

MICHIGAN HEALTH SCIENCES LIBRARIES ASSOCIATION

No. 10 Winter 1984

GOVERNOR BLANCHARD APPOINTS BARBARA KORMELINK TO LIBRARY OF MICHIGAN BOARD

Barbara Kormelink, librarian at Bay Medical Center Library in Bay City, was among the nine appointees to the Board of Trustees of the Library of Michigan who were named by Governor James Blanchard in December, 1983. Kormelink, of Aubrun, represents librarians from a special library. She is Library Director of Bay Medical Center in Bay City. Her professional activities include serving as past president and current treasurer of the Valley Regional Health Science Librarians, Secretary/Treasurer of MASH, Michigan Area Serials Holdings Committee, membership in the Medical Library Association, the Special Libraries Association, the American Library Association, and the Michigan Health Sciences Library Association.

The old State Library was under the jurisdiction of the Department of Education until the passage of P.A. 540 of 1982 created a separate Library of Michigan which is under the aegis of the Legislation Council of the legislature of Michigan. This new law provided for the appointment of Board of Trustees to include professional librarians and interested citizens.

The Board of Trustees held their first meeting on January 13, 1984, at the Library of Michigan in Lansing. At this meeting, Leo Dinnan of the Wayne Oakland Library Federation was elected chair of the Board, and Howard Lipton, representing the general public, was elected vice-chair.

The first business of the Board was to adopt by-laws governing the actions of the Board.

The most important business transacted at the meeting was the selection of representatives from the Board to the Committee of the Legislative Council which is selecting the new State Librarian. Dorrine Anderson of Gladstone and Emily Modley of Flint were appointed to the Selection Committee and all board members were urged to attend the interviews and to input their questions and opinions during this process.

Participation at the Board meetings is invited by the public. Any observer is welcome to attend the meetings and a time is to be allowed on the agenda for public comment.

A tour of the Library of Michigan was arranged for the new board members following the meeting.

James W. Fry of Columbus, Ohio, was named as State Librarian to head the Library of Michigan by the Legislative Council on January 24, 1984.

Mr. Fry received degrees from Milligan College, Ohio State University and Indiana University. He comes to Michigan with extensive professional and administrative experience gained from positions at the State Library of Ohio and at Ohio State University. Mr Fry is expected to take over the job in mid-March.

MASH COMMITTEE SUPPORTS STATE WIDE UNION LIST

The Michigan Area Serials List Committee (MASH) met on February 6, 1984 at Ingham Medical Center in Lansing. The Committee decided that a new edition of MASH will not be published, and that they support the State Wide Union List of Health Sciences Serials, which is in the process of production by OCLC.

The MASH Committee urges all MASH libraries to send their serial holdings for the OCLC union list, via their Region of Cooperation (ROC). The health sciences list will not be complete unless all MASH libraries participate. It was reported at the February MASH meeting that many areas of the state had not imputed their holdings.

If your library has any problems inputting holdings, please call David Keddle, Chair (MASH) or contact your local MASH representative.

David G. Keddle, Chair Michigan Area Serial Holdings Committee Ingham Medical Center Chi Medical Library 401 West Greenlawn Ave. Lansing, MI 48909 517-374-2270

TENTH ANNUAL MHSLA CONFERENCE AT TRAVERSE CITY

The tenth annual Michigan Health Sciences Libraries Education Conference, hosted by Norma Powers, was held at the Park Place Hotel in Traverse City. Those attending and conference planners deemed it extremely successful. High marks were given to both workshops and facilities. Despite the steady rainfall, conference participants were able to enjoy the fall beauty of Traverse City and to shop in the local gift and outlet stores. A highlight of the conference was the speech made by former first lady of Michigan, Helen Milliken.

PRESIDENTIAL ADDRESS Kay Kelly

Unfortunately, I can not be optimistic about the future of our Michigan Health Sciences Libraries. There are two ominous clouds on the horizon which will impact on our future. One is diagnosis related groups (DRGs) and the other is the rising cost of medical education.

