Document delivery from NRL occurs in a matter of hours, at most, one working day. Thanks to NRL, the physical library space can be used effectively for customer services, workstations, group study rooms, displaying only the most current and most used collections such as textbooks, handbooks, periodicals not published electronically etc. KUH Medical Library only stores periodicals since the year 2000 and has a focused, up-to-date book collection. The greater part of the collection is in the forms of e-journals, e-books and databases.

Making ends meet

Since 2010, KUH Medical Library has been maintained jointly by the University of Eastern Finland (UEF)

Library, as the libraries of the former University of Joensuu and the former University of Kuopio merged into the University of Eastern Finland Library at the beginning of 2010. The UEF Library is a public scientific library offering library and information services especially to the university's 3000 staff members and 13,000 students and the library is also open to everyone seeking information. The University of Eastern Finland Library is one administrative entity which comprises the campus libraries in (Joensuu, Kuopio and Savonlinna) and KUH Medical Library in the vicinity of Kuopio campus (*Figure 1*). Printed materials can be sent from one campus to another upon request, and the electronic resources are available to all library users in the facilities of the campus libraries, and the members of the University of Eastern Finland and the staff members of KUH can also access them remotely.

Fig. 1. *The organizational structure of the UEF library.*

During recent years, the agreement regarding KUH Medical Library has been revised twice in order to ensure it is up-to-date and also to keep a more accurate track of financial matters. In the current version, both organizations have committed themselves to certain level of allocations. The total amount is based on the funding to which the university hospital is entitled through its role as a teaching hospital; and the percentages of the organizations are based on data about the division of the staff working hours. Negotiations about the yearly budget are conducted at the top level of both organizations: the medical director of the university hospital and the academic rector of the university take part in the negotiations in addition to library representatives.

With limited but so far reasonable resources, KUH Medical Library aims to serve each library user according to their needs. There are different types of library users with different needs to be met. Some require personal services, others may want to access databases and other resources themselves but need help, and the rest can manage everything individually (5). These different types of library users need different services.

Especially in hospital libraries, it is often necessary to tailor the services according to the needs of the users. Tailored services are not necessarily time-consuming or complicated to organize. Often very short training sessions (e.g. as little as 20 minutes) relevant to the current audience (e.g. medical specialities) with the focus on one topic at a time, are much more effective than longer study programmes. The key is to present the right information to the right patrons at the right time.

Another essential element in making ends meet is the staff members' enthusiastic attitude: it is not costly to respond promptly, to be customer-friendly, or to adjust one's timetable to that of the patron. When each member of the staff realizes they are part of a larger picture, and able not only to see that but also participate in painting the picture, the commitment is huge. Though the UEF merger took place in only two years and created extra work loads and considerable stress and challenges for the staff, the quality of the customer services was never at risk. During the merger process, all staff members were encouraged to take part in making decisions in building the new library, and to understand that everyone could make a contribution towards improving the library's quality of service (6).

Since the KUH Library funding comes from the same source as the funding for medical research and teaching done in the hospital, the library has spent a lot of time in developing an evidence-based approach to measure the effectiveness of its services as well as for tailoring and marketing its services. To achieve this goal, it has been able to utilize the library's quality management system, one especially useful parameter being the monitoring of

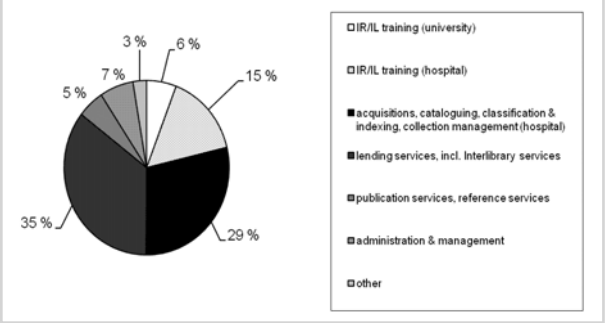

Fig. 2. *Division of staff working hours in KUH Med. Lib. 2010.*

the staffs' working time. Each year, in the yearly budget negotiations, the questions about the number of staff arise "in the Internet-era where everything is freely available". Since the library has been able to explicitly show what types of tasks have been carried out and how much time they take, the hospital's management has been convinced of the need for highly qualified staff, especially when counselling and teaching of the users takes more and more time. (*Figure 2*.)

Future scenarios for cost-effective co-operation

In our case there definitely is evidence that both the parent organizations – the university and the university hospital – have gained from the co-operation and the maintenance of a joint library: i.e. the result of this co-operation is a library that is broader in its scope and a more functional entity. The library has gained more resources due to this co-operative model and on the other hand has been able to provide more tailored services for the hospitals' staff, not only physicians but also academics and students working in the hospital. Perhaps most importantly, the library staff has been able to specialize in meeting the information needs of the hospital.

It is most likely that restructuring of both the health care system and higher education shall continue in Finland. One scenario is that the doctoral medicine education shall be allocated even more from the university hospitals to other hospitals. This most likely will result in a need for university library level services and might mean a new and broader role for providing high quality library services to these regional hospitals. Here one may encounter new challenges, especially from the point of copyright restrictions outside the universities and their campuses and the distances between the hospitals (7).

Another development in Finland is the increasing co-operation between the polytechnic and university education. This is especially important within the health sector when one considers the education of nurses. There already have been discussions about this type of co-operation on the Kuopio campus since it involves library and information services.

The other larger trends – the digitalization of science and the economical challenges – is one that all will be facing for the foreseeable future. In some respect, this offers vast possibilities especially within the health sector: the Open Access culture may provide new resources and ways of disseminating information both to academics and laymen. Here the libraries can play a major role if they are willing to join this process.

One way of overcoming financial challenges is to co-operate and cross boundaries actively, both between organizations and also in geographic terms. The digital dissemination of information opens up new possibilities for joint services within Europe; even globally. It is crucial for libraries to join this emerging trend and be active in the dissemination of digital health information. Here the co-operation between the users and providers and creators of this information is crucial. The tools for this type of activity are already in our hands; all that is needed is an innovative approach and a future-oriented leadership.

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7. Sheat K. Libraries, copyright and the global digital environment. The Electronic Library 2004;22(6):487-491.

Financial restrictions – perhaps for the benefit of librarians?

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Abstract
The author reports on the annual MLA meeting which took place in Minneapolis from the 13-18 May 2011. During this meeting, the issue of financial restrictions in libraries was not a specific subject of the different presentations. However, some closely related issues were discussed in depth: in particular, the value of library resources and services, the importance of research grant revenues, the role of the librarian in educating users with regard to resources, a better use of available resources etc. This paper briefly decribes all these issues which can be considered as a valuable "return of investment" for libraries and librarians.

Key words: libraries; library services; financial management.

MLA's annual meeting took place in Minneapolis 13-18th May. Thanks to the kind invitation to the EAHIL Board from the MLA Board of directors it was me, EAHIL's Past President, who represented EAHIL and attend the meeting. For me it was the 3rd MLA meeting, but once again I was impressed by the number of colleagues attending and the scale and professionalism of the organization.

As with most conferences there is always too much on offer and I was only able attend less than a fifth (or maybe a tenth) of the program. Parallel sessions, exhibit, informal meetings and talks over coffee all these are essential ingredients to participate in a conference and add to the benefit of attending.

The theme of the meeting "Rethink" inspired the presenters to highlight new roles, new markets, new procedures and new views. The (parallel) sessions were sponsored by one or more of the sections, which meant that these sections were responsible for the programming of the sessions and the selection of papers to be presented, not necessarily limited to section subjects or projects from section members. I selected presentations about librarians' roles in serving faculties, new areas of activities, in context of the clinic, laboratory or health service, according to my personal interests.

Several presentations and posters were dedicated to the role of clinical librarians, embedded librarians or informationists in context. Being in the wards, serving patients, but also being part of the (lab) research team are examples of new roles and services by medical librarians in different settings. Overall experience was reported to be rewarding and resulting in an increase in questions and/or requests for assistance from the library.

In the context of the Clinical and Translational Science Awards (CTSA) renewal process, an active and important role for librarians consists of bibliometrics and evaluations: citation analysis, impact studies, social network analysis etc. CTSA programmes are intended to speed up the implementation process of (laboratory) research results into clinical practice. In this respect it was interesting that the focus group research by colleagues from California and Texas has shown that translational researchers have significant educational needs regarding data curation and data management. Another study revealed the interests of the researcher in the provision of genomic and proteomic information tools and resources by the library.

With the growing importance of genomic and translational medicine a partnership program between a bioinformaticist and library school faculty was formed to create a model for teaching graduate LIS students about genomics and translational medicine. With a better understanding of the basic concepts in genomics, personalized medicine and translational medicine information professionals will be better equipped to provide support from bench to bedside. Also in the teams and collaborative projects regarding Systematic

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Reviews there is a role for librarians both as searchers, critical appraisers and reference database managers.

The financial crisis was not a subject in the presentations I have attended. Nevertheless some interesting sessions were arranged on "Return of Investment". Different methods and models were presented to demonstrate the value of the library resources and library services. For example: figures on research grant revenue in relation to the library resources used (cited references). Other research methods used to demonstrate the value of library services were surveys to customers receiving reference assistance or sent out to all faculty members and completed by personal interviews. An interview study with academic researchers in biomedicine revealed that researchers employ an array of strategies to meet their information needs. Most use interlibrary services extremely rarely if at all; most interviewees indicated that their information-seeking behaviors are inadequate. There is a continuing role for librarians in educating researchers regarding resources that are available. Investigating customer information needs and targeting nontraditional clients has led to tailor made and highly focused alerts and awareness services, with examples in laboratory animal care and research ethics, as well as copyright issues and health technology assessment.

