Health Sciences Library

Annual Report
2002-2003

Penny Logan, Manager Library Services
August 15, 2003
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Executive Summary

1.1 Highlights

The open hours and many general procedures were rationalized among the Health Sciences Libraries in 2002-2003. The various catalogues were brought together into one and the underpinnings are in place to offer the Library catalogue on the Capital Health intranet.

An inventory of the libraries’ collections was completed and vital missing items were replaced. The current collection numbers 14,000 books and more than 700 journals. The Library continues to search out online materials and currently provides access to 75 online full text textbooks and more than 350 full text journals.

There was some disruption to receipt of our journals when our supplier went bankrupt. The most pressing problem was the lack of online access to titles. We have a new supplier, the EBSCO Corporation, and the journal delivery, both paper and online, is back to normal.

Capital Health’s Libraries joined a consortium of regional libraries to purchase databases at lower cost. This group is continuing to investigate other areas of cooperation.

1.2 Significant Challenges in the coming year

Simpson Hall, where the Nova Scotia Hospital Library is currently housed, is scheduled to be demolished in 2004. Although there is a suggestion that the Dartmouth General Hospital and the Nova Scotia Hospital Libraries combine, there is no space allotted for the Library in either of the hospital site plans. The required space for a combined library is 5,000 square feet in a high-traffic area.

There are increased demands for the Interlibrary Loans service. Software and new equipment is required to reduce costs and to increase efficiencies in this service.

Staffing at all sites is at a bare minimum. There are increasing demands for training classes in how to use the Library’s materials, and increased demand for Librarian-mediated online searches. The proposed budget includes a request for one Library Assistant to begin to address these staffing demands.

Increased enrollment in the Dalhousie Medical School beginning September 2003 is expected to put increased pressure on the Health Sciences Libraries collections and services.
A needs analysis is planned so that a long-term plan for Library services can be developed.

2002-2003 was a year of building on strengths of the three staffed and one volunteer library in Capital Health. In all areas the staff have worked diligently as individuals and in teams to find common ground and establish best practices that meet the needs of Capital Health Library users. The individual units worked cooperatively to ensure a system-wide set of standards, principles and practices. Several ad hoc committees met to discuss cataloguing and interlibrary loan issues with excellent results and much work has been accomplished toward the goal of an integrated Library system that meets Hospital Library standards and is accessible to all of Capital Health.

**Collections**

**Book collection**

An inventory of the Library’s book holdings was undertaken in 2002 to identify missing items. In total, 205 missing items were replaced at a cost of $25,000. Efforts are underway to create a core Reference collection that will be available in all Capital Health libraries. Recommended lists of books have been studied and texts will be ordered to bring the collection up to minimal standards. A Collection Development policy is being finalized that will act as a guide to future development of the Library’s resources.

An interesting project was initiated by the Department of Psychology to provide better access to their collection of books. Under the old system the location of an item was known only insofar as it was held somewhere in the Department. The Library was asked to re-catalogue the Department’s books so that they will appear on the Library catalogue. In addition, items that are held in the Department on long-term-loan are now signed out to individuals. This new system will ensure that everyone in Capital Health will be able to see everything that is available and, when needed, the Library can recall the item from the borrower. This proved an excellent opportunity for the Library to cooperate with a department to the benefit of all.

The book collection currently numbers 14,000 items.
The Library’s journal collection was dealt a serious blow in 2002-2003 with the bankruptcy of our journal supplier, the Divine Corporation. Capital Health’s lawyers filed a Statement of Claim with the Canadian Trustee in Bankruptcy and will follow through as legal proceedings ensue. In the meantime, the Capital Health Management Team agreed to allow an over expenditure so that there would be no interruption in Capital Health subscriptions. This far-sighted decision has meant that the Library has a minimum of missing issues. Appendix B “Report on journal subscription status Jan 21, 2003” outlines the situation.

In March, a Request for Proposal was developed and the EBSCO Corporation won the competition as the new journal supplier for Capital Health. The change of supplier created a significantly increased workload for the journal staff both in administering the orders and in re-establishing electronic access for each title. The Library remains committed to purchasing electronic versions of journals whenever possible and affordable.

The Library subscribes to 708 journals; 357 of those are accessible online.

**Audiovisual collection**

Audiovisual formats are very popular with Library users. Video and CD-Rom resources will be updated in the coming year. The Dartmouth General Hospital Library has an outstanding collection of consumer health videos that are circulated to the general public. These are videos of the Community Health series of lectures delivered by physicians and health care workers from the Dartmouth General Hospital. The local cable television station films the lectures.

The Library collection numbers 950 Videos and CD-ROMs.

**Databases**

During the 2002-2003 year, the Health Sciences Library of Capital Health joined a consortium with the Kellogg Library of Dalhousie University, the Health Sciences Library of Memorial University, the IWK Health Sciences Centre and the Nova Scotia Western Region Health Authority to share access to eight (8) user ‘seats’ for the MDConsult database. This allows Capital Health staff access at a cost of $11,000, rather than the $88,000 price if we were to purchase this access as an independent subscriber.

In addition to providing access to PubMed, Capital Health subscribes to the Cochrane Library, PsychINFO and the Cumulated Index to Nursing and Allied Health (CINAHL).
databases. The chart below shows the quantity of material accessible electronically from these databases.