First, let me address the problem of the DRGs or the GD DRGs as my medical colleagues call them. This is a payment system worked out by the federal government for medicare patients in our hospitals. It is based on a formula devised in the 1960s by two Yale professors- one in management and one in public health- in their study of health systems. They never intended it to be used as a payment plan. They compressed 10,000 diagnosis and procedures into 467 categories in order to more easily study hospital systems of care. New Jersey recently picked up this formula and turned it into a prospective payment plan for hospital care. The federal government has now turned that experiment into national policy which is to be phased in over the next few years. How does this affect us? If the system is implemented, Michigan hospitals as a groups will suffer a loss of medicare revenue of \$97 million in 1984 alone. My hospital will lose \$2 million. How much will your hospital lose and where will the cut be made? Certainly direct patient care services will be the last cut. Where do you think the first cuts will be? The "efficient" diagnosis will become very important. Patients will have to be "average" - no complications - not very sick. Highly specialized doctors will not be welcomed on staff - too expensive saving those patients. Any hospital under 500 beds in a "rural" setting will automatically be paid 30% less than "urban" hospitals. "Rural" is defined as a city less than 50,000. Access to care is not a big factor. There is no provision for any new technology or its development. If this policy prevails we are locked into "1984" medicine. Our hope is that this is a stop gap measure - but what will come after? And what ruin will it leave?

Now to medical education and its rising cost. It is estimated that the average total cost of an American medical education is now \$85,000. Students can still put together loans for this amount but upon graduation his/her pay back will be \$21,000 per year to a total of \$400,000 +. How will this impact the Michigan health science libraries? This is expensive education and Michigan has 3 medical schools to support. It is said that already the pool from which students are picked has been affected. There may be less talented students, an elite group based on money. The curriculm may become less clinically oriented, more book and lecture oriented, in order to hold down cost. The system may change to match the European, the student studies the subject, not the patient and tests out of school with very little clinical experience. Who can doubt that if the quality of the student and his education is diminished that this will not affect the quality of American medicine?

How are we to meet these changes? As a group, take heart, my friends the administration of my hospital, Northern Michigan Hospitals, have joined together for the first time in my experience, with the administrations of Marquette general and Munson of Traverse City to try to address this problem common to us. MHSLA was formed to address our libraries

common problems and has had some success. We must and we will continue to support each other in our attempts to meet these changes on our horizon.

To end, I would like to quote Martin Cummings upon his retirement from NLM. "...It is important to recognize that libraries are not, and should not become, commercial operations. The library will be destroyed as an effective instrument in a democratic society unless it provides services freely to its citizenry. To remain a free society, we Americans need to have free and full access to knowledge as it is generated. If this knowledge is transmitted only to those who can afford to pay for it, we shall run the risk of becoming a scientifically, culturally, and intellectually impoversihed nation.

Good libraries remain the most effective institution for acquiring, preserving, organizing and disseminating the knowledge derived from human accomplishment...' This I believe. Don't you?

MICHIGAN HEALTH SCIENCES LIBRARIES ASSOCIATION 1984 EXECUTIVE BOARD

Kay Kelly, president Dean C. Burns Health Sciences Library Burns Clinic Medical Center Petoskey, MI 49770 (616) 348-4500

Leslie Behm, President-elect Science Library/Clinical Center Library Michigan State University East Lansing, MI 48824 (517) 353-3037

Lea Ann McGaugh, Secretary Medical Library McLaren General Hospital 401 Ballenger Highway Flint, MI 48502 (313) 762-2141

Mary A. Hanson, Treasurer St. Mary's Hospital Library 200 Jefferson SE Grand Rapids, MI 49503 (616) 774-6260

