

Final Report

National Network of Libraries of Medicine
Hospital Internet Access Task Force

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Submitted by:

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Executive Summary

Hospital librarians face information technology (IT) barriers that are often unique to the hospital environment. The Hospital Internet Access Task Force of the National Network of Libraries of Medicine, formed in May 2003, identified common IT barriers and problems that hinder easy access to Internet-based information within hospital libraries. The Task Force also identified promising strategies for ensuring easy access while preserving appropriate security and privacy protections.

Charge to the Task Force:

- Identify current barriers and problems that inhibit easy access to Internet-based information within the hospital environment
- Determine ways to identify best practices and promising strategies for simultaneously ensuring easy access and preserving appropriate security and privacy protections in hospitals
- Identify ways to disseminate information about best practices and promising strategies to hospitals, their libraries, and their IT departments
- Recommend other actions that NLM and the NN/LM could take to promote more effective access to electronic knowledge-based information within the hospital environment

Using the following methods, the task force created an original list of barriers and strategies:

- Reviewed presentations and posters from MLA annual meetings and meetings of MLA Chapters for past 3 years
- Requested strategies from NN/LM network members through RML listservs
- Reviewed literature to find best practices

Task Force members compiled a list of about 50 librarians to contact for more information, and conducted phone interviews in fall 2003 using a structured list of eleven questions. To simplify analysis of the results, we assigned codes to their responses and put them into an Excel spreadsheet. A subgroup of the Task Force redesigned the spreadsheet to make it possible to transfer the data into an Access database.

The Task Force presented a preliminary report at an Open Forum during the MLA annual meeting May 2004. They recruited three hospital librarians, Terrie Wheeler, Michelynn McKnight, and Janet Cowen, to present case study scenarios. Forum participants also provided additional information about barriers and strategies on survey sheets and gave their opinions about disseminating the final report.

Task Force members did a high-level analysis of the data collected through the phone interviews. Of the 47 librarians interviewed, 27 worked in hospital libraries. Of the 27 hospital-based librarians, 22 receive IT support from the institution's central IT group and 23 have assigned IT responsibilities to one or more library staff members.

Although Task Force members expected to gather technological solutions to the identified barriers, analysis of the data indicated the majority of the strategies were related to communication and training. The strategies fell into six categories, including: communication with IT staff, advocacy of library needs, training for librarians, and work with vendors, specific technology solutions, and other librarian-initiated strategies.

The following report outlines the barriers to Internet access in hospital libraries, discusses the data gathered through the phone interviews, and offers recommendations directed to Task Force members, the NN/LM and NLM for how to overcome some of the barriers.

Statement of the Issue

During our first Conference Call, Angela Ruffin provided some background information about the purpose of the Task Force. The issue of hospital libraries having problems with accessing information on the Internet was first raised during an NLM site visit to the Middle Atlantic Regional Medical Library at the New York Academy of Medicine in July 2002. Similar concerns were subsequently mentioned during several other RML site visits later that year. In recognition of the widespread nature of this issue amongst hospital libraries, NLM created a NN/LM Task Force to identify the specific challenges faced by hospital libraries in providing electronic access to knowledge-based information, and to identify ways in which the NN/LM and NLM could assist in addressing those challenges.

Background

The Task Force had meetings via conference calls from May 2003 through February 2005 and met personally at the Medical Library Association (MLA) annual meeting in Washington, DC on May 24, 2004 when it held an Open Forum on hospital library IT issues for the general membership of MLA.

The Task Force used the following methods to complete their work:

- Created a list of barriers (see Appendix A)
- Suggested and implemented methods to identify promising strategies / best practices to overcome barriers:
 - Reviewed presentations and posters from MLA annual meetings and meetings of MLA Chapters for past 3 years
 - Solicited strategies from NN/LM network members through RML listservs
 - Reviewed literature to find best practices (see examples in Appendix C)
- Compiled a list of approximately 50 librarians to contact for more information based on identified strategies.
- Conducted phone interviews of these librarians in fall 2003 using a structured list of eleven questions (Appendix B) and codes were assigned to responses to facilitate analysis of the results.
- Collated the data gathered via the phone interviews using an Excel spreadsheet format and a subgroup of the Task Force converted the spreadsheet data into an Access database.
- Created a Web page for the Task Force at: <http://nmlm.gov/projects/hosplibit/>
- Hosted an Open Forum at the MLA Annual meeting on May 24 entitled “IT Issues in Hospital Libraries: Powerful Solutions and Strategies” to describe the work of the Task Force and to solicit additional information about barriers strategies from the audience. Three hospital librarians, Terrie Wheeler, Michelynn McKnight, and Janet Cowen, presented case study scenarios and audience members suggested ways to disseminate the findings of the Task Force.
- Posted modified reports from the Access database temporarily on a public Web page for reference by members of the Task Force.

