Past President's Message

The Annual Meeting has come and gone and I can now look back on my year as MAHSLIN President. As I mentioned at the meeting, this was my first time as president of any organization and I am glad to say I enjoyed every minute of it. Thank you all for the opportunity.

It was a pleasure to watch from the sidelines as Chris and her Committee planned and guided the 2008 Meeting from a little idea to a successful conclusion. The Education Committee, co-chaired by Alison Clapp and Nathan Norris were extraordinary again this year running several outstanding and well-attended programs. Megan and Dorothy managed to publish several informative newsletters this year. Jeanie VanderPyl continued to administer and expand the popular StatRef program and negotiated a MASHLIN membership in NELINET. Pat Vigorito kept our finances in good order and Julie Whelan kept excellent minutes of our meetings. Kathy McCarthy kept our By-Laws under control and Melinda Saffer Marchand organized our Archives. Also a big thank you to Rhoda Moskowitz of the Nominating Committee for recruiting a new secretary and president-elect.

A special thanks goes to Alison Clapp who had the vision to see that the MLA Medspeak brochure
definitions were not understandable and undertook the complete revision of all the brochures. Along with help from NECHI, BBLC, SEMCO and WINNIC, 5 brochures have been rewritten and accepted by MLA. The first Medspeak brochure has been published with credit given to MAHSLIN on the front cover. What I am trying to say here is that a group like MAHSLIN is not run by one person. It will not and can not survive without your help.

I apologize if I have forgotten to recognize everybody. As I write this, all my books, folders, journals and everything else have been packed away for a move to new smaller quarters that will happen May 7. So I am working from memory only.

Submitted, Bette Bissonnette

2008 MAHSLIN Annual Meeting Partners

MAHSLIN would like to thank this year’s Partnership Program participants for their generous support of our organization: Thank you for contributing to the 2008 Annual Meeting.

- Basch Subscriptions, Inc.
- BMJ Group
- Ebsco Information Services
- Elsevier
- Nelinet/TDNet
- New England Journal of Medicine
- Ovid
- Rittenhouse
- STAT!Ref

We would also like to thank the NN/LM New England Region for their generous support.

MAHSLIN kindly appreciates your support.

Submitted, Terri Niland

HALL of Fame Award

This past week, I've been thinking of one word that best describes Sandra Clevesy, our 2008 MAHSLIN Hall of Fame recipient. The word that came to mind is quality. Sandy Clevesy has made quality contributions to our profession.
After graduating from Simmons, Sandy’s first medical librarian position was at Hale Hospital. Four years later, she became library director at Lawrence General. In 1976, she became director of library services at Framingham Union Hospital.

Colleagues agree that status quo just isn’t part of Sandy’s style. She led the way for many of us by demonstrating a progressive vision with an uncanny ability for predicting new trends in technology. As a result library services were streamlined to increase productivity & user access.

The library community has benefited from Sandy’s creative ideas at the local, state & national level. Sandy taught the Medical Librarianship course at Simmons. She was an early member and always a leader of the Consortium for Information Resources. CIR members cooperatively shared their library services and resources. Sandy contributed a chapter on this kind of hospital library cooperation in Hospital Library Management, a book published by MLA

According to Chris Bell, MAHSLIN itself benefited from Sandy’s technological savvy. After many unsuccessful attempts to publish a paper based union list of serials for resource sharing; Sandy had a solution. Through the cooperation of NLM, who provided an automated serials bibliographic record listing, an outside computer vendor and several hospital consortia, MA produced its first union list in the 1980s. This first list and its process became the national standard for automating Union lists and was the precursor to the current serhold records that route our ILL activity through DOCLINE.

On a regional level, Sandy served as secretary, treasurer and program chair in NAHSL. (Not at the same time) On a national level, she served as president of the Hospital Library Section of MLA, served on its executive committee & nominating committee she has presented various papers and participated in panels at our national meetings. In addition, Sandy has published several articles in the Bulletin of the MLA. Beyond all of this, those of us who know her well believe that her most important quality is she takes the time to support and mentor others as probably many of you in this room would agree.

Please join me in thanking Sandy for contributing so much to our profession from MW to the national level. We wish you only the best.

