

HLA NEWS

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Adventures in Blogland (or Attack of the Blogpeople!)

This article was prepared by **Graham Spooner** from **Katie Zepps Library, College of Nursing in Sydney**. Graham can be contacted by email – GSpooner@nursing.aust.edu.au

Most readers would be aware that the term “blog” is an abbreviated form of “web log”. Blogs are often described as personal journals where individuals diarise their activities and interests and publish it on the web for all to read. They can include text, images, sound files and links to other sites. RSS (Really Simple Syndication) allows for the new content added to blogs to be pushed out to subscribers.

A lot of the forecasters are predicting that this type of communication (blogs and RSS feeds or syndication) will eventually replace e-bulletins and email based listserv applications because of the ease of scanning (and automatic archive). A few months back I decided that it was time to find out what all the commotion was about.

My initial venture into Blogland (alternatively, the “blogosphere”) involved setting myself up as a passive consumer of content published in blogs. Naturally, there are many blogs out there which have been created by librarians. Some of the blogs to which I currently subscribe have interesting names. Some examples are: LibrarianInBlack (<http://librarianinblack.typepad.com/librarianinblack/>), Library Stuff ([\[www.librarystuff.net/\]\(http://www.librarystuff.net/\)\), Shifted Librarian \(<http://www.theshiftedlibrarian.com/>\), Librarians Rx \(<http://www.library.ualberta.ca/mt/blog/librariansrx/>\) and Tame the Web \(<http://tametheweb.com/>\). Others have more functional names such as Library Link of the Day \(<http://www.tk421.net/librarylink/>\), The Distant Librarian \(<http://distlib.blogs.com/distlib/>\) and ResourceShelf \(<http://www.resourceshelf.com/>\). I also subscribe to some nursing blogs as well as some general interest ones such as Wired News \(<http://www.wired.com/>\) and Discovery Channel \(<http://www.discovery.com/>\). A Dilbert comic \(<http://www.unitedmedia.com/comics/dilbert/>\) is also delivered daily and ALIA has syndication for aliaNET \(<http://alia.org.au/rss/>\) as an alternative to the emailed bulletin. Currently, I have 42 subscriptions.](http://</p>
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Having content from all these sites delivered to you is a simple and painless process. A feed reader or news aggregator is required. I selected a free, web-based aggregator called Bloglines (www.bloglines.com). They run and manage all of the software and technologies necessary to collect

the syndicated feeds from tens of millions of online information sources and blogs and deliver the content to you. After you join Bloglines you simply search for the content you are interested in and identify the feeds you want to track. Once you “subscribe” to those feeds (a single-click manoeuvre in most cases), Bloglines will constantly check those feeds for changes or additions and direct new information onto your Bloglines personal page. This article will not detail the process of setting yourself up as this is all explained at the Bloglines site.

Logging into Bloglines and reviewing my feeds is now a daily

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FROM YOUR

CONVENOR

REVISION OF GUIDELINES

I'm pleased to advise that our Newsletter editor and former Convenor for HLA, Melanie Kammermann, has been appointed as the HLA paid project officer with the brief of revising the Guidelines for Australian Health Libraries. The project has turned into a transnational effort with Susan Powelson from the Canadian Health Libraries Association. Susan is keen to collaborate with us as both our associations have guidelines due for revision. Susan has received approval from the US Medical Library Association to use their standards as a model and an email working group is forming. If you are interested in taking part in this process, please get in touch with Melanie (melanie.kammermann@alianet.alia.org.au). Anyone who has already contacted me need not do so again. Your name will now be added to an email distribution list so you can take part in the debate on details of the revision.

COMPETENCIES

HLA has an interest in descriptions of skills and competencies and, as Graham Spooner shows (see page 6), these are well described by sister associations. Rather than work up more words to describe the many laudable qualities we all know we need, HLA is concerned to work on professional development opportunities to extend the knowledge and skills of health librarians. A May 2005 study from the Department of Information Studies at the University of Wales Aberystwyth looked at the availability of training for NHS library staff and at professional development needs. There is much in that report that applies here. See http://www.library.nhs.uk/forLibrarians/nlh_cpd_report100505.doc

Work has begun with ALIA on ways in which professional

development relevant to Australian health librarians may be delivered. Watch future newsletters for more details.