- Worked during the summer of 2004 with the Information Technology Committee of the MLA Hospital Libraries Section to promote its new “Information Technology Forum” at <http://www.hls.mlanet.org/itforum/> This bulletin board site provides a place to discuss approaches and concerns related to hospital library IT issues. MLA has agreed to open registration for the Forum to anyone interested in the topic, including non-MLA members.
- Submitted brief articles to the July 2003, April 2004, and July 2004 issues of *National Network*, the newsletter of the MLA Hospital Libraries Section (Anna Habetler).
- Compiled a bibliography of articles about Hospital Library IT issues. (see Appendix C)
- Presented results of Task Force work at the Hospital Library Forum in Seattle in October, 2004 (Ruth Holst).
- Published an article summarizing Task Force activities in the Technology Column of the January 2005 issue of *MLA News* (Susan Barnes). (see Appendix D)
- Created a PowerPoint template summarizing Task Force findings. (see Appendix E)

Discussion

Task Force members conducted structured phone interviews in fall 2003 using the list of eleven questions in Appendix B. To facilitate analysis of the results, codes were assigned to responses and entered into an Excel spreadsheet that was later converted to an Access database. Librarian contacts were given in advance of the interviews the list of barriers that had been created by the Task Force and the list of questions they would be asked by the interviewers to gather the following information:

- Barriers and strategies
- Size and type of institution
- Level of IT support
- Description of IT environment
 - Networks, firewalls, hardware, software
- Ways to disseminate results

Data about the Interviewees

Of the 47 people who participated in interviews with task force members, 27 were from hospital libraries. Almost one third of the remainder were from academic institutions, and the rest from corporate libraries, plus an AHEC and an RML. Our overall sample was drawn from 26 states and 1 Canadian province. The hospitals were in small towns (e.g. Mt. Vernon, WA) and large cities (e.g. Los Angeles, CA). The number of beds at these institutions ranged from thirty beds at the smallest institution to more than sixteen hundred beds at the largest institution. While all RML regions were represented, the greatest number of respondents came from the Northeast and the South.

Our sample of 27 hospital libraries was collected through our identification of early adopters and opinion leaders. We made no effort to be representative in size, location, or any other criteria, so the brief sketch of the IT support environment for these libraries should not be generalized to

hospital libraries as a whole. The 27 hospitals came from 18 states: CA, FL (2), GA, KS, LA, MA, MD, ME, MI (2), MN, NY (2), OH, OR, OK (3), PA (4), SC, TX, and WA (2).

Of the 27 hospital libraries, 23 are at institutions that have centralized IT support and 22 of these receive IT support from the institution's central IT group. Of the 4 libraries at institutions without centralized IT support, only one has dedicated IT staff within the library (i.e., FTE specifically devoted to IT responsibilities). That means that 4 of the 27 hospital libraries in our sample do not receive support from a centralized IT group within their institution and also lack their own dedicated library IT staff. These 4 libraries are at fairly large institutions where IT support *must* be present, so it is probably provided by IT units that are not centrally administered.

23 of the libraries in our sample do not have dedicated library IT staff, but that number is misleading. All of the libraries in the sample have staff for whom part of their job is IT-related. One librarian, in fact, reported that "all staff" of the library have IT responsibilities of some sort.

4 of the libraries in the sample have their own dedicated IT staff, meaning that they devoted a specific segment of their staff FTE to IT work. These are not in the largest institutions, but they are in sizeable ones: an 800+ bed hospital in NY, a 600 bed hospital in PA, a 700 bed hospital in MN, and a 950 bed hospital in MI.