Submitted, Rhoda Moskowitz

MAHSLIN ANNUAL MEETING April 25, 2008
Ethics of Stem Cell Research, Patrick Taylor, JD
submitted by Alison Clapp, Children's Hospital Boston

The MAHSLIN Annual Meeting included a range of topics and speakers with the morning session focusing on ethics. Patrick Taylor’s presentation was not intended to give the audience a specific
viewpoint regarding the ethics of stem cell research but rather to provide the background to better understand where we are currently in the U.S. In looking at stem cell research, science, ethics and the law all bring differing perspectives to the topic. The overriding theme throughout the presentation is that this is a highly complex topic with no easy answers.

The first part of the talk described different ways ethicists and commentators analyze ethical issues in stem cell science. The most well known issues relate to how stem cells are derived. Some of the ways stem cells can be generated include in vitro fertilization (IVF), somatic cell nuclear transfer (SCNT), and induced pluripotent cells (iPS cells). Each has its own ethical issues. As new forms of derivation are developed they will have their own unique features and perhaps differing ethical evaluations. There are other issues than just derivation however, for example:

- Standards for informed consent
- Issues of moving from preclinical research to clinical trials to therapies
- Fair and reasonable access to trials and therapies
- Fair distribution of benefits to donors
- Sharing data and materials
- Allocation of resources (cure vs. preventive care)
- Human-animal chimeras
- What are the effects on “personhood” of the neural transplant recipient

Because clinical trials involve a unique set of ethical issues, Mr. Taylor covered some of those factors in more detail including issues in healthy volunteer testing, justice in disease selection and recruitment, moderating therapeutic expectations, avoiding ‘coercion’ when the needs are dire, and truth-telling with investors, the press, consumers and the government. The fact that the research is developing so quickly can make it difficult for ethics to keep pace with the progress.

U.S. federal policy has many aspects. The most well known is the limitation announced by President Bush that only lines created prior to a certain date would be supported with research funding. The difficulty turned out to be that far fewer lines than anticipated were actually useable, and in addition that the limit excluded promising new areas of research like SCNT. In addition, the policy requires separation of funding and resources for fundable and other lines, so causes additional complexity and duplication, and poses a huge obstacle to setting up research cores. Federal policy also includes various agencies responsible for human subject research and drug development, as well as patent policy. Because federal involvement is restricted to the presidential lines, while leaving stem cell inventions patentable, it has left an unregulated gap for commercial companies to obtain patents, restrict data sharing, and operate without rules and oversight that would govern federally funded research. The latter part of the talk focused on the funding conundrum: federal vs. commercial and some of the specific issues related to each. NIH data and materials sharing standards apply only to the restricted funding for the few approved lines. Contrast this with commercial funding which has licensing restrictions based on corporate self-interests meaning sharing can be limited and decisions may be determined based more on “free market ethics” rather than for the public good.

Because there has been no strong federal direction in this area, various others have offered
varying opinions. The National Academy of Sciences created the first national ethical standards for research. While they addressed many areas, they did not address data sharing or distributional or clinical research ethics. The International Society for Stem Cell Research Guidelines is similar, but also focuses on global sharing and global dialogue regarding evolving ethical and scientific standards. In the U.S. some states such as California and Mass. have chosen to fund research while others prohibit or limit research. In most instances the NIH takes the lead in science and research, but in this instance there is tremendous fragmentation with commercial interests certainly playing a larger role. The lack of a U.S. “coherent national approach” was contrasted with Germany and the UK which represent different approaches but at least consistency.


Submitted, Alison Clapp

Moving On: Inspired by MAHSLIN

At the close of the MAHSLIN Business meeting I had reached my term limit as secretary of MAHSLIN. As I talked with Olga Lyczmanenko about “handing over the pen”, I felt a lump in my throat. While driving back to Boston, I reflected on my four years serving on the MAHSLIN Board. It was definitely a professional “high”.

Many presidents and their boards reigned during my tenure. Cindy Hutchison was leaving as I came. Kathy McCarthy was beginning. They were followed by Anne Fladger, Margo Coletti and Bette Bissonette. Each provided their own style of leadership, energy and organization. Board members continually excelled in their various duties. Contributions that come immediately to mind include Pat Vigorito’s investment of our funds into interest bearing CDs; Cindy and Brandy’s work on the membership database; Nathan and Alison’s continual offerings of high quality education programs; Margo’s perseverance in bringing us a redesigned brochure and innovative website; Jeanie Van der Pyl’s tireless surveying of members and negotiating with vendors, as she strives to find the best, most affordable online collections for our members. Because of her projects, NELINET offered MAHSLIN membership at the sponsor level. Now all members have access to NELINET training classes at discounted rates. The newsletters by Dorothy and Megan have kept us current and connected. Then there is the Olympic like passing of the torch as MAHSLIN board members campaign year after year to have Mass Medical Society include a library with librarian as part of the hospital CME accreditation standards. Or, consider the quality of our annual meetings where year after year we learn about the latest developments in healthcare, libraries and technologies.
With hospital libraries closing, administrators commandeering our space, and more and more tasks and technologies added to our job descriptions, it’s easy to feel depressed and negative about our profession right now. But then I think of MAHSLIN. Remembering one of my favorite children’s books, I think of it as the “little organization that could.” With hard work, perseverance and a vision of the future, MAHSLIN doesn’t give up and continues to achieve outstanding results for our members and our profession.