Local Group Representative to Board

Doris Blauet, FAHSLN Flint Osteopathic Hospital Medical Library 3821 Beecher Rd Flint, MI 48502 (313) 762-4587

Hildegard Joseph, MDMLG Henry Ford Hospital Medical Library k-17 2799 W. Grand Blvd. Detroit, MI 48202 (313) 876-2550

Diane Hawkins, NMHSL Pennock Hospital Medical Library 1009 W. Green Hastings, MI 49058 (616) 945-3451

Norma Powers, NMHSLG Health Sciences Librarian, Munson Medical Center 6th & Madison St. Traverse City, MI 49684 (616) 922-9000

Diane G. Schwartz, SCMHSLA University of Michigan Alfred Taubman Medical Library 1135 E. Catherine Street Ann Arbor, MI 48109 (313) 764-1210

Alice B. Ketchum, TAMIC McKenzie Memorial Hospital 120 Delaware Sandusky, MI 48471 (313) 648-3790 ex. 186

Mildred E. Kingsbury, UPMHSLC Marquette General Hospital Health Sciences Library 420 W. Magnetic St. Marquette, MI 49855 (906) 228-9440 ex. 429

Pat Wolfgram, VRHSL Saginaw Osteopathic Hospital Library 515 N. Michigan Saginaw, MI 48602 (517) 771-5465

Mary A. Hanson, WMHSLA St. Mary's Hospital Library 200 Jefferson SE Grand Rapids, MI 49503 (616) 774-6260

REGION THREE REPORT

In the Fall *MHSLA News*, Metta Lansdale presented a definitive report on Region 3 and its activities. This is an update of activities undertaken by Region 3.

Region 3 Meeting The Regional Council meeting will take place in Chicago, March 20-22, in conjunction with the annual meeting of the Consortium/Local Group Meeting, March 21-23, at the American Congress Hotel, Chicago, IL. Information concerning the meetings can be obtained by writing or calling: Dana Van Loo, GMRMLN Management Office, Library of the Health Sciences, Health Sciences Center, University of Illinois at Chicago, P.O. Box 7509, Chicago, IL. 60680. (312) 996-2464. A full report on the meetings will be made in the next MHSLA News.

Collection Development Money was expended by Wayne State University and the University of Michigan (Resource Libraries) for monographs that are frequently needed for interloaning to the basic health science libraries (BHSL).

Document Delivery (ILL) Look for an ongoing column in 3 Sources, to provide orientation to the ILL manual and to address question to problem areas. An investigation has begun to identify BHSL whose serial holdings are not in GMRMLN and to the feasibility of adding them.

Online Service One hundred and thirty people attended two Online Updates held in Michigan.

Regional Online Union Catalog NLM has approved the BRS subcontract for 1984. Barbara Kormelink has been appointed to a committee for further study of the use and charges of this database.

Technology Committee The committee is doing a survey of the technology availale and what is needed in each state of Region 3.

GMRMLN Communication If you are not receiving *3 Sources*, Region 3 newsletter, contact:

3 Sources

GMRMLN Greater Midwest Regional Medical Library Network Management Office

Library of Health Sciences/University of Illinois at Chicago P.O. Box 7509

Chicago, IL 60680

(312) 996-2464

I would like to thank Metta for the work she did in representing us at the first regional meetings and her helpfulness in acquainting me with the job.

Jackie Raphelson

PRESIDENT'S FAREWELL Jackie Raphelson

At this meeting we celebrate the tenth anniversary of the Annual Education Conferences sponsored by our organization. Our meetings have occurred in a period that has been ambivalent for our profession. In this span of time we have witnessed the good and the bad effects of national developments on the roles and potentials of our libraries. We have lived through recessions, have learned to accommodate our budgets to the inflationary trends, and our personnel to administrative cutbacks. During these times, our conferences have helped considerably to lessen the negative effects we were all experiencing. We came to them for new knowledge and new techniques. They have also been a clearinghouse for the exchange of news about local, state, and national meetings. We have shared ideas with each other and have returned to our libraries better prepared to meet our problems, secure in the knowledge that we were not alone. We remained confident about our libraries and optimistic with our profession. This, in itself, has been an important role for MHSLA to have played.