Data about Solutions and Strategies

While the Task Force originally expected to gather technical solutions to the barriers identified, it soon became clear that the majority of "solutions" or "promising strategies" were in the form of practical advice to hospital librarians on how to keep up-to-date on information technologies and how to communicate with the hospital's IT staff. The strategies identified fell into the following six categories:

1. Communication with IT Staff

- Speak their language
- Learn their roles and functions
- Meet with them periodically
- Interact as professional equals
- Share success stories from other institutions
- Use project management approach for larger projects
- Acknowledge their contributions

2. Advocacy for Library Needs

- Cultivate user support
- Add IT person to Library Committee
- Build the case for library exceptions to institutional "standards"
- Define how library services fit into institutional mission and priorities
- Show "return on investment"
- Bring in outside consultant

3. Training for Librarians

- Learn computer basics
- Attend CE courses
- Use email discussion lists and journal clubs to keep up-to-date
- Attend training sessions offered by IT

4. Work with Vendors

- Educate vendors about differences between hospital environment and academic medical centers
- Involve vendors in solving software compatibility problems

5. Specific Technology Solutions

- Use a server outside the firewall to address security issues
- Use a separate server for library to avoid security issues
- Use remote server supplied by vendor
- Use a DSL line with a static IP address to avoid “dynamic” IPs
- Use links off Intranet page to avoid installation of “non-standard” software

6. Other Librarian-initiated strategies

- Learn to do basic trouble-shooting functions for library computers
- Coordinate Intranet development for the institution
- Take on Web master role

Critical Barriers

Access to the Internet provides a significant set of challenges to hospital libraries. Even though our sample is not representative and should not be used for generalizations, it is notable that 15 of the 27 hospital libraries mentioned firewall problems as significant barriers, with 9 of the 15 citing Ariel electronic document delivery (EDD) software as the trigger issue. Hospital libraries also have IP address requirements different from their institutions. They need to provide IP addresses to publishers and vendors for electronic resource access and authentication and they need static IP addresses for software such as Ariel. The hospital IT unit often will not approve these requests until they have a better understanding of the need.

Hospital libraries cited a significant number of barriers related to their specialized needs for software applications. Many hospitals mandate a standard set of software packages for use within the hospital to promote consistency and ease of maintenance. Libraries need cataloging, Ariel, and other specialized library software not included in the standard list, and are thereby required to request exceptions.

Challenges of implementing Ariel software were listed by 13 of the 27 hospital libraries and also by 5 of the other libraries. No other product was named more than once or twice by the interviewees. Released in 1993 by the Research Libraries Group (RLG) for use in academic and research libraries, Ariel is now used by thousands of libraries, including hundreds of medical libraries, and has become the de facto standard application for non-e-mail-based EDD. Hospital libraries continue to struggle with Ariel software in order to share their resources with the largest

number of libraries. Purchased in 2003 by Infotrieve, Ariel is now a commercial product with no real competitors.

Recommendations

The Task Force offers the following recommendation for specific actions that might help to overcome some of the IT barriers faced by hospital librarians.

Recommendations for NN/LM

1. Disseminate the findings of the Task Force, including making the Final Report accessible online.
2. Use the PowerPoint slide template created by the Task Force to present results at state and regional meetings.
3. Partner with the Medical Library Association to promote and support the new Hospital Libraries Section (HLS) Information Technology Forum at <http://www.hls.mlanet.org/itforum/>
4. Work with MLA/HLS to create a “technology standard” to be added to the “*Standards for Hospital Libraries*” that defines the minimum levels of technology needed for hospital libraries to function in their role as providers of knowledge-based information resources.
5. Develop IT classes for hospital librarians that offer MLA CE credit
6. Promote and/or expand course on hospital library IT issues taught in South Central Region.
7. Recruit a hospital CIO to write an advocacy article on the importance of IT support of libraries for publication in a journal read by hospital IT staff and/or hospital administrators.
8. Gather case study scenarios on how to resolve common IT issues and put them on a web page
9. Create a list of mentors/consultants who are willing to assist hospital librarians with IT issues

Recommendations for NLM

1. Fund projects (through NN/LM) to develop and test EDD alternatives for hospital librarians

Task Force Members

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Anna M. Habetler
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Barriers that inhibit easy access to Internet-based information within the hospital environment
Revised December, 2003

1.0 IT Policy Issues

- 1.1 Filtering software that blocks access to specific URLs.
- 1.2 Restrictions on using software that does not conform to hospital IT standards.
- 1.3 Hospital Librarians not allowed to install their own software.

2.0 Security Concerns

- 2.1 Firewall and proxy server issues related to installing Ariel and other EDD software
- 2.2 Firewall and proxy server issues related to opening ports for video streaming and other software applications
- 2.3 Remote access to network resources, including licensing issues and IP address issues
- 2.4 Access to Patient information
- 2.5 Desktop security settings that do not allow librarians to install and manage software.
- 2.6 Wireless security concerns

3.0 Software Issues

- 3.1 Browsers configured to prevent downloading of files.
- 3.2 Plug-ins not being allowed.

