

Library Resources and Services for Associated Clinical Organizations

Access to library resources and professional information services in the clinical setting can:

- Improve evidence-based decision making and patient outcomes
- Support informed and timely business decisions; improve profitability; reduce risk
- Improve attainment of institutional and professional accreditation standards (e.g., ACGME, Joint Commission, LCME, Magnet)
- Support excellence in educational programs
- Facilitate research and adoption of innovative technologies and practices
- Promote collaboration with healthcare teams to improve lives of patients and families

Project Background

The AAHSL Task Force on Library Services for Associated Clinical Organizations (ACOs) was convened in July of 2019 with a charge to identify AAHSL libraries that have successfully developed funding and service models for providing library services and information resources to their ACOs, defined as hospitals, health systems or clinics that have any connection, either ownership, formal agreement, or informal relationship with the academic institution. The task force interviewed librarians from eight institutions. ACOs included a range of public and private hospitals and health systems. Interview transcripts were analyzed by task force members to identify key variables and best practices.

What to Know

- **Library resources require different processes for selection and purchasing**
Library resources are each unique, even among similar types of resources such as journals. In addition to focusing on different disciplines, some resources are interprofessional and others are designed for distinct user groups. Librarians are experts in selecting resources based on quality, usability, and value and can best tailor a collection to the needs of the ACO's professionals.
- **Pricing models for library resources often vary from other types of resources**
New groups of users or locations cannot be added without amending license terms, which may not be possible or may lead to large price increases. Pricing can vary widely by publisher, with some using FTE, locations, or even bed counts to establish costs. Publishers may interpret variables like locations and FTE differently, for example, counting contiguous hospitals, such as a children's hospital and a cancer center, as separate locations. Publishers are likely to give discounts for multi-year contracts, however this locks in ongoing expenditures at negotiated increases for more than one fiscal year. These factors have a dramatic effect when there are mergers and acquisitions among health systems. Librarians are experts in negotiating for knowledge resources and should be involved in adding new potential users to existing resources.

- **Identity management and authentication are essential**
Library resources come with vendor contracts that govern terms of access for specific groups of individuals. Identity management and authentication are essential for facilitating easy access and usability while complying with licenses and security protocols. Work with your library to ensure compliance and usability of library resources are positively integrated into the institutional IT environment.
- **IT infrastructure can impact access and reporting**
Academic institutions and health systems will likely have unique IT infrastructures, including different systems, platforms, personnel, and contexts. For example, there may be a variety of learning management systems and digital environments. Environments may be configured in ways that do not facilitate providing access for subsets of an institution or reporting utilization of resources. Librarians can identify potential solutions for both access and reporting.
- **Usage statistics don't tell the whole story**
Usage statistics for online resources are important but for a variety of reasons they don't tell the whole story. Usage data is not always available and even when available, it can be confounded by IT infrastructure. Librarians can identify options for tracking usage.
- **Library services increase the value of resources**
Librarians can enhance the use of information resources by teaching their efficient use in the context of evidence-based practice and clinical care. Librarians can conduct expert searches to identify hard-to-find information and contribute to systematic reviews. Librarians save clinicians time, freeing them up to focus on patient care.

Conclusions

There is not one formula that works to determine the cost of library services for every associated clinical organization. Each ACO has its own unique identity, environment, strengths, and weaknesses. Determining the best practice for providing library services to affiliated clinical organizations is a balancing act that requires consistent, ongoing communication between the ACO and the academic medical center library. A full report from the task force is available on the AAHSL website <https://www.aahsl.org>.

References

Marshall JG, Sollenberger J, Easterby-Gannett S, Morgan LK, Klem ML, Cavanaugh SK, Oliver KB, Thompson CA, Romanosky N, Hunter S. The value of library and information services in patient care: results of a multisite study. *J Med Libr Assoc.* 2013;101(1):38-46.

Abels EG, Cogdill KW, Zach L. Identifying and communicating the contributions of library and information services in hospitals and academic health sciences centers. *J Med Libr Assoc.* 2004;92(1):46-55.

Madden A, Collins P, McGowan S, Stevenson P, Castelli D, Hyde L, DeSanto K, O'Brien N, Purdon M, Delgado D. Demonstrating the financial impact of clinical libraries: a systematic review. *Health Info Libr J.* 2016 Sep;33(3):172-89.