LOCAL HLA LIAISON OFFICERS

I've heard from members that they would like to see more local coordination of events and a figurehead to represent HLA who can also report back issues of concern. Having a national group does remove the need for group paperwork and administrative tasks locally but can also leave a gap in the communication chain. The HLA executive is keen to close that gap with a greater level of involvement with members. We're calling for people willing to take on the role of a local liaison person for a region. A region can be whatever physical area makes sense to you. I'm sure you have natural locality networks already for other purposes. The details of what we'd expect from someone in the role are shown below. Graham Spooner has already volunteered to take this on for the Sydney area. If you are already in a local network, perhaps an HLA component could be added to your meeting rather than having to organise another event. Bear in mind though that your network would need to be inclusive of members from all sectors.

As you can see, we want to keep the role simple and not have it become a burden. The essence of it is to keep our collegial networks strong and encourage local informal gatherings where people can meet for social and professional networking.

Liaison officers will ...

- organise a schedule of local meetings in cooperation with members in the region (this is a coordination role – it does not mean you would be expected to take on all tasks associated)

- seek volunteers to host and organise all details for meetings
- be the single point of contact for the schedule of meetings organised through the year
- maintain a calendar of meetings to be held and advertise these through any local networks, aliaHEALTH, and the ALIA website events calendar
- advise the member organising a meeting of any ALIA requirements for events (full cost-recovery, differential fees for members / non-members)
- identify requirements for any event that is more than an informal cost-recovery networking group and seek involvement of the HLA Executive who can support by preparing a business case to the ALIA Board of Directors
- act as a liaison point with HLA Executive for communication of local and national issues of concern
- encourage contributions of content to the newsletter
- encourage potential members to join
- represent HLA at local, relevant non-HLA organised events and meetings
- be part of a liaison officers email group and elect one from their number to sit on HLA Executive

The member agreeing to organise a meeting is responsible for:

- advertising the event
- selecting the topics / speakers
- catering
- determination of charges needed to cover costs for the event.

If you are interested in becoming a local liaison officer, or have any other issues you want to raise with the HLA Executive, please feel free to contact me directly.

Cheryl Hamill
HLA Convenor

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A Library Redevelopment

Anne McLean describes the challenges and excitement as Austin Health's new library slowly rises from the dust.

Until the Victorian Labour Party's unexpected election win in 2000, the Austin Hospital in Melbourne's north was on track to be privatised. Reversing that decision was the first task of new Labour Health Minister, John Thwaites. Since the Project Plan was launched in 2001 the Austin Hospital redevelopment has been unfolding. The project included the co-location of the Mercy Hospital for Women from East Melbourne. It was agreed that there would be a single library run by Austin Health to service both institutions. As I write this, the Mercy Hospital has moved into its new home in Heidelberg and the Austin Hospital is due to move 400 acute beds, including the Emergency Department and ICU, over the coming weeks into the new Austin tower. The Library Redevelopment is not yet completed so the Mercy Hospital Library has been temporarily located in one of the onsite construction sheds.

During the early project planning the library was allocated prime space in the new Austin tower. This was very exciting, but alas, plans changed. As the current Library is adjacent to the new Education Precinct it was decided to redevelop and expand the existing library space. There are some who say that access to electronic information has undermined the need for expansion of library spaces in the future, but as Lindberg and Humphreys (2005) write "the 'library as place' is still highly valued and heavily used". Our current Library was, at peak times, bursting at the seams and from 2005 the library would also need to service the new La Trobe University Clinical School (undergraduate nursing) and integrate the collections of the Mercy Hospital for Women.

So instead of the ideal scenario of moving into a new space, and having an opportunity to plan a new library from scratch, we had to plan for continuing to operate a library service during rebuilding works on



“ instead of the ideal scenario of moving into a new space, and having an opportunity to plan a new library from scratch, we had to plan for continuing to operate a library service during rebuilding works on two sides of the library over an extended period

two sides of the library over an extended period. Maintaining security for the library space and protecting resources from dust have been major issues. Working conditions for library staff and library customers over the last months have been far from ideal. It has been a challenge to manage the frustration of both groups! However long-term, we will (I hope!) forget the trials and tribulations of this time, and will have achieved a library to match the major teaching hospital status of our co-located health service.

We have already moved parts of the collection twice, and have two further moves ahead. The last move, of course, will be the most disruptive as we reconfigure the entire collection layout and integrate the Mercy Hospital collection. The project is due for completion in October/November 2005.

