

# National Newsletter National Newsletter National Newsletter

## The librarian as entrepreneur

**I**n the *Staying Alive in the 90's* series which have appeared in the past three issues of this newsletter we have investigated a range of options for cost containment, improvement of customer service and generating funds in an adverse economic climate.

In this final article we will be taking a brief look at the means by which Melbourne teaching hospitals are raising money to support core services by providing chargeable services to non-traditional library users. This information is based on a survey conducted by Monash Medical Centre libraries in December, 1993, and updated in December, 1994.

It seems that most hospital libraries in Melbourne either have or are investigating, entrepreneurial services selling a variety of library services and products to the public. The range of services mirrors traditional library service and utilizes the exist-

ing library infrastructure so, in most cases, there is no need for extra investment in staff or equipment.

The range of customers is varied but seems to be mainly professionals who have been accustomed to library services but for some reason have been cut off from direct access to libraries, e.g. general practitioners, specialists in private practice, ex-members of hospital staff and foreign doctors seeking registration in Australia.

Other major groups of customers are commercial enterprises requiring specialist medical information for specific projects, e.g. pharmaceutical companies, patient education and students requiring special projects.

There is certainly a market out there for our services but how do we service it given the competing demands on our time and energy?

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# Copyright: Publishers should give libraries a break

In response to last month's article "*Will ILL be the death of STM publishing*", Julie Hooke from Royal Adelaide Hospital puts forward some salient points from the library side of the periodical publishing business.

**T**he blood-sucking leeches of the publishing industry are whining about their profits and making noises about imposing further charges for the use of their product on the market sector which has been sustaining them for so long. Perhaps it is time to remind them that the exploitation they perceive in document delivery services is a direct result of their own greed. I do not pretend to speak for all libraries, however, if my own is reasonably typical, I would like to offer the following thoughts for consideration.

1. Our book and journal budget has not declined. Based on a study I did over a year ago, average journal costs increased approximately 250% over the period 1983 to 1993. Our budget increased by about

***"If journals were not so expensive more libraries could afford to buy more of them"***

65% over that time. I understand from the University of Adelaide Librarian that his study covering the period 1984 to 1994 yielded the same sort of figures for a larger, more diverse collection.

and more of my book and journal budget has had to be directed towards the purchase of periodicals. There has also been a decline of 29 subscriptions during that period.

3. While average journal costs have increased by about 250%, subscriptions have dropped by 9.2% and interlibrary loans have increased by 7.6%.

4. While it is difficult to calculate the various intangibles connected with having your own subscriptions on hand a basic guide to cost efficiency per journal can be made by dividing the subscription cost by the number of ILLs. A selection of our 1993/94 costs included: The American Journal of Otolaryngology at \$298.75 per loan, Clinical Otolaryngology & Allied Sciences at \$92.74 per loan, Journal of Gynaecologic Surgery at \$79.17 per loan, Cutis at \$69.34

per loan, Seminars in Urology at \$38.80 per loan, Perfusion at \$23.31 per loan, Comprehensive Psychiatry at \$14.68 per loan, Aviation Space & Environmental Medicine at \$7.76 per loan, British Journal of Surgery at \$1.90 per loan, down to two copies of the New England Journal of Medicine at 58 cents per loan.

5. It appears to me that the publishers of the titles at the higher end of the price scale have been handsomely rewarded for, at times inferior products; or at least ones which, although demanded by our senior staff, was not considered useful enough to be borrowed by our readers. Thirty-two titles which came in over the \$39.00 per loan mark will be examined for cancellation this year. While ILLs for these "rare" titles does balance the scales a little in their favour, we cannot, justify the purchase of such titles for the distributed national collection.

The vital question we should be asking the publishers is: What level of usage of your product do you consider fair for the price you charge, and, what is the true market value of an article, an issue?

If you examine the cost per issue of some journals, it is clear that quite a few decent-sized text books could be purchased for the same money. Haworth and, particularly, MCB University Press journals are a case in point.

6. With the cost savings realised in many industries through modern technology and quality business practices, the need to increase product cost by 250% in 10-15 years must be fairly indefensible.

This hospital, and many like it, is expected to provide an equivalent quantity of high quality service each year while having millions of dollars shaved off the previous budgets year after year. What is so different in the publishing industry?

7. If journals were not so expensive more libraries could afford to buy more of them. With annual price increases of 10-15% (fairly usual), it is surprising that David Brown claims that an erosion rate in general subscription income to publishers of 3-5% is creating such havoc.