A broad range of product reviews and company presentations took place at the exhibit area, with a remarkable amount of products aimed at supporting evidence-based practice. The EBM movement advocates more and better use of available evidence in as many resources as possible to access. EBM products are in general value-added, not only by the integrated evaluations and comments, but are at the same time secondary sources replacing the need to access the primary literature. With the ever increasing costs for accessing the primary sources, the use of secondary (or even tertiary) has come into focus and might be a cost-effective approach to information management. Of course this will only be true for competitive products, otherwise we shall end up with the same problems as with the scientific journals: ever increasing costs dictated and made possible by monopolies executed by the publishers.

The serials crisis announced more than two decades ago (ever since my start in librarianship 25 years ago, collection management has been synonymous with cancellations) will hit many of our libraries in the near future, if they are not already seriously hit and damaged. My spokesman, a European publisher's representative originally British nowadays based in the USA, told me that not only stated funded universities and medical school libraries will face serious budget cuts due to the serious fall in tax income money for the government, but also private universities, traditionally the richer and better of parties, will suffer from the crisis. Money savings allocated in the stock market as an investment to make some profit, have turned into a huge loss of assets, and budget cuts of 25% or more can be expected.

For publishers uncertain and difficult times approach. Cancellations and fluctuating money exchange rates are strong forces to raise subscription fees, which will be followed by more cancellations. In order not to lose subscribers, several publishers (not the famous ones with the big deal contracts) have to operate with smaller margins and less profit. Generous offers will be fewer and become exceptions, negotiations for renewals at lower pricing will be hard, if not unsuccessful for sure. Options for librarians will be to support the better use of the available resources (see the first paragraphs of this article) or to generate income by serving new customers.

Being in the position to support a neighbour organization on request with several library services, my negotiations with publishers and their representatives for the upcoming renewals will aim at including these new customers in my contracts at the same or slightly higher subscription rates. Part of the costs of the library should be reimbursed by the new customers, collection should stay at the same size and value, and therefore net costs to be paid from my budget should be a bit lower next year. It hopefully will be possible. It would result in a double profit for the library: more services, noticeable and measurable return on investment and an increase of the value of the library. And if in the end there will be less resources that could be a benefit to the end-users as well: too much to read already! Geoffrey Bilder's advice in his plenary presentation at the end of the MLA meeting is: help and support researchers to use tools that help them to avoid reading!!

All sessions were audiotaped, together with the abstracts and slideshows uploaded on the web to view at home over and over..., really very helpful in memorizing what you have heard and to fill in the gaps of what was missed. These are accessible only for registered conference participants.

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[Collected February - April 2011]

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The goal of this section is to have a look at references from non-medical librarian journals, but interesting for medical librarians (for lists and TOC's alerts from medical librarian journals, see: http://www.chu-rouen.fr/documed/eahil67.html)

Free full text

1. Ortega Egea JM *et al.* **Profiling European physicians'usage of eHealth services**
   Information Research 2011 [cited 2011 April 5] 16(1)
   Introduction. Deeper knowledge of physicians' eHealth-related behaviour is needed in different countries. This paper clarifies the usage patterns of eHealth services among European general practitioners. Method. The survey database Flash-Eurobarometer No. 126 'General Practitioners and the Internet' is analysed. Additional socio-demographic variables are also included, such as country, age, sex, location, and size of the medical practice. Telephone interviews were conducted for data collection purposes. Analysis. Latent class cluster analysis was applied to identify homogeneous segments of eHealth adopters among European physicians. Country, age, sex, location, and size of the medical practice were included as covariates in the analyses, in order to obtain a descriptive profiling of the identified segments. Results. The analysis yielded three segments of European physicians using eHealth services. After adding the group of physicians not using the Internet, the following four final segments were identified: Information Searchers, Advanced Users, Laggards and Non-Internet Users. The analysis of covariates in the latent class cluster model showed that country, sex and age were significantly related to physicians' usage patterns of eHealth services. Chi squared analyses were performed to account for the group of Non-Internet Users, further confirming the existence of strong country differences and moderate age influences, but very weak effects of sex on physicians' eHealth-related behaviour. Conclusion. The identification of European physicians' eHealth usage patterns contributes to the development of suitable and adapted promotion strategies, aimed at ensuring efficient adoption processes of Internet technologies among providers of patient care services in the analysed countries.
   Available from: http://informationr.net/ir/16-1/paper467.html

2. Powelson S Vaska M. **Determining user needs for an academic health sciences library renovation**
   Evidence Based Library and Information Practice 2011 [cited 2011 April 5] 6(1) 92-4
   The Health Sciences Library (HSL) at the University of Calgary (U of C) opened in the late 1970's. The library serves the Faculties of Medicine, Nursing, Veterinary Medicine, and a Bachelor of Health Sciences program. In addition, HSL provides services to the Foothills Medical Centre, the largest acute care hospital in Calgary.
   Available from: http://ejournals.library.ualberta.ca/index.php/EBLIP/article/view/9411/7852

3. Gavgani VZ. **Need for content reengineering of the medical library and information science curriculum in Iran**
   Library Philosophy and Practice 2011[cited 2011 Mars 3] January
   New approaches in medical education and practice such as Evidence-Based Medicine, Information Therapy, and Patient-Centered Healthcare require more reliable, timely and specialized information services. At the same time, the provision of information services in the environment of Web 2.0, medicine 2.0, library 2.0, and mobile computer technology require new skills on the part of librarians. Library and Information Science (LIS) education curricula have to be changed to meet the professional needs and skills required for librarians. The aim of this study is to find out whether the content of LIS academic courses offered by Iranian Medical LIS schools meet the clinical/medical librarians' professional needs. It focuses on the areas of evidence-based approach, patient-centered healthcare, information therapy services, and Web2.0 applications. Methodology: This is an exploratory study involving a content analysis of the curricula and course descriptions of all schools/departments of medical library and information science in Iran. The medical library science education curricula in Iran address neither the trends in LIS education and services, nor the emerging technologies in information and communication. Specifically, professional skill requirements such as critical appraisal, rigorous research methods used in health science literature, evidence-based medicine, e-health, evidence-based library and information practice, Web 2.0, applications of Information Communication Technology and mobile technology are not included in LIS education to meet the needs of community and improve healthcare outcomes.
   Available from: http://unllib.unl.edu/LPP/gavgani-nanekaran-shiramin.htm

4. Nagaraja A. *et al.* **Comparison of Web of Science and Scopus Impact Factors of Indian journals**
   Library Philosophy and Practice 2011[cited 2011 Mars 3] January
   Database coverage of Indian journals in Web of Science and Scopus were identified. Impact factor from Journal Citation Reports 2008. SCImago journal rank indicator of Indian journals was tabulated and compared. It was found that Scopus covers more impact factor-tracked Indian journals, while Web of Science covers 45 Indian journals with impact factor.
   Available from: http://unllib.unl.edu/LPP/nagaraja-vasanthakumar.htm

5. Saylor K *et al.* **A transformational outreach program for an academic health sciences library. Looking beyond research institutions.**
   College & Research Libraries News 2011 [cited 2011 Mars 3] 72(2) 86-9
   For many years and for a variety of reasons, the University of Michigan's Taubman Health Sciences Library did not engage in community relationship building or define community outreach as one of the priorities in its services and overall mission. With the arrival of a new director in 2006, and changes in organizational leadership and focus, the library began to take part in a series of community events on an informal basis and to foster relationships with local organizations and community partners.
   Available from: http://crln.acrl.org/content/72/2/86.full

Abstracts only

1. Miguel S *et al.* **Open access and Scopus: A new approach to scientific visibility from the standpoint of access**
   Journal of the American Society for Information Science and Technology Article 2011 [cited 2011 April 12] first published online: 11 APR 2011
   The last few years have seen the emergence of several open access (OA) options in scholarly communication, which can be grouped broadly into two areas referred to as gold and green roads. Several recent studies have shown how large the extent of OA is, but there have been few studies showing the impact of OA in the visibility of journals covering all scientific fields and geographical regions. This research presents a series of

informative analyses providing a broad overview of the degree of proliferation of OA journals in a data sample of about 17,000 active journals indexed in Scopus. This study shows a new approach to scientific visibility from a systematic combination of four databases: Scopus, the Directory of Open Access Journals, Rights Metadata for Open Archiving.
Available from: http://onlinelibrary.wiley.com/doi/10.1002/asi.21532/abstract

2. Keneally C. TaBaMLN Keeps on Ramblin': **The evolution of the Tampa Bay Medical Library Network**
Journal of Interlibrary Loan,Document Delivery & Electronic Reserve 2011 [cited 2011 April 11 21(1 & 2) 91-7
The Tampa Bay Medical Library Network, also known as TaBaMLN, has been an invaluable organization for central Florida medical librarians for over 35 years. The goals and activities of this group, as well as the membership, have changed and evolved over the years, but one thing remains: This consortium is an integral part of the medical library landscape for the Tampa Bay area and beyond and provides its members with resources, networking, and continuing education. This article addresses the evolution of this important group from 1975 to the present day.
Available from: http://www.informaworld.com/smpp/content~db=all~content=a936138246~frm=titlelink

3. Keiser BE. 21st-Century: **Table of contents alerts**
Online 2011 [cited 2011 April 7] 35(2) 34-7
Publishers provide some assistance by allowing a table of contents (TOC) alert for individual titles. Even if you don't subscribe to a title or a set of journals within a discipline from a specific publisher, you may be able to keep abreast of what is going on within topics of interest to you and your clients by receiving TOCs for journals before, or as soon as, they are published. Most TOC alerts are a snap to set up. These services have morphed over the years, but many don't charge a fee, and they can be a real help in catching articles that you normally would not see. For librarians, the most frustrating part of setting up TOC alerts for individual clients/researchers is that the TOCs often are issued before the print publication is mailed and/or the articles get into some of the databases.
Available from: http://www.infotoday.com/online/mar11/index.shtml

