

Association of Academic Health Sciences Libraries (AAHSL)
AAHSL Membership Task Force: Background and Recommendations
September 2009

An AAHSL Membership Task Force was appointed in November 2008 with a request to prepare a preliminary report for the January 2009 Board Retreat with final work to follow depending on the recommendations. This Task Force's recommendations are covered below, as are changes recommended for the Association's bylaws to incorporate these recommendations.

Q: Why a Membership Task Force?

A: Over time, association practices may start to diverge from policy, and new circumstances (e.g., advent of Leadership Fellows, new medical schools and new branch campuses being established) raise new questions of membership type, service, and eligibility.

Q: What was the charge of the Task Force?

A: Briefly, the Task Force was asked to clarify the membership categories; outline category benefits; determine eligibility for office holders, committee participation, and new directors' symposium; address membership of new medical school libraries and branch libraries; and make recommendations to the AAHSL Board. The members of the Task Force represented many of the categories of membership identified in the charge.

Q: Who can be a member of AAHSL?

A: The Task Force confirmed the current bylaws wherein regular (full) members of AAHSL are libraries of institutions that are members of the Association of American Medical Colleges (AAMC) and are accredited by the Liaison Committee on Medical Education (LCME). The Task Force recommends this membership category name be changed to "full" (currently is "regular"), as this is clearer terminology when referring to the membership in the bylaws and other Association documentation.

Q: How about Canadian members?

A: By AAMC membership definition, regular membership in AAMC includes Canadian medical schools. The Task Force recommends that Canadian members be full AAHSL members and be assessed associate member dues, to reflect the lesser value of the Association's advocacy efforts for this group.

Q: Who else can join?

A: Institutions or organizations that have an interest in the purposes and activities of the Association may join as associate members. This would include academic health sciences libraries of institutions accredited by agencies or boards other than the AAMC / LCME, such as osteopathic or non-North American schools. It would also include associations, federal agencies, and other groups with interests related to AAHSL.

Q: What about newly founded medical schools?

A: New medical schools may initially join as associate members and must move to full membership when the school receives provisional accreditation and enrolls a charter class. This conforms to membership practices followed by the AAMC for newly created medical schools.

Q: May branch libraries of existing members join?

A: Branch libraries that are part of member institutions are included in the membership of the parent library. Branch libraries may join AAHSL as associate members, with the permission of their institutional representative.

Q: Who may vote?

A: Full members may vote; associate members are not eligible to vote.

Q: Who may serve as officers or on the Board of Directors?

A: Only representatives of voting (full) members may serve as officers and on the Board of Directors.

Q: Who may serve on committees?

A: Full and associate members may serve on standing and ad hoc committees. Only representatives of voting (full) members can serve as chairs and official representatives to other groups. The Membership TF recommends broadening those individuals who can serve on standing committees beyond the institutional representatives (this is already the case for ad hoc committees). Priority would be given to appointing directors to committees, but directors could also recommend fellows, former fellows, deputy/associate directors, and senior library staff with special expertise to serve on AAHSL committees.

Q: Who may receive new director training?

A: Any first-time director (permanent, acting, or interim) representing a full or associate member is eligible to participate in “new director” orientations or symposia. First-time branch library directors, who are not associate members, may participate with the approval of their institutional representative. Nonmember directors may participate, if space is available and an appropriate fee is applied.

Q: Who may participate in the AAHSL annual statistics?

A: AAHSL statistics are a significant membership benefit and are supported by both submission of data and dues. Effective 2010, the Task Force recommends that only AAHSL academic health sciences library members (both full and associate) may contribute to the statistics. All full and associate members will continue to receive a print copy of the statistics. All full members and associate members that are academic health sciences libraries will receive access to the AAHSL Statistics Web Portal.

Q: How may nonmembers access the AAHSL statistics?

A: Nonmembers may not participate in the annual statistics survey and may not have access to the statistics Web portal. The print statistics will be available for sale with differential pricing for members and nonmembers. [To qualify for the member price, the order must be placed directly with AAHSL Headquarters. Orders placed via library or other vendors will be charged the nonmember rate.]

Q: What about other individuals who would like to participate in AAHSL (fellows, former fellows, branch librarians, senior staff in member libraries, etc.)?

A: The Task Force confirmed that AAHSL is an institutional organization, and members are represented by their medical library director or the library director's designee. There are other professional associations that address the individual membership needs of health sciences librarians. That said, AAHSL is also committed to the development of new directors and emerging leaders in the field. The Task Force recommends that the eligibility to participate in Association committees be broadened (see above). In addition, the Association has also established two separate listservs to accommodate the desires for both a more inclusive list that includes fellows and senior staff recommended by their directors and a directors-only listserv for those communications that are exclusively directed to the institutional representatives.

Q: Are there new membership categories or audiences the Association should consider?

A: The Membership Task Force discussed several options. The Task Force considered broadening full membership to other types of institutions, but felt the current membership category of associate member offered the flexibility to include many types of institutions. In addition, the lower dues for associate members reflect the lower benefits derived by other types of institutions. Two that were specifically discussed were academic osteopathic libraries and hospital libraries within teaching institutions. The Task Force felt both of these audiences would be better accommodated as associate members: osteopathic libraries, because our association with AAMC may affect the value of full membership for this audience, and the Council of Teaching Hospitals, because with over 400 members, full membership could potentially change the nature of AAHSL.

Q: What changes are required for the Association's bylaws to respond to the Membership Task Force recommendations?

A: In many respects, the Task Force reaffirmed existing policy as stated in the current bylaws. Some recommended changes are to practice, rather than to the bylaws. The Task Force recommendations that affect the bylaws are:

- Changing the name of the current "regular" members to "full", which the Task Force feels is clearer when referring to the membership in the bylaws and other Association documentation.
- Removing the restriction that standing committee members can only be institutional representatives (directors).
- Codifying the current practice that only full (voting) member representatives can hold office, serve on the Board, and chair committees.

Q: What happens next?

A: The proposed bylaws changes will be discussed at the annual membership meeting on November 9, 2009, in Boston. Following that meeting, a ballot will be distributed to the membership with a two-thirds vote of those responding required to amend the bylaws.