

Telemedicine Canada

Libraries Responding to the Changing Health Care Environments
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I would first like to start out by briefly discussing the current status of health care in Manitoba. As in all provinces, rationalization is taking place. In Manitoba, the provincial government has carried out bed closures and has proposed closing certain community hospitals while changing other hospitals from acute/ambulatory care facilities to long term care facilities. Legislation has just been passed in provincial parliament creating regional health authorities. This is considered a positive move by some experts because health care decision making will be at the community level. However, there is a catch in that the boards of these authorities will not have absolute control. They are called authorities but the boards are politically appointed and not elected. Senior bureaucrats will have the real control. I felt this overview necessary to make the point that we must understand the political environment (which by the way is constantly changing) in order to strategically plan our response to the government agendas that will impact on health libraries. The Manitoba Health Libraries Association (MHLA) has kept up to date with the changing health care environment. Of particular concern to us is that the issue of access to knowledge based health care information is not being properly addressed in the context of cost effective quality health care delivery. The government's focus seems to be on the

systems side of medical information or alternatively described as medical data.

Before I go on to describe a current project MHLA is working on to address the issue of access to knowledge based health care information, I'll review what services exist in Manitoba to serve the information needs of the health care community.

Within the tradition of health libraries, MHLA member libraries have maintained co-operation and interdependency. Our fundamental strategies for expanding information access within Manitoba include interlibrary loan services, reciprocal borrowing privileges (whereby MHLA member libraries within Winnipeg loan materials to each other at no charge and to those libraries outside of Winnipeg at a nominal cost - that being a photocopy of an article or pages from a textbook); the University of Manitoba's Neil John MacLean Health Sciences Library is the main resource library for health care in Manitoba and any library in our province can borrow materials at no charge - however, a charge is levied for photocopies. To facilitate our resource sharing, MHLA has maintained a union list of serials and audio visual materials. Basically we have created an infrastructure for the delivery of health care information in Manitoba.

Building upon this infrastructure, MHLA has proceeded with the co-ordination of implementing DOCLINE within our member libraries. As you know, DOCLINE further facilitates resource sharing while automating the process. As a part of implementation planning, we conducted an informal survey to establish the existing level of technology and access to the Internet among

member libraries. We found that several libraries did not have the minimum required computer equipment let alone Internet access due to chronic under funding. MHLA assisted these libraries in lobbying their administrators with the information provided in the DOCLINE package and with further support of a contact person should they have any questions during implementation.

Given the lack of funding health libraries are experiencing and the need for full participation in DOCLINE, MHLA passed a motion to cover the DOCLINE start-up costs for member libraries. This included, the cost of having our union list of serials converted into SERHOLD format. Not all of our libraries will be able to participate right away and to account for this, we have planned a mentorship program whereby a library with DOCLINE experience will be partnered with a library preparing to implement DOCLINE. To further educate and inform our members, we recently we held a seminar on using DOCLINE conducted by Bev Brown, the DOCLINE co-ordinator at CISTI. During this session, we also established our routing table structure and discussed issues and impacts of positioning in the tables. We had a very good turn out, all but two of our member libraries were represented. We expect to be ready for early 1997.

Outreach comprises an important part of the U of M's library services and an interesting situation has developed in Manitoba. In 1977 the College of Physicians and Surgeons of Manitoba provided funding for the hiring of a professional librarian to provide outreach to rural Manitoba physicians at no charge. This service operated from the U of M Medical Library and was heavily used. In 1994, the College withdrew funding for outreach and the

Medical Library was forced to begin charging for its outreach services. The new service is called InfoRx and is operated on a non-profit, cost recovery basis and is directed at the entire health care community, business, governments, researchers and the general public. Although the quality of service has not declined, the imposition of charges has led to a drastic reduction in use.

In 1990, the Manitoba Health Information Network (MHINET) was set up as a collaborative project of the Manitoba Association of Registered Nurses, Manitoba Health Organizations and the Winnipeg Health Sciences Centre. This service is staffed by a full time professional librarian and a part-time library technician. MHINET is currently funded entirely by the Manitoba Association of Registered Nurses (MARN). MHINET provides a full range of library services to nursing professionals in Manitoba and is free of charge to MARN members. This service is extremely well used.

The inequities of access to library services between physicians and nurses in Manitoba demonstrates the need for better co-ordination of resource sharing that is being hampered by the diversity of mandate, governance and funding amongst libraries.

MHLA recognizes that the present restructuring of health care delivery in Manitoba presents an opportunity for planning the co-ordination of knowledge based information services for health care professionals. As I discussed earlier, through MHLA's efforts, a major portion of the infrastructure is in place to carry out better co-ordination. We have organized a task force to write a position paper on access to health care information for submission to

the provincial government.

The goals of MHLA's position paper are:

1. To develop strategies for collaboration, co-operation and technological innovation which will enhance and ensure easy, equitable and cost effective access to information for health care workers and consumers throughout the province of Manitoba.
2. To ensure that the provincial base of resources and services is current, comprehensive, readily accessible, and responsive to information needs.

Our position paper discusses the impact of access to current medical/health information on the cost and quality of health care. We cite the various studies in the literature on this in addition to finding local examples and anecdotes. The role of MHLA is outlined including our accomplishments in establishing the infrastructure for resource sharing. Existing services, changes in services and the resulting impacts are documented. Also addressed are the continuing problems in the provision of health care information such as:

- i) deficiencies in the resource base where not all libraries can meet the information needs of their clients;
- ii) inequalities in access provision where rural health professionals in particular are at a disadvantage;
- iii) fragmentation of health care information delivery through a lack of overall co-ordination of Manitoba libraries;
- iv) financial obstacles for clients' obtaining information; and
- v) the lack of time and skill on the clients' part to find the information they need.

The paper is concluded with recommendations that are broad in scope and they include:

- That all health care professionals in the province of Manitoba be guaranteed easy, equitable and facilitated access to comprehensive, current and authoritative health information.
- That health care consumers be provided with easy, equitable and facilitated access to the information resources and services that they require to make informed health care and lifestyle choices and be active participants in health care decision-making.
- That the development of the services and resources required to meet these information needs be done in a co-ordinated and cost-effective manner on a province-wide basis, that will maximize resource availability and use.
- That access to health information resources and services be improved and enhanced through the effective and co-ordinated implementation and use of new and evolving technologies.
- That the feasibility and cost-effectiveness of centrally co-ordinated co-operative licensing agreements to provide province-wide access to commercially produced health information resources and the appropriate copyright clearances to facilitate the delivery, distribution and dissemination of information be actively explored.
- That an agency or individual be designated to be responsible and accountable for the overall co-ordination, implementation and evaluation of these projects and programs.

The first draft of our position paper is just being completed with submission strategies and fine tuning still being worked out.

I'll conclude by saying that we must understand the political environment

(which by the way is constantly changing) in order to strategically plan our response to government agendas that will impact on health libraries.