**Online Databases available to all Capital Health staff from any Capital Health computer**

<table>
<thead>
<tr>
<th>Database</th>
<th>Journals</th>
<th>Textbooks</th>
<th>Articles</th>
</tr>
</thead>
<tbody>
<tr>
<td>CINAHL</td>
<td>1200</td>
<td>n/a</td>
<td>3,000,000</td>
</tr>
<tr>
<td>Cochrane Library</td>
<td>1</td>
<td>n/a</td>
<td>3,000 Full text</td>
</tr>
<tr>
<td>MD Consult</td>
<td>50 Full text</td>
<td>50 Full text textbooks</td>
<td>70,000 Full text</td>
</tr>
<tr>
<td>PsychINFO</td>
<td>1800</td>
<td>126 Chapters</td>
<td>7,000,000</td>
</tr>
<tr>
<td>PubMed</td>
<td>4600</td>
<td>24 Full text textbooks</td>
<td>12,000,000</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>7600+ journals</strong></td>
<td><strong>75 Full text textbooks</strong></td>
<td><strong>22,073,000 articles</strong></td>
</tr>
</tbody>
</table>

**Systems**

In order to allow for sharing ideas and data between the Libraries, all Library staff now have access to one “Shared” drive. Files that are used by all the Libraries have been placed on this drive and all staff can view and update the files.

In the 2002-2003 year, the Inmagic software that is used for the Library catalogue was upgraded and the Nova Scotia Hospital, the Dartmouth General Hospital, the Infirmary and Dickson catalogues were merged. Cataloguing standards were developed and a very large project was undertaken to standardize the catalogue’s 14,000 records.

A pilot project is underway at the Nova Scotia Hospital Library to enter the Nova Scotia Hospital and Dartmouth General Hospital Journals into the catalogue. The Nova Scotia Hospital is currently engaged in the second phase of this project completing journal check-in using the Inmagic software. The project has been very successful and it is anticipated that the remaining Capital Health journal records will be added in 2003-2004. The Library catalogue, however, is currently only available to Library staff. Please see the section *Looking Ahead to 2004* below for plans to put the catalogue on the Capital Health intranet.

The e-mail box size was increased for Interlibrary Loan personnel to accommodate large files received as Interlibrary Loans and a system-wide e-mail address was created cdhalib@cdha.nshealth.ca to streamline communication.

Staff at the Infirmary Site and Dickson Site received training and passwords for use of the DalMedix system. These two sites now join the Nova Scotia Hospital site with the ability to communicate with Dalhousie students who have overdue materials using the DalMedix system.
Equipment

Fifteen (15) faulty chairs at the Infirmary were repaired and new ergonomic desks were purchased for the Nova Scotia Hospital. An inventory of the computers and printers held in the Libraries showed that several machines were out dated and in some cases IT would no longer support the equipment. All computers are now leased and every site received at least one new computer.

Computers received 2002-2003:
- Infirmary – 4 computers for the public area
- Dickson – 3 computers for staff, 2 computers for the public area
- Dartmouth General Hospital – 1 computer shared by volunteers and public
- Nova Scotia Hospital – 2 computers for staff, 1 for the public area

Services

Many individualized training sessions were completed for nurses, physicians, residents and medical students. In addition formal training sessions were organized for 95 Capital Health nurses, psychologists and managers, in Halifax, Dartmouth and Windsor.

<table>
<thead>
<tr>
<th>Capital Health Library Services 2002-2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circulation</td>
</tr>
<tr>
<td>Reference Questions</td>
</tr>
<tr>
<td>Interlibrary Loans</td>
</tr>
<tr>
<td>Online Searches</td>
</tr>
<tr>
<td>Table of Contents Users</td>
</tr>
</tbody>
</table>
Facilities

Dartmouth General Site

The Dartmouth General Site contains only a very small reference collection and some publicly circulated videos. There is one computer that is shared with the Library volunteers and with the public. There is no study seating, no audiovisual viewing area, no workroom, no office and no storage. There is room on the bookshelves for approximately 40 more books. Volunteers ensure that the Library is open each day and provide a photocopy service. The Nova Scotia Hospital Library staff provides all other services.

The Library received new flooring this year. A book drop was purchased, however, given the lack of space, it was decided in consultation with maintenance personnel, that the book drop will not be installed until the Library has adequate space.

The location of the Library is an issue for the Dartmouth General Hospital. In the space planning for new services, an inadequate space in an unsuitable location was offered for the Library. The Library developed a report outlining the services possible in this space. Please see Appendix C “Library Services Possible in a Limited Area”.

Dickson Building Site

The Dickson Building Site has effective seating for nineteen (19) two public access computers and four (4) study carrels. The lack of adequate storage has the result that the audiovisual viewing room is used for journal storage and is not available to users. The one office area is a combination office, staff room and stationery storage.

The Library does not meet minimal standards for space between and around the stacks\textsuperscript{1}. To try to alleviate the very cramped conditions, a weeding project will be undertaken in the summer of 2003 to try and remove some materials from the collection to recoup space for newer materials and allow for realignment of the bookshelves so that there is appropriate clearance.

