

# HLA NEWS

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## HOPING for the BEST... PREPARING for the WORST

### Managing online emergencies in a health libraries consortium

Lindsay Harris (The Queen Elizabeth Hospital) and Jennifer Hanisch (Women's and Children's Hospital, Adelaide) outline the reasons why the South Australian Health Services Libraries Consortium adopted an emergency management protocol for electronic resources and how such a protocol may be constructed and implemented by a consortium or collaborative group of health libraries.



▲ Jennifer Hanisch

Lindsay Harris ▲

The South Australian Health Services Libraries Consortium (SAHSLC) comprises 14 libraries in the health and community services sector of the South Australian Government. The Consortium operates under a memorandum of understanding to undertake the joint purchasing of electronic products as well as serving as a forum to deal with issues of common interest and in representing the views of member libraries to both their parent agencies and to external parties. (For background information on the Consortium refer to the SALUS website – [www.salus.sa.gov.au](http://www.salus.sa.gov.au))

The ever increasing reliance on electronic information prompted the Consortium to consider how its member libraries would be able to provide alternative access to at least core databases and online materials in the event of a prolonged disruption to Internet based information services at the individual site level. (Fletcher

2006 pp 11-12) This concern was reinforced by a state government review of disaster and emergency planning in the aftermath of the 2002 Bali bombing attack and the arrest of terrorist suspects within Australia.

The emphasis was on securing access to electronic information, owing to its primary role in health information, and the very real difficulties loss of online access would pose collectively for Consortium members and their clients. It was accepted that from the viewpoint of the average health professional the loss of hard print materials in individual collections would not be so devastating in an electronic environment. Equally, the Consortium recognised that if there were a state wide collapse of the Internet then access to core medical materials in hard print would continue to be vital. Each library was therefore strongly encouraged to maintain a small collection of such materials in hard print specific to the needs of their

principal client groups. (Beales 2003 p21)

Hence our emergency management protocol was devised to support individual Consortium libraries in the event of major disruptions to online services, either through natural or man made disasters. The protocol would enable member libraries, in collaboration with other Consortium libraries, to continue to deliver at

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# CONVENOR

What you need is a good course of Information Rx

From Wikipedia: *The use of  $\mathcal{R}_x$  in prescriptions originated as an astrological symbol that was written for talismanic reasons at the start of medical prescriptions. Later it changed into  $\mathcal{R}_x$  (an uppercase R with its tail crossed), and was used as an abbreviation for the Latin word recipe = 'take' (imperative), i.e. an instruction to the pharmacist to take the items listed in order to prepare the medicine. When printing came, it was rendered as 'Rx'.*

From the PsychologyAndLaw.com definitions site: *shorthand medical script for medicinal 'prescription' or recommended course of treatment.*

My recommended course of treatment is to prescribe for yourself attendance at the Information Rx symposium, from 2 to 3 February 2006. Not all self-diagnosis and prescription is dangerous! <http://www.information-online.com.au/> (see satellite events)

Our keynote speaker is Carol Lefebvre, Information Specialist at the UK Cochrane Centre. Her role is to identify reports of controlled trials for inclusion in Cochrane reviews and to make these available in The Cochrane CENTRAL Register of Controlled Trials in The Cochrane Library – and to support others engaged in this work. Her research interests include improving the design of search strategies to identify reports of trials and systematic reviews. Carol will deliver our information prescription on the place of search filters in the conduct of a systematic review.

One element of the symposium will be to reconsider how we function as a Group and the ways in which we may reinvigorate participation from technicians and librarians working in Health. It's a difficulty in all social and community organisations today – how to engage and involve people in building our professional capital in

society. Are we all just 'too busy' with too many competing priorities – is that a balanced approach to life? Are we suffering from that work-life imbalance that seems to be pandemic? Let's all consider: how can we have it all; how can we share the load; what is it to be a health librarian or technician today; what is the future of our profession? Many questions and we'll move towards some answers in Sydney and through 2007.

Can't make it to Sydney? ALIA is partnering with FOLIO to deliver a professional development program of online learning for health librarians. You can drive the direction for online learning and vote on a short list of four courses to select the pilot course which will commence in March 2007. FOLIO (Facilitated Online Learning as an Interactive Opportunity) was established to provide support for librarians moving into new roles, focussing on the development of skills in health informatics and knowledge management, especially related to digital libraries. The online courses will be delivered by a team led by Andrew Booth, based at SchHARR (School of Health and Related Research), University of Sheffield in the UK <http://www.nelh.nhs.uk/folio/>. Further information on the vote to select a pilot course may be found in the aliaHEALTH list archives <http://lists.alia.org.au/pipermail/aliahealth/2006-December/004992.html>. A report from an Australian library manager who completed one of the early FOLIO courses (before they became restricted to UK health librarians) is also on the ALIA site <http://www.alia.org.au/groups/quill/issues/2003.7/folio.html>

This is an exciting development and if the pilot is successful, more FOLIO courses will be offered. The FOLIO courses in the UK have been offered since 2003 and continue to gain support as

part of the National Electronic Library for Health (NLH) Librarian Development Programme.

This is my last column as convenor and it has been a great professional development opportunity in itself. I've had contact with some wonderful professional people from all over Australia (and Hong Kong with our editor). I've learned that the famous Lucille Ball quote, "If you want something done, ask a busy person to do it" is only true to a certain tipping point. "Many hands make light work", or "when eating an elephant take one bite at a time", are more pertinent and sustainable sentiments for a busy time. With the wisdom now of hindsight (if only we could live life backwards), I urge you all to consider playing a small role in our Group. There will be many opportunities for all of us to play a small role with the International Congress of Medical Librarianship in Brisbane in 2009 and with ongoing networking and group communication. I plan to stay involved with the group, but in other roles. There is always a contribution to be made and I enjoy that. I particularly enjoy the contact with my colleagues across the country. You know that somebody who should do something? That can be you – be a somebody!

A warm welcome to Heather Todd from Queensland, our incoming convenor and to Lisa Kruesi who has also joined the HLA Executive. My thanks to the HLA Executive. I've had great support and a wonderful collegial group of people who are quick to give ideas and share the load. Thanks to Veronica Delafosse (Treasurer), Melanie Kammermann (Newsletter Editor), Mary Peterson (Secretary), Lindsay Harris and Greg Fowler (Committee members).

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# A message from HLA's incoming CONVENOR



It is an honour and a privilege to become the next HLA Convenor. I certainly have some

large shoes to step into and would like to take this opportunity to thank Cheryl for all of her work supporting HLA. I look forward to working with her in the future.

