

Expectations, needs and responsibilities of academic libraries to their medical and health communities

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Institutional Strategy



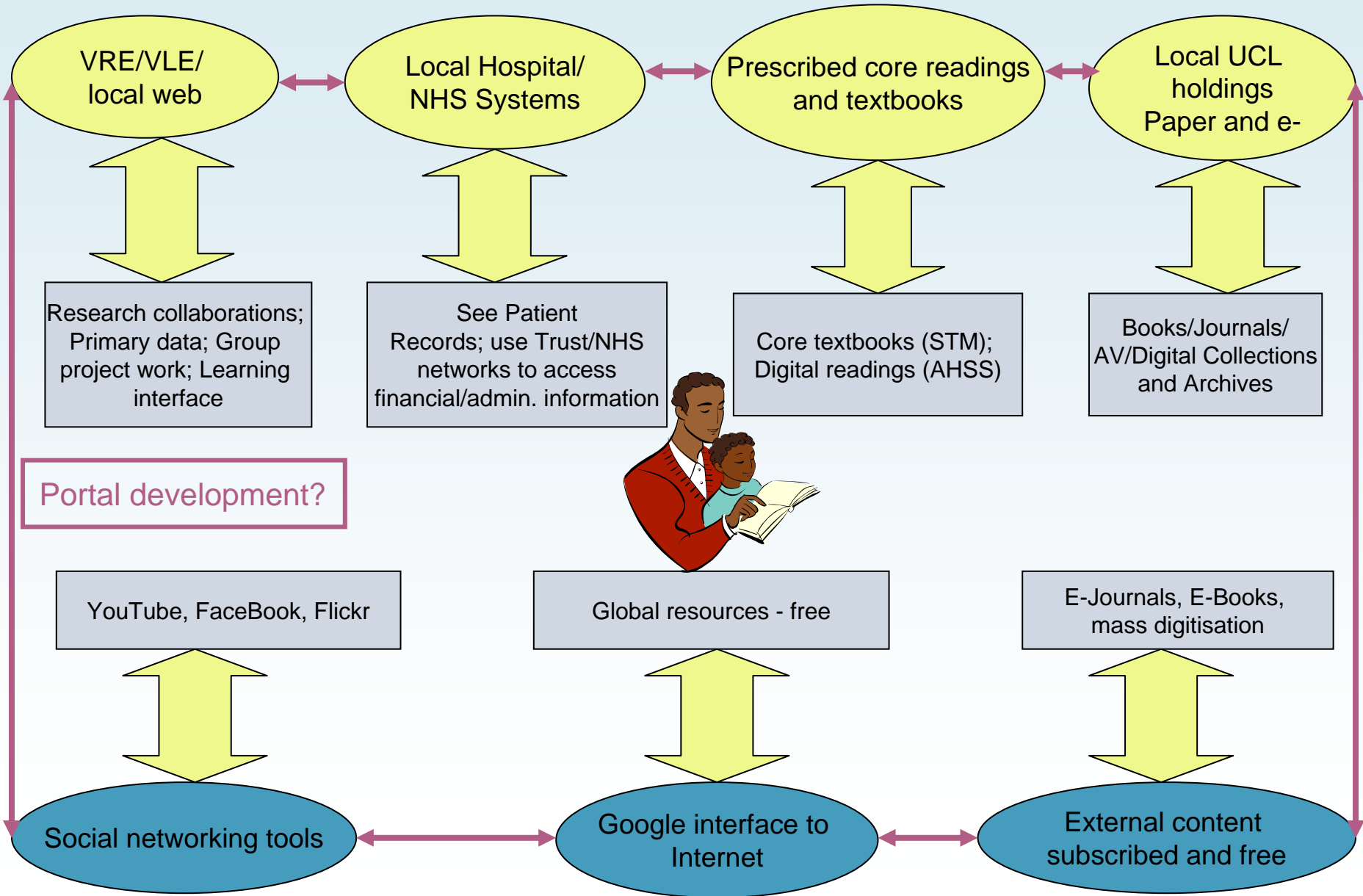
Library Strategy 2005-10

- 10 over-arching goals
- E-Strategy a priority for:
 - Teaching and Learning
 - Research
 - Student experience
 - Partnership working