In addition, the shelving at the Dickson Building Site is home-quality rather than library–quality. There are limitations to how the shelves can be arranged since they are not designed to carry the full weight of a shelf full of library books.
Halifax Infirmary Site

The facilities at the Halifax Infirmary site are in good repair and there is adequate storage for current operations. An arrangement was made with Housekeeping services to have the carpets and upholstery cleaned in March during the late night shifts so as to limit inconvenience to Library users. The Infirmary site, the newest library in the Capital Health system, is situated on the 2nd floor of the Infirmary. It has a small reference collection, two small meeting rooms, 4 public access computers, an audiovisual viewing room, table seating for 20 and 6 study carrels. There is a storage closet, a workroom plus one office.

Nova Scotia Hospital Site

The Nova Scotia Hospital Health Sciences Library has traditionally provided Library services to the Nova Scotia Hospital, the Dartmouth General Hospital and the East Coast Forensic Unit. In the enlarged Capital Health structure, the Nova Scotia Hospital Library is also the Library resource for the Eastern Shore Memorial Hospital, Musquodoboit Valley Memorial Hospital and Twin Oaks Memorial Hospital.

The Nova Scotia Hospital Health Sciences Library is housed in Simpson Hall on the Nova Scotia Hospital grounds. Simpson Hall is slated for demolition and the building receives only minimum maintenance. There have been 10 leaks in the library over the past 12 months. Most of the flooding has occurred from faulty pipes in the ceiling and there was also a very large flood from broken pipes in one of the walls in the storage area. Since flooding will permanently damage Library materials and equipment, sheets of plastic have been purchased and positioned on the top of shelves ready to spread when water appears. This stop-gap measure has been used several times and we have been fortunate that so far most of the leaks have occurred when Library staff is present - although one of the telephones had to be replaced due to water damage which occurred at night when staff was not on site. Ceiling tiles have not been replaced, there is a persistent smell of mildew and paint is peeling from the walls and ceiling. The overall effect has been negative on users and on staff morale.

Coupled with the deteriorating conditions, is the uncertainty of a site for the Library when Simpson Hall is demolished. In the space planning for the Nova Scotia Hospital, the architects noted that the Library is “orphaned” and there has been no decision about where the Library will be situated.

There has been a suggestion that the Library of the Dartmouth General Hospital and the Library of the Nova Scotia Hospital could be combined into one Library that will serve both sites. However, the space plan for the Dartmouth General Hospital allows only enough space for relocation of the existing Dartmouth General Hospital facility. The 1400
square feet allocated will not accommodate the most basic of services, nor will it accommodate the collection of the Nova Scotia Hospital.

From a facilities point of view, finding a space for the Nova Scotia Hospital Library that is of adequate size and in a suitable location is a top priority. For a discussion of the possibilities, please see attached Appendix B: *Health Sciences Library Service in Capital Health: Response to public information sessions. January 27, 2003*. The Library at the Nova Scotia Hospital has access to one C@P site computer, which is shared with the public and inpatients. There is seating for 12 and there are 2 study carrels. There is a small meeting room which doubles as an office and as a storage room, and the intended audiovisual viewing area is used for storage.

**Personnel**

Myrna Lawson, Library Assistant at the Nova Scotia Hospital was honoured for her 20-year career. Don Ford, CEO of Capital Health, presented Myrna's Long Service Award to her at a ceremony held on April 24, 2003.

Library staff training was a priority item in 2002. As part of the effort to amalgamate the Library catalogues, training in the use of the Inmagic software was arranged with the software vendor. The cost of this project was shared with the Nova Scotia Department of Environment and Labour Library, which uses the same software. Other courses attended by staff include: the Basic Disaster Preparedness and Response Workshop sponsored by the National Library of Canada; Word Level 1 and Level 2; Excel Level 1 and Excel Level 2; PubMed Searching Techniques; a Train the Trainer Workshop and the Conference for Women.

One of the most important tasks for this year, from a Human Resources point of view, was the job reclassification project. This work was completed in August 2002 and the results will be final in the fall of 2003.

Volunteers continue to make significant contributions at the Dartmouth General Hospital and the Infirmary Libraries.

With illness, leaves and time to fill vacant positions, we had some challenges. Two of the Libraries operated under very stressful conditions in 2002. At one site, 1.5 staff covered the work of the usual 2.5 people for 7 weeks. At another site, the usual 3-person complement was down to two people for 23 weeks and down to one person for 5 weeks. This had the positive result of people pulling together and taking on double-duty. A vote of thanks to all the staff for providing great Library service in the face of extreme pressures. We are currently a healthy lot, working with a full complement.

Penny Logan began as Manager Library Services on June 3, 2002; Diane Lawson was hired as part-time Library Clerk on August 12, 2002; Andrea Deveau was hired on long-term assignment as Library Clerk at the Infirmary on October 15, 2002. In addition, Lena
Comeau worked as Library Clerk at the Infirmary from August 6, 2002 to Sept. 13, 2002 and Kim MacInnis worked during a parental leave as Library Assistant at the Dickson Building from October 3, 2002 to April 11, 2003.