4. Sanni SA Zainab AN. **Evaluating the influence of a medical journal using Google Scholar**
Learned Publishing 2011 [cited 2011 April 5] 24(2)145-54
This study shows how a journal's influence can be calculated by using citations obtained from Google Scholar and other methods even though the journal is not covered by any citation databases. Influence is measured in terms of foreign contributions, 'equivalent' immediacy scores of recent articles, and the calculation of citations and 'equivalent' impact factor. A total of 580 articles published in the Medical Journal of Malaysia (MJM) between 2004 and 2008 served as the sample. Very few foreign authors contributed to MJM (12.5%), implying its low regional acceptance as a channel for research communication. Immediacy scores for each year indicate citations were received by recently published articles. A total of 1,164 citations were received by 446 of the 580 articles and the main citing sources were journals (1,083) with reasonable h index and impact factor. Yearly impact scores ranged between 0.367 and 0.616. Higher impact factor scores were obtained by older articles.
Available from: http://alpsp.publisher.ingentaconnect.com/content/alpsp/lp/2011/00000024/00000002/art00010

5. Tjensvoll K. **National licensing for the Norwegian Electronic Health Library**
The Journal for the Serials Community 2011 [cited 2011 April 5] 24(1) 52-5
The Norwegian Electronic Health Library (NEHL) is a national online library service for Norwegian health care personnel. Through the NEHL portal (www.helsebiblioteket.no), users have access to approximately

2,500 medical journals, bibliographic indexes, point-of-care reference tools and other medical information resources. The service is funded by the Norwegian government, and consequently must comply with laws and regulation concerning public acquisitions, which are more or less the same all over the European Union. Norwegian laws were recently changed in order to be more in harmony with the EU. The regulations state when public tenders should be used, and also describe in detail how a tender should be organized and what kind of process to use for different kinds of products and/or projects.During the first half of 2009 a decision was made to acquire a point-of-care reference tool for Norwegian physicians. As a result of the tender process NEHL acquired national licences for BMJ Best Practice and UpToDate.
Available from: http://uksg.metapress.com/app/home/contribution.asp?referrer=parent&backto=issue,13,25;journal,1,71;linkingpublicationresults,1:107730,1

6. Wilmes NA. **Providing mobile mibrarian service to a college of nursing to increase interactions and transactions: one Wayne State University, Science and Technology librarian's experience**
Science & Technology Libraries 2011 [cited 2011 Mars 7] 30(1) 99-107
A mobile librarian service to the Wayne State University College of Nursing was developed to provide in-person reference and research support. This service has been successfully used for eight semesters by College of Nursing faculty, graduate students, and some undergraduates for support of research and course work. This article will address the details and provide a description of the service.
Available from: http://www.informaworld.com/smpp/content~db=all~content=a934442266~frm=titlelink

7. Shpilko I. **Assessing information-seeking patterns and needs of nutrition, food science, and dietetics faculty**
Library & Information Science Research 2011 [cited 2011 Mars 7] 33(2) 151-7
This research examines how faculty in academic nutrition, food science, and dietetics locate and access relevant information sources; what information service needs they perceive; which scholarly journals they consult regularly for current awareness; and which journals they use for research and teaching. An e-mail survey was conducted at a large urban public university offering graduate and undergraduate programs in the fields of nutrition, food science, and dietetics. Scholarly journals remain the most common and effective information source for academic nutrition and food science faculty. The PubMed database from the U.S. National Library of Medicine was identified as the main platform for accessing MEDLINE, the most frequently used database for scientific literature searching. The findings inform and support subject librarians in their collection-building decisions, enabling them to improve the services they currently offer to academic communities in these fields.
Available from: http://dx.doi.org/10.1016/j.lisr.2010.07.018

8. Mei-ying W *et al.* The Bibliometric **Characteristics of Chinese medical core journals**
Serials Review 2011 [cited 2011 Mars 3] 37(1) 9-13
To provide bibliometric evidence for Chinese medical journals to be considered for the evaluation system of core journals, the authors have undertaken a comparative study on bibliometric characteristics between Chinese core journals and common journals (journals not included in A Guide to the Core Journals of China). There are 203 Chinese medical core journals and 440 Chinese common journals. Impact factor, ratio of articles supported with funding sources (foundation), total yearly pages and average article length of core journals are significantly higher than those of common journals in China. Medical editors can take effective measures to improve academic levels and journal impact by considering factors from this study, such as having a proper and short publication cycle, increasing the impact factor, concentrating on articles with foundation support, publishing more high-impact papers, increasing substantive content and publishing more articles with abstracts.
Available from: http://dx.doi.org/10.1016/j.serrev.2010.11.002

9. García-Lacalle J *et al.* **The unpromising quality and evolution of Spanish public hospital web sites**
   Online Information Review 2011 [cited 2011 February 21] 35(1) 86-112
   Purpose – The objective of this paper is twofold: first to determine to what extent Spanish public hospitals are using their web sites to provide useful information to users and to improve hospital-patient relationships, and second to determine which factors have an influence on web site adoption and level of development over time. Design/methodology/approach – The web sites of public hospitals were searched for and analysed in 2005 and 2008. Their contents and features were scored using an 86-item checklist. Several hypotheses were proposed regarding the influence of internal and external factors on web site adoption and level of development. Logit and linear regressions were conducted to test the proposed hypotheses. Findings – Half of the Spanish public hospitals do not have a web site. The hospital web sites were acceptable in the information dimension but should improve their interactive features, as well as their navigation and usability. No significant improvements were observed during the period analysed. The size of the hospitals was a determining factor for web site adoption and level of development in both years. However, from 2005 to 2008, external factors – in particular internet penetration – became a significant factor to explain the adoption and level of development of web sites. Practical implications – Citizens are increasingly relying on the internet to search for health-related information. Hospital managers should exploit the advantages of implementing and properly developing a web site in order to improve the patient-care provider relationships and offer citizens reliable information about healthcare. Originality/value – To date, no empirical study has analysed the factors that influence the implementation of hospital web sites or the evolution of their contents and quality over time.
   Available from: http://dx.doi.org/10.1108/14684521111113605

10. Baro EE *et al.* **Information literacy among medical students in the College of Health Sciences in Niger Delta University, Nigeria**
    Program: electronic library and information systems 2011 [cited 2011 February 14] 45(1) 107-20
    Purpose – The aim of this paper is to investigate whether undergraduate students in the College of Health Sciences in Niger Delta University are information literate, and to determine whether they are aware of and use different information resources including electronic ones, and to assess their ability to evaluate information before use. Design/methodology/approach – Questionnaire and interview methods were used to collect data from the students. Findings – The students mostly rely on textbooks, medical journals, the internet, colleagues, and the Nigerian National University Commission's virtual library for information. They rarely use electronic resources such as MEDLINE, HINARI, the Cochrane Library, and EbscoHost. This could be because of a lack of awareness and skills necessary to search databases. Problems such as lack of time, the challenge of locating "good citable stuff", inability to use effectively the medical library, and poor skills in information searching were mentioned. The study recommends that medical librarians and faculty should collaborate in integrating information literacy skills into the medical school curriculum. Originality/value – This paper may help inform discussion about students' competences for locating, selecting, evaluating and using information essential for lifelong learning.
    Available from: http://dx.doi.org/10.1108/00330331111107439

Emerging challenges

iPads, Mobile Libraries and Medical apps

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Oliver Obst has asked me to be a guest writer for his column of the June issue of the JEAHIL. At first I hesitated because writing - to be honest- is not really my cup of tea. It takes me too much time and concentration; I tend to write too much on too many topics at once, and I always demand an original quality contribution from myself. During the writing process I keep coming up with new ideas, constantly hesitating between extra information and the levels of detail to include. But then again, how could I refuse Oliver who has put such determination, originality and efforts into these columns for many years now, on topics that always interest me and many -if not all- other EAHIL members.

iPads on Loan: shaking things up

For many things Oliver's library is a great example for using new technologies in medical libraries. With his combination of intelligence, logic, his sensitive antenna for user needs ánd a pragmatic approach in applying new technology, he has created over the years a wonderful medical library with a large array of tools and services for the ZB Med Münster. Last year he launched their iPad on Loan project and when we (at the Central Medical Library (CMB) of the University Medical Center Groningen (UMCG) heard how it was introduced and how well it was received, we wanted to do this too. Oliver agreed immediately, without hesitation, to share his "blueprint" & all the ins- and outs regarding the project. He also wrote about it in this Journal, http://jeahil.wordpress.com/2010/10/14 /ipad-lending-project-first-results

The Background Info-page on the iPad on Loan-project wiki, http://ipadscmb.pbworks.com tells the story from the beginning, - from buying 6 iPads and collecting Apps via iTunes - to the present day (having 8 iPads available and a waiting list of >80 interested staff members.

Our objective in giving these iPads to staff members in our hospital community, was to:

1. learn from their experiences with the iPad as a tool that could possibly change workflow in a clinical, research, patient-care or educational setting;
2. learn more about all types of workflow, communication & medical Apps;
3. learn to know our users' needs even better.

The personal touch, whereby the iPads are distributed in personal meetings with the head of the library, Annalies Koelstra, has proven to be very effective, and the principle has worked extremely well. The iPad-users have to sign a short contract and agree on doing a short evaluation, again via a one-to-one meeting, when bringing the iPad back.