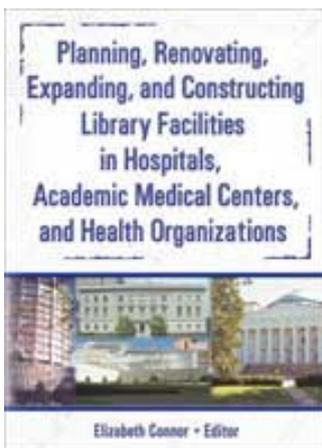
I would also like to take this opportunity to introduce myself to you. On a personal note I was born in London, England, and moved to Australia in my early 20s as 'it seemed a good idea at the time'. I settled in Canberra and it

was there that I began working in libraries. I must have been destined to be involved in medical libraries as my first professional position was as the Medical Librarian for the Department of Defence. I remember having to attend a week's training course at the National Library of Australia before I was allowed to use Medline! (Should I have admitted this?) I have always maintained a keen interest in medical librarianship with my present position involving the oversight of the life sciences and medical libraries managed by the University of Queensland Library. I have been involved in various ALIA committees and am currently a standing member of the IFLA Section on Health and Biosciences

Libraries and convenor of the 10th ICML (International Congress of Medical Librarianship) that will be held in Brisbane in August/September 2009.

I was very pleased to attend the 'rebirth' of the Queensland Chapter of HLA recently and have every confidence that it will become a supportive and dynamic group to be involved with and look forward to their 2007 program. I am also looking forward to meeting you at the HLA Symposium in February and working with the other members of the HLA executive in the coming year.

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**Majella Pugh (The Royal Melbourne Hospital Library), reviewed *Planning, renovating, expanding, and constructing library facilities in hospitals, academic medical centers, and health organizations, edited by Elizabeth Connor and published by The Haworth Press (New York, 2005, 218p)***

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Soft cover, US\$24.95 + \$5 p&p  
(copy supplied by publisher)

NOTE: This review first appeared in AARL 2006; 37(2): 166. Reprinted with permission.

## BOOK REVIEW

Connor's book is aimed at hospital, academic, health association, other special librarians (and interested students) planning to refurbish, renovate or construct libraries. It provides descriptive, illustrated, and practical information, with an emphasis on the academic setting.

As an Assistant Professor of Library Science with extensive experience in planning, designing, managing and consulting for renovation and design projects, Connor is well placed to auspice the work. Thirteen case studies are presented in similar format, largely as a result of a call for involvement on the US MEDLIB-L Listserv in late 2003.

Two of the reports come from special libraries (aka "Health Organizations"), six from academic medical centres, and five from hospitals. Twelve are from the USA, one from Canada. The majority represent renovations, and as can be expected, the scale, cost and angst varies. Two mergers and three new libraries are discussed.

Having moved a 900 m<sup>2</sup> hospital library at the end of 2004, I was pleased to see

discussion about qualitative as well as quantitative considerations: stresses on staff, ongoing need for vigilance of the architects (including learning their language), and the needs to constantly communicate to the stakeholders, and occasionally to compromise. The imperative to support your institution's goals and objectives, not just the library's, is also highlighted.

I would recommend the book to anyone in any discipline about to change their library's physical circumstances, with the caveat that not all answers are contained within. Whilst we can extrapolate the North American experience to Australia, we here face, *inter alia*, different funding issues and varied user patterns due to international variations. Also, the experiences of the larger settings which dominate the text are not entirely applicable for solo or small libraries.

Read this book, post your own queries to the ALIA listservs (as I did), research the journal literature, read other texts ... and good luck! It's a hugely challenging task, but what doesn't kill you makes you stronger.

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# EUROPE as an OPEN BOOK

Alex Petrie discovered that European health librarians are interested in much the same issues as their Australian colleagues, and reports on “a most enjoyable and rewarding conference”.

The 10th European Conference of Health & Medical Libraries in Cluj-Napoca, Romania, wound up on 16th September after a hectic four days crammed with interesting presentations and very entertaining social functions. I can't remember how many times I heard people say it was the best conference they had ever attended. And that wasn't just from the delegates but their partners as well. We were met at the airport by extremely enthusiastic and efficient conference helpers, who drove us to our hotels and ensured all was in order before leaving us to recover from our flights. They also tirelessly tracked lost luggage, enabling the unfortunate owners to get on with more interesting matters, like the First Timers dinner, which allowed those new to the European Association for Health Information and Libraries (EAHIL) conferences to settle in and get to know other delegates before the conference began in earnest – an excellent innovation and I gather something that will be repeated at the next EAHIL conference in Helsinki.

The theme of the conference was *Europe as an Open Book* and it was reassuring to find that health librarians in Europe were interested in much the same issues as we are in Australia. Papers covered everything from implementing an open source OPAC (the data migration was a little fiddly but otherwise this was a perfect solution for this small specialised

library), to comparing Science Citation Index with Google Scholar for citation analysis (findings – they both yield a fair percentage of unique citations so you need to search both to be comprehensive), to an overview of “Click, click quick” an e-current awareness service for acute services in the UK National Health Service (this study revealed the great inequity of internet access between the nursing and medical professions and highlighted the need to market and train users in new services). Open access was obviously a hot topic and was discussed by several presenters – both from the publisher viewpoint and that of the librarian. There were many excellent papers and I often found it hard to decide which session to attend but the paper I found most intriguing introduced a customisable “Quick Search” toolbar for internet browsers, which can provide rapid access to your library resources. I'm sure some of our staff don't even know we have a Library intranet page (or it's too slow to get to) so this may be a way to give those users access. As we were regularly reminded, our users like Google because it's quick and easy – access to our library resources should be too.

Our social calendar was also packed full. We were treated to a selection of popular arias by the Romanian Opera of Cluj on the first night and had a choice of three tours on the Thursday afternoon. I chose the tour of the unfortunately named Turda Salt Mines, despite the warnings of extreme cold and slippery floors, and was very glad I did. It was quite spectacular and we were rewarded for our descent down 18 flights of narrow wooden

LEFT: Robert Kiley of the Wellcome Library presenting via videoconference from the UK. It may have been more logical to have Robert on the smaller screen and his PowerPoint on the larger but it made for a very entertaining presentation.



BELOW: Cheryl Ouwerling from Tweed Hospital in NSW, the only other Australian health librarian at EAHIL this year, judging the poster presentations.



steps (and yes, they were extremely slippery!) by a concert from a string quartet – quite surreal and the acoustics were wonderful. The gala dinner on the final night was an eye-opener for me. I had no idea that European Health Librarians were such a rowdy bunch. The, shall we say “extremely enthusiastic”, dancing began before we'd even had our entrees and I'm sure would have continued well into the small hours if the bus drivers hadn't insisted that they were going at 2am. This made for some slightly bleary-eyed librarians on the all-day sightseeing tours which concluded the conference. I opted to visit Alba Iulia (a wine growing centre and considered one of the most important historical towns in Romania) and the Rameti Monastery (an Orthodox monastery in the mountains inhabited by 80 carpet weaving nuns).

All in all, it was a most enjoyable and rewarding conference. Many thanks to Sally Wood-Lamont, Ioana Robu and all the 10th EAHIL Conference team!