8. I have heard it claimed that journal publishers have to pay authors to write for them. In 20 years at this institution I have never met any author who claimed to have been paid for having an article published. I have met one, however, who could quote the charge he had to pay (per page) to have his article published in an American journal.

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# ALIA Health Libraries Section Annual General Meeting Agenda

The Health Libraries Section Annual General Meeting will convene at 5:15pm  
on 28 August, 1995.

The Agenda items are as follows:

1. Present and apologies
2. Minutes of the previous AGM
3. Business arising from the minutes
4. Correspondence
5. President's report
6. Treasurer's report
7. Report on copyright and health libraries
8. Anne Harrison Award
9. Distance education scholarships
10. International congress Australia 2005
11. Other business

## Conference Update

Registrations for the conference are now nearing the 600 mark with 189 first time registrants.

There will be lunch-time "getting to know you" sessions and early morning walking/power walking/or jogging sessions for the energetic at 7:00am every morning. As with the Specials conference at the Gold Coast EBSCO Australia will be publishing the daily conference newspaper EBSCO Express which will keep us all up to date on what's on where.

Remember, the GRATISNet AGM will be held on Monday, 28 August, at 12:45.

*Kay Vincent  
Liverpool Hospital*



## HEALTH LIBRARIES CRUISING DINNER SYNERGY CONFERENCE 28 AUG 1995 SPONSORED BY HINTON INFORMATION SERVICES

**T**he Health Libraries Section dinner will be the highlight of the Synergy in Sydney conference and we already have more than 100 bookings! While the dinner will be an wonderful occasion to present the Anne Harrison Award it will also be an excellent networking opportunity. Oh yes, it will also be a lot of fun.

The dinner will be held at National Maritime Museum and dress in a nautical theme, while optional, will be highly regarded and the best costume will win a special prize. The jazz quartet *Notoriety* will be along to make the party swing so we know that this will be a great night with great company.

We obviously have been aware of possible financial restraints and trying to keep the costs down for the many poorly paid Health Librarians so the cost

of the dinner is only \$45.00 (there will be a cash bar).

Ruth Mitchell (NRRR), the irrepressible Geraldine Barkworth (EBSCO Australia) and I form the HLS social committee. Ruth and Geraldine have been a wonderful comrades contributing great ideas and enthusiasm but also backing this with efficiency and productivity. Hinton Information Services kindly agreed to sponsor the dinner and we would like to thank Katie Blake, Manager Health and Medical, and her assistant Alison Moon for their assistance.

We look forward to seeing you at the dinner and can promise you that it will be one of your enduring memories of the Synergy conference.

To book call ACMS on (02) 332 4622.

*Cate Dawson (NMS)*

# The Librarian as entrepreneur

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## 1. Subscription Services

A popular method is to charge "outside" users a fee for access to a variety of library services over a six-monthly or annual period. Fees vary but \$100 per annum with special rates for ex-staff members and specific services seem to be the norm.

## 2. Specific Services

Most hospitals offer access to specific services at special rates which may vary depending on the customers requirements. Samples of such services and average rates are:

- CDROM searches @ \$10 - \$15 each
- Interlibrary loans @ \$6 to \$15 each
- Photocopies of journal articles @ \$5 to \$8 each
- Access to word processing @ \$5 per session
- Reference services at negotiated rates.

## 3. Contracts

Two hospitals offer services on contract to amalgamated hospitals, private hospitals and a university. Charges for such contracts vary from \$150 per month plus the salary of a staff member, \$50 per person per annum, through to specific charges for services with agreed limitations.

This type of entrepreneurial service is likely to grow as the Victorian government presses ahead with hospital amalgamations as outlined in its recent strategic planning document, *Victoria's Health to 2050: Developing Melbourne's Hospital Network*.

## 4. Special Services

One library offers a variety of information products tailored to the individual needs of its clients. Current awareness services are offered at \$50 per year for a monthly print-out and information for VCE CAT topics are compiled and priced according to the amount of work involved in their preparation. This service has proved to be hugely successful.

Other permutations of these entrepreneurial activities abound. Service charges are outstandingly low compared to commercial information brokers where the cost of an average librarian-mediated

CDROM search could be as much as \$110 per topic and photocopies are provided from \$20 per article, \$30 per item for document delivery, and \$120 for access to an extensive library.

There are many advantages in establishing entrepreneurial services besides the welcome extra injection of cash for the library budget.