Our membership statistics reflect a growth that is also heartening. Our total membership for this year is a high of 146m up from last year's 127. This growth, surely indicates that health science librarians are finding educational and professional rewards in this association.

But MHSLA needs to continue to grow and to have the support of its members for who knows what the next decade may bring. To gain the support from our colleagues we must periodically update and seriously implement goals and objectives that reflect our members' needs. We must not live on past laurels but must keep informed about these needs and be responsive to them. This is easier said than done. To accomplish this we must take the time to become more involved with our colleagues in other library and information associations. This involvement should also extend to colleagues in other professions with whom we work. In this way we will insure the flow of ongoing ideas on those issues that are of vital concern to our members. For more and more our work is becoming strongly interelated with the other professions around us. We are becoming more dependent upon them and they upon us.

Last year I made mention of the fact that there was little data available to use to respond to questions put to us by the Michigan Hospital Association about the Michigan Health Science Library Scene. I am happy to report that some progress has been made to remedy that situation. The Kom "Development of a Hospital Library Survey: Report No. 19", was published last May. My thanks to Holly Buchanan and Jim Williams for a copy of the publication. No detailed analyses are provided in this preliminary survey so no final conclusions can be drawn for comparison purposes.

I would like to share with you some of the data from that report that I do find of interest. 77 out of 118 Health Science Libraries listed in Michigan responded to the study.

The median salary figure for the responding libraries is approximately \$19,500.

On the educational level, 52% of the librarians had an M.A. and less than 4% had only a high school degree.

As for the median FTE's, 35% of the libraries had one full time equivalent and 25% had 2 or more FTE's.

The average budget was approximately \$34,000. But 18% of the hospitals had less than \$5,000, and 31% had more than \$57,000.

In allocated space, over 50% of the libraries had less than 1,000 sq. ft. and only slightly more than 2% had 5,000 sq. ft. or more.

63% of the hospitals had less than 200 beds and 44 of the 77 respondees were in hospitals with residency programs.

This is just a sampling of the data contained in the report and though it is only preliminary, it does begin to describe some of the characteristics of health science libraries across the state.

When I begin to view the statewide situation from this perspective and by own experience this past year, I find myself not as pessimistic as I was the last time I was before you. It does appear that Michigan's economic crisis has at the worst "bottomed out" and the economy has begun to grow again. This has been apparent in out own organization. Although our travel funds seem to be restricted, our budgets reflect a greater flexibility and the decline in the numbers of health science libraries has slowed this year. This makes me more optimistic about the future. I do believe that we have weathered the worst of the storm.

Finally, let me say that the one activity of the presidency that has been the most rewarding for me has been holding meetings in libraries in different areas of the state. Through these meetings I have met many of our members, seen their libraries, enjoyed warm hospitality, and shared along with the board some of their successes and concerns. I was again impressed by the devotion, hardwork and enormous amount of time spent by the board members to futher the goals of this organization. And it would have been imposible for me to have served as your president without a great deal of support and assistance from many people. All of you who served as committee members or chairpersons or resource persons contributed to the successful operation of MHSLA in 1982-83. My thanks to all of you.

With great pleasure, and a good deal of relief, I turn the gavel over to our new president—Kay Kelly, and wish her, our organization, and all of you a very good year.

NLM ONLINE UPDATE 1984

Michigan MEDLARS searchers met at Metropolitan Airport for the '84 online update presented by Pat Pinkowski, Online Service Coordinator, Region 3, on November 3; a few points of special interest to hospital librarians are highlighted here.