Current Health Sciences Library Staff, July 2003

Joan Briand, Library Clerk – Nova Scotia Hospital
Andrea Deveau, Library Clerk – Infirmary
Rachel Green, Library Assistant – Infirmary
Diane Lawson, Library Clerk – Dickson
Myrna Lawson, Library Assistant – Nova Scotia Hospital
Verona Leslie, Library Assistant – Infirmary
Penny Logan, Manager Library Services
Erica Smith, Library Assistant – Dickson
Moira Stewart, Library Assistant - Dickson

Internal/External Committees and Activities

Connections were made with the Occupational Health and Safety Committees of the QEII, the Nova Scotia Hospital and the Dartmouth General Hospital. The Library representatives to these committees are Joan Briand and Rachel Green.


Health Sciences Library Budget Fiscal 2003

<table>
<thead>
<tr>
<th></th>
<th>Dartmouth</th>
<th>Dickson &amp; Infirmary</th>
<th>Nova Scotia Hospital</th>
<th>Libraries outside metro</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries &amp; Benefits</td>
<td>0</td>
<td>$260,966</td>
<td>$70,891</td>
<td>0</td>
<td>$331,857.00</td>
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<tr>
<td>Books</td>
<td>$6,551</td>
<td>$47,113</td>
<td>$9,801</td>
<td>$539</td>
<td>$70,414.00</td>
</tr>
<tr>
<td>Journals</td>
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<td>$174,943</td>
<td>$53,414</td>
<td>0</td>
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<tr>
<td>Supplies</td>
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<td>$28,325</td>
<td>$7,115</td>
<td>0</td>
<td>$38,018.00</td>
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<tr>
<td>Total</td>
<td>$15,539</td>
<td>$511,347</td>
<td>$141,221</td>
<td>$539</td>
<td>$668,646.00</td>
</tr>
</tbody>
</table>

Looking Ahead to 2004

Good Hospital Library practice requires that clinical material in the collection be 5 years old or newer. The Health Sciences Libraries collections are dated in some areas, so a
‘weeding’ project will be undertaken to identify titles that need to be updated. In addition, this project will give the opportunity to examine the collection for gaps, to identify areas that are no longer supported and to identify where the collection needs to be enhanced to support new Capital Health programs.

The Library catalogue is currently available only to Library staff. In the 2003-2004 budget, $10,000 has been earmarked to purchase software that will license the software so that the catalogue can be available to all staff on the Capital Health intranet. This software will also allow users to order items online and for requests to be transmitted automatically to Library staff. This enhancement will mean that Capital Health staff – from any location - can identify and order materials from the Library.

In the coming year we will be looking at the need to replace outdated printers, and to investigate acquiring large capacity scanners to streamline and cut the costs of interlibrary loans.

The ‘public’ computers are made available for Capital Health staff, Residents, Clinical Clerks and secondarily for patients and their families. Currently printouts from these computers are free. This has contributed to a significant expense for toner, and frequently many dozens of printouts are not picked up, - making it seem that the many of the printouts are not necessary. The Library will move to equip the public computers with a cash card system, similar to that in use for photocopiers so that printer costs can be recouped.

Many of the telephones are without features like call forwarding, hands free and conference call features which hamper staff’s ability to forward calls and to take part in training opportunities that require conference call features.

Initial steps were taken in 2002 to develop a needs analysis for the Library services. This process will be continued in the 2003-2004-budget year.

Space planning for the Nova Scotia Hospital and the Dartmouth General Hospital Libraries will remain an issue as we move into the next fiscal year.

Penny Logan
Manager Library Services, Capital Health
July 10, 2003

Appendices


This report was submitted to Marilyn Swaffer, Director of Medical Education on January 21, 2003.

Report on journal subscription status

January 21, 2003

The Health Sciences Library of Capital Health has the responsibility for ordering all the books and journals for all departments. This arrangement puts the ordering in the hands of the people with expertise in the area of book and journal ordering and streamlines the purchasing arrangements. Currently Capital Health subscribes to more than 700 titles, from 84 different publishers.

One of the efficiencies libraries employ is the use of a subscription agent. For a service fee, the subscription agent handles all the new subscriptions*, renewals, claims** and correspondence with individual publishers.

Each subscription has a different start and end date. For example, some publishers will only begin a subscription in January; some publishers will only begin a subscription in June or September. The vagaries of publishers and the monitoring of journal subscriptions is so complex that employing a subscription agent is the usual Library practice.

Capital Health had a long relationship with Faxon/RoweCom as subscription agent. In 2000 “divine incorporated” took over Faxon/RoweCom. We continued to experience good service into 2002.

On December 20, 2002 we received word that divine was no longer honouring subscription renewals and, in fact, payments made to divine in November may not have been paid. The Capital Health Purchasing department was contacted and they confirmed that divine cashed a cheque for $216,502.09 in November.

Since December 20, Library staff has been in contact with hundreds of Libraries who were divine customers as well as with publishers. We have confirmed that most of the publishers have not received any funds paid by Capital Health for subscriptions for 2003. Of the $216,502.09 collected by divine only $21,496 was forwarded to publishers.