4.0 Internet Connectivity and Hardware Issues

- 4.1 Speed, performance, and bandwidth issues.
- 4.2 Use of outdated PCs and other equipment in the library.
- 4.3 Restrictions on using hardware that does not conform to hospital IT standards.

5.0 Website Issues

- 5.1 Librarians not having access to update and maintain web pages related to the library.
- 5.2 Librarians not having the training to design and manage web pages.
- 5.3 Distinguishing between the role of the librarian as a content manager for the corporate intranet vs. the Internet

6.0 Communication and People Issues

- 6.1 Lack of understanding of the IT department and its issues and challenges
- 6.2 Lack of understanding of library services by IT staff
- 6.3 Communicating the library's needs to IT
- 6.4 Urgency / prioritizing work
- 6.5 Lack of technology-related knowledge and skills among librarians
- 6.6 Budgeting and planning issues related to IT
- 6.7 Lack of IT/Library collaboration on projects

Questions for Structured Interviews of Librarians

Revised November, 2003

The National Network of Libraries of Medicine has formed a task force to address how the network and the National Library of Medicine could assist hospital libraries in working effectively with their hospital IT departments. The task force has been charged with identifying current barriers and problems that inhibit easy access to Internet-based information within the hospital environment. The task force is also working to identify promising strategies for ensuring easy access while maintaining appropriate security and privacy protections. These strategies will eventually be communicated to hospitals, their libraries, and their IT departments.

You are one of the people whom we've identified as having developed successful approaches to resolving IT issues, and I would like to ask you a few questions about how you did it

1. What kind of institution does your library serve?
2. How large is your institution?
3. Does your institution have centralized IT support?
4. Does your library receive IT support from this central unit?
5. What barriers has your library experienced in acquiring, implementing, or using information technology?
6. What technical or management approaches or strategies have you found productive in solving or addressing these barriers?
7. Does your library maintain dedicated IT staff within the library payroll who interacts with the larger organization's IT department? If so, what barriers or issues have you had to resolve?
8. Are there additional approaches or strategies that you have found productive in working with your IT people?
9. Please describe your IT environment related to barriers you've mentioned:
 - a. kind of networking,
 - b. kind of firewall,
 - c. operating systems,
 - d. browsers,
 - e. office management software,
 - f. library management software,
 - g. scanner/copier,
 - h. email packages,
 - i. electronic document delivery software
10. Can we call you back if we have more questions?
11. After we have identified strategies that have been useful, we would like to make them available to the hospital library community. What do you think would be the best ways to share this information with you and your colleagues?

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2. Cowen JL and Edson J. Best practice in library/information technology collaboration. J Hosp Libr. 2002; 2(4):1-15.
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5. Levin L. Beware of roadblocks on the way to Ariel. National-Network. 1999 Jul; 24(1):14.
6. Lippincott JK . Working together: building collaboration between librarians and information technologists. Information Technology and Libraries. 1998 Jun; 17(2):83-86.
 Abstract: CNI's Working Together professional development program is designed to provide institutional teams of librarians and information technologists with the tools they need to work collaboratively on projects of mutual interest and need. The development of the Internet and networked information content has provided the impetus for many collaborative projects on campuses, bringing together the content and service skills of librarians and the networking and technical skills of information technologists. The Working Together program provides participants with a conceptual framework for successful collaboration, a means of analyzing collaborative situations, and a process for developing successful collaborations in the home institution.
7. Lyon BJ; Stavri PZ; Hochstein DC, and Nardini HG (National Library of Medicine, Bethesda, Maryland 20894, USA.). Internet access in the libraries of the National Network of Libraries of Medicine. Bull Med Libr Assoc. 1998 Oct; 86(4):486-90.
 Abstract: As the National Library of Medicine expands access to its products and services by making them available on the Internet, more accurate information about current and future access in medical libraries is needed. The National Network Office of the National Library of Medicine conducted a survey of all network member libraries to determine the extent of connectivity and the barriers preventing 100% connectivity. Respondents called a toll-free number and, using interactive voice technology, answered questions concerning Internet access in their library. Seventy-eight percent of the network member libraries responded. Four percent of academic libraries, 27% of hospital libraries, and 10% of "other" libraries reported that they were not connected. Computer cost, lack of in-house expertise, and lack of

management support were the highest ranked barriers to connecting. The National Library of Medicine and the Regional Medical Libraries will use information from this survey to develop strategies to help all member libraries achieve full connectivity.