While the ZB Med uses their WissensWiki and a php-based home-made program (Oliver has to teach me one day how to do that!) to document the iPads and the project, I decided to make every installed App to be put into into a Delicious Bookmark http://www.delicious.com/digicmb/ipadcmb

The tool Packrati.us (http://packrati.us/) bookmarks all links in my Tweets directly to the Delicious, including the "IPADCMB" tag. Basically I can use the "tweet this" option from inside iTunes AppStore to do this. Unfortunately, I still have to maintain that App-list on our beta-wiki manually. Meanwhile our activities with the iPads have stirred things up at our hospital a little. It was interesting to note that many people from many different departments contacted us to talk about iPad-related topics. From the IT-department to the nursing staff, and from policy-makers to researchers, they all came to discuss the project and some of its consequences. Can we do this without risk of patient-information being leaked? Can we organise our IT systems to access critical patient-care tools on the iPads, even from home? Can we use it in teaching, or at the bed-side? We have also had teachers who came to do a project on the use of ipads for the visually impaired, and a head-nurse to ask for an iPad to "treat" a long-term isolated, very ill patient. With the iPad she could communicate and keep in touch with the outside world, friends and family much better. We created a manual on how to access the hospitals off-campus solution (using Citrix", called Werkplek Op Afstand, WOA).

I can safely say that by doing this project the library received very positive feedback from everyone. Regarding the PR and marketing, doing this, even though it is a low-profile project with relatively low costs (just the costs of hardware and Apps), has had a high impact. Many people and departments, including IT and Management, are more aware of its possibilities.This week the hospital even lifted the ban on Dropbox (http://www.dropbox.com), a very polular file management program that makes handling files between the desktop, laptop, tablets & mobiles very easy. In the near future a new emerging challenge will be to compare and explore the river of announced new tablets http://www.zdnet.com/blog/btl/the-10-hottest-tablets-coming-in-2011/44415

Fig. 1. *Groningen Central Medical Library webpage.*

If you have any questions, just contact me, or come by for a visit :-)
To be continued …

MobileCMB.nl

Almost at the same time of the early preparation of the iPad on Loan-project, we started a project with 4th year Hanzehogeschool-students of the Web & Mobile Services program to develop a mobile application for the CMB. Part of this project was doing research into mobile user needs, and the other part was to create a working prototype of a medical library (web)-app. In the survey, created with Google Docs, Forms, we specifically asked users to leave their email address if they would be interested in an iPad on loan. That is how our initial waiting-list became so large. Now, even with 8 iPads, on loan, each for a maximum of 2 weeks, the list is still growing due to our library-demo's on location, in the departments and staff-meetings with the iPad2. The iPad2 is for library demo's on Tablets, Workflow, Library & Medical Apps, the best right now, because the complete VGA-out allows us to show the complete screen of the iPad on any beamer with any problems? Preparation time was too short to present the outcome of the surveys here in detail (we asked both, students and staff), maybe a future column ;-)

In January 2011 the prototype was ready and it contains now the most mentioned features of the survey outcomes. Here are the most special ones:

- We are proud to have a fully integrated PubMed search connected with our linkresolver RUGLinks (SFX) to easily get to our fulltexts. The other search tools included are: UpToDate, Catalogue, AccessMedicine, E-Journals and E-Books
- Our new LibGuides on Medicine, Dentistry, Human Movement Sciences and Nursing, http://libguides.rug.nl/profile.php?uid=10227
- Contact section with Olark Chat http://www.olark.com/
- Available Computers in the Library and the MedicalFacility
- All our social media links

If you want to see the complete mobile App, have a look at our CMB Netvibes, http://www.netvibes.com /cmb#Mobile or Scan the qr-code with your mobile and go directly to the (web) app!

Fig. 2. *MobileCMB.nl*

Please try it, and let us know your experiences preferable via the Response Buttons on the App.
The App was created via JQuery http://jquery.com/ and PHP, http://simple.wikipedia.org/wiki/PHP and is running on a University server. I can manage it via Filezilla, PHPmyadmin and a MySQL database.
More info at our CMBWIKI: http://cmbwiki.pbworks.com/w/page/36068275/Mobile-CMB

Medical Apps & related

To finish this column off, a short mention of related interesting tools:

- MedicalApps is a public Netvibes page with the most important Medical Apps Search tools in one place. News on New, Free, Pricedrops, reviewed Medical Apps http://www.netvibes.com/medicalapps
- Medical Apps Search (MAPPS) If you are looking for a specific App or topic, try this Google Custom Search MAPPS http://www.google.com/cse/home?cx=004308201683882109473%3As7kc4_l-vry
- https://www.facebook.com/Medlibmob?sk=app_4949752878
- Collected medical library mobile sites/apps: http://www.delicious.com/medlibmob/medical+library+mobile
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- And last but not least, a Daily Magazine created with tweets focussed on Medical Apps "The Medical Apps Daily" http://paper.li/medlibmob/1295104201

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[Sci. Signal., 29 March 2011, DOI: 10.1126/scisignal.2001314]

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SCIENTIFIC PROGRAMME

5 July Tuesday	
09:00 - 10:00	Registration desk open
10:00 - 13:00	Continuing Education Courses
10:00 - 17:00	EAHIL Board meeting (MBA Lounge)
13:00 - 14:00	Optional Lunch
14:00 - 17:00	Continuing Education Courses
18:00	First Timers Event/ Optional Dinner
6 July Wednesday	
08:00 - 09:00	Registration desk open
09:00 - 12:00	Continuing Education Courses
12:00 - 13:00	EAHIL Council meeting
13:00 - 14:00	Special Interest Group Meetings
14:00 - 15:30	Opening Ceremony (Auditorium) Opening Lecture - "Impact of Information Technologies to Build up Scientific Thinking" by Prof. Emin Kansu.
15:30 - 17:00	Opening of the Exhibition and Poster Exhibition
18:00 -	Welcome Dinner

7 July Thursday	
08:00 - 09:00	Registration desk open
09:00 - 09:30	Plenary Session 1 **THEME**: Adapting the 23Things programme for health librarian professional education (AUDITORIUM)
09:30 - 11:00	Parallel Session A **THEME 1**: Online Courses **THEME 2**: Information Literacy in the Curriculum
10:00 - 11:00	Coffee Break
11:30 - 13:00	Parallel Session B **THEME 3**: Developing Programs **THEME 4**: Best Practices
13:00 - 14:00	Lunch
14:00 - 15:30	Sponsor Session
15:30 - 16:00	Coffee Break
16:00 - 17:30	Parallel Session C **THEME 5**: Teaching Practices in Health Sciences **THEME 6**: Assessment & Evaluation of Learning ROUND TABLE DISCUSSION
18:30 -	Gala Dinner
8 July Friday	
08:00 - 09:00	Registration desk open
09:00 - 10:00	Plenary Session 2 **THEME**: E-readers and e-text (AUDITORIUM)
10:00 - 11.30	Parallel Session D **THEME 7**: Supporting Patient Information Needs **THEME 8**: Knowledge Management Best Poster Session
11:30 - 11:45	Coffee Break
11:45 - 13:00	GENERAL ASSEMBLY AND CLOSING CEREMONY (AUDITORIUM)
13:00 - 14:30	Lunch
14:30 -	Library Tour

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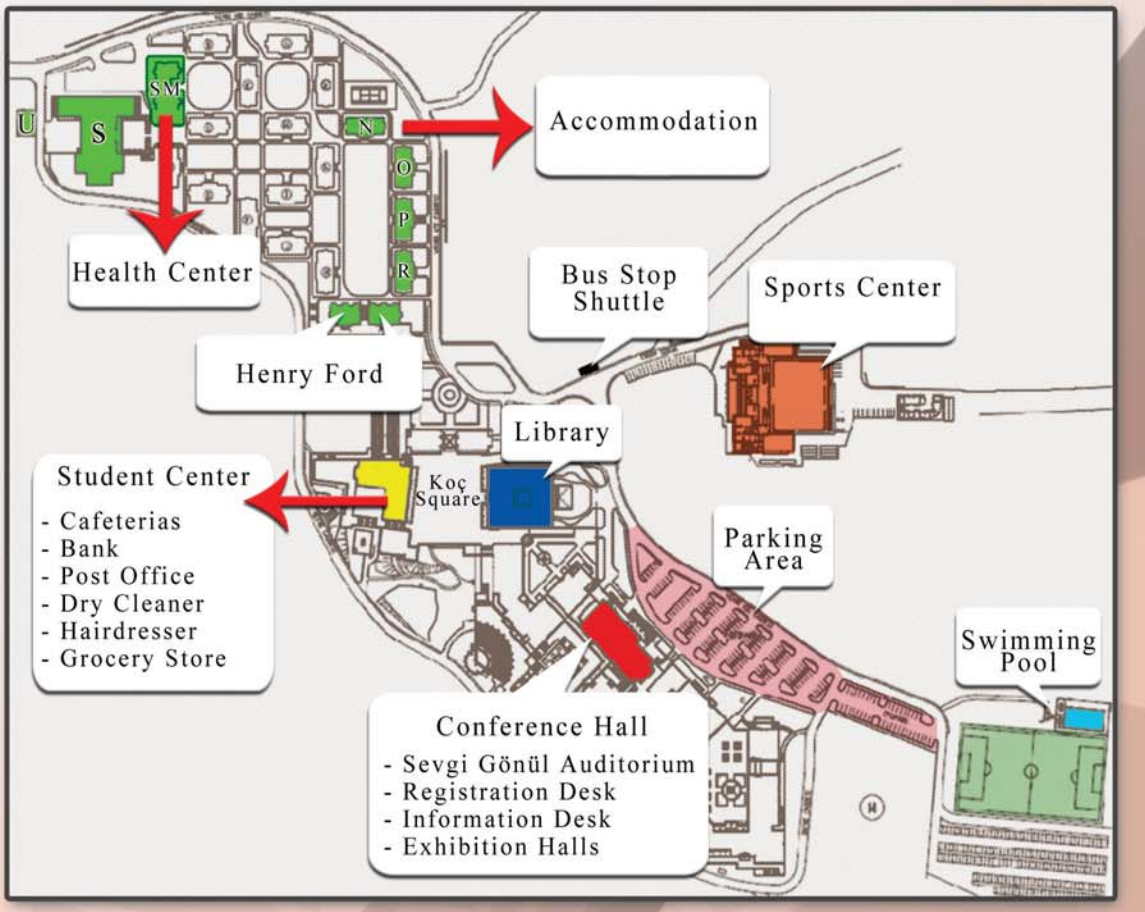