Our new Library will have increased in size by about 260 sq metres and will provide group spaces as well as spaces for individual study. Individual study spaces will have power and data points, and wireless access hubs are also being installed. The present, very inadequate Library office, circulation desk and workroom spaces are being expanded and remodelled, and there will be new lighting, sprinklers and carpet throughout. There has been gratifying support for our library project acknowledging the integral role the library plays in the patient care, teaching and research undertaken across the health service. While we will not have achieved the perfect outcome, the library staff are quietly confident that after a year of dust and disruption, we will have achieved the best possible Library for our new multi-facility health service.

Anne McLean

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REFERENCE

Lindberg, DA and Humphreys, BL (2005), '2015 - the future of medical libraries', *New England Journal of Medicine*, vol.352, no.11, pp.1067-7.

Would you like coffee or chardonnay with that?

You can't drag a horse to water and make it drink. But can you drag a librarian to professional development and make him/her drink? Geraldine Barkworth talks about obstacles and opportunities.

So can you? Well, yes, maybe if there was great coffee or a good chardonnay perhaps, but that's moving away from the point.

Professional development helps determine the quality and direction of your life. Your career has a symbiotic relationship with your personal life. What happens in one impacts the other. Good professional development takes a holistic approach.

"There's no profession without succession." How many times do we have to hear that before it sinks in? Would you prefer to operate at 50 per cent capacity or would you like the opportunity to build on who you are and who you can be? Choosing a path of career and personal development can do that for you.

Resistance

Far from being futile, resistance to professional development is

downright short sighted. It is anti change and anti growth. It's not about jumping on board just to be the same as everyone else. It's about carving out your own path of what's right for you and your future. It requires discernment.

Occasionally, managers or staff resist attending professional development opportunities. Learning about any fears or preconceived ideas that a staff member or your manager may hold, helps to create a level playing field of understanding. It doesn't guarantee agreement of your proposal, but it does prepare the ground for mutual understanding and respect and that's the basis for great communication. And with great communication, the world opens up to new possibilities.

Dragging staff

Sometimes staff resist career development opportunities offered by their manager. A little extra time

spent exploring their objections may lead to best result for everyone. Once I had a staff member who steadfastly refused to attend professional development (PD) events, saying, "It's just my day job". After spending a little more time with her, I learnt she had an abusive husband who belittled her work. She had to get dinner on the table by 6pm. In future I arranged for her to attend relevant PD which allowed her to be home by 5pm. One small allowance on my part enabled her to participate in PD and build her confidence and skills. See if any of the scenarios in the box below are familiar to you.

Dragging managers

Sometimes information managers refuse career development opportunities for their staff. Extra time spent exploring their objections may lead to a better result for everyone. I once had a

Resistance from Staff "I'm too busy."	Fear / Belief "I'll get further behind." "Busyness makes me important." May feel pressured, stressed about staying on top of things or looking good.	Possible Solutions for Managers Assess their workload realistically. Make any needed adjustments. Build self esteem.
"I'm not interested."	"Why should I bother?" "No one cares about me." May feel unstimulated and unappreciated.	Find out what interests them. Look for suitable courses or get them to research.
"I know everything."	"I don't want to be seen as incompetent." "I'm better than everyone else and I don't want to learn otherwise."	Identify what they don't know. Avoid competitions. Look for advanced courses. Build a deeper level of self esteem.
"This is just my day job."	"My real life is outside of work." "I'm only doing this for the money."	Identify specific knowledge gaps or personal interests. Link PD to Performance Evaluation and therefore, income.
"I don't want to do it."	"No one tells me what to do." "I'm frightened I might fail; not look good."	Explore and provide options. Find out what they do want and what would help most with their work. Accept their final decision.

Resistance from Managers "No money".	Fear / Belief Want to be perceived as competent financial manager; have other priorities over PD; fear of funding cuts and restructure.	Possible Solutions for Staff Find out how much is available. What are the priorities and future directions? Create fair system: eg. one course per person per year. Or, find new employer who values PD.
"PD is a waste of time."	Quantity (numbers) is better than quality (depth). Fear that PD is just wasted social opportunity. May dislike PD personally.	Create proposal outlining specific needs, results and benefits of identified PD. Quantify resources (money, time, staff) and projected value outcome.
"Too busy to think about it."	Feeling pressured to perform, caught up in quantity not quality cycle. May need to feel busier and more important than everyone else.	Do the legwork and make it easy for them. Create proposal with projected outcomes and benefits. Demonstrate teamwork and benefits of complimentary roles.
"Not sure if it's right for you."	Is it a rip off? Is there something better? Is it suited for someone else? Can I trust your judgement?	Do the legwork and measure pros and cons of different courses. Give them facts, figures, projected outcomes.
"Now's not a good time."	I have to juggle priorities and pressures the staff isn't aware of and it's inappropriate for me to share sensitive information.	Explore a little if you can. Be trustworthy. Accept the Manager is capable of making the best judgement call at this time. If you can't accept it; decide on your own future.

manager who deflected my PD request with, "Well it sounds like a good idea, but I don't have time to think about it. How come you've got time to think about it?" I did some research, put some facts and figures together showing the projected positive impact for the whole library. It took one page and 20 minutes to write. I offered to do a morning tea presentation of what I learnt from the workshop. The manager appreciated I saved her time, liked the results based proposal (she passed it on to her manager and used it in a quarterly report) and it got me a cheque.