The full text of the papers is available online at [http://www.eahilconfcluj.ro/scientific\\_programme.html](http://www.eahilconfcluj.ro/scientific_programme.html)

Several people started blogs for the conference <http://eahil2006.blogspot.com/> – links to some of the other blogs on the left.

Next year's EAHIL Workshop will be held in Krakow, Poland from September 12-15, 2007. And the 11th EAHIL Conference will be in Helsinki, Finland, June 23-28, 2008. Visit <http://www.eahil.net/conferences.htm> for more details.

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# Changing places

As the ACT State Manager for The One Umbrella, Vicki Dall often gets asked “when is the right time to look for a new job?” and “how do I write a good resume and develop sound interview techniques?” This article is based on a talk Vicki delivered to the ALIA ACT and Region Health Libraries Group in September 2006 and in it she shares a few tips and hints.

Do you avoid talking about work with friends? Do you get a knot in your stomach when you think about going to work? Does work drain you instead of infusing you with energy? If you answered ‘yes’ to one or more of these questions then maybe its time to consider changing jobs.

Changing your job may arise from two quite separate needs. You may be seeking new challenges in your career, which could include more skills, greater variety or increased responsibility. On the other hand your need for change may come from the realisation that you are in the wrong role or the wrong environment.

Whatever the reason(s), the first step is to recognise the need for change. Next you will need to determine:

- where you want to be
- what you want to be doing, and
- what you need to do to make it happen.

Changing your job inevitably leads to a process of self change and it’s important to evaluate your motivations. Going through this considered process of change will not be easy. It has often been said that changing jobs rates only second to death, with marriage and divorce further down the ladder.

Also consider that wherever you are working, you need to be a positive part of your organisation and culture. If you are unhappy in your current position consider looking for alternatives. Whether it is a job change or attitude shift, the outcome will invariably be the same – a more positive development in your career and career plan.

## WORKING TOWARD JOB CHANGE

Depending on your reasons for seeking a new position, one approach to consider in your bid to secure a more suitable position is to look at what makes you good at your job and an ideal candidate for a new role. As part of this process, also identify the weaknesses you have and then work to improve them, or at the very least, ensure that your new role will not require you to use skills you don’t have.



**Changing your job inevitably leads to a process of self change and it’s important to evaluate your motivations.**



## RESUMES

What is a good resume? In my opinion, there is no right or wrong way to put a resume together. Resumes are personal documents that should reflect your skills and experiences. My advice is to make sure they do exactly that. In addition, make sure that the resume is a readable, attractive and informative document that achieves its primary goal – TO GET THAT INTERVIEW!

The essential elements of the resume are:

- Name
- Personal data – you don’t have to put in your age or marital status
- Work experience
- Education
- Professional associations
- References

You do not want to bore the person assessing resumes and letter. Their time is valuable and you need to make your points succinctly. The most important thing is to address the key selection criteria so that as they have their assessment sheet in front of them, they can simply go tick, tick, tick. This can sometimes be difficult when there is a list of 15 key selection criteria. In that case, a separate sheet is often a good idea with the covering letter simply being a pointer to this document and your resume. One thing I personally believe in is stating why you want to work for the library or organisation you’re applying to. There has to be some reason that you are writing this application and hopefully it is because in your mind you have said, “I really want to work for ‘X’, I have heard great things about the service and I want to be a part of that”. Put that in. Make it known.

An extremely important thing to do is to spell check your resume. Never underestimate its importance. You may have read each word more than 10 times and feel confident that everything is correct but still get someone with a good critical eye for grammar and spelling to read it for the last time.

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least basic information to clinicians for patient care until the restoration of normal services.

### Objectives of the emergency management protocol

Firstly, the Consortium identified what would be excluded from the scope of the proposed emergency protocol:

- Damage or losses to physical collections such as hard print.
- Disruption to services by prolonged staff absences.
- Collapse of the Internet at state government or national levels.
- Short down time periods for electronic services of less than four hours.

What the protocol attempted to provide were the following objectives:

- An agreed plan whereby Consortium libraries could respond in a prepared, coordinated manner to a significant disruption to electronic services at site level.
- Provision of support with the least delay or confusion by Consortium libraries to individual libraries that had suffered a significant loss of access to their online services.
- Ensure continuity of access to electronic information for clinical purposes until at least limited recovery in online services at the affected site(s) was achieved.
- Describe and determine the level and extent of support to be given by Consortium members to those libraries experiencing an emergency.

### Literature review

An extensive search of the literature on disaster planning and management in libraries, involving Medline, CINAHL, LISA and Google, was undertaken in mid 2005 and updated in mid 2006. This revealed a considerable body of literature primarily concerned with the preservation and conservation of physical materials damaged through fire or natural disaster. Reports on managing the loss of electronic services and

resources are limited and mostly stem from articles on the 9/11 terrorist attacks. Literature on a collaborative or consortium level response to disasters, and more specifically the loss of electronic resources, are even fewer in the published literature.

A number of articles and web sites were reviewed and various findings have been incorporated into the protocol. However, it is fair to say that to a large extent we had to improvise in the drafting of an emergency management protocol for electronic services at the consortium level.

### Advantages and disadvantages of collaborative emergency planning

The literature review, reinforced by our own experience, revealed a number of pros and cons in embarking upon an exercise in collaborative emergency planning. The advantages of collaborative disaster planning at a consortium level are:

- Sharing ideas. The opportunity to learn from the experiences of others and avoid excessive duplication of effort by individual libraries.
- Access to available and potential expertise and knowledge is maximised.
- Communication between libraries is enhanced and each member has a good understanding of their roles and responsibilities in the event of a disaster and its aftermath.
- Ability to provide peer support during and after disasters or prolonged emergencies. The literature is unanimous that having the professional and emotional support of colleagues during periods of disaster related stress is crucial to the recovery process for both institutions and individuals.

The disadvantages of collaborative disaster planning are:

- Distances between agencies can pose obstacles in resource sharing, although this is more of a difficulty for physical rather than virtual collections.