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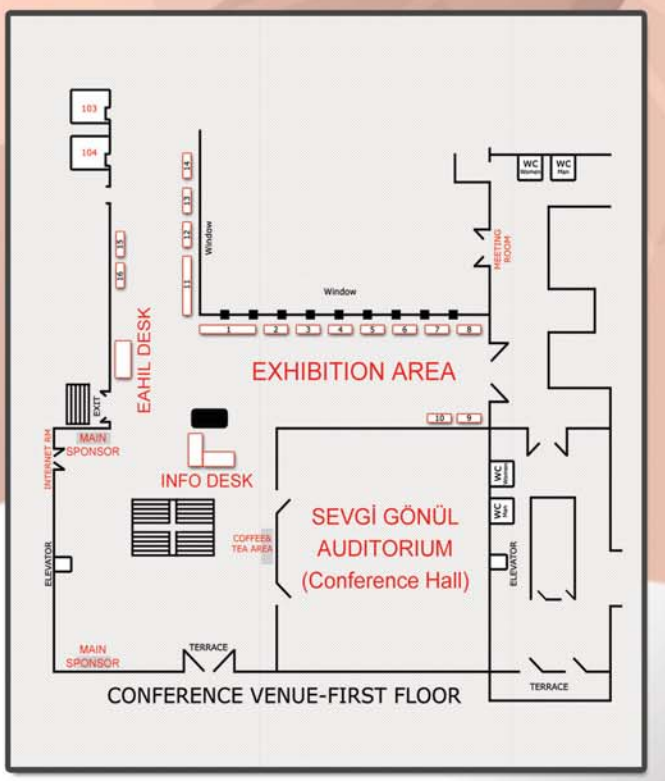

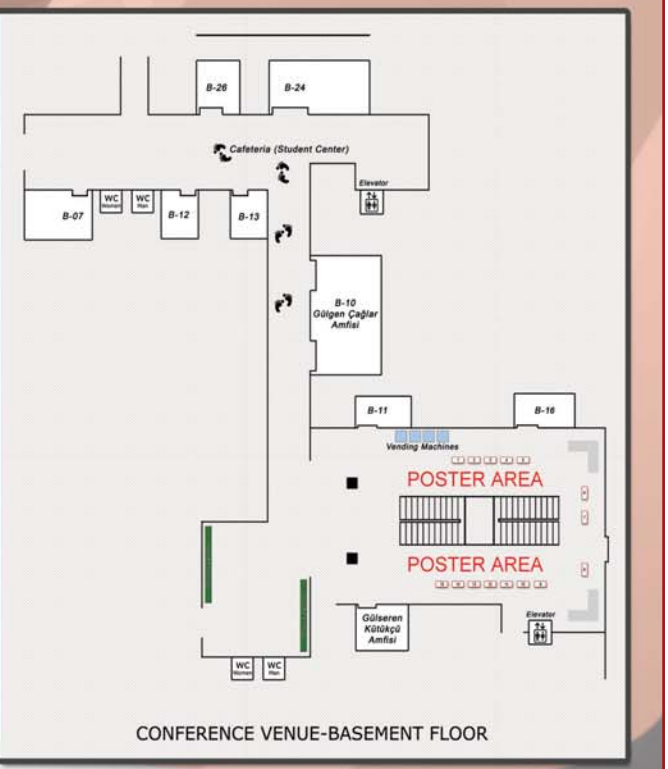

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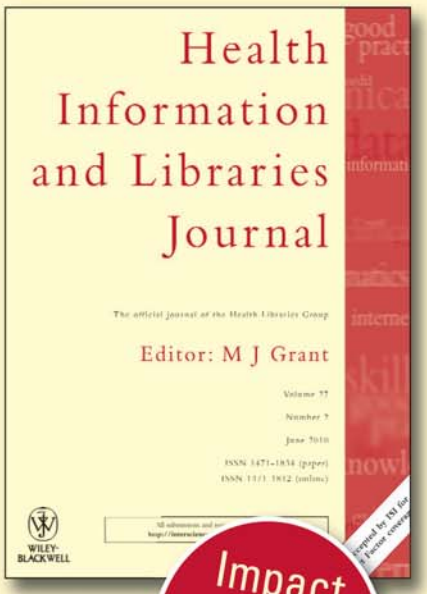
Health Information and Libraries Journal



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Edited by **Maria J Grant**
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Health Information and Libraries Journal (HILJ) is a European journal of international and interdisciplinary interest to practitioners, researchers and students in the information, library and healthcare sectors.
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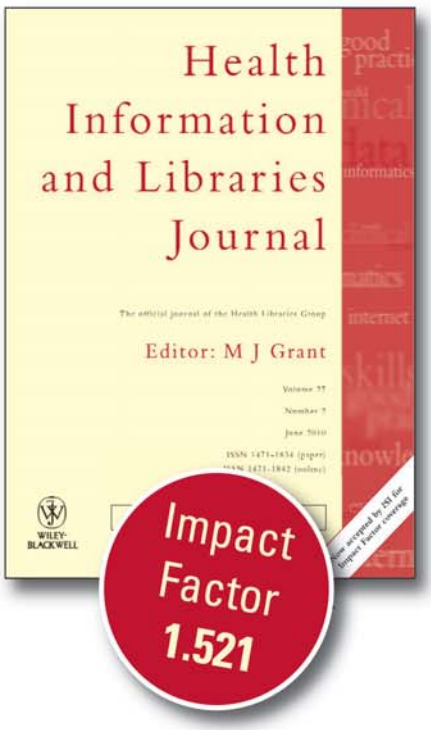

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Letter from the President

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Contact: pbm2@cam.ac.uk

Dear Colleagues,

While our membership of EAHIL reflects a common purpose and a shared belief in the value of working together across national and organisational boundaries, my conversations with EAHIL colleagues regularly provide me with examples of the many differences in local practice that exist between us and distinguish the professional environments in which we operate. Another demonstration of this appeared recently in the form of a paper reporting a survey into the Internet usage habits of general medical practitioners (GPs) in a substantial cross-section of European countries (1). The authors of this paper – with a background in business administration – sought to establish how far these GPs routinely made use of Internet-based networks in the course of their work. Their original survey data were gathered in 2002, and the results are thus a snapshot of Internet usage several years ago rather than a reflection of current practice. However, they are still significant for us because they demonstrate just how widely Internet-based activities might vary from one country to another. For example, the proportion of GPs who reported that they did not use the Internet in any form ranged from 3% of GPs in both Sweden and the UK, to 76% of GPs in Greece at the other end of the spectrum. Further analysis showed that the proportion using the Internet as information searchers (in other words, exploiting it in the type of activity of most interest to us as information professionals) varied from 67% of respondents in Finland down to 11% in both Denmark and Holland.

There are, of course, several reservations to these results that must be noted before we start to draw too many over-hasty conclusions. For example, the survey did not cover all European countries; it studied only doctors, and within that profession surveyed only GPs and not hospital doctors or other health-care staff, and these latter groups might present an entirely different picture if asked the same questions. Moreover, as already noted, the data relate to levels of activity in 2002, and the authors themselves point out that studies based on more recent data have shown – as we would expect – a substantial increase in the use of the Internet throughout Europe. Nevertheless, I think it is possible to make some instructive observations from our perspective. First, the survey provides evidence that there is a wide variation in official attitudes across Europe to Internet-based activities and the extent to which they should be formally embedded in health services as a routine aspect of professional practice. This in turn is likely to have an effect on the priorities assigned to training medical practitioners in the necessary information-handling skills both at medical school and then subsequently as their careers develop. It

will also have an impact on the level of priority given to investing in improved technology and faster, more effective network capabilities. And from a pan-European perspective, the disparity in different countries' levels of commitment to using the Internet has implications for international co-operation, with a danger that those countries exploiting network technologies on a large scale will tend to look for partners in research collaborations whose similar commitment to these technologies facilitates effective communication, information systems run the risk of being bypassed. For us, as health-care information professionals, this paper provides a timely reminder that we must continue to be sensitive to the differences between national health-care systems, and thus to the varying problems and needs of the information professionals who work within each systems, when planning future EAHIL activities.