Drink deep of whatever professional development you chose. Why be dragged, when you can run open armed to all those inspiring and energising opportunities out there. Don't sell yourself short – explore the juicy possibilities life has in store for you.

Geraldine Barkworth, Principal, BOLD WOMEN BIG IDEAS, used to work in libraries and now she helps overachieving library professionals succeed without the struggle. You are welcome to subscribe to her informative bimonthly ezine, *Great Expectations for Library Professionals*. She is facilitating a teleconference program beginning in August called *How To Be A Relaxed Overachiever*. Suitable for bold individuals or institutions. To register or inquire, contact her on 02 6685 1917 or geraldine@boldwomenbigideas.com.au

A National Library for Health – Can we live without one?

In October 2005 a National Institute of Clinical Studies Forum will be held in conjunction with the Cochrane Colloquium in Melbourne.

The forum poses the question: A National Library of Health – Can we live without one? (see <http://www.colloquium.info/?pageID=522>)

This is indeed a very good question and one of great interest to HLA members. Cheryl Hamill will be attending this forum and will report on it in a future issue of HLA News.

You may have read in the June issue of *inCite* Marie Murphy's report on the ALIA education forum. If you missed it, it can also be accessed online (<http://alia.org.au/publishing/incite/2005/06/education.forum.html>). Graham Spooner kindly represented HLA at that forum.

On 11 April I attended the ALIA Education Reference Group Forum at the State Library of NSW. A presentation about the HLA competencies had been prepared by Cheryl Hamill but as she was unable to attend that day I undertook to give it on her behalf.

The Forum was attended by individuals representing TAFE and university educators, ALIA groups, employers, professional associations and recruitment/training providers.

The program included an overview of ALIA's role in education to date followed by updates on the state of play in both vocational and higher education. There was a presentation on professional development for the profession. Cheryl's presentation slotted into a session looking at competencies, standards and frameworks. In this session, the information about the HLA competencies was presented alongside the information about the Special Libraries Association competencies (<http://www.sla.org/content/learn/comp2003/index.cfm>), teacher librarian standards (http://alia.org.au/policies/teacher-librarian_standards.html) and the Chartered Institute of Library and Information Professionals (UK) framework of qualifications (<http://www.cilip.org.uk/qualificationschartership/FrameworkofQualifications/>).

Below are some snippets that I have extracted from Cheryl's presentation. It starts with the following snapshot of health libraries in Australia:

Health Libraries

- Are located in hospitals, research institutes, government departments, regional health services, professional colleges, universities, drug companies, and community organisations.
- Support the clinical, research, educational, and management activities of their organisations. Some provide services to the health consumer.

- There are 453 Health / Medical Libraries listed in the National Library's Australian Libraries Gateway. 448 members of ALIA select the Health Libraries Australia group to belong to (363 personal 85 institutional). The ALIAhealth email discussion list has 517 members.

Impacts on competencies and standards in the Health workforce

The Australian Health Ministers' Conference has set in place a National Health Workforce Strategic Framework and Action Plan. It is notable, by absence, that health librarians are not counted in the data sets of health occupations collected by the Australian Institute of Health and Welfare (as reported in the Strategic Framework). <http://www.healthworkforce.health.nsw.gov.au/amwac/pdf> and http://www.healthworkforce.health.nsw.gov.au/NHW_stratfwork_AHMC_2004.pdf http://www.healthworkforce.health.nsw.gov.au/amwac/pdf/NHW_action_plan.pdf

Trends that impact on competencies needed

- Increase in consumer participation in their own health and a demand for consumer health information services. Informed health consumers are better able to contribute effectively to their own health care.
- Greater availability of information and consequent information overload faced by clinicians.
- Trend to evidence based health care and clinical governance / patient safety / quality care focus

Health Librarian Competencies

Generic special librarian competencies need to be supplemented by an understanding of the competency requirements of the Health industry. They should be developed by advanced university specialty qualifications and by quality CPD programs. The needs of the

health librarian workforce to develop and maintain professional competencies must be fed into the workforce planning processes in Health.