- AIDS (Acquired immune deficiency syndrome) can now be searched as a MESH heading. A reprint of an AIDS search, complete from May 1983 to August 1983, containing 215 citations is available from NLM, free of charge, via mail delivery.
- 2) An article assigned the term "review" as a MESH heading must contain no new material; therefore, some good review articles which contain new material will be missed if "SS# and review" is used. Inputting "SS# and all review, reviews, and reviewed" in title or abstract.
- 3) The current MEDLINE file will contain two years of material, going on three years, i.e., 1982, 1983, and 1984.
- 4) In using the SHOW COST command, avoid cumulating the costs of individual searches when several searches are performed in sequence by using the term SHOW COST RESET which resets the counter on the individual user ID, so that costs printed are for one search only. SHOWCOST RESET DETAILED will provide a cost analysis breakdown. STOP Y will print a grand total.
- 5) DIS can always be substituted for disease, diseases, disorder or disorders in MESH headings.
- 6) If, at a particular point in time, ELHILL is offering a free database, it is cost effective to enter such a free database in order to print NEWS; eventually, an inexpensive database will be established for NEWS, COMMENTS, and EXPLAIN.
- Many more abstracts are obtainable for MEDLINE this year than previously, due to the lifting of certain publisher restrictions on abstracts.
- 8) A user friendly interface with MEDLINE, CATLINE and AVLINE is under development at NLM, called CITEHILL.
- 9) Effective October 1983, NLM will charge domestic libraries \$5.00 for each interlibrary loan filled. Instructions to borrowers are reprinted in GRMPMLM Interlibrary Loan Manual, 1983, in the NLM Fact Sheet, July/August 1983, and in the NLM Online Services 1984 Update packet.

- 10) On DIRLINE, it is possible to search by zipcode, by keywords and by textword. To search by state, use state abbreviations listed in NLM Technical Bulleting No. 171, July, 1983, page 12, using the qualifier CY in parenthesis. U.S. Postal Service state abbreviations will be implemented at a later date.
- 11) The word stems "cardio" and "cardia" are used in MESH to indicate a tissue or muscle condition of the heart. The word "heart" is used to indicate the pumping or functioning of the heart, e.g., "myocardial infarction" means a heart muscle failure, while "heart failure, congestive" means a failure of the pumping action.

To make additions or corrections, please call...Lucie Beard, 313-252-4830 Detroit Osteopathic Hospital

MHSLA DUES ARE DUE

Please mail your check for dues for 1984. Dues are \$10.00 per year. Make checks payable to MHSLA and forward to:

Mary A. Hanson St. Mary's Hospital Library 201 Jefferson SE Grand Rapids, MI 49503

ELEVENTH ANNUAL CONFERENCE

Dates have been established for the 11th educational conference, to be held at the Hyatt Regency-Flint, October 9-12, 1984.

BADGES AND RIBBONS

Please mail any badges and ribbons left from our last conference to:

Marilyn Schleg Hurley Medical Center Hamady Health Science Library 1 Hurley Plaza Flint, MI 48502

READY SOON

Orders may now be placed for purchase of the 1983 CUMULATED INDEX MEDICUS scheduled for April 1984 distribution. The stock number is S/N 017-052-00240-6, and the price is \$172)\$215 foreign). Place orders with the Superintendent of Documents; U.S. Government Printing Office; Washington, DC 20402.

PUBLICATIONS COMMITTEE

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MHSLA News is the offical newsletter of the Michigan Health Sciences Libraries Association. Comments and inquiries may be sent to any member of the Publications Committee.

Mildred Kingsbury, EditorMarquette General Hospital
Doris Asher, ChairE.W. Sparrow Hospital
Judy CoppolaMichigan State University
Barbara KormelinkBay Medical Center
Alice KetchumMcKenzie Memorial Hospital

MHSLA 6215 West St. Joseph Highway Lansing, MI 48917

HOWLEY, HELEN

1116 N. GRANGER

ARFR012525

SAGINAW

MI 48602