We have contacted another subscription agent, EBSCO, and they have agreed to act as our new subscription agent and, for 2003, and to meet the price divine quoted us. We have sent the journal subscriptions for the Nova Scotia Hospital and the Dartmouth General Hospital since their subscriptions had not yet been paid.
In order to obtain journal subscriptions for the rest of Capital Health for 2003, we need to find $194,006.09 ($216,502.09 - $21,496). This figure represents the subscription list that were not paid divided as:

- Library subscriptions: $172,152.94
- Departmental subscriptions: $21,853.15

Publishers are aware of the problem and in most cases are willing to allow a period of “grace” until the end of February to allow Libraries extra time to get their renewals in. Typically it takes from 2 to 3 months for a subscription renewal to be processed. If we can renew our subscriptions by the end of January, we still run the very real risk that there will be no access to journal material until March or April.

The Health Sciences Libraries of Capital Health belong to a network of libraries and we borrow material from each other using the Interlibrary Loan system. This system requires of each Library that they meet the obligations of maintaining a collection that they will loan to other libraries. During these trying times, we will work doubly hard to fill requests using Interlibrary Loans.

However, the disaster for Capital Health users is the loss of online access to journals. Satisfying the information needs of the geographically diverse population of Capital Health is only possible by providing online access, and online access is tied to subscriptions.

Our Health Sciences Library collection is overwhelmingly reliant on journal articles to support the information needs of the health care providers providing patient care. If we cannot find funds to replace that lost to divine, Capital Health will lose the ability to provide journal material both in hard copy and online which will mean we cannot support the patient-care decisions of our users.

In sum, our supplier has $194,006.09 that was not sent to publishers. Our ‘business’ is providing journal articles. Is there any fund to cover this type of situation?

* The bulk of the 700 subscriptions are paid with one cheque to the subscription agent, saving the cost of cutting 700 individual cheques, one for each subscription.

**Claiming issues involves keeping track of which issues are received, noting when an issue is missing and contacting the subscription agent to obtain the missing issue. If a publisher does not have extra copies of a missing issue, the subscription may be extended by a month. In that case the subscription year now ends one month later that expected further complicating the management issue.

This report was submitted to Brian Butt – Director Health Services DGH, to Linda Judge - Director Capital Health Mental Health Services and to Marilyn Swaffer - Director Medical Education on January 28, 2003.

Health Sciences Library Service in Capital Health
Response to public information sessions
January 27, 2003

The Master Plan for the Mental Health and Drug Dependency Programs at the Nova Scotia Hospital site and a similar plan for the Dartmouth General Hospital have been circulated. In the public information sessions held for both plans, the architects and the planning committee noted that the one service that is “orphaned” is the Health Sciences Library. No space was assigned in the Nova Scotia Hospital plan, even though the Library is housed in Simpson Hall, which is slated for demolition. In the Dartmouth General Hospital plan there is mention of a tiny space in an unsuitable area.

This report is written in response to the public information sessions. It refers only to the space requirements for a Health Sciences Library and does not include the volunteer library space noted below. The Health Sciences Library has a mandate and budget to support the information needs of Capital Health employees and students.

Background

The Nova Scotia Hospital is a primary teaching center for Mental Health services and houses the largest collection of psychiatric and mental health materials in Eastern Canada. The material held by the Nova Scotia Hospital Library is a resource shared throughout Capital Health through the Health Sciences Library network.

The planning committee notes that the role for the Dartmouth General Hospital is as a secondary level referral center for Cobequid Community Health Centre, East Coast Forensic Hospital, Eastern Shore Memorial Hospital, Hants Community Hospital, Musquodoboit Valley Memorial Hospital, and Twin Oaks Memorial Hospital and that more students will become part of the day-to-day operations of these centres. The Library requires space to provide services in support of the health-care providers of these facilities as well as to support the educational requirements of students. Although there is a trend to electronic sources, the typical publisher can offer articles electronically only back to about 1995, so a paper collection and a computer-based collection will co-exist for some time to come.

With the current severe space restraints, this proposal assumes that planners will look at space for one library that can serve the needs of all of these centers. Therefore, this report outlines the necessary planning considerations for one Health Sciences Library to serve the
Nova Scotia Hospital, the Dartmouth General Hospital and the 6 ‘feeder’ centers that refer patients to the Dartmouth General.

Two calculations are shown. The first shows current space occupied by the Library service at the Nova Scotia Hospital and at the Dartmouth General. This calculation shows a space requirement of **4,938.26 sq. ft.** The second calculation follows a detailed space plan based on function. Using this formula the space requirement is **4996.4 sq. ft.**

Both these formulae show that space required to provide Library Services to the Nova Scotia Hospital and to the Dartmouth General Hospital is approximately 5,000 square feet.

Space Planning

The amount of space required can be calculated using a variety of formulae. The easiest calculation is to take the measure of current space used by the NSH and the DGH libraries.

**A. Current space occupied by the NSH and the DGH Libraries**

This space calculation is based on the current books and equipment housed in these two sites (there are some Health Sciences materials housed in the Dartmouth volunteer library) and is a reasonable estimate of size for a combined library.

Total current space occupied by the two libraries: $5563.06 + 154 = 5717.06$ sq. ft.

There are two economies to consider. First, as noted above, the NSH patient library is a service that falls under Volunteer services. Secondly, although the NSH fireplace is a wonderful feature, it is not an essential Library service.

Those two spaces can be subtracted from the total 5717 sq. ft.