8. McKnight M. ARIEL and hospital libraries: the struggle with firewalls for Internet document delivery. *J Hosp Libr.* 2001; 1(4):1-16.
Abstract: Hospital library services have to deliver high quality copies of articles from other libraries quickly and inexpensively, especially in clinical emergencies. The Ariel Internet document delivery system is superior to faxing or mailing photocopies, yet relatively few hospital libraries currently use it because of its incompatibility with protective local network firewalls. Some hospital libraries have found a number of different ways to solve the problem and improve their document delivery services.

Hospitals rely on firewall systems and policies to protect computer networks from external attacks and internal misuse. Hospital libraries find ways to work with the policies to provide Internet-based services to their patrons.

9. Sharrow MJ. Library and IT collaboration projects: nine challenges. *CAUSE/EFFECT.* 1995 Winter; 18(4):55-56.
10. Swanson SE. Access management: living with firewalls. *J Hosp Libr.* 2001; 1(1):41-50.
Abstract: Hospitals rely on firewall systems and policies to protect computer networks from external attacks and internal misuse. Hospital libraries find ways to work with the policies to provide Internet-based services to their patrons.
11. Weise FO and McMullen TD. Study to assess the compensation and skills of medical library professionals relative to information technology professionals. *Bull Med Libr Assoc.* 2001 Jul; 89(3):249-262.
Abstract: Purpose: The study seeks to determine how medical library professionals performing information-technology (IT) roles are compensated and how their positions are designed compared to information technology staff in their institutions. Methods: 550 medical library directors in hospital and academic medical libraries were surveyed. The data was then compared to survey data from other compensation studies of the IT industry. Results: There is a gap in compensation between medical library professionals and IT professionals performing similar functions using information technology. Technology-intense library jobs are compensated at higher levels than more traditional jobs. Conclusions: To compete with IT salaries, managers of medical library professionals will need to be ever more cognizant of the employment practices of IT professionals in nonmedical library disciplines. It is typically in the medical library's best interest to ensure that IT-related jobs, accountabilities, and capabilities of the medical library are known and understood by others, especially in the human resources and information technology staff departments.



January 2005 Technology

Hospital Library Strategies for Successful Information Technology Collaboration

Submitted by Susan J. Barnes, National Network of Libraries of Medicine, Pacific Northwest Region, Seattle, WA; edited by Marcy L. Brown, AHIP

In the spring of 2003, representatives from hospital libraries, the National Network of Libraries of Medicine (NN/LM), and the hospital information technology (IT) sector formed the NN/LM Hospital Internet Access Task Force. The National Library of Medicine asked the task force to identify barriers inhibiting access to Internet-based information resources in hospitals. During this process, the group also identified promising strategies for working with increasingly complex technology environments. Ruth Holst, AHIP, FMLA, NN/LM, Greater Midwest Region, Chicago, IL, a former hospital librarian, chairs the task force.

The task force met face to face for the first time at MLA '04. Prior to that, virtual meetings were held. Throughout 2003 and the early part of 2004, members conducted telephone interviews with more than fifty librarians from across the country who had been identified through publications, presentations, and recommendations from colleagues. Interviewees shared openly about the technology barriers they faced and the strategies they employed to deal with those barriers. The task force gathered additional information at an open forum held at MLA '04.

During the interviews, the task force expected to hear about software- or equipment-based strategies, and a few were mentioned, including establishing a library server outside of a hospital firewall and building a separate network connection for a library. Interestingly, successful approaches more often grew from communication, advocacy, project management, and hard work.

▲ Speak the Language of IT

Learning to speak the language of IT and understanding their roles and functions fostered key channels of communication. Many librarians found success once they interacted with IT staff as equals, acknowledged their contributions, and invited them to join library committees. Libraries must cultivate support by placing the library's technology needs in the context of the larger institution. A hospital library should outline its place in the hospital mission, vision, and strategic priorities. A library's ability to show a return on investments for technology, and quantify the benefits to users are also important factors.

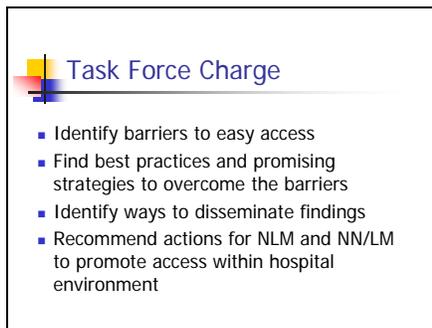
Librarians should attend computer-related continuing education courses, in-house training sessions, and other technology workshops to understand and intelligently discuss new technologies and their strategic use. Many libraries have found an important role in their hospitals in the Web-development function. The task force also heard about the importance of educating vendors as to the differences between hospital and academic medical center environments and involving them in solving software compatibility problems.