However, I must admit, that I am very happy not to have to drive through the Wyman St/Winter St exit on a regular basis.

Submitted, Julie Whelan

Consortia Reports given at the MAHSLIN Board Meeting
BBLC Report—February 2008

In the upcoming newsletters similar reports from SEMCO & NECHI will be available here.

Overview

BBLC or the Boston Biomedical Library Consortium dates back to 1978 and was established primarily for resource sharing and to discuss shared issues. It appears that little has changed. In 2005, as the new Medical Librarian at New England Baptist Hospital, I began representing the hospital library at meetings and found an extremely valuable resource. The previous Chair of BBLC, Bette Bissonette, described the group’s interaction best in her outgoing remarks last June. She said that “although we are a small group, there is always a lively discussion and everyone leaves just a little bit smarter.”

Maintaining the network

Over the past year, concern about attendance prompted discussion about the purpose of BBLC, about its strengths and its value. In the end, the consensus of the group was that BBLC offers support and aids in professional development. Members were strongly in favor of maintaining the BBLC network and the relationship and contact that came along with it.

Work Demands

Many of our member libraries, however, are short on staff and long on work. In many instances, one person libraries predominate and the work load has increased even though predictions had libraries going the way of the dinosaurs. Currently, five meetings are held each year. Demanding schedules led us to reexamine and propose reducing the number to four meetings per year. That
issue is to be voted on later this year in March. (The group has since voted to meet 4 times a year.)

New Member

Earlier this year, BBLC added a new member to its network. Our newest affiliate is Somerville Hospital which is represented by Trish Reid. Geographically, our reach includes Boston, Brockton, Burlington, Cambridge, Framingham, Lowell, Natick, Newton, Norwood, Salem, Somerville, and West Roxbury. Our meetings are usually held in Newton at Newton-Wellesley Hospital thanks to Chris Bell who books the meeting rooms almost a year in advance.

Health Literacy

Meetings are never dull and there is always something to discuss and much to learn from BBLC colleagues. At our September 2007 meeting, we focused upon Health Literacy. Donna Beales addressed our group on health literacy and plain language in a highly entertaining and interesting presentation. It was startling to learn that over half the adult population in the U.S. does not read above an 8th grade level. Also, when someone is battling a disease, their comprehension level is compromised; even college graduates’ reading levels drop steeply. Following Donna’s presentation, Alison Clapp initiated this group to the rewriting of MLA MedSpeak brochures into a simpler, more easily understood format. The goal was to simplify intricate medical language to a 5-6th grade level.

A Name Change

Beth Israel Deaconess's Medical Library Services, under Margot Coletti, initiated a name change this year that sparked some reaction. The Medical Library is now part of Knowledge Services and Margo’s title was retooled to Director, IS/Knowledge Services; library staff are information specialists. The addition of Information Commons to the Agoos Medical Library name breaks the perception of just a traditional library and reflects the diverse use of the space.

Additional job roles

During the year, librarians at Saints Medical Center and New England Baptist Hospital were assigned additional roles and responsibilities – those of CME program coordinators Time is biggest challenge. Dealing with the huge amounts of paperwork associated with events and new CME guidelines while trying to maintain a timely and responsive information service is a definite challenge!

Professional development

There is an active effort directed to promoting professional development and an awareness of current industry issues and trends. Copyright, DOCLINE issues, and health literacy are some of the topics that have been addressed in the past 12 months.
Summary

Despite the difficulties of increasing work demands, BBLC is an organization that is evolving with the times. It provides a valuable forum for discussion, networking, and professional development.

The BBLC report was given by Olga Lyczmanenko, BBLC Chair 2007-2008, at the MAHSLIN meeting on February 1, 2008.

Ready or not? Emergency Preparedness and You

Most of us think… that will never happen to me when it comes to disaster planning.