- The mix of bureaucratic structures and cultures can produce reporting problems. In the case of our Consortium this is less of a problem, given most members belong to state government agencies, but it could be an issue in some situations.
- The diversion of significant staff time and energy into supporting other libraries. This is potentially a major issue.
- Conflicting user service priorities arising between the assisting and assisted libraries if the disaster and /or down time for online services is prolonged. (Lashley 2003 p29)

### Key points in the creation of an emergency management protocol

Certain key points are commonly noted in the literature as essential to creating an effective emergency management plan/ protocol:

- Communication with all participants is vital and all other facets of a disaster plan are critically reliant on good, constant communication links.
- It therefore follows that maintenance of a current personnel contact list is absolutely fundamental and this list must be regularly updated and securely available in both electronic and hard print formats.
- Responsibility for particular tasks must be clearly designated in any contacts list, i.e. who calls whom, who does what and what information must be provided is at the heart of any successful disaster management plan. (Lashley 2003 pp30-32)

Before commencing the drafting of an emergency management protocol participating libraries must appreciate that such a protocol will represent an ongoing effort. Regular reviews will have to be conducted by a designated coordinator or coordinating group to revise the various elements of the protocol. These include:

- Changes in library personnel, reporting structures and

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- administrative responsibilities.
- Changes or upgrades to each library's information technology infrastructure, either at site or regional levels.
- Major changes in electronic collections purchased and in physical locations.
- Current contact details of all relevant vendors and suppliers.
- Identification of each library's core client groups and of any significant legislative, financial, policy or administrative requirements that must be met by participating libraries.
- Up to date contact details of library staff. These ought to also incorporate out of hours emergency telephone numbers to be held in confidence. (Eng 2002 p5)

The second component of any emergency management plan is a risk assessment exercise whereby participants audit their key functions to determine their probable degrees of vulnerability in the event of a disaster. In the case of the SA Health Libraries Services Consortium the risk assessment concentrated on the provision of electronic services to client groups whose information needs were considered to be paramount during the loss of online library services.

### Drafting a consortium emergency management protocol

The literature speaks of the importance of producing formally recognised documentation describing what and how will be offered by mutual aid agreements between libraries. Joint activities would encompass such matters as:

- Emergency web site maintenance.
- Degree of emergency access to be granted to external users to electronic information services.
- Listings of available resources for emergencies.
- Coordination of initial response to an emergency and ways of communicating with all participating libraries during the emergency period.

- Defining the criteria of when an emergency exists, how it is proclaimed, who takes the initiative in calling an emergency and in determining its duration.
- Undertaking any necessary training, annual planning reviews and revision of supporting documentation. (Mathews 2005 pp67-68)

From a consortium's viewpoint it is highly desirable that all procedures and documentation are kept to within reasonable work and time limits if the emergency protocol is to survive beyond its first year.

One approach is to prepare an emergency recovery checklist as part of the disaster protocol to itemise which actions need to be taken by whom, how and in what order of priority. The checklist would act as a prompt sheet during the initial phase of an emergency for the guidance of whoever is present at that time and has to respond quickly and logically to the situation before them. Given that emergencies tend to occur at awkward moments, often when managers are absent, the provision of an up to date emergency recovery checklist should be regarded as fundamental to the writing of an emergency protocol.

### Implementation steps for a consortium emergency protocol

To establish and maintain a disaster management protocol a series of steps are necessary:

- 1) Formally recognise the need for long term collaboration in planning.
- 2) Determine the disaster protocol's principal objective in emergency mitigation, i.e. which objective does a consortium or group wish to achieve?
  - (a) Restore operations as soon as possible by accessing only the latest information.
  - (b) Renew normal business operations within a reasonable period.
  - (c) Resume and continue operations in a deliberately downgraded mode until the eventual restoration of all services. (Georges 2004 p12)

- 3) Identify the role and responsibility of each library in responding to a disaster and how annual reviews will be coordinated by the membership.
- 4) Document the administrative issues involved together with the allocation of tasks and the compilation of lists of available expertise and contact details.
- 5) Specify which activities will be offered mutual assistance under the disaster management protocol as laid down in an agreed response/recovery checklist.
- 6) Formulate a disaster recovery strategy that is comprehensible and known to all relevant library staff, particularly during the initial response phase.

In early 2006 the SA Health Services Libraries Consortium adopted an emergency management protocol after a long period of planning and consultation. The protocol described and defined the scope of its operation, how notifications of emergencies would be made, an approved list of library contacts for emergencies, which services and resources would be offered and to what degree. The protocol also contained brief recommendations for individual libraries in preparing their own site specific emergency procedures. Consortium members undertook to maintain hard copies of the document within library work areas, to advise their staff on the contents of the protocol and to review the protocol every two years. The Consortium's 'Emergency Management Protocol' may be found on the SALUS homepage. (Click on the user guides tab then refer to general guides)

### CONCLUSION

Under contemporary circumstances it behoves health libraries "to hope for the best and to prepare for the worst". Time constraints and probability may appear to render emergency management a low priority for

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libraries. However, if and when, a disaster or emergency strikes we have a duty to be able to react in a professional and organised manner. It is imperative that the flow of information vital to health care is not disrupted indefinitely and the well being of our citizens is not jeopardised by our previous inaction.

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## THE INTERVIEW

The basic premise of any interview is to do your homework. Who is the organisation you have the interview with? What are their goals and objectives? What challenges do they face and what do you have to offer them? As it is, you may well have done this research before applying.

Avoid being swayed by gossip about what is happening in an organisation. Remember, it is often one person's opinion and as we are all, thankfully, individuals we don't think or react the same way.

Here are some brief pointers on interviews:

- It is a rare person who is not nervous in an interview. The people interviewing you will understand this.
- Make sure you are on time for the interview. Try not to be too early. Seeing other candidates leave the interview, especially in the small world of libraries where so many of us know one another, can lead to a destabilizing little voice echoing in your ear, "I'll never stand a chance now".
- Presentation is everything. I do not care what kind of organisation you are going to be working for, first impressions matter. Be well dressed, smart and clean (including fingernails). Have good breath and no hangover or bloodshot eyes. You may think that no one would go to an interview with a hangover or dirty clothes but you would be surprised.
- Presentation in many organisations is vital. If you are uncomfortable wearing suits, ties or conventional clothing you may not be successful in an interview with a law firm if you turn up in jeans. While the skills and what you have to offer is important, if clients do not have any faith or confidence in your ability based on your initial presentation, why would they believe that your skills and

capacity could possibly do that further down the track. I am aware that EEO regulations are meant to ensure that there is no bias in appointments of staff but be realistic about the environment you want to work in.

- Greet the interviewers with a handshake if offered, look them in the eye and continue to maintain eye contact with them throughout the interview, preferably not a piercing one that makes them feel that they are under the microscope!
- If a question is asked that you need time to consider, say that. Silences are not uncomfortable – just let them know that you wish to make a considered reply.

Finally, the reasons why one candidate is successful in an interview cannot be solely based on skills and experience. More and more importantly is the factor of fitting in with the organisation's culture, values and expectations. If you are looking to move into a special library environment do not think that you can do so based solely on skills and what you have to offer. A primary focus in all libraries is the customer and meeting their needs.

Matching your needs to the needs of the organisation you plan to work for will ensure that the relationship you have if successful during the interview is one where there is growth, development and opportunities. Good luck with your job hunting.

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# A note from York – Changing JOBS and COUNTRY

After 13 years at the University of Queensland Library, Ruth Foxlee recently took up a position with the Cochrane Wounds Group in the UK. Ruth gives her 'appraisal' of this significant life change.