A survey was done in May 2002 by an HLA working group.

The purpose of this survey is to find out if there are any health and medical library courses (or units or parts of units) offered now or intended to be offered in the near future by tertiary institutions in Australia.

The survey found:

"Of the 11 Universities contacted by phone during the survey period (May 2002) only the University of NSW currently offer a postgraduate unit titled "Health Information: retrieval, systems and management" as part of the Masters of Information Management. This unit is offered internally three hours per week for 14 weeks.

The University of Technology Sydney is planning to offer an elective subject called "Health and Legal Information" in second semester 2003 for both undergraduate and postgraduate students."

Future Directions

The HLA group would like to see the development of university specialty qualifications / CPD programs in health librarianship and is willing to work in partnership to achieve this. HLA will contribute to the health workforce planning processes by advocating for the sustainable provision and recognition of a workforce that meets the needs of the sector.

One comment made during the presentation concerned the notion of whether health librarian competencies would involve specialised knowledge rather than specialised skills? An interesting point for discussion, I feel.

After lunch some workshop activity took place which involved group discussion of the draft ALIA Education Framework: stakeholder

roles and responsibilities document and a review of the existing ALIA education statements.

The final session was further workshop activity on ALIA's ongoing role in LIS education. This was to look at course recognition and accreditation. I was unable to stay for this final session.

My impressions of the day?

It goes without saying that the education of librarians and library technicians is of vital importance to the profession. It was interesting to discover what is happening in TAFE and universities and reflect on the implications for the individuals who will be filling our shoes in the future.

Sitting down in a diverse group and trying to analyse the stakeholder roles and responsibilities contained in that document was also a good exercise. Some roles and responsibilities of professional associations detailed in this document may require further discussion and possible action by HLA. Some examples are:

- Provide support for individual members to determine professional development goals
- Facilitate forums for creation, sharing and dissemination of professional knowledge
- Arrange partnerships with training providers to provide professional development courses

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**ALIA HEALTH LIBRARIES
AUSTRALIA:
YOUR SECTOR GROUP
WORKING FOR YOU.**

task for me. It is not very time-consuming despite the number of feeds. Naturally, not all of them have a new post every day and a quick skim usually verifies that much of the new content is not of interest (except Dilbert, of course!). But now and then, there is that gem which alerts you to a newly published document, news story, web resource or other item that is valuable to you, to your clients or to your organisation. Bloglines has a feature that allows you to email that item to yourself and from there you can forward it to anyone else you think may be interested. I have been regularly posting items obtained in this way to the aliaHEALTH list.

If you find that a blog is not useful or interesting or has dried up, you simply cancel your feed to it. You don't have to send a request to be removed from it like you do an e-bulletin or listserv.

After several months of being a consumer of information delivered to me, I decided that I would like a look at the process from the other side. By way of experimentation, I created a blog at the Blogger (www.blogspot.com) website. To have a look, please go to: kzepps.blogspot.com. RSS feed is automatic and I have added it to my feeds on Bloglines.

Initially, I have simply used a basic template available from Blogger but this can be changed or enhanced. In its current incarnation, being a blogger does not seem to be much extra work. A lot of the material is redirected from other sources or comes from information already supplied to my clients and simply refashioned for the blog. Content posted to my test blog is often too ephemeral or trivial to be

posted on the main library web site. This does not mean that some of our clients are not interested in knowing it. I have also posted lists of new items in the collection and notices about events taking place at the College and elsewhere. I imagine that other current awareness content is appropriate for the type of blog I have created.

The main advantage of a blog is its immediacy – I can post material to it at any time and those who have subscribed to the RSS feed then receive it straight away. Material can also be posted to the blog by email, but I have not used this feature myself. The blog also creates a searchable archive of all content previously posted for those who choose to visit it from time to time rather than subscribing to the feed. Blogs can be bookmarked and regularly visited like any other web site.

At this stage, all of this investigation has been by way of an experiment. However, I am already hooked on RSS feeds and feel that I will definitely continue this side of blogging and RSS. The problem is limiting the number of feeds so that your daily check of them does not become unmanageable. New feeds are constantly being created [e.g. Web Junction now has BlogJunction (<http://webjunction.lishost.org/>) and BBC News-On This Day (<http://news.bbc.co.uk/onthisday/default.stm>) is fascinating] and it is tempting to add them to the My Feeds area.