LESS: Patient library: 284.8 sq. ft.
LESS: Fireplace area: $(17’ \times 20’)$ = 340 sq. ft.

**Total current space occupied by the NSH Health Sciences Library = 4938.26 sq. ft.**

**B. Space estimate by area function**

For comparison, another method of estimating required Hospital Library space is to enumerate how much space is required by function. Using this calculation, the total space requirement is **4996.4 sq. ft.** The chart below shows the space required by each activity. The Appendix details the calculation for each area.

<table>
<thead>
<tr>
<th>Functional Area</th>
<th>Space Required –sq. ft.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Book Stack area</td>
<td>441</td>
</tr>
<tr>
<td>Journal Stack Area</td>
<td>895</td>
</tr>
<tr>
<td>Seating area</td>
<td>932</td>
</tr>
<tr>
<td>Book Return</td>
<td>54</td>
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<tr>
<td>Staff area</td>
<td>900</td>
</tr>
<tr>
<td>Entrance &amp; information desk</td>
<td>140</td>
</tr>
</tbody>
</table>
In sum, space planning for the NSH and the DGH has not included a plan for the Health Sciences Library. A combined NSH and DGH library can offer efficiencies of space and human resources and provide Library support for all the Hospitals that refer to the DGH. To do this requires a minimum space of 5000 square feet for the work of the Library.

The location of the Health Sciences Library in a Hospital is crucial. Typically a Hospital Library is situated on the main floor, in a high-traffic area. One local example is the Health Sciences Library at the Halifax Infirmary that is situated near the cafeteria. Natural lighting is essential to creating an area conducive to reading and quiet study.

There is an urgency to define a space for the NSH Library given the planned demolition of Simpson Hall. I hope this report helps define the space requirements and that the planning committee can find a way to include Library space in the overall plan.

One item that, it appears, has been completely overlooked by the planning committee is the patient-libraries that now operate under Volunteer Services at the Nova Scotia Hospital and under the Auxiliary at the Dartmouth General Hospital. These two services are unique in Capital Health as they provide access to health materials to patients and to the community at large. In addition, the Nova Scotia Hospital Patient Library provides employment for 14 ex-patients under Project 50. The Dartmouth General Hospital Volunteer Library provides a collection of videotapes of televised programs featuring Dartmouth physicians and health care workers. These videos are recommended by physicians to their patients and are made available for loan to the general public. These two services are vital to both patients and to the larger Dartmouth community. The space currently occupied by these two volunteer libraries is: 284.8 sq. ft. (NSH) + 154 sq. ft. (DGH) = 438.8 sq. ft. These services are separate from the Health Sciences Library. It is hoped that the planning committee will consider the current volunteer library services in the space-planning process.

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Appendix

Book Stack Area Calculation

The estimate of space for shelving includes the space required for the shelving unit itself plus the width of the aisles on every side and space at the end of the shelving unit. The Accessible Canadian Library guidelines require a minimum of 36” for aisle width and a 4’ x 4’ area at the end of each stack for wheelchair turnaround.

Calculation for book stack area:

Current NSH book stacks:
5 double sided stacks @ 6 feet long by 6 feet high by 26” deep.
Each stack occupies 6 x 2.1 feet = 12.6 feet.
Total stack space: \(12.6 \times 5 = 63\) sq. ft.

Aisle space per stack: 36” x 6’ = 18 sq. ft
Total aisle space: 18 x 6 (one aisle on each end) = 108 sq. ft.
Wheelchair turning: 4’ x 4’ = 16 sq. ft. One at the end of each unit
Wheelchair turning for each unit: 32 sq. ft
Total wheelchair turning: 32 x 5 = 160 sq. ft.
Total aisle and wheelchair turning: 108 plus 160 = 268 sq. ft.

Total for NSH BOOK stacks: \(63 + 268 = 331\) sq. ft.
Additional material to bring the DGH Library up to minimum standards is 1400 books @ 30 per shelf on a 5-shelf unit = 150 per unit. Requires 10 (3 foot) units to hold 1400 books.

2.2’

Book Stack area required: 15’ x 2.2’ = 33’ plus a 36’(3’) aisle= 15’ x 3’ = 45 sq. ft. plus wheelchair turnaround at the end of each stack (4 x 4 = 16sq. ft x 2) = 32 sq. ft. (33 + 45 + 32 = 110 sq. ft)

Total for DGH BOOK stacks: 110 sq. ft.

- Total BOOK stack area required: = 331 + 110 = 441 sq ft.

Journal Stack area

Total required: current stack area at the NSH plus room for 10 (3-foot) shelving units to accommodate growth over the next 10 years.

Currently NSH journals are held in 1803 journal boxes, each box 4” wide, on library shelves, 5 boxes per shelf. Library shelving units are 5 shelves high. Therefore each shelving unit can hold 25 boxes. A range of shelving units is typically 5 units long.

The NSH journal holdings occupy 72.12 shelving units.
The journal stacks for the Nova Scotia Hospital requires this configuration:

The space required for the journal stacks is: $2.2' \times 15' = 33 \text{ sq ft} \times 7 \text{ stacks} = 231 \text{ sq ft}$. 
Aisle space = $15' \times 36'' = 45 \text{ sq ft} \times 8 = 360 \text{ sq ft}$.
Wheelchair turnaround at each end ($4' \times 4' = 16 \text{ sq ft}$) $16 \times 1 = 224 \text{ sq ft}$.
Space for NSH Journal stacks: $231 + 360 + 224 = 815 \text{ sq ft}$.