Such services encourage a business/competitive awareness in the library staff and appeal to hospital administrators who are usually advocating competitive business models to their departments.

However, there are several problems which should be considered carefully before sallying forth into the commercial world. Hospital librarians report that they lack the time to devote to entrepreneurial services in the current cost-cutting environment of low staffing and high workloads.

Also, library staff can be significantly diverted from providing services to the primary user groups by the attraction of quick cash from outside users. Private customers are usually quite demanding and have high service expectations for the low fees charged by most hospital libraries.

Monetary returns are quite low for the amount of library staff effort. Also, customers, especially from the medical professions, are usually unused to paying a realistic fee for library services they are accustomed to receiving free of charge.

Finally, there are potential legal problems in providing entrepreneurial services. These include the legal/ethical implications such as those which have arisen in the USA where legal proceedings have been initiated by private information brokers arguing that public service organisations charging for library services at unrealistically low fees undermines their ability to conduct competitive business.

Also, there may be copyright problems associated with marketing copies of copyright material for profit without compensating publishers and authors.

The survey indicated that most Melbourne hospital libraries offering entrepreneurial services were not concerned about these legal problems and were pressing ahead, for financial reasons, towards the new model of the business savvy, high-tech, competition oriented library of the next century.

continued next page

***"There are potential legal problems for libraries offering entrepreneurial services"***

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We hope you have enjoyed this series and found some of the ideas useful in keeping your library alive in today's increasingly challenging economic environment. We hope that in future it will not be a matter of staying alive but that we will all be starting to thrive.

Andrew Rook  
Adam Clark  
Monash Medical Centre

The authors wish to thank all of the librarians who responded to our surveys and acknowledge their kind assistance in preparing these articles.

The editor would like to thank the authors and the editors of **Health Inform** for allowing the reproduction of these articles.

## Leigh Oldmeadow, Manager of Moninfo, responds to *Staying Alive 4* (Entrepreneurial Services)

I was very interested in *Staying Alive 4* (Entrepreneurial Services) describing the activities of hospital librarians and their attempts to bring in extra revenue. It must be extremely difficult to continue to provide the information services that are essential to hospitals under the current funding restraints.

My concern is that the fees charged (outlined on page 4 of this issue) for these services are too low. As a full cost-recovery, fee-based information service, Moninfo's charges reflect market rates and all the costs associated with providing the service so I am amazed that there would be any money made on document delivery that was charged at the rate of \$6.00 to \$15.00 per request or a Medline CD ROM search at \$10.00 to \$15.00.

Is our expertise worth so little? Most CD ROM searches, if they are thorough, require at least an hour from the time the client describes the information they want to the handing over of the results. I do not know of any profession that charges as little as \$10.00 to \$15.00 per hour! If all costs are not being recovered this means that the library is actually subsidising these services to outsiders to the detriment of their primary clientele. It reflects badly on the library profession when we continually undervalue our professional expertise.

## EBSCO Index Medicus Price Study

EBSCO Australia has just released their 1991-1995 Index Medicus price study and it reveals, as if we need to be reminded, that there has been a significant increase in the cost of the subscribing to the bundle of serial titles listed in *Index Medicus*.

The total cost of a one year subscription to all of the Index Medicus titles has increased by 51.4% over the past five years. In 1991 the bundle of 2,386 serial titles cost a little more than \$600,000. The cost of subscribing to the 2,547 titles listed for the 1995 period is \$919,242.

The study also produced some interesting findings about coverage and costs by subject area and country of origin. Basic sciences and research titles represent only 34% of the total Index Medicus list while clinical and patient care titles represent the remaining 66%. Also, titles published in the European Economic Area represent less than half (48.5%) of the total number of titles listed.

During the period the number of US titles listed in Index Medicus grew by almost 100, from 932 in 1991 to 1,021 in 1995, while the number of non-US titles increased by only 61, from 1,457 to 1,526.

For more details of this report EBSCO Australia can be contacted in Sydney on (02) 922 5600

## New Release

**Resources for Health Sciences: a guide for Australia**  
edited by Veronica Delafosse, AusLib Press, 1995.

This new work replaces the ALIA *Recommended List of books, journals and reference materials for small health sciences libraries* and is an excellent resource for all health science libraries.

The book is divided into three sections, books, serials and reference works, and then subdivided by subject. It is a greatly expanded list from the ALIA production with more than 1,000 books and many hundreds of serial titles.