It's 4pm and dusk is beginning to fall. Such is winter in the north of England, though York, the city where I now live and work, is not really considered that far north by true northerners. For 13 and a half years I had worked at the University of Queensland (UQ). For the last four of these years I had been seconded to work half-time for the Cochrane Acute Respiratory Infections (ARI) Group as a Trials Search Coordinator (TSC). Working for the Cochrane Collaboration proved to be an enriching experience personally and professionally, not to mention being a gateway to international travel. The Collaboration has been referred to as 'cult-like', I'm not sure how fair that is but as an organisation it certainly relies on the dedication of contributors both paid and unpaid. Try as I might I could never keep my TSC job within the confines of a 9-5 day so there's no denying that trips to Barcelona and Ottawa were sweeteners. However, beyond that, I learned a great deal about systematic reviewing and the challenges of getting evidence into practice. I authored a Cochrane review, helped train others in systematic review methodologies

and along the way developed some useful skills.

To continue my association with the Cochrane Collaboration seemed a natural thing but the ARI was experiencing funding difficulties so when a number of TSC posts came up in the UK I considered them seriously. I applied for three posts in London, Manchester and York, but it was the post in York with the Cochrane Wounds Group (<http://www.york.ac.uk/healthsciences/gsp/themes/woundcare/Wounds/>) that held the greatest interest for me. I always considered myself an outside chance for all of these jobs because whoever employed me would need to apply for a work permit on my behalf as I have no other ties to the UK. I considered this to be a significant barrier, and although that turned out not to be the case it did add to the great length of red tape that had to be unravelled in order for me to get into the country. Anyone considering a move to another country needs to practice patience. The application for a work permit was completely out of my hands. This was all handled by the University of York who had to demonstrate to the Home Office



ABOVE: Ruth models the Drizabone poncho UQL friends and colleagues gave her as departure gift.

that a non-EU citizen was the best person for the job. Once a permit had been granted I applied to the British High Consulate in Canberra for a work visa. Contrary to dire warnings about delays on the Consulate website, my application was processed very quickly and in under a week I was notified that I had a visa for the term of my contract.

Resigning from the University of Queensland Library (UQL) was a strange experience. I was excited at the prospect of a new job in a new country but a little mournful at the prospect of leaving the organisation I had worked at for over 13 years. It was the generosity of the professional development programme at UQL and their willingness to release me to work for the Cochrane Collaboration that enabled me to develop the skills I needed to get the UK job. But the resignation went in, the packing got done and on Oct 11 I arrived in the UK. On Oct 12 I had my first day as TSC with the Wounds Group (my choice!) and I haven't had much time to catch my breath ever since.

The Wounds Group operates differently enough from the ARI Group for the transition to be challenging, however the basics of the job remain the same – I prepare and maintain the Group's Specialised Trial Register and provide literature search support



LEFT:  
Department of  
Health Sciences  
University of York

[Continues on p12...](#)

# EBSCO product updates

## Announcing EBSCO's HEALTH INFORMATION PORTAL (eHIP)

EBSCO's Health Information Portal (eHIP) has been designed specifically with health libraries and health departments in mind. eHIP provides the technologies, development capabilities, and support and training systems to provide better service and value for money than is currently being offered in Australia.

eHIP provides the following compelling advantages over our competitors:

- An up-to-date listing of all individual resources that is updated daily.
- Intuitive, seamless linking from bibliographic resources to all available full text based on this up-to-date listing.
- Total integration via EBSCO's unique SmartLinking technology
- Usage statistics that measure detailed use of the federated search engine, use of title links, linking from bibliographic resources to full-text, session information of the eHIP service, usage statistics regarding individual resources, and more.
- EBSCO's customer service and regional office network that provide a depth of content knowledge, technological expertise, and industry experience well suited to the needs of Health libraries.

### eHIP's components

eHIP comprises the following features:

- an up-to-date title and resource list

- a subject browser
- a link resolver that links users from a bibliographic reference to available full-text
- a federated search engine – a thesaurus is also planned utilising an enhanced MeSH subject listing
- a table of contents, and search alerting system
- Serials bibliographic database

### Key enhancements increase functionality of EBSCO A-to-Z®

To meet the demands of its growing customer base, EBSCO has recently enhanced its A-to-Z® title listing service with several new features, reducing the administrative demands of managing electronic resources. Enhancements include:

- A new look for the Reader Site Titles Tab, which now features a new, more user-friendly look.
- The ability to customise your Reader Site Index Tab – For the Reader site Index tab, you can opt to: display a custom message for users (managed within the Site Customisation feature); display custom notes (managed within Notes and Icons); display custom package-level URLs (managed within Collection Editor); display custom packages (managed within Collection Editor; the default is not to display custom packages); and hide managed packages (managed within Collection Editor; the default is to display managed packages).
- The ability to upload online ISSNs for Custom Titles

– Customers can upload their online ISSNs for custom titles, and they will display on the Reader site.

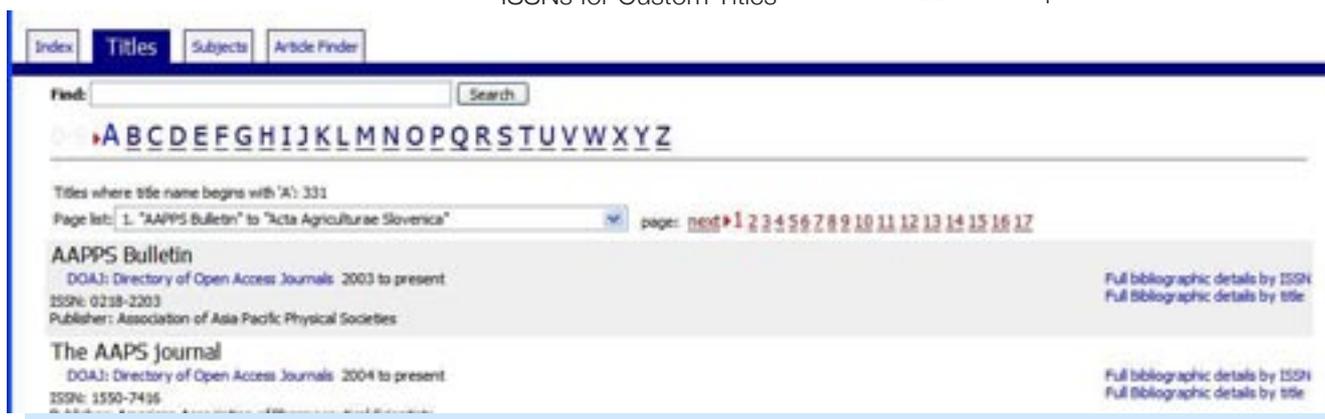
- Unicode characters now visible in Notes – You will be able to display non-English text and symbols in your custom note labels and text fields (in the Notes and Icons feature), which now accommodates Unicode.
- Greater password security – To ensure a greater level of security for your account, passwords will no longer be visible from the Account Settings page (you can still edit your passwords from this page).
- Fields removed from Reader Site if no information is available – To streamline the Reader site, fields that contain no information will no longer display. Therefore, the "Field Behavior" option will be removed from the Display Options tab under A-to-Z Reader site customisation.