The NSH and the DGH libraries receive approximately 1000 journal issues each year. At an average size of $1/4''$ per issue, the shelf space to hold that material is 250 inches, or approximately 20 feet of additional shelving space each year. Library shelving units are 3 feet wide with 5 shelves per unit, so one unit can hold 15 feet of material.
The Library collection is weeded each year, so with accommodation for discarded material, the additional shelf space required can be calculated as 15 feet, or 1 shelving unit needed each year.
Additional stack space for 10 years: 3’ shelving unit x 10 = 30 square feet. With aisle space:

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2'2"
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15’ (5 double-sided stacks @ 3’ each section)

Additional stack space: 2.2 X 15 = (33 sq. ft) plus one 15 x3’ aisle (15 sq ft) plus wheelchair turnaround at each end (4’ x 4’ = 16 sq ft)
Total for 10-year growth: 33 + 15 + 32 = 80 sq. ft.

- Total journal stacks: 815 + 80 = 895 sq. ft.

Seating Area

Workstations for users need to be ‘wired’ so that users can access the Capital Health network from their laptops. “30 square feet per user seat will provide adequate seating including aisle space around each chair”2. Carrel seating requires 45.5 sq. ft. per carrel 3.

Current seating areas 13 (NSH) + 2 (DGH) = 15 @ 30 sq. ft. = 450 sq. ft.
Carrels: 4 @ 45.5 sq. ft. = 182 sq. ft.
Table seating: 2 tables for 4 one table for 2: 10 @ 30 sq. ft. = 300 sq. ft.

- Total seating areas: 450 + 182 + 300 = 932 sq. ft.

Book Return

The book return area, although a small space, is essential and requires easy-access and workroom to maneuver several book trucks. Book return area: 9 x 6 = 54 sq. ft.

- Book return area: 54 sq. ft.

Staff Area

Librarian: 200 sq. ft.
Library Assistants: 2 x 175 = 350 sq. ft.
Library Clerk: 1 x 175 sq. ft.
Volunteer: 1 x 175 sq. ft.
Staff area: 200 + 350 + 175 + 175 = 900 sq. ft. 4.

- Total staff area: 900 sq. ft.
**Entrance and Information Desk Area**

Using the MLA Guidelines the information desk area occupies 140 sq. ft.\(^5\). Six to Eight feet is allowed for space needed in front of the Information desk for people to enter the library. The equipment required includes an information/circulation desk with a computer and printer and a chair for staff.

- Total space entrance and information desk: 140 sq. ft.

**Current Journal Display Area**

**NSH Journals**

The NSH current journal shelf is 15’ long by 8 feet high by 24” deep. The space occupied by the current journal display is 15 x 2 = 30 sq. feet. 2 feet is required in front of each display for standing and passing for an additional 15 x 2 = 30 sq. ft.

**Total space for current NSH journals: 60 sq. ft.**

**DGH Journals**

A basic Health Science journal collection consists of 309 journal titles. Of those, about 100 are already held by the Nova Scotia Hospital. Current journal display shelves hold 16 issues on a 3 foot-wide display range\(^6\). Because of different sizes of the journals, some economies can be made. To accommodate 200 journals the library will need 13 ranges of new journal shelving.

New journal shelving space requirements:

1.1’ deep x 3’ wide = 3.3 sq ft

14 ranges

Total required for new journal display: 13 x 3.3 = 42.9

2 feet is required in front of each display for standing and passing

Aisle requirement: 13 x 3’ = 39 x 2’ = 78 sq. ft. total for standing and passing

**Total for DGH new journal shelving: 42.9 + 78 = 120.9 sq. ft.**

- Total new journal shelving: 60 + 120.9 = 180.9 sq. ft.

**Public Access Computer**

Three public access terminals are required. For future growth, two more public access terminals should be anticipated. The MLA Guidelines state 45.5 square feet is required for each public access station.\(^7\)

Current requirement: 3 @ 45.5 = 136.5 sq. ft.

Growth over 10 years: 2 additional = 2 @ 45.5 = 91 sq. ft

- Total Public Access Computers: 227.5 sq. ft.
Reference Area

Reference books are typically larger than other books. For that reason fewer can be accommodated per shelf, and Reference books are typically shelved on low units, 4 feet high. At 15 books per shelf on a 3-shelf unit that is 3’ wide, each unit can hold 45 books. **Current Reference and Reserve collection at the NSH is 458. The Dartmouth General currently has only 22 Reference titles. To develop a Health Science collection, it is expected that there will be 100 more Reference titles added to the NSH collection**

Requirement to hold NSH plus DGH material (558 titles):

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**Total Reference area required: stack (3’ x 9’)(x2) plus aisles (3’ x 9’) (x3) plus wheelchair turnaround x 4 (4’x 4’ = 16 x 4 = 64 sq. ft.) = 54 +81 + 64 = 199 sq. ft.**

- Total Reference area 199 sq. ft.

Photocopy Area

There is a need for a public photocopier and a need for a staff photocopier.