Being a blogger is more recent and I am still getting a feel for this. At this stage my instinct is that it is very worthwhile. On the other hand, posting to a blog which no-one reads or subscribes to would not be a good use of time. In the meantime I am continuing to blog on.

Consider making a donation to the

Anne Harrison Award Trust

The Anne Harrison Trust Fund is a living fund that welcomes donations and bequests. The Trust exists to further understanding of health librarianship and the professional practice of individual health librarians. Personal and corporate donations can be acknowledged or remain anonymous. You may consider including a bequest to the Trust when next updating your will. For more information contact AHA administrators Greg Fowler (g.fowler@uq.edu.au) or Veronica Delafosse (v.delafosse@cgmc.org.au). For further information on the award visit <http://www.alia.org.au/awards/merit/anne.harrison/>

What's on offer at the NLA?

In the June 2003 issue Roxanne Missingham outlined a range of ways in which the National Library's services support the work undertaken in health libraries. Since 2003 there have been some significant developments in services. Sandra Henderson reports.

Libraries Australia

<http://librariesaustralia.nla.gov.au/>

Libraries Australia was launched in December 2004 as a major redevelopment of the Kinetica search service. The success of services such as Google prompted the development of the very simple search interface, but it was also quite evident that users are no longer satisfied with lists of references; they actually want to get items NOW. This is not always possible, but Libraries Australia provides links to enable users to get many items more readily through a 'Get This' button linking to libraries, commercial suppliers and online bookstores. Libraries Australia also makes it simple to save records, and export them in various formats or as an email to the user. Alerts (remember SDIs?) allow for simple creation of regular reports of new records in the user's area of interest.

The new search interface has been very well received, and further improvements are being added. In June an APAIS database pay-per-search option was made available for small libraries, and there has already been interest from users in expansion of this facility to other databases.

From July 1 Libraries Australia membership is based on a subscription model, giving libraries more budget certainty, and allowing more libraries to offer access to their users. Many small libraries will now be able to access most of the databases within Libraries Australia for an annual subscription of \$330. There has been an encouraging number of enquiries from small public libraries who now see Libraries Australia as an affordable resource to add to their stable of online resources. Personalisation will be added in the near future, allowing individual users within member libraries to store their own searches and alerts.

The success of the national system depends on the continued support of the contributing libraries who are adding records and holdings to the Australian National Database. To encourage these vital contributions all members adding records or holdings qualify for a 25 per cent reduction in their subscription cost. For libraries on the base rate of \$330, this means the subscription drops to \$264 annually.

The new subscription model will also remove the charges previously imposed for using the Kinetica Document Delivery System (except the charge imposed by the supplying library). Libraries with specific reciprocal charging arrangements (including gratis supply arrangements) can contact the Help Desk to have those charges set up as the default within their charging group. For those GratisNet members who are already users of Libraries Australia, registering for KDD is now even more worthwhile because you will be able to make use of the system without incurring any costs over and above your annual Libraries Australia subscription. Those libraries which are not Libraries Australia members might also like to consider the advantages of joining under the new subscription arrangements.

MusicAustralia

<http://www.musicaustralia.org>

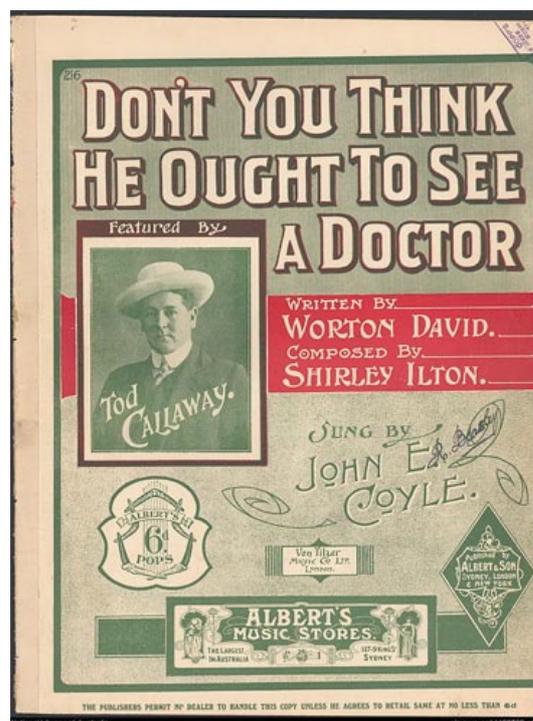
In March 2005 the National Library launched MusicAustralia. What has this got to do with health libraries? Not a lot in most cases, but you and your users are not working 24 hours a day, and surprising

numbers of people are interested in music to some extent. You might just want to know if there has been a song written about your home town, or find a picture of an Australian musician. MusicAustralia includes records for resources from the National Library and several other cultural institutions, and also links to online versions of many music scores, photographs, websites and web documents, as well as to audio files of several hundred items. The National Library has digitised over 10,000 of its early music scores, so those with musical talent can print out the complete score for such inspiring works as *The Westralian Anthem*. MusicAustralia is well worth a browse! (And just to make it relevant, there ARE resources on music therapy).