Happily EAHIL's 2011 Workshop programme, to be held on 5-8 July at Koç University in Istanbul, shows every sign that the organizers have understood this when making their plans. As I write, the full programme has already been published and registration is in progress. Our hosts at Koç University have chosen as the Workshop's theme "Active Learning and Research Partnerships in Health". It is particularly appropriate that the word "partnerships" lies at the heart of the chosen theme, given Istanbul's unique position at the junction of two continents and its history as a place where different cultures have come together over many centuries and built working relationships that last to this day. The programme follows the pattern of previous workshops with a mixture of presentations, posters, and continuing education courses, and there will be opportunities for the Special Interest Groups and other informal groupings to meet on their own during the course of the week. To complement the formal sessions there is also an attractive social programme that will help participants to savour some of the "Turkish Delights" that Istanbul and its environs have to offer. We are delighted that EAHIL has again been able to announce six 500 Euro scholarships, awarded competitively, to support the successful candidates wishing to attend the Workshop, and are grateful to EBSCO for again helping to sponsor these awards. This year, in addition, a further scholarship, sponsored by the Journal of EAHIL, has been introduced and is awarded to the author(s) of what the editors have chosen as the best paper published in the Journal during the previous year. While members should need no encouragement to submit articles to the Journal, we hope this additional incentive might persuade a few more potential authors to consider contributing papers in future.

Our annual meeting and the Journal are the most visible of the Association's activities, but there is of course a lot of activity behind the scenes to manage our affairs and ensure that EAHIL remains responsive to its members' needs. Most of this work revolves around the EAHIL Executive Board, whose members are in regular contact as well as meeting twice a year. This year the Board's winter meeting took place in February in the Netherlands for two days of intensive deliberation (Day 1 at the EAHIL Secretariat office in Maarssen, and Day 2 in Amsterdam). Much of the Board's agenda dealt with essentially administrative matters, but some of the topics discussed will be of interest to a wider audience.

The EAHIL Website has been reviewed, and both the Board and the Web 2.0 Taskforce have concluded that it should be completely redesigned so that it can make a more substantial contribution to the Association's activities. It already plays a useful role as the source of official information about the Association, as well as providing the membership database and an interface to the websites of our annual conferences and workshops; but it has not kept pace with technological developments and has the potential to contribute much more as a source of support for members. The Board is very conscious of the fact that for 51 weeks of every year we are essentially a virtual organisation, and the EAHIL website and our email lists are key elements in ensuring that we can communicate effectively with one another. The Taskforce is therefore preparing a project proposal for the website to be overhauled, with a view to starting work later in 2011.

The Board has been concerned for some time that the role played by the EAHIL Council has not been developed to its fullest potential. The Council has a vital part in the Association's organisational structure since it provides

for representation from every country in the Council of Europe that has at least five members of EAHIL, and – as our Constitution states – "Council members shall act as a link between the members in their country and the Association." At last year's Council meeting in Lisbon the members held a brainstorming session, the results of which have been reviewed by the Board. We shall therefore be bringing proposals to the Council's July meeting in Istanbul that we hope will enable the Council collectively, and its members individually, to become more actively involved than has sometimes been the case. But we should not forget, either that the Councillors' role works in both directions. While they can help the Board to communicate with the membership at large, they are also a conduit through which members in their own countries can raise matters that they wish the Association to consider. The EAHIL website contains a list of the current Council members (2), and I do encourage you to make contact with them if the need arises.

I have already mentioned the EAHIL email lists and their use as a means of keeping in touch. You may not have realised that at present there are 14 separate discussion lists (see the EAHIL website for details), each with a specific function: some of the lists have a restricted membership while those run by the Special Interest Groups are potentially open to anyone with an interest in the work of a particular SIG. The Board discussed one specific aspect of list activity, having noted that some members have used the main EAHIL Members list to seek help with inter-library loan requests. This practice has attracted criticism from some quarters but can clearly be of benefit to members (and of course their users) in certain circumstances. We plan to discuss the practice further at the Istanbul Council meeting before formulating a policy statement for future guidance.

Looking further ahead, the Board received progress reports on two future meetings, the 2012 Conference, which will take place in Brussels on 4-6 July, and the 2013 Workshop, which is planned for Stockholm. The Brussels conference will have a special significance: not only will it be a return to the city that hosted the first European Conference of Medical Libraries in 1986, but it will also mark the 25th anniversary of EAHIL's official constitution in 1987. You can be sure that the programme will reflect this landmark in our history, so do earmark the date in your diaries.

By the time you read this the 2011 Workshop will be imminent. I hope as many of you as possible will be able to travel to Istanbul, overcoming the financial restrictions that are affecting all of us, and look forward to meeting you there.

References

1. Ortega Egea J.M., Román González M.V., and Recio Menéndez, M. Profiling European physicians' usage of eHealth services. Information Research. 2011 March [cited 2011 May]; 16(1) paper 467: about 17 pp. Available from: http://informationr.net/ir/16-1/paper467.html

2. EAHIL [updated 2011 March; cited 2011 May 6]. EAHIL Council 2011-14. [about 2 screens]. Available from: http://www.eahil.net/organization.htm#EAHIL%20Council

Report from the MESH Special Interest Group

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MeSH and Bibliometrics

The usefulness of MeSH for indexing, cataloguing and searching Medline and other MeSH-indexed databases is an unquestionable and well-known fact. MeSH terminology is considered a "standard" in medical literature storage and retrieval and can therefore be successfully used also in less traditional areas, for example bibliometric analysis. The primary aim of the Karolinska Institutet (KI) bibliometrics project is to provide high quality bibliometric analyses - at different levels and for different reasons - as a research assessment tool.

When the bibliometrics project to define, survey and describe current research topics at KI was initiated, the need of a controlled vocabulary for this work became evident. Karolinska Institutet University Library was asked to cooperate and MeSH was recommended.
Prior to collection of suitable terms for description of respective research topics, we decided to construct a checklist based on MeSH Tree Categories to assure a systematic and consistent collection of terms.

A checklist based on MeSH categories with examples of MeSH terms relevant in oncology and cancer research was compiled (Table 1). More general terms were later included in search strategies with the Explode command for inclusion of more specific terms.

Table 1. *Checklist based on MeSH categories.*

Tree	MeSH Categories	Relevant MeSH Terms
A	ANATOMY/ORGANS/CYTOLOGY	Neoplastic Stem Cells
B	ORGANISMS	Oncogenic Viruses
C	DISEASES	Neoplasms
D	CHEMICALS, DRUGS, SUBSTANCES	Antineoplastic Agents
		Cancer Vaccines
E	DIAGNOSTIC and THERAPEUTIC TECHNIQUES	Neoplasm Staging
		Combined Modality Therapy
G	PHYSIOLOGICAL and BIOLOGICAL PHENOMENA	Cell Transformation, Neoplastic
	IMMUNITY	Immunity, Cellular
	CHEMICAL and PHARMACOLOGICAL PHENOMENA	Drug Resistance, Neoplasm
H	DISCIPLINES	Medical Oncology
		Oncologic Nursing
E	EQUIPMENT	Radiation Equipment and Supplies
N	HEALTH CARE FACILITIES	Cancer Care Facilities

EAHIL Workshop 5-8 July 2011

The MeSH Special Interest group (MeSH-SIG) will meet Wednesday 6th of July between 12.00-13.00 according to the programme.
The exact location of the meeting will later be mailed out via the MeSH-SIG list.
The meeting is open for everybody interested in MeSH issues.

The presentation of different MeSH Tree categories was also used to explain the structure of MeSH to scientists/representatives of the different research topics participating in the bibliometrics project.

We started with creating extensive search strategies based on MeSH. To validate the strategies we met with the scientists/representatives of the respective research topics and made modifications if necessary. These strategies were then used in the bibliometric analyses.

Sessions with the scientists/representatives were not only crucial for building relevant search strategies, but also important as a contact link between the research institutions and the university library.

The work with MeSH-based search strategies to define Karolinska Institutet research areas for use in bibliometric analyses started in 2007. The strategies are annually updated with new MeSH terms.

News from PHIG

This year the EAHIL workshop will be held in Istanbul, the city that bridges both Asia and Europe. This year, the Public Health Interest Group (PHIG) will have representatives from both the WHO EURO and EMRO regions. The Public Health Interest Group (PHIG) will be meeting on Wednesday July 6th at 12:00 during the EAHIL Workshop in Istanbul. A representative from the WHO EURO office Patricia Søndergaard (Languages, Publications and Library) WHO Regional Office for Europe and Hatem Nour El-Din Technical Officer from the WHO-EMRO Eastern Mediterean Office will be attending. This will be the first PHIG meeting that there will representation from both EURO and EMRO WHO offices at the same time at a PHIG meeting. Agenda items or topics for discussion can be sent Katri Larmo (katri.larmo @helsinki.fi) The PHIG meetings are open to all who are interested.

Under the auspicies of PHIG, Tomas Allen (WHO Geneva) and Jennifer Lopez will be offering the course *Tips for Trainers of Library Courses.* The course is an updated version of a course offered in Dublin, 2009. The course will take place on Tuesday, July 4th. Everyone is welcome to attend and can register on the EAHIL workshop website.

We look forward to seeing you in Istanbul.

Thomas Allen
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Geneva,
Switzerland|
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News from EAHIL

Everything – simply – immediately: service in medical libraries

[2010 annual conference of the German Medical Libraries Association in Mainz, Germany]

Anja Kaiser[1], Eike Hentschel[2]

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The annual conference of the German Medical Libraries Association took place from the 27th until the 29th of September 2010 in Mainz with more than 200 participants. The motto was *Everything – simply – immediately: service in medical libraries*". In lectures, working groups, roundtable discussions, workshops and a poster session, the participants were able to obtain new information regarding numerous topics in medical libraries and had the chance to exchange ideas and to further discuss different issues. In this summary just a few topics of the conference are presented. There were many more issues broached which cannot all be discussed here.