▶ Visit the task force Website (nnlm.gov/projects/hosplibit/) for a list of members and work details. Additionally, the MLA Hospital Libraries Section Information Technology Forum (www.hls.mlanet.org/itforum/) provides a place to discuss issues related to IT and its use in hospitals. Registration is free and open to anyone interested in hospital IT.

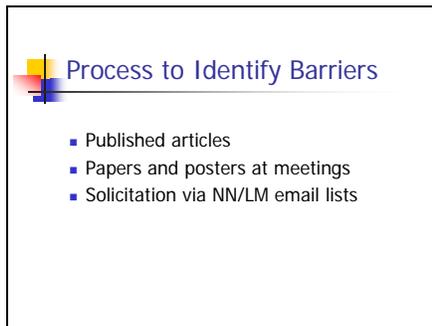
Slide 1



Slide 2



Slide 3



Slide 4



Process to Identify Strategies

- Published articles
- Papers and posters at meetings
- Solicitation via NN/LM email lists
- Phone calls to 50+ librarians
- Open Forum at 2004 MLA meeting

Slide 5



Phone Call Data Gathered

- Barriers and strategies
- Size and type of institution
- Level of IT support
- Description of IT environment
 - Networks, firewalls, hardware, software
- Ways to disseminate results

Slide 6



Phone Call Interviewees

- 27 or 47 work in hospital library
- Others from academic, corporate, AHEC
- 22 or 27 receive support from central IT department in hospital
- 4 of 27 have dedicated Library IT staff

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Critical Barriers Identified

- Firewall problems (15 of 27)
- Ariel implementation (9 of 15 above)
- Need for non-standard software, such as library catalog software
- IP address requirements of outside library vendors and need for static IP

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Key Strategies Identified

- Communication with IT department
- Advocacy for library needs
- Training for librarians
- Work with vendors
- Specific technology solutions
- Other librarian-initiated strategies

Slide 9



Communication with IT

- Speak their language
- Learn their roles and functions
- Meet with them periodically
- Interact as professional equals
- Success stories from other institutions
- Use project management approach for larger projects
- Acknowledge their contributions

Slide 10



Advocacy for Library Needs

- Cultivate user support
- Add IT person to Library Committee
- Build case for library exceptions
- Define how library services fit into institutional mission and priorities
- Show "return on investment"
- Bring in outside consultant

Slide 11



Training for Librarians

- Learn computer basics
- Attend CE courses
- Use email discussion lists and journal clubs to keep up-to-date
- Attend training sessions offered by IT

Slide 12



Work with Vendors

- Educate vendors about differences between hospital environment and academic medical centers
- Involve vendors in solving software compatibility problems

Slide 13



Specific Technology Solutions

- Use a server outside firewall
 - Separate server for library
 - Use remote server supplied by vendor
- Use a separate Internet connection
 - DSL line with a static IP address
- Use links off Intranet page to avoid installation of "non-standard" software

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Other Librarian-initiated strategies

- Learn to do basic trouble-shooting functions for library computers
- Coordinate Intranet development
- Take on webmaster role

Slide 15



MLA Open Forum – May 2004

- Described Task Force work
- Presented 3 Case Study Scenarios
 - Terrie Wheeler – Pittsburgh VA
 - Michelynn McKnight – Norman Regional Hospital (OK)
 - Janet Cowen – Maine Medical Center
- Asked how to disseminate results

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Information Technology Forum

- Worked with MLA Hospital Libraries Section
- “Information Technology Forum”
<http://www.hls.mlanet.org/itforum/>
- Registration required
- Open to non-MLA members

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Task Force Members

- Ruth Holst, Chair
- Susan Barnes
- Nancy Clark (new in Sept 2004)
- Anna Habetler
- Janie Kaplan
- Michael Kordelski (new in Jan 2004)
- Maureen Malloy (resigned Sept 2004)

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Task Force members (continued)

- Sal Marotta (resigned in July 2003)
- Denise O'Shea
- Tracy Powell
- Reinaldo Rodriguez (new in Jan 2004)
- Carolyn Willard
- Catherine Burroughs, Outreach Evaluation Resource Center
- Angela Ruffin, National Network Office