PictureAustralia

<http://www.pictureaustralia.org/>

By now many of you will have explored PictureAustralia, but if you've missed it, PictureAustralia



NEWS FROM EBSCO

EBSCO is pleased to announce the release of three landmark databases to complement and increase EBSCO's suite of first class medical offerings.



CINAHL® Plus with Full Text

CINAHL® with Full Text is designed to fulfill the need of nursing students and researchers for easy access to pertinent nursing resources.

This version of CINAHL is unique to EBSCO and features:

- Full text for key titles incl RN, British Journal of Nursing (back to date of issue - no embargo!)
- Complete CINAHL Indexing back to 1937
- 'Evidence Based Care Sheets' for all nursing disciplines

DynaMed joins EBSCO

DynaMed, the point of care resource with more of the answers, joined EBSCO in July 2005.

This database is a direct competitor to UptoDate with a number of key advantages, including:

- DynaMed is Evidence-Based (systematic evidence analysis and literature surveillance)
- Answers 70 per cent of clinical questions!
- DynaMed is updated daily

SocINDEX™ with Full Text

SocINDEX™ with Full Text is the world's most comprehensive and highest quality sociology research database. The index features more than 1,300,000 records with subject headings from a 15,600 term sociology-specific thesaurus designed by expert lexicographers.

This product also contains

informative abstracts for more than 620 'core' coverage journals dating back to 1895. In addition, this file provides data mined from more 1,890 other journals plus full text of 547 books and monographs and 6,711 conference papers.

Improved access

With the great array of databases, e-journals and print media now being made available to patrons, EBSCO is assisting libraries in providing seamless access to full text resources. Ask us about our title listing services (AtoZ and EJS) and state of the art link resolver (LinkSource).

Want more information or a free trial?

Contact Ian McLeod, the regional manager for Biomedical Libraries in Australia and New Zealand. Ian can be reached on 03 9418 5775 or via email imcleod@epnet.com

new directions for the future – ALIA Symposium for Special Librarians

ALIA is proud to announce a symposium for all Australian special librarians. *new directions: ALIA Symposium for Special Librarians* is a special event designed to give specials the opportunity to enjoy the company of friends and colleagues and be inspired by interesting professional speakers, and to develop knowledge and expertise in the new fields of endeavour that librarians now need in their roles as information professionals.

Lock the date in your diary now – *new directions* will be held on November 3 and 4 this year, in the new RACV building in Bourke Street, Melbourne.

new directions is specifically designed to give specials the best support and practical advice in new concepts in the short time of one-and-a-half days. It will feature a practical program with presentations from invited speakers followed by discussions, panel sessions or workshops – more of a meeting, or a gathering of like minds, under the guidance of a subject-dedicated leader. The structure of the program

is designed to help participants discover new ways of working, thinking and acting in modern library environments.

This is a chance to find up-to-date information, the latest thoughts on resource licensing, security of information and effective marketing. For around ten years information professionals have talked about the virtual library. Find out where the virtual library stands now, in the new century, and learn about a new model for end user training at this symposium.

Impress your manager or supervisor with your new-found

knowledge and at the same time add a few points to your professional development scheme. You are a member of ALIA's Professional Development program, aren't you? If not, this is the best time for you to join by going to <http://alia.org.au/education/pd/scheme>

The registration fee also includes a ticket to a dinner on the first night.

More information can be found <http://conferences.alia.org.au/ss2005/> or by contacting Emma Royan-Smith at ALIA national office on (02) 6215 8222.



APPLICATIONS ARE INVITED FOR THE

Anne Harrison Award 2005

The deadline for applications to the biennial ANNE HARRISON AWARD has been extended to 16 September, 2005. The Anne Harrison Award is open to all Australian health library and information professionals.