Suggested area for public photocopier: 68 sq. ft.\(^8\).

Area required for staff photocopier: 68 sq. ft.

- Total required for photocopier: 136 sq. ft.

Book Trucks

8 square feet for each book truck. Currently 4 book trucks = 32 square feet\(^9\). With additional collection two more book trucks anticipated = 6 x 8 = 48 sq. ft.

- Total Book truck space: 48 sq. ft.

**Interlibrary Loan area**

The Collection of the Health Sciences Library is the bare minimum to meet the needs of users. Our users have a demand for material that is not held in the Capital Health system. A large part of the Library’s work is devoted to Interlibrary Loan. The Library is
purchasing a large scanner for each library. The scanner requires a table and a dedicated PC. The space requirements for this system is 2, 5’x3’ tables, one to hold the scanner and documents, and one to hold the computer and printer.

3 x 5 tables = 15 sq. ft x 2 = 30 sq. ft. with aisle space of 3 feet in front (to allow for book truck)  (aisle = 3 x 10 = 30 sq. ft.)

- Total Interlibrary Loan area: 60 sq. ft.

Study Rooms

Two small group study rooms: 16’ x 16’.
2 @ 256 sq. ft. = 512 sq. ft.

- Total study rooms: 512 sq. ft.

Walk-up Library Catalogue station

Computer stations for viewing the electronic Library catalogue: 2 @ 45.5 sq. ft.

- Total Walk-up stations: 91 sq. ft.

Audiovisual viewing area

The audiovisual viewing area allows users to view videos, slide shows and VHS tapes in a separate area. (The current space for this activity at the NSH is 170 sq. ft.).

AV Carrels: 4 @ 45 sq. ft. = 180 sq. ft.

- Total audiovisual viewing area: 180 sq. ft.

3. op cit. p. 150
4. ibid
5. op. cit. p. 145
6. op. cit. p. 144
7. op. cit. p. 145
8. op. cit. p. 147
9. op. cit. p. 146
10. ibid
11. op. cit. p. 145
12. op. cit. p. 150
Appendix C: Library services possible in a limited area

This report was submitted to Marilyn Swaffer March 28, 2003

Library services possible in a limited area

A space plan for 5,000 square feet was drafted for a combined Nova Scotia Hospital/Dartmouth General Hospital Health Sciences Library. The Dartmouth General Hospital space plan, however, has allotted 1460 square feet for library services. It is not possible to relocate all the resources from the current Nova Scotia Hospital Library into such a small space.

However, there is a pressing need for Library services to serve the Dartmouth General Hospital as well as the non-metro Capital Health sites. As the Dartmouth General moves towards a role as a teaching hospital, accreditation will require that a full health science library service be available.

Below are 3 possible scenarios, given the limitation of 1460 square feet, from which to provide Library services. The space for each activity is based on the previous space plan.

Scenario #1: a reference collection

Reference books, current journals, staff, photocopier and book return = 1469.9 sq. ft.

Services possible
Hospital staff can come to library to look up quick information and can photocopy articles. Library staff can take requests for material.

Services not provided
- no seating in this scenario; there is no place to sit to read.
- no table space; hospital staff has no place to place heavy books.
- no circulating collection or back-issues of journals; to obtain any circulating books or journals later than the current year the user must fill out a request and wait for delivery from off-site.
- no computers; hospital staff does not have access to electronic subscriptions
- no printer – hospital staff cannot print off literature searches or articles
- no online catalogue – hospital staff cannot look up materials
- no instruction without computers and seating space

Resources required
one or more additional full-time staff required to do the work of retrieving and reshelving materials off-site.
continued upkeep of off-site facilities.
Scenario #2: a circulating collection

Circulating material, staff and photocopier = 1477 sq. ft.

Services possible
Hospital staff can come to library to borrow books and can photocopy.

Services not provided
- no reference material available
- patient care decisions cannot be supported 24/7
- no seating space in this plan; hospital staff cannot can sit and read.
- no table space; hospital staff have no place to place heavy books.
- no journals; to obtain any journals the user must fill out a request and wait for delivery from off-site.
- no computers; hospital staff do not have access to electronic subscriptions
- no printer; hospital staff cannot print off literature searches or articles
- no online catalogue; hospital staff cannot look up materials
- no instruction without computers and seating space

Resources required
- additional Library Assistant staff working off-site to answer reference questions.
- one or more additional full-time staff required to do the work of retrieving and reshelving materials off-site.
- continued upkeep of off-site facilities.

Scenario #3: a reference collection with seating

Reference, photocopier, computers and seating = 1494.50 sq. ft.

Services possible
Hospital staff can come to library to look up quick reference information, can photocopy and can see what is available in the library. There are places for hospital staff to sit.

Services not provided
- no staff available to take orders for materials
- no material may be taken out of the library
- no library instruction
- no library staff to provide assistance for interlibrary loan, reference questions, online search help etc.
- no circulating collection or back-issues of journals. To obtain any materials the user must fill out a request and wait for delivery from off-site.
- no online catalogue – hospital staff cannot look up materials
**Resources required**

one or more additional full-time staff required to do the work of retrieving and reshelving materials at the Dartmouth General Library
continued upkeep of off-site facilities