Each entry is indexed by author, title and subject which refers to the main entry by record number rather than page number allowing for easier and quicker location. The layout is fresh and easy to read with plenty of room for marginal notes.

The book does not include computer software or databases and while this may appear to be an unusual exclusion, the range and number of such items may be better off listed in a dedicated directory.

For more details call AusLib Press on (08) 2784363.

# ACLIS National Interlending and Document Delivery Summit

*Report by Anne Fricker*

**T**he National Interlending and Document Delivery Summit was held at the Lakeside Hotel in Canberra on 18 and 19 May, 1995. It was arranged by ACLIS in response to the common issues which emerged in interlending and document delivery seminars held around Australia last year.

Attendance at the summit was by invitation only and the invitation list was carefully arranged to include representatives of all library sectors (including library suppliers). I was very pleased to represent SA Specials and Health and GratisNet.

Representatives of GratisNet had a position paper distributed with registration to all delegates. This was written by the Queensland committee but amended after a lengthy teleconference between the State convenors and the Summit attendees. Apart from a sheet of comments included from the Queensland ACLIS group it was the only position paper.

As a GratisNet representative I responded to a debate between Ray Choate (University of Adelaide) and Arthur Ellis (University of WA) regarding access or ownership. Despite the fact that GratisNet was probably seen as something of an anomaly by many delegates it seems that cooperative networks are frequently utilised by special libraries and so there are many issues in common to specials and health.

The Summit was opened by Helen Hayes (ACLIS President) who was followed by Tom Cochrane (Queensland University of Technology) who presented a paper reviewing developments since 1980.

Judith Greenaway (Monash University) gave an excellent practical overview making comparisons between the Australian ILL system and the UK and USA systems. She commented that Australia fortunately has a national union list (ABN), national networks and has ACLIS as a coordinating body whereas the UK has the BLDS as a national clearinghouse and the USA a multi-priced, fragmented system where prices are often negotiated directly between libraries.

Neil McLean (Macquarie University) stressed the importance of being client driven, noting that library clients usually said that they wanted something urgently whether or not they actually did. He calculated the cost of providing ILLs to be around \$40 for routine loans with 62% being the borrowing library's cost and 38% being the lending library's costs.

Of most concern was a paper dealing with intellectual property and copyright from Philip Griffith (Associate Professor of Law, University of Technology, Sydney). He told the assembled librarians "you lose", believing that the new Copyright Act (due in several years) will see the end of fair dealing currently allowed under sections 49 and 50 of the present Act. The copyright owners are a much stronger group than librarians and will be pushing for everyone to make royalty payments on all copying. Griffith also touched on issues dealing with electronic ILLs, commercial activities of libraries and digital photocopiers.

Geoff Payne (CAVAL) spent much of his time going into detail about emerging document delivery technologies such as ARIEL, MIME and X400 (which I am sure none of us are using yet).

At the close of the Summit, after some reflections by Warren Horton (NLA) and summing up by Derek Whitehead (State Library of Victoria), more than 30 resolutions were considered.

The resolutions of most interest to health and special libraries were that ACLIS was reaffirmed as the library body controlling ILL prices, research and standards, and that ACLIS will continue to lobby for a continuation of copyright provisions favourable to the library community (we won't give in without a fight).

The Summit proceedings will be published but it may be some time before they become available (look out for information in ACLIS News and other library publications). Finally, look out for a national tour by Jamie Wodetzki from ACLIS who will be presenting a seminar on copyright issues.

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**Got something to say?**

**Been to an interesting seminar or conference?**

**Want to tell your colleagues how you did it or find out how to?**

**The HLS NATIONAL NEWSLETTER is your forum for issues that matter to health librarians. Tell us all about it ... [gmanns@ozemail.com.au](mailto:gmanns@ozemail.com.au)**

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# Copying in hospital libraries under threat - update

**I**n the last issue I reported on the implications of the narrow definitions that the Copyright Agency Limited (CAL) was attempting to apply to the terms "research" and "study". Since then I have received a letter from the Australian Copyright Council to whom I had written raising these same concerns as outlined in June's newsletter.

In this letter the view is expressed that a person requesting (or making their own) copies need not be involved in formal study. In other words, "study" could apply to study by individuals for their own purposes if they were enrolled in a formal course or even if they were not.

The letter from the Council does warn that copying for a library user where the librarian is aware that the user intends to give the copy to a third party, (a patient, for example) would be in breach of copyright. The Council also reminds us that multiple copies are, of course not permitted without a licence.

