

Introduction

2009 was another successful year for the Electronic Health Library of British Columbia (e-HLbc). Despite the economic difficulties faced by many libraries in British Columbia and across Canada, e-HLbc added more full text to its collections, renewed its core suite of resources, and tripled its affiliate member roster. 2010 promises more exciting achievements.

In the following pages you will find an overview of e-HLbc, highlights of successes achieved in 2009, and what lay ahead for the consortium in the year to come.

"Research like that provided by e-HLbc ... where would we be without it?"

Deborah Collette BScN RN Research & Evaluation Coordinator, Nursing, Northern Health Authority

Overview

What is e-HLbc?

A project of the BC Academic Health Council, e-HLbc is a consortium working with health and post-secondary libraries across British Columbia to provide all health students and practitioners in BC with reliable and equitable access to electronic health resources.

With their e-HL*bc* membership, institutions are provided access to a core suite of health resources. A foundational body of information for any organization providing health instruction to students or research to practitioners, these resources provide access to approximately 1,500 full text journals, 360,000 evidence-based reviews, and abstracting and indexing for about 11,000 journals from the medicine, health and allied health fields.

e-HL*bc* also provides members with a forum for collaboration between the education and health sectors – a crucial component to facing the challenges of providing quality care to BC residents.

Who Benefits From e-HLbc?

- 92,000 health practitioners
- 182,000 students, educators & researchers
- 41 members in health, post-secondary & government sectors

Plus ...

 All residents of BC benefit by having health practitioners with access to highquality health resources

What is the value of e-HLbc?

Cost savings at the system level

Before e-HLbc, students and practitioners were often licensed to access health databases through more than one institution. For example, health practitioners were covered by licenses through their health authority, their professional association and, if they were clinical faculty, a post-secondary institution. This resulted in duplicate or triplicate costs. Licensing at the provincial level eliminates duplication of expenditures and saves money.

Cost savings at the organization level

Licensing for 41 organizations across BC, e-HL*bc* leverages larger numbers to garner better pricing for members. In 2009/10, members enjoyed the following discounts negotiated through e-HL*bc*:

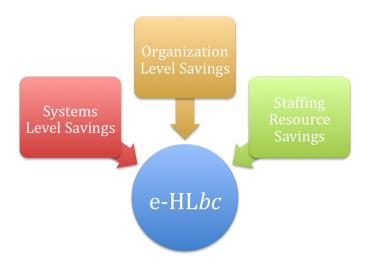
- 20% off of retail price American Psychological Association
- 50 55% off of retail price EBSCO
- 45 90% off of retail price Ovid

In other words ...

- Approximate cost of licensing e-HLbc's core suite in 2009/10 = \$1,200,000 USD
- Estimated retail cost for the same suite in 2009/10 = \$1,800,000 USD
- 50% estimated total savings licensing the core suite through e-HLbc

Cost savings by reduction in staff time.

e-HL*bc* provides a service that saves organizations valuable resources and staffing time by decreasing members' interlibrary loan costs as well as reducing staff time spent on negotiations, marketing, and technical support. Resources saved by working through e-HL*bc* leave busy staff free to do what they do best – assist clients and support their organization.



e-HLbc's Core Suite of Resources Includes...

- » Biomedical Reference Collection
- » CINAHL with Full Text
- » Evidence Based Medicine Reviews
- » LWW Total Access Collection
- » MEDLINE Index & MEDLINE with Full Text
- » PsycARTICLES
- » PsycINFO

Overall...

Top 3 Databases for Searches:

- 1. PsycINFO
- 2. CINAHL with Full Text
- 3. Ovid Medline

Top 3 Databases for Full Text Downloads:

- 1. PsycARTICLES
- 2. CINAHL with Full Text
- 3. LWW Total
 Access Collection

Health Sector ...

Top 2 Databases for Searches:

- 1. Ovid Medline
- 2. CINAHL with Full Text

Top 2 Databases for Full Text Downloads:

- 1. LWW Total
 Access Collection
- 2. CINAHL with Full Text

Post-Secondary Sector...

Top 2 Databases for Searches:

- 1. PsycINFO
- 2. CINAHL with Full Text

Top 2 Databases for Full Text Downloads:

- 1. PsycARTICLES
- 2. Medline with Full Text

2009/10 Measures of Success

The Year in Statistics

Patrons at e-HLbc member institutions continue to benefit from having access to e-HLbc's core suite of resources. Consortial usage statistics attest to the continued relevance and utility of e-HLbc databases.

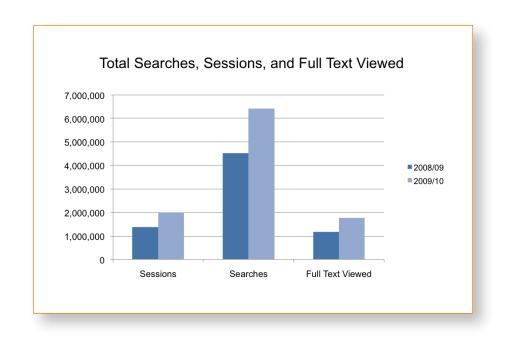
In 2009/10, students, researchers and practitioners

- Held 2,010,000 Sessions on e-HLbc Databases,
- Performed 6,416,000 Searches, and
- Viewed 1,784,000 Full Text Articles.

Since the total costs for licensing the core suite amount to approximately \$1,200,000.00, cost per use remains low compared to standard costs for information in the health science disciplines:

- **\$0.61** = Cost per session
- **\$0.19** = Cost per search
- \$0.69 = Cost per full text viewed

Compared to last year, members have seen increases in the amounts patrons have used, searched, and found full text articles from e-HLbc resources.



The Year Ahead

The coming year will be an exciting one for e-HLbc. Together, these undertakings will set a direction for e-HLbc's future.

Forging a New Path

e-HL*bc* exists in a dynamic environment. Information resources and services are rapidly changing, and the needs of e-HL*bc* members in the post-secondary and health sectors are evolving with the shifting needs of patrons and end users.

In 2010/11, e-HLbc plans to engage in a strategic planning process in order to insure that the consortium continues to meet the shifting needs of members, identify strategic directions for e-HLbc to follow, and guarantee that the consortium is responsive and flexible