In 2010 the German Medical Libraries Association had its 40th year anniversary. To mark this occasion Franz Josef Kühnen portrayed the development from the beginning of the 1960's until now and described the first steps of the medical information supply with his title *Rather few, complicated and with delay* before speaking about the foundation of DIMDI, the Central Library of Medicine in Cologne and the German Medical Libraries Association which contributed to the better networking between medical libraries.

The conference's main topic was communication strategies of medical libraries. Oliver Obst, Münster presented the results of a workshop regarding the future of medical libraries which took place in the run-up to the conference. He described the difficulties in reaching all library users even when different communication channels are used. Therefore one of the future issues in medical libraries could be a target-group-specific marketing.

Manuela Schulz, Mannheim spoke about the project *The library visits the user,* a new initiative in Mannheim in which the librarians go directly to the medical institutions to present all library services and to deliver courses. The advantage is that the medical staff receive exactly the information they have asked for.

Another approach is the *Lunch and learn concept* introduced by Marianne Gretz, Roche Diagnostics GmBH. The library invites staff for a snack at lunch while they answer questions and talk about the library´s services.

In some round table discussions, the participants agreed that personal contact with the library users is important to introduce them to the library's services and offers. Furthermore, the advantages of social networks such as *Facebook* were discussed and how these could help to reach more library users. Most German medical libraries do not have a *Facebook* page yet but are very open to initiating it.

Another central topic was the advancement of service strategies and offers of medical libraries. In this context Bruno Bauer, Vienna introduced two new services of the university library of the Medical University in Vienna: the online textbook collection "Van Swieten Student 2.0", which is not only a library catalogue but also consists of special data such as scanned covers as well as tables of content and different Web 2.0 technologies such as social bookmarking, comment and rating functionality. Furthermore, it contains links to different databases, forums, examination questions and images. Another project Bauer spoke about was the retrospective cataloguing of historical book

collections. In this context an E-Books-On-Demand Service was developed, which permits the ordering of books via Amazon´s *EOD Reprint*.

Additionally, a new bibliographical database, *bibnet.org*, was introduced by Markus Fischer, Solothurner Spitäler AG. The free database contains 44.000 references from mainly German nursing journals and was developed with Open-Source-Solutions.

Frank Norman, MRC National Institute for Medical Research London presented the concept of *The Informationist,* a librarian who is embedded into a research group, to observe the research process and who can offer detailed searches for published literature.

Of course, there were lectures and round table discussions about information literacy instructions. Anja Kaiser, Leipzig introduced the Blended-Learning Course – *Medical bibliographical research*, which is embedded in the course *Problem orientated learning: infectiology and immunology*. All medical students of Leipzig University are obliged to attend this course in their 3rd study year. The Blended-Learning Course consists of two parts. First the students have to pass an e-learning course in which video-tutorials are implemented to describe databases and different ways to get full texts. After that the students attend a course in which they can practise the trained topics. The overall experience is very positive and the students are highly motivated. Therefore the course will continue to be offered as Blended-Learning.

But not only services of medical libraries were discussed. Ulrike Brunenberg, Düsseldorf introduced the new building of the medical library of the University of Düsseldorf, called OASE, an abbreviation of the German expression: center for exchange, study and development. She spoke about the complicated conditions at the beginning of the project and how it was possible to realise the idea of a new modern library building in the heart of the medical faculty. Besides the medical library the building will embody a Student Advisory Service, the Dean of student affairs, function and learning rooms and the student body office. It is planned to open OASE in May 2011.

The conference finished with advanced training workshops for PubMed, MedPilot 3.0, Web 2.0 and the Cochrane Library. The next annual conference of the German Medical Libraries Association will take place from the 19th until the 21st of September 2011 in Cologne.

ERRATUM - HINARI

Dear Sally Wood (Editor, JEAHIL),

I very much enjoy receiving the EAHIL Journal.

I would like to draw attention your attention to the news item in the current Journal EAHIL (March 2011, p47):

Publishers withdraw 2500 journals from the free access scheme in Bangladesh.
The organization's Health Inter-Network for Access to Research Initiative (HINARI) was set up in 2002 to enable not for profit institutions in developing countries to gain access online to more than 7000 biomedical and health titles either free or at very low cost. Five publishers have now withdrawn free access to more than 2500 health and biomedical online journals from institutions in Bangladesh. BMJ 2011; 342:d196

http://www.bmj.com/content/342/bmj.d196.full. Subsequent clarifications in the Lancet and on publishers' websites showed that publishers **did no**t withdraw access.

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In order to clarify this situation and our error the Editor wrote to Richard Gedye, Director of Publishing Outreach Programmes, STM

Here is his reply:

The International Association of Scientific Technical and Medical Publishers (STM) has for the past ten years been a key partner in the HINARI programme. STM supports HINARI because we believe it is the most effective way of maximising access to readers within the currently predominant business model that recovers publication costs via a charge on readers or their institutions. At the launch of HINARI in 2002, 400 institutions in 68 of the world's poorest countries gained access to up to 1500 medical research journals to which they previously did not have access. Today these figures are 4600, 105, and 7400 respectively.

Erratum - HINARI

After the flurry of concerned postings to HIFA2015 regarding the availability in Bangladesh in 2011 of journal titles from a number key publishers, I thought that HIFA2015 members might appreciate a brief summary of the current state of play from my vantage point as a representative of the International Association of STM Publishers (STM), one of the 13 main HINARI programme partners.
Of the five publishers mentioned in the original BMJ article at http://www.bmj.com/content/342/bmj.d196.full

ELSEVIER have reinstated access
http://download.thelancet.com/flatcontentassets/pdfs/S0140673611600688.pdf

AAAS have reinstated access
http://dgroups.org/ViewDiscussion.aspx?c=e95b885f-14b0-4452-a819-06cf188ee6b0&i=6f928e6b-dae0-48b0-adaa-75539d227620

Lippincott Williams and Wilkins have emailed me to confirm they will be reinstating access

SPRINGER have not distributed their online journals in Bangladesh via HINARI for the last five years. Access in Bangladesh to the Springer content is via INASP. Springer have posted an announcement to this effect http://www.springer.com/about+springer/media/pressreleases?SGWID=3D0-11002-6-1067521-0.

THE AMERICAN SOCIETY OF ANIMAL SCIENCE: the inclusion of the ASAS in the list of access excluders was incorrect - an error in the HINARI administration system for which, on behalf of HINARI, I apologise. ASAS's Journal of Animal Science continues to be available throughout Bangladesh in 2011 as it has been in 2010.

Whatever the business model involved in recovering the costs of publishing peer-reviewed research journals, it seems logical and fair that arrangements should be put in place that allow these costs to be waived for beneficiaries in the world's least developed economies. The open access business model frequently recovers publication costs from authors or their research funders and it is reassuring to hear from postings to HIFA20115 over the last couple of weeks that the major players in this space also believe that equivalent arrangements should be put in place for their charges to be waived for authors in the world's least developed economies.

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Publications and new products

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Dear Colleagues,

Articles, books and news - pushing libraries and librarians into doing new initiatives and to collaborate.

Effective communication with library clients is essential. Hospital libraries: stand up and be counted! (B. Bennett, A. Madden. Medical Reference Services Quarterly. 2011;30:178).

The book "Being an information innovator" Ed. J. Rowley. Facet Publishing, London celebrates existing examples of good practice, and promotes the development of innovative and entrepreneurial behaviour at all organizational levels.

Libraries Thriving is an online community with the aims to facilitate collaboration on the innovative use of e-resources. Librarians, teaching and learning centres, faculty and researchers are sharing ideas and working together on this site to further commons goals of increasing innovative use of e-resources. The goals of *Library Thriving* are to help libraries realize their possibility for impact and to address challenges, to develop case studies of success that can be replicated and to resolve key technical issues that limit progress (IWR News Desk, Information world review 30/03/2011).

In Britain "librarians – traditionally seen as a mild, herbivorous breed – are up in arms" because the local authority budgets are reduced by the government's cuts and up to 500 libraries around the country will have to close (B. Bathurst. The Observer, Sunday 1 May 2011).

Giovanna F. Miranda

Journal issues

Since March 2011, the following journal issue of *Health Information and Libraries Journal* has been received:

Volume 28 Issue 1

M. J. Grant, A. Sutton. Using and writing reviews to inform your practice. Editorial p.1–2
Library and information science workers can use reviews to inform their decision-making and service planning. Guidelines on writing reviews for the *Health Information and Libraries Journal* are presented.

A. Brettle, M. Maden-Jenkins, L. Anderson, R. McNally, T. Pratchett, J. Tancock, D. Thornton, A. Webb. Evaluating clinical librarian services: a systematic review. p. 3–22
The objective of this study was to undertake a systematic review which examines models of Clinical Librarian services.

M. G. Flynn, C. McGuinness. Hospital clinicians' information behaviour and attitudes towards the 'Clinical Informationist': an Irish survey. p. 23–32
This paper investigates the self-perceived information needs, behaviour and skill levels of clinicians in two Irish public hospitals. It also explores clinicians' perceptions and attitudes to the introduction of a Clinical Informationist into their clinical teams.

M. Maden-Jenkins. Healthcare librarians and the delivery of critical appraisal training: barriers to involvement. p. 33–40
The aim of this paper was to examine the barriers to healthcare librarian involvement in delivering critical appraisal training.

A. Ritchie. The library's role and challenges in implementing an e-learning strategy: a case study from northern Australia. p. 41–49
The objective of this study was to explore the concept of elearning in relation to the Library's role in implementing an organisation-wide elearning strategy.

R. Chan, V. Stieda. Evaluation of three point-of-care healthcare databases: BMJ Point-of-Care, Clin-eguide and Nursing Reference Centre. p. 50–58
The goal of this study was to assess the content, interface and usability of three point-of-care tools: BMJ Point-of-Care, Clin-eguide and Nursing Reference Centre.