The problem of copying for a library client to research a patient's condition and/or best treatment is still a grey area, however. As regards to this type of copying, the Council did agree to some extent with CAL's interpretation and felt that this could be viewed as copying to meet organisational aims or for the individual's professional interest rather than for research or study. In that case copying could not be regarded as being covered by research and study exemptions.

The problem is that because copying for this purpose has never been tested, advice on how a court of law would regard this in relation to research and study cannot be given with any confidence. Whether researching patient care is "research" for the purposes of copyright exemptions to infringement or merely serving the purposes of the organisation is still open to interpretation.

The Macquarie Dictionary definition of research is "diligent and systematic enquiry or investigation into a subject in order to discover facts or principles". This definition has already been used by a judge in a case in relation to Section 40 of the Act, according to the Australian Copyright Council.

In my opinion, a doctor or other health professional reading (and perhaps copying?) information about a disease, syndrome etc. is certainly undertaking "diligent and systematic enquiry" to "discover facts or principles".

Could it not be argued then, that they are undertaking research, namely "researching" a patient's condition? As things stand under present legislation (the Copyright Act is currently under review) library users complete a copyright declaration stating that the copy is required for research or study.

According to the Australian Copyright Council this "study" does not have to be formal study and I believe that finding out about a patient's care easily fits into a definition of "research" even if, ultimately the research benefits the organisation.

Grahame Manns' point about for-profit organisations made in the last newsletter certainly gives much food for thought for any member employed in the private sector. Research or study exemptions under the present Act only apply to non-profit libraries or archives.

*Graeme Spooner  
Librarian  
NSW College of Nursing*

## HLS National Executive 1995

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**Submissions to the Newsletter can be sent to the editor on diskette in any IBM format or via email.**

*Opinions expressed by authors are their own and are not necessarily those held by their institution, the editor, ALIA or the HLS National executive.*

## Copyright: Publishers should give libraries a break

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Elsevier Science (one of the notoriously expensive publishers) has introduced a scheme (marketing or public relations - take your pick) called the PLUS voucher programme, where their authors can assign credits to a library of their choice for each article they have published. We have one credit so far, which, when the voucher is redeemed, will give us a whopping 2.3% off the cost of an Elsevier journal we buy. You can bet the publisher's annual price increase will far exceed this. Also, it is not clear how such credits can be claimed through subscription agencies.

9. I take exception to the assertion that every library tolerates flagrant breaches of copyright by both staff and readers. The copying performed by staff (in my experience) is very tightly controlled, and readers are advised of their duty if breaches of the Copyright Act seems to be likely. It is the copying outside the library, which is not regulated in any way.

I believe that libraries are being singled out for attention, as they are easy targets and generally compliant/co-operative. Publishers should be far more worried about the copies from personal subscriptions which get passed around from hand to hand and which may be copied in breach of the Act.

10. It is all very well for David Brown to complain about the "distortion to the research information process" if certain esoteric journals bite the dust. This process has already been corrupted beyond belief from its original intention of informing scientific gentlemen of like mind and interests of one's discoveries, and has moved from the dis-

semination of knowledge to the dissemination of profits.

If journals are not viable, perhaps they should be merged with those that are. There is no law which makes it mandatory to hive off knowledge, for publishing purposes, into such narrow sub-specialty groups. (I note that Brown's article has been reproduced from an MCB University Press title; MCB who, according to one subscription agent, raised their prices so much recently that they were inundated with cancellations.)

11. If publishers are so keen to be paid according to the true value of their product, perhaps they should consider replacing subscriptions charges with a licence agreement and supply the original hard copy of the journal to the library free of charge. The library would forward royalty payments to either the publisher or a collecting agency. Publishers of much read journals would be rewarded, and publishers of unread journals might get the hint that they are subsidising a poor performer.

Credit would also be received for document supply to libraries which do not hold the journal. Thus the emerging document supply industry, which makes a profit out of supplying a publisher's product to a third party, could be eliminated, or at least given a run for their money. The dissemination of lists of contents or printed abstracts from the head of the article could be organised (under blanket permission) within the institution to publicise each issue, in the hope of generating more royalties.

By way of a footnote, our top two journals for cost increases from 1983 to 1993 were *The Journal of Advanced Nursing* at 752% and *Anesthesiology* at 564%. The latter was probably worth it as it rated \$5.11 per loan, and proved itself an economical purchase.

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paper, on diskette and magnetic tape formats. Swetscan is supported by a rapid document delivery service direct to the requester's desk.

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