### New overlap analysis feature coming soon

Customers will soon be able to run various reports to quickly discover the overlap in coverage between two databases, or two sets of databases, in your library's collection. They will also be able to discover which packages include titles that are available nowhere else in their collection and which packages include titles that are completely overlapped (all included in other packages in their collection).

### Want more information?

For information on anything mentioned in this column, or on any of our other products or services, contact your local EBSCO Representative.



# Take your knowledge on tour

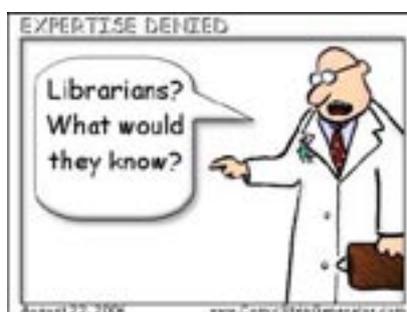
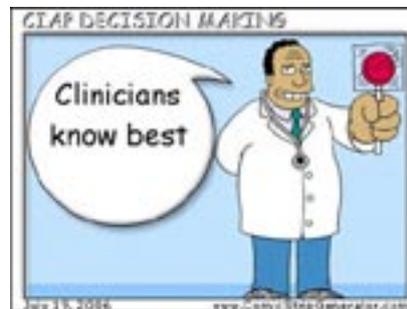
This year's Internet Librarian International conference was held in London from 16-17 October. Two of our own, Graham Spooner and Gillian Wood, presented a paper on the role librarians have played in the development of CIAP. In this report about the conference, Graham Spooner encourages more Australian health librarians to consider presenting at this international gathering.

Gillian Wood, from NSW Health, and I recently attended the 8th annual Internet Librarian International Conference in London. There we presented a paper, *Back Seat Driving – how librarians in NSW, Australia have added value and expertise to a clinical information system*. The paper looks at some of the specifics of the influence and power librarians have wielded within the initial Clinical Information Access Project (<http://www.ciap.health.nsw.gov.au/index.html>) and continuing program, outlining what we have learned and, also, where we have been burned. The paper is available at the conference website at: [http://www.internet-librarian.com/2006Presentations/A105\\_Wood\\_Spooner.pdf](http://www.internet-librarian.com/2006Presentations/A105_Wood_Spooner.pdf). [an excellent, well measured review. Ed]

Though it was my second year in a row as a presenter I appreciated having Gillian along as a co-presenter this time around. As the organisers seem keen to promote the "international" aspect of the conference, there seems to be a good opportunity for Australians to continue being involved. Free registration is offered to presenters so start thinking about a paper for 2007 to keep the Australian flag flying. Sponsorship funds by various vendors assisted me in 2005 (OVID) and both Gillian and myself in 2006 (Ebsco, OVID and Swets) to get to and stay in London.

The conference is promoted as "the only international conference that focuses clearly and intensely on information professionals and their use of the internet as a vital workplace tool". Presenters came from 50 different countries and kudos should be given to those who manage to present their papers in English rather than their native tongue.

The theme for this year's conference was touted as being "about the dualities that govern the



daily worklife of today's information professional – discovering new resources and demystifying Web technologies." Topics included:

- Library 2.0: Is it more than just a buzzword?
- Open Access, Open Source: How does this affect information storage and retrieval?
- Internet Research Intricacies: Is there life beyond Google?
- Outreach: How can we best serve geographically disbursed clientele?
- Teaching and Training: What techniques work best?
- New Technologies: Where do blogs, podcasts, screencasts and wikis fit?
- Search: What's new in the search engine space?
- Collaboration: How will social software affect information professionals?
- Digitisation: Can we really digitise everything?

A number of speakers at the 2005 conference reprised their papers for this year's conference, updating them with the year's developments. A good example is Karen Blakeman's Out-Googleing Google: *Finding What Google Misses*. This presentation ([http://www.internet-librarian.com/2006Presentations/A204\\_Blakeman.pps](http://www.internet-librarian.com/2006Presentations/A204_Blakeman.pps)) offers a great overview of developments in search engines, their progress and when they are best used.

Michael Stephens (of "Tame the Web" blog fame - <http://tametheweb.com/>) and Rob Coers also added 20 more training tips (<http://www.tametheweb.com/ili2006/CoersStephensTechTraining.ppt>) to the 20 they presented last year. I found their ideas on

Continues on p12...

Graham designed these comics using <http://www.comicstripgenerator.com/> <<http://www.comicstripgenerator.com/>> to add a bit of humour to his and Gillian's ILI2006 conference presentation on CIAP. Not all made the final presentation but those familiar with CIAP's history will appreciate the humour!

content to include in librarian-organised training very interesting. If you are already running training sessions at your organisation or are considering doing this, both their 2005 and 2006 presentations are worth looking at.

Library 2.0, blogs and wikis feature in many of the papers. Locate these by browsing the presentations on the website at <http://www.internet-librarian.com/presentations.shtml>. Brian Kelly's paper on his personal experiences with wikis is particularly worth checking out (<http://www.ukoln.ac.uk/web-focus/events/conferences/ili-2006/talk-2/>).

The trade exhibition had grown somewhat since last year, although it still has a long way to go to equal that of our Online Conference. Several laptops for checking email were provided this time as well, the lack of which seemed a little strange last year.

On a personal note, Gillian preceded the conference with some time on a bicycle in France while I motored through parts of Scotland, France and Spain afterwards – just another bonus of participating in a London-based conference!

Graham Spooner  
College of Nursing (NSW)  
GSpoooner@nursing.aust.edu.au

to Cochrane authors. The job of a TSC is not so different from that of many medical librarians, just a bit more specialised and with a reduced information skills teaching component. That said I have already been enlisted to teach students in a Masters level systematic review course about the finer points of rigorous literature searching. It is fair to say that I miss having regular contact with fellow health librarians. Dividing my time between Cochrane and Herston Medical Library enabled me to transfer knowledge and skills back and forth across roles. The library and information environment changes so rapidly that one's knowledge can become out of date quite quickly so it will be important that I develop alternative strategies for staying current. I hope to form links with the University of York Library (<http://www.york.ac.uk/services/library/#>) and the Centre for Reviews and Dissemination (<http://www.york.ac.uk/inst/crd/>) with a view to participating in local professional development activities. I also hope to enrol in one of the taught Masters programmes offered here in the Department of Health Sciences.

Beyond the changes associated with starting in a new job there is the challenge of living



in a different country. I have lived in the UK previously and visited several times over the past two decades, so the way of life here is not entirely unfamiliar to me. Besides Australia and the UK have key similarities; we share a common language (roughly), we drive on the same side of the road and we're both obsessed with sport. But in other ways our national characters are completely different and I find myself appearing so obviously alien at times. I want decent service and a hot shower with moderately good water pressure – these desires single me out as a foreigner immediately! Any Brit knows that they're both silly pipe dreams.