See http://www.ucl.ac.uk/Library/libstrat_may05.shtml

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User Behaviour



Key Strategic Questions



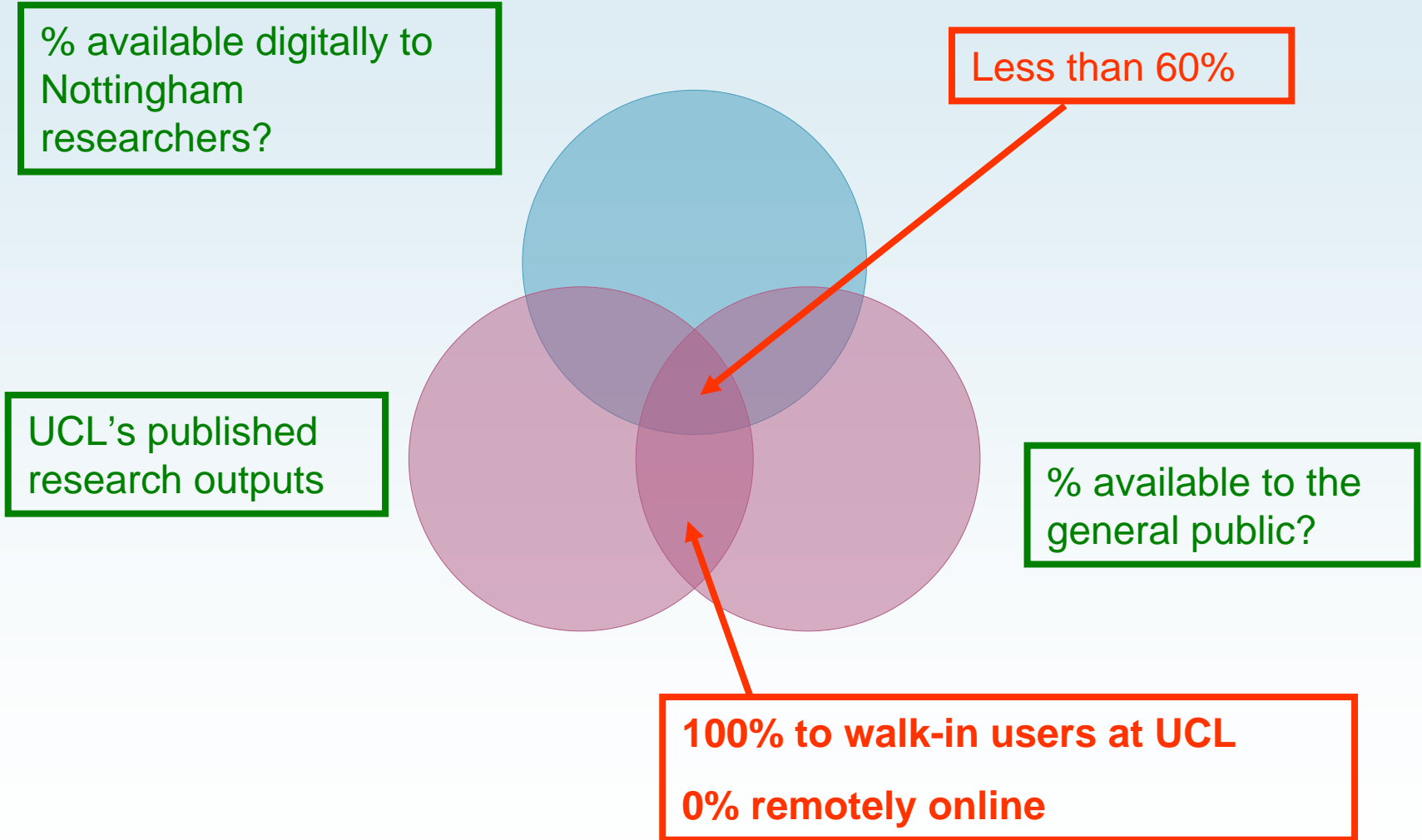
- ❑ British Museum Reading Room is traditional model
 - ❑ Library pulls readers into library space
- ❑ In a networked and global environment, library is just **one** content provider
- ❑ In UCL, STM researchers hardly ever set foot into a physical library space
 - ❑ Digital material is pushed to them electronically at their desktop
- ❑ Should the Library push stuff out to where the user is?
 - ❑ Is the portal concept helpful in providing a one-stop shop for the user to navigate both local and remote content and services?
 - ❑ Thanks to Lorcan Dempsey for this metaphor and discussion