Australian health librarians established the Anne Harrison Award in 1987 to commemorate the life work of Anne Harrison (1923 to 1992). Anne was Librarian-in-Charge at the Brownless Medical Library, University of Melbourne, from 1949 until 1983. She initiated the Central Medical Library Organisation in 1953 and helped pioneer the introduction of *Medline* into Australia. Anne was a founding member of the Australian Medical Librarian's Group and later the LAA Medical Librarians' Section. These professional associations, together with the more recent ALIA Health Libraries Section, comprise the organisational history of our current national professional association, Health Libraries Australia (HLA).

Previous recipients of the Anne Harrison Award include Ruth Sladek, Adam Clark, Lorena Smirneos, Kathy Saurine, Veronica Delafosse, Anne Batt, Frances Bluhdorn and Linda Mulheron.

The Trustees of the Anne Harrison Award provide \$3000 for:

1. A research project that will

- increase the understanding of health librarianship in Australia, or
- explore the potential for the further development of health librarianship in Australia

2. Assistance towards

enrichment of knowledge and skills of Australian health sciences librarians, including funding to:

- help meet expenses of an approved course of study or study tour, or
- help meet expenses arising from a publication in the field of Australian health librarianship.

While any application that meets these criteria will be considered, the Administrators would like to suggest the following contemporary topics:

- a benchmarking study for hospital libraries, applying the information literacy framework in a health industry setting, *and*
- implementing evaluation methodologies for health library services.

Applications are assessed by the Anne Harrison Award Administrators. Announcements about the Award will be made on our aliaHEALTH e-list.

Administrators

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Majella Pugh
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Trustees

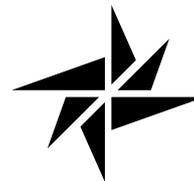
After many years as a trustee, Anne Batt has stepped down from the role. Many thanks to Anne for all her hard work.

The trustees are now
Cheryl Hamill
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Brigitte Glockner
brigitte.glockner@health.wa.gov.au
Susan Lutley
s.lutley@ecu.edu.au

Current administrators, trustees and HLA executive members are ineligible to apply for this award.

Donations or bequests to the Anne Harrison Award

Enquiries and applications can be made with Greg Fowler by email to g.fowler@uq.edu.au



Your 2005 HLA Executive

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REGIONAL LIAISON COORDINATOR

To be elected from the network of regional liaison officers.

NEWSLETTER / WEBSITE COORDINATOR

Melanie Kammermann

melanie.kammermann@alianet.alia.org.au

Congratulations Bronia Renison!

Bronia Renison has been awarded the 2005 Queensland Library Achiever of the Year Award.

When presenting Bronia with her award at the Annual Library and Information Week Trivia Night in Brisbane, Sue Hutley, Convenor of the ALIA Quorum Group, said "Bronia Renison is a worthy winner of the 2005 Queensland Library Achiever of the Year Award.

"In the last ten years, in Townsville, Bronia has achieved excellence in two main areas:

- As the Librarian in Charge of the Townsville Health Library, one of the largest libraries within Queensland Health, Bronia has managed to negotiate a newly refurbished library, selection of a new library management system and a joint use arrangement with James Cook University.
- Regarding her contribution to the wider profession, Bronia has been an active member of ALIA since she arrived in Townsville. She has been a consistent committee member on the ALIA

Townsville Group and her ongoing participation in the Health and Information Online groups of ALIA has been significant. She has organised and conducted many seminars and workshops. Most recently Bronia this year organised the traveling speakers from the Information Online Conference in January to visit Townsville to bring their expertise to northern colleagues. Amongst many other things, Bronia also supports a hospital library in PNG with donations and has provided professional development for Fijian Health Librarians.

So as you can see, Bronia has had a diverse working and professional life. She is very committed to our profession and the judges felt that this was suitably recognised by this award as the Library Achiever of the Year."

The Queensland Library Achiever of the Year Award is proudly



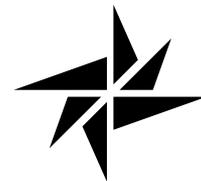
Bronia Renison with her award

sponsored by The One Umbrella. Bronia received \$500 and a rare corporate umbrella from Marion Nicholson from The One Umbrella.

For further information about the award visit <http://www.alia.org.au/awards/merit/qld.laoty/>



From Left: Marion Nicholson (Managing Director, One Umbrella), Sue Hutley (ALIA Quorum Convenor), Bronia Renison, Gill Hallam (ALIA President), Karla Adams (One Umbrella)



DETAILS

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See the newsletter online at
<http://www.alia.org.au/members-only/groups/healthnat>



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