L. Brewster, B. Sen. 'Quality signposting': the role of online information prescription in providing patient information. p. 59–67
This paper identifies current online information prescriptions provision and evaluates a sample of information prescriptions websites against the original Department of Health aims of information prescriptions provision; British Medical Association usability criteria; and information seeking vignettes.

K. Atsawawaranunt, C. E. Adams, S. Roberts. Searching for randomized controlled trials and clinical controlled trials in Thai online bibliographical biomedical databases. p. 68–76
The aim of this study was to identify relevant Thai bibliographic databases and investigate accessibility, functionality and content, particularly in relation to randomized controlled trials and clinical controlled trials.

Books review

Being an information innovator. Ed. J. Rowley. Facet Publishing, London, UK, 2010; ISBN: 978-1-85604-671-8, £44.95 (price to CILIP member £ 35.96), p. 224.
This book discusses and applies the rhetoric and theories of innovation and entrepreneurship in information organizations. It both celebrates existing examples of good practice, and promotes the development of innovative and entrepreneurial behaviour at all organizational levels.

E-books in libraries – a practical guide. Ed. V. Havergal and K. Price. Facet Publishing, London, UK, 2011; ISBN number: 978-1-85604-572-8, £49.95, p. 224.
This book provides a practical appraisal of e-books, aims to fill that need by addressing the key questions. It is divided in five parts the production and distribution of e-books; the planning and developing an e-book collection; delivering e-books to library readers; engaging readers with e-books; the future of e-books.

The 2011 Guide to Free or Nearly-Free e-Books. Ed. C. Armstrong, 2011. UKeiG Publications Group; ISBN: 978-1-870254-14-4; Paperback £29.50; p. 177.
The Guide is a tool designed to facilitate easy access to the free e-books and e-book collections which can enhance any digital library. It is an annotated listing of around 230 single titles, collections, archives, gateways and search engines – for librarians and others involved in book selection in all sectors – school, further and higher education, public and special libraries.

James Lind Library. Three books are available for free download from the James Lind Library – *Testing Treatments* by Evans, Thornton and Chalmers (also available free in Spanish, Arabic and Chinese); *Smart Health Choices* by Irwig, Irwig, Trevena and Sweet; and *Know Your Chances* by Woloshin, Schwartz and Welch.
http://www.jameslindlibrary.org/

Papers review

Online community library thriving to promote the value of libraries
IWR News Desk, Information world review 30/03/2011
http://www.iwr.co.uk/professional-and-library/3010845/

Hospital libraries: stand up and be counted!
B. Bennett, A. Madden. Medical Reference Services Quarterly. 2011;30:178

The secret life of libraries
B. Bathurst. The Observer, Sunday 1 May 2011
http://www.guardian.co.uk/books/2011/may/01/the-secret-life-of-libraries

Health sciences librarians' research on medical students' use of information for their studies at the medical school, university of Queensland, Australia
K. E. Lasserre et al., Medical Reference Services Quarterly. 2011;30:141

The clinicaltrials.gov results database — update and key issues
Deborah A. Zarin et al. N Engl J Med. 2011;364:852

Supplemental or detrimental? Journals debate the value of supplemental materials
M. Solis. The Scientists, February 24, 2011
http://www.the-scientist.com/news/display/58027/

Checking for plagiarism, duplicate publication, and text recycling
S. Kleinert. Lancet. 2001;377:281

Google Scholar duped and deduped – the aura of "robometrics"
P. Jacso. Online Information Review 2011;35:154

Publications and new products

New journals

Translational Psychiatry, an online-only open access journal published by Nature Publishing Group. Translational Psychiatry explores the more translational area between the research in neuroscience and conceptually novel treatments. Articles are freely available online immediately on publication, published under Creative Commons licenses. An article-processing charge of £2,000 / $3,000 / €2,400 will be levied per article accepted for publication.
www.nature.com/tp.

Disaster Medicine and Public Health Preparedness is an official publication of the American Medical Association. It emphasis public health preparedness and disaster response for all health care and public health professionals globally. The journal seeks to translate science into practice and integrate medical and public health perspectives.
http://www.dmphp.org/

News

OpenAIRE. EU researchers, businesses and citizens can have free and open access to EU-funded research papers thanks to OpenAIRE (Open Access Infrastructure for Research in Europe), launched by the European Commission launched. OpenAIRE will provide a network of open repositories providing free online access to knowledge produced by scientists receiving grants from the Seventh Framework programme (FP7) and European Research Council (ERC), especially in the fields of health, energy, environment, parts of Information & Communication Technology and research infrastructures, social sciences, humanities and science in society.
http://www.openaire.eu

Top 5 Best Practices For Advancing Your Editorial Office. A new white paper from Thomson Reuters, outlines five ways that scholarly publishers can advance their business by leveraging all that online peer review systems have to offer. Many systems contain similar features and functionality but the real differentiator between systems comes from the provider relationship.
http://thomsonreuters.com/news_ideas/press_releases/?itemId=429093

Information sources... web based

Libraries Thriving is an online community sponsored by the online reference service, Credo Reference. It aims is to facilitate collaboration on the innovative use of e-resources and is free to all members of the educational community: librarians, educators, researchers, publishers and library vendors.
www.librariesthriving.org

F1000 Posters. An open access repository from Faculty of 1000 which covers posters from the leading biology and medicine conferences. It now includes posters from over 180 international meetings.
http://posters.f1000.com

MMMP. The Databases Melanoma Molecular Map Project is an open access interactive multidatabase for research on melanoma biology and treatment. Seven interconnected databanks for the interactive collection, update and consultation of the translational and clinical information on melanoma biology and treatment.
http://www.mmmp.org/MMMP/

The EU Clinical Trials Register. The online register launched by the European Medicines Agency (EMA) gives for the first time public access to information on interventional clinical trials for medicines authorised in the 27 EU Member States and Iceland, Liechtenstein and Norway. The database also allows the public to search for information on clinical trials authorised to be carried out outside the EU if these trials are part of a paediatric investigation plan. The information contained in the EU Clinical Trials Register is extracted from EudraCT, the EU clinical trials database. https://www.clinicaltrialsregister.eu

ResearchMatch brings together people who are trying to find research studies, and researchers who are looking for people to participate in their studies. It is a free and secure registry that has been developed by major academic institutions. ResearchMatch is a Clinical and Translational Science Awards initiative funded by the National Centre for Research Resources, part of the National Institutes of Health.
https://www.researchmatch.org/

News from publishers

Thieme Medical Publishers, Inc. Global ENT Outreach, with the help of otology books provided by Thieme Medical Publishers, Inc., is working to improve the treatment options available for people affected by hearing-related disorders. With training programs in countries such as Ecuador, Peru, El Salvador, Cambodia and American Samoa, Global ENT Outreach provides the facilities and resources to train future otologists to better serve their communities. Thieme has regularly donated books over the last ten years to ensure that the trainees have the latest and most comprehensive information available to perform the range of hearing-related procedures.
www.thieme.com.

Nature Publishing Group partnerships. Nature Publishing Group and the International Pediatric Research Foundation (IPRF) announce a publishing partnership for Pediatric Research. Pediatric Research is owned by the IPRF and is the official publication of the American Pediatric Society, the European Society for Paediatric Research, and the Society for Pediatric Research. NPG will begin publishing Pediatric Research in January 2012 on behalf of IPRF. Nature Publishing Group and The American College of Medical Genetics (ACMG) announce a publishing partnership for Genetics in Medicine. Genetics in Medicine (GIM) is the official journal of the American College of Medical Genetics, the largest professional association of medical geneticists in the United States. NPG will begin publishing Genetics in Medicine in January 2012 on behalf of ACMG.
www.nature.com

BioMedCentral announces a new development. Diagnostic Pathology will provide virtual glass slides for readers to its articles. Authors can choose to include virtual versions of their glass slides in their articles and these will be linked to the main article.
www.biomedcentral.com

Forthcoming events

13-17 June 2011, Ottawa, Canada
JCDL 2011
Joint Conference on Digital Libraries
For further information: http://www.jcdl.org/index.shtml

20-23 June 2011, Aberdeen, United Kingdom
Information: Interactions and Impact
For further information: http://www.i3conference2011.org.uk/

22-24 June 2011, Istanbul, Turkey
15th International Conference on Electronic Publishing,
For further information: http://www.elpub.net/

27-30 June 2011, Salford, Greater Manchester, United Kingdom
EBLIP6
6th international Evidence Based Library and Information Practice Conference
For further information: http://conferencealerts.com/seeconf.mv?q=ca16s8hs

29 June - 2 July 2011, Barcelona, Spain
Getting Europe ready for 2020: the library's role in research, education and society
LIBER 40th Annual Conference
For further information: http://bibliotecnica.upc.edu/LIBER2011/

5-8 July 2011, Istanbul, Turkey,
Active Learning and Research Partners in Health
EAHIL Workshop 2011
For further information: http://eahil2011.ku.edu.tr

13-18 August 2011, San Juan, Puerto Rico
World Library and Information Congress
77th IFLA General Conference and Assembly
For further information: http://conference.ifla.org/ifla77

26-28 September 2011, Berlin, Germany
International Conference on Theory and Practice of Digital Libraries 2011
For further information: http://www.tpdl2011.org/

17-19 October 2011, Monterey, CA
Internet Librarian 2011
For further information: http://www.infotoday.com/il2011/

14-16 November 2011, Mestre, Venice, Italy
PharmaBioMed
For further information: www.pharma-bio-med.com

Colophon

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