Weather shapes culture in many ways and the weather here can be dire at times. Nevertheless the British climate is what gives the country its beautiful paleness. One has to balance the effect of not being in real sunlight for days on end (depressing) with that of seeing the spires of York Minster bathed in cold, shimmering light (breathtaking). And on that note I will head out into the 5pm night. I think it might be sleeting.

Ruth Foxlee  
Cochrane Wounds Group (York)  
rf518@york.ac.uk

### AUSSIE EXPATS IMPACTING ON BRITISH LIBRARIES

Arriving at ILI2006, it was startling to suddenly discover that Aussies, though small in number, are having a large impact on some aspects of British libraries. For example, in the first session, Brian Kelly, from the University of Bath, alluded to his colleague, Kara Jones. Kara is the Subject Librarian for Biology and Biochemistry, Computer Science, and Mathematical Sciences at UB and an expat Australian doing great things in her position – just trying things and seeing how they go. It's very L2.0 (for example, check out <http://bathsciencenews.blogspot.com/>) and seems a long way away from the very formal

structures I associate with British libraries. From what I could gather there are a number of Australians, like Kara, working in British libraries that are putting their strong IT backgrounds into practice.

Gillian Wood  
NSW Health  
GWOOD@doh.health.nsw.gov.au

LEFT: Graham Spooner and Gillian Wood (middle) with Aussie expat librarians at ILI2006.



ABOVE RIGHT: York Minster

LEFT: Mickelgate (one of the old city gates)

# INFORMATION MANAGEMENT as a unified discipline\*



Aimed at providing food for thought, Left Field invites authors from outside the field of library and information science to deliver their views on a range of topics of potential interest to HLA members.

Until quite recently, Information Management (IM) practitioners have practiced their craft in isolation. Typical stereotypes and perceptions often portrayed records managers belonging to the basement, IT specialists in high paced I can do anything settings, Librarians in I go on managing my collections and serials mindsets and business users in why does IT not solve my problems as expected exasperations. This era is coming to an end. Why? The commoditization of IT, the increasing pressure to achieve better cost-efficiency and higher management expectations are forcing IM to reorganize itself into a coherent field of practice. IM is becoming more “unified” or “integrated”.

IM occupies the problem space set out in the table below. That 3-D grid, not meant to be exhaustive, has over 360 intersection points. It is not surprising that large organisations have difficulties leveraging the best of records management, library management and IT together. These narrower disciplines do not, typically, approach IM holistically.

IM leaders and managers need frameworks to practice their craft. Accountants have their financial reports and Generally Accepted Accounting Principles. Project managers have their Work

Breakdown Structures and charts. Information managers need Strategic Information Management Frameworks (SIMF). SIMFs help organizations to explicitly consider and define the following elements:

- Information Management Vision
- Information Management Principles
- Information Management Directives
- Information Management Architecture

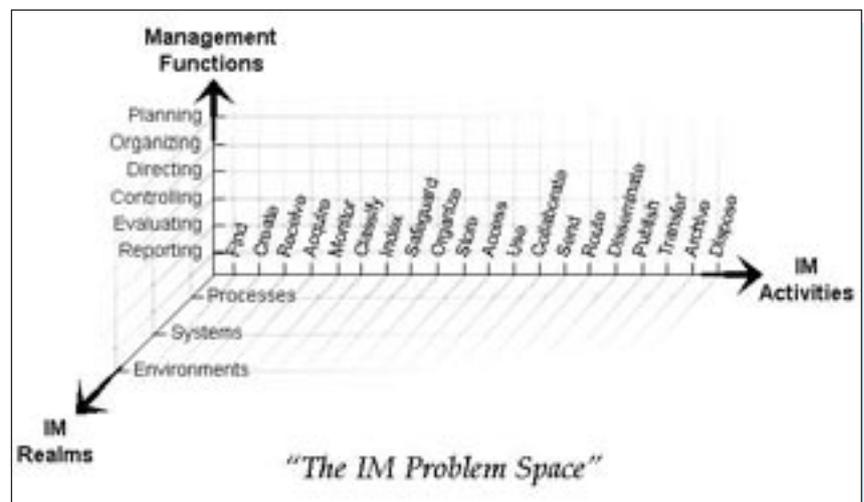
The last element of SIMFs, the IM Architecture, includes all necessary and sufficient components that are needed to deploy and maintain an integrated information environment:

- Information Context (the business)
- Information Requirements
- Information Resources
- Information Activities
- Information Roles, Services & Products
- IM Standards/Education/Training
- Recorded Information (includes data, records and publications)
- Information Technology
- Architecture Optimization

More information on all these components can be found in the 2005 Fall issue of the Canadian Military Journal ([http://www.journal.dnd.ca/engraph/Vol6/no3/06-Information2\\_e.asp](http://www.journal.dnd.ca/engraph/Vol6/no3/06-Information2_e.asp))

How integrated is Information Management in your organisation?

In something a little different for the Left Field column, HLA News has reproduced a post from the now “retired” blog, *Information Management Now*. In his post blogger, [PATRICK CORMIER](#), argues that information managers and leaders, which includes librarians, need to take an increasingly more holistic approach to the practice of information management and require a framework within which to do so. Patrick Cormier is a project director in the Canadian federal government. He is also the founder of the Government 2.0 Think Tank (<http://gov20.info>).



\* Cormier, P. (7 Dec 2005). Information Management as a unified discipline. *Information Management Now*. <http://imbok.blogspot.com/2005/12/information-management-as-unified.html> (1 Dec 2006).

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# Trish Aguado retires...

Angela Smith pays tribute to Trish Aguado who, after 28 years at the Gardiner Library Service, 19 as Manager, recently retired.

With the beautiful Lake Macquarie as an inspiring backdrop, colleagues, both past and present, family and friends came together on Friday, October 6 to celebrate the retirement and contribution that Trish Aguado has made to the library community.

Her career began at Burwood/Drummoyne Public Library back in 1974, and in a move from Sydney to Newcastle in 1978, Trish undertook a position as Deputy Manager of the Gardiner Library Service [John Hunter Hospital, NSW] before becoming Manager of the service in 1987 after the departure of Monica Davis.

Trish has achieved much in her 28 years with the Gardiner. Many of you would be aware of her work both as a member of or in an executive role on many committees and Associations; and as such she has helped steer the development of health libraries and of health library professionals at the local, state and national levels.

Trish has always been at the forefront of opportunities taking place within our profession and keen to embrace emerging technologies to improve and expand services for the Gardiner's clientele. Career achievements in the 1980's included strengthening the relationship between the University of Newcastle and the Gardiner Library Service; coordinating inaugural teaching programs of Medline on CD-Rom for University of Newcastle undergraduate and postgraduate medical students; assisting in gaining a five year National Health & Medical Research Council grant worth \$100,000 to train undergraduate medical students in the use of Medline; and pioneering programs for Australian Medical Examining Council (AMEC) student doctors.