We need to change that mind set. Being prepared with an emergency response plan will help you preserve your collection, space and resources the best you can while continuing essential services for your users.

Though we do not live in a high risk area for natural disasters like California or Louisiana, we can certainly benefit from being prepared for common New England disasters like flood and heavy snow.

You might ask, “Where do I get started? Or even why should I bother?” First, let’s address the second question. The essence of our services as health information resources at the point of care, demand the continuity of services even in times of disaster.

To address the first question, we can get started by asking some basic questions about our space, collection and services.

Questions to ask:

- What are the risks to my library?
- What are my essential services and resources?
- How can I assure my essential services and resources are maintained during/after a disaster?

Once you have assessed these three basic questions for your library, you want to take a look at how you can preserve “continuity of service” in disaster.

The NN/LM has a new toolkit to help you do just this. Check it out at: http://nnlm.gov/ep.
NN/LM Emergency Preparedness & Response Plan’s Toolkit will help you:

- Learn about the latest developments in the NN/LM Emergency Preparedness and Response Plan initiative
- Learn how to create a Memorandum of Understanding with a buddy library
- Learn about disaster plan templates like dPlan and PReP
- Learn the steps in the service continuity plan
  - Assess your risks
  - Determine your essential services
  - Plan for continuing of essential services
  - Determine your essential resources
  - Determine a continuity of access plan for your essential resources
  - Know how to contact your RML
  - Drill
  - Review and update

The NN/LM has identified preparedness “goals” for members. We hope you will and will help you to:

- Maintain an up to date disaster plan
- Establish a service continuity plan
- Identify a back up library
- Create a Memorandum of Understanding (MOU) with that back up library
- Know how to contact your RML for help!

We realize this may seem like a lot to ask. But, being prepared has its benefits. It shows our organizations that we value our collections and our services. It shows our buddy libraries that we support each other. And, most of all it keeps our essential services alive in times of disasters which can be life saving as our services provide health information at the point of care, which is in fact a matter of life and death.

At a minimum, we recommend the following steps:

- Identify your core services and resources
- Create a floor chart of the library with shaded collections to be saved/pulled
- Identify a buddy library for continuity of services
- Know how to contact the RML for help

For more information, stay tuned to the NN/LM Emergency Preparedness & Response Plan’s Toolkit: [http://nnlm.gov/ep](http://nnlm.gov/ep) I would like to wrap up with an important excerpt listing “must know” resources for Emergency Preparedness from the NN/LM Toolkit:
The Gilbert M. Cogan Memorial School

Gale Cogan, former librarian at Saints Medical Center in Lowell, has been supporting a medical library that she helped start in Cambodia for many years. She visits many of us on a regular basis to collect our discarded medical books and journals, packs them up and ships them to Cambodia. However, times have changed and the library in Cambodia now has access to many journals online. Gail has stopped sending journals but still needs medical books and especially books on CD that are no more than 6 years old.

As part of her continued interest in Cambodia, last February, Gale and her family dedicated a school in the Kon Pisei District of the Kampong Speu Province of Cambodia in her late husband Gil's name. The school, in a rural part of Cambodia where a paved road is a true luxury, is more than an hour from Phnom Penh. It has facilities for 85 students and offers other things besides basic education. A new well and a back-up well have been installed so clean filtered water is now available. Also a school nurse will attend to basic health needs. The computer is currently run by 2 car batteries but will be powered by rooftop solar panels soon.

As you know, Gil Cogan was a very well respected pediatrician in the Lowell area for many years. A school in his memory is a fitting tribute to a man who dedicated his life trying to improve the lives of children.

Submitted, Bette Bissonette
Announcements

On April 15, 2008, Bonnie Hsu retired as Library Director from South coast Hospitals Group, New Bedford, MA. With over 20 years of service at South coast, Bonnie's legacy includes the growth of the St. Luke's Hospital Health Science Library and the successful merger of 3 hospital libraries. Maintaining on-site library presence at St. Luke's, Charlton Memorial Hospital in Fall River, MA, and Tobey Hospital in Wareham, MA, Bonnie standardized policies and coordinated holdings. Her sense of humor and attention to detail will be missed by her staff and patrons alike.

Submitted, Jennifer Lanouette, MLIS, AHIP
Patricia M. Vigorito, MLS

Cindy Hutchison is retiring from New England College of Ophthalmology, Boston, MA, June 30th

Sandra Clevesy is retiring from Metro West Medical Center, Framington, MA