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2. Implications

- Open Access
- Joint Procurement

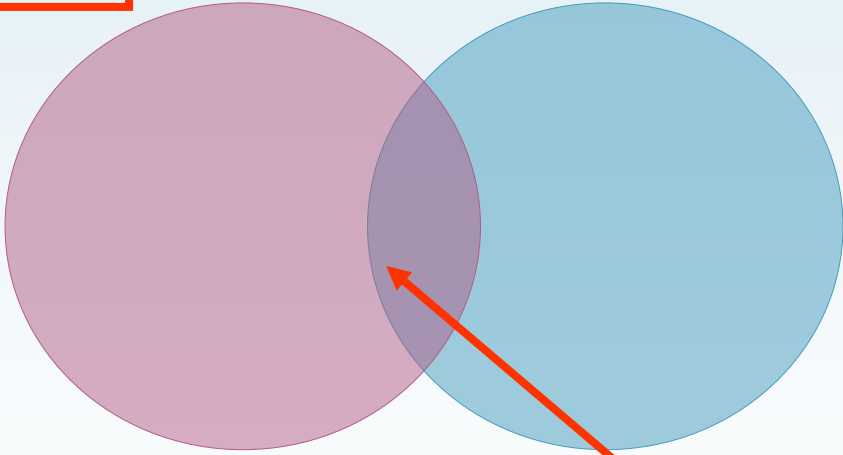




90% of its funded research is available online

% available to an NHS hospital?

UK National Health Service



40%

'How accessible is NHS-funded research to the general public and to the NHS's own researchers?' M. Cockerill, 2004 at <http://www.biomedcefsntral.com/openaccess/inquiry/refersubmission.PDF>

What should NHS do?

- ❑ Open Access is good for the researcher
- ❑ Good for the practitioner
- ❑ And good for the patient
- ❑ NHS and HE can work together to embed Open Access into the NHS culture
- ❑ SHERPA programme in UK Higher Education, funded in part by the JISC, is a model of good practice for NHS
- ❑ Strategic Content Alliance is a good focal point for debate, since both JISC and the National Library for Health are members
 - ❑ <http://www.jisc.ac.uk/whatwedo/themes/eresources/contentalliance.aspx>

SHERPA as an Open Access exemplar



❑ SHERPA

- ❑ <http://www.sherpa.ac.uk/>
- ❑ Has cross-search service to 26 Open Access repositories in UK HE
- ❑ Provides tools for copyright management
- ❑ OpenDOAR lists global Open Access repositories
- ❑ As of 24.6.08, lists 83 Open Access repositories in Health and Medicine
- ❑ NHS represented by ReFeR, repository of the findings of research studies funded by the Department of Health, 1289 items

Procurement

- ❑ Peter Hill: *From Knowledge to Health in the Twenty-First Century*
 - ❑ <http://www.library.nhs.uk/aboutnlh/review>
- ❑ Report advocates joint procurement of content between HE and the NHS
- ❑ HE spends more on purchase of content, especially e-content, than NHS by factor of 10:1
- ❑ Content is already sometimes procured by public purse for the same person twice, as an HE and NHS individual
- ❑ Recommendation 43:
 - ❑ The National Library for Health, through its working group, should consult on and gain consensus on “core content”, covering approximately 80% of NHS health library journal needs. This core content should form the basis of the national process for journal (paper and electronic) procurement

Procurement

- ❑ Great advantage in NHS and HE working together on this
- ❑ Already links to the JISC and to the NHS/HE Content Group, part of the NHS/HE Forum
 - ❑ See <http://www.nhs-he.org.uk/>
- ❑ Joint procurement recommended by Spink S, Urquhart C, Cox A. Procurement of electronic content across the UK National Health Service and Higher Education. University of Wales Aberystwyth (November 2006)
 - ❑ See <http://www.nhshe.org.uk/Procurement%20of%20NHS%20and%20HE%20e%20content%20Report.pdf>

Procurement - Issues

- Definition of what is core content
 - Is there a shared view on this across HE and the NHS?
- Who pays in HE and where are the funding streams in the NHS?
 - How sustainable are these sources of funding?
 - How can current procurement cycles in the two domains be aligned to effect joint procurement?
- Will publishers work with NHS and HE as a joint procurement body?
- How wide is the definition of authorised users, both in HE and NHS?
- Can we actually prove that savings will result from such joint activity?

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5. Conclusions



Conclusions?



- User Behaviour is changing and information provision has to follow new modes of delivery
- Open Access is a growing movement in Higher Education
 - NHS is not currently well served
 - Researcher, clinician and patient would all benefit from greater access to published research outputs
- Joint Procurement of e-content between HE and the NHS would help shoulder the burden and could lead to savings in the public purse
 - Challenge is to work out the road map to get from where we are now to where we want to be
- If you have been, thanks for listening
 - Happy to hear comments