Trish's vision and entrepreneurial approach saw the Gardiner grow

from just 2 FTE staff to 17 FTE and from one teaching hospital library to three, plus six satellite branches spread throughout hospitals and health units in the Hunter Region. In 1994, Trish established the Gardiner's revenue operations, the first health sciences library in the country to establish in-sourcing services including database development, knowledge management, indexing services and library management for clients both within Hunter Health and the private sector. In 1999, Trish guided development of the Gardiner's website ([www.gardinerlibrary.com](http://www.gardinerlibrary.com)), the first commercial website for Hunter Health complete with e-commerce capabilities to better streamline inter-library loan processes and open the Gardiner's collection and services to a global market.

More recently Trish guided the Gardiner's cultural development by installing an Artist-in-Residence, and actively promoting the Area Health Service's Arts for Health Program by staging an art exhibition of works by local TAFE students from drawings of the library's specimen collection. The Gardiner has held two book launches and curated its own exhibition of works and items of



ABOVE: Trish Aguado and Linda Mulheron (photo courtesy of Linda Mulheron)

historical significance from the collection. These activities have been enjoyed by staff and clients, and have assisted in raising the profile of the Library and expanding its significance at the organisational level.

Trish has been the recipient of numerous awards in recognition of her value to Hunter Health and to the library community. Trish is a published author and has presented numerous papers at library and medical conferences. Trish will be remembered by her staff as an outstanding manager, a gifted mentor and a true and valued friend. The staff of the Gardiner Library Service and the library community will miss her contribution greatly. We wish her well as she embarks on a new journey and enjoys more time with family and friends.

Angela Smith

Gardiner Library Service

[Angela.Smith@hnehealth.nsw.gov.au](mailto:Angela.Smith@hnehealth.nsw.gov.au)

BELOW: Gardiner Library staff members, Angela Smith, Barbara Douglas, Trish Aguado and Adele Mascord (photo courtesy of Linda Mulheron)



# Tassie beckons for ANN ALDERSLADE

Ann Alderslade's career has spanned some 42 years. The following chronicle of Ann's working life – describing her own 'potted history' – first appeared in the Aug 2006 issue of *interface*, the newsletter of the ALIA Top End, and is reprinted with permission.

Ann Alderslade, Library Manager, Department of Health and Community Services, has resigned to take up retirement in Tasmania.

Ann started her career at the State Library of South Australia in 1964. She worked in the Children's Library and the Adult Lending Service and on a Mobile Library. In 1968, she became a School Librarian. After a brief stint in what was then a Teacher's College Library, she left Adelaide and went to Canberra and was working in the Library at Duntroon (before ADFA) during the Vietnam War. After two winters in Canberra she moved to Sydney where she worked in cataloguing and readers services at Macquarie University. She then made her first venture into medical librarianship by getting a job for the multinational drug company, Roche.

After a few years on "maternity leave" (which didn't exist at the time), the Roche Research Institute closed down, and Ann and her husband, Phil, ended up in Darwin in 1981. In 1982, she returned to the workforce, very part-time as a copy cataloguer for NTLIS.

In 1983, she went to work in the Mines and Energy Library for a month and ended up being there for three years. During that time, the National Library ran a land line from Canberra to Darwin, and NT Libraries were connected to ABN. In 1987, she took a job as Reader's Services Librarian at the newly formed University College of the Northern Territory. This Library was a challenge in that they had very few books and no subject catalogue. However, she did have an office with an ensuite loo. Then John Dawkins came along and merged all tertiary institute libraries

so the library of UCNT merged with that of the then Darwin Institute of Technology to become the Northern Territory University Library.

By this time Ann's children were in the last years of primary school and she believed she should be spending more time with them. So she took a part-time job as the Academic Assistant to the Director of the Menzies School of Health Research in 1988.

As part of her role at Menzies, she spent quite a bit of time in the Library at Royal Darwin Hospital. When the Librarian left in 1989, she was seconded to act in the position until it was filled permanently. She then realised that it was a job of enormous potential and had to compete for it. So, she has been there ever since. However, the job and the Department have constantly evolved over that period of time.

Ann was involved with two Darwin conferences: the ALIA Conference in 1986 at which she presented a paper about IT for special libraries in the NT which probably would make interesting reading today. She was also involved with the RAISS Conference in 1993 and once again presented a paper with Lu Steuart and Rennison Robb – that paper has better stood the test of time although they didn't foresee full text electronic resources.

Ann was the first special librarian to get elected to the ABN Network Committee; Warren Horton 'excommunicated' her when she took the job at Menzies. She was President of the Special Libraries Section on two occasions and President of ACLIS. She represented the NT on ALIA General Council twice,



and was on the Council that voted to relocate ALIA national office from Sydney to Canberra. On the second occasion, she was part of the vote to abolish General Council and set up the current Board. For many years she was Professional Development Officer for the NT Branch of ALIA and helped to create a number of PD events.

Ann says she's been lucky in working with such a great group of colleagues in the NT. She would like to mention, in particular, Anne Wilson, Lu Steuart, Cherie Cable, Colleen Pyne, Bid Rose, Vanessa Fleming and Mary-Anne Meginess. She would also like to pay tribute to all her staff over the years who have survived her management style.

Ann's career has spanned more than 40 years, and half of it has been in the NT. Ann says, "It is possible to practice 'adventurous' librarianship in the NT – we are not quite so constrained by tradition up here".

All the best Ann.

## Sad times and fond thoughts

Our thoughts and best wishes are with Josephine Marshall (Librarian, The Walter and Eliza Hall Institute of Medical Research (WEHI)) on the passing of her partner and soul mate David Grant on Thursday 30 November, 2006.

# Information *Rx*

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Join your colleagues in Sydney for a two day satellite symposium to Online 2007, February 2-3 (Friday & Saturday), at the Sydney Convention Centre.

We'll be looking at the indications and contraindications for services and innovations, at the vital signs of our systems and our profession and at actions and reactions to change and innovation.

- National approaches to health information and the state of the nation's health libraries
- Library / Web 2.0 – digital divides between libraries and how to overcome them
- Search filters and expert searching
- Panel on trends: EBL; Clinical Librarianship
- Virtual reference update – the latest with Chasing the Sun
- Future directions for HLA – round table and general meeting
- Group meetings: GratisNet; Chasing the Sun
- Anne Harrison Award nominations open
- Symposium dinner, Friday night
- Trade Exhibition

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**HLANEWS  
DETAILS**

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## Contributions

Contributions to this news bulletin are welcome. Please send by email to the editor (details above).

See the news bulletin online at <http://www.alia.org.au/groups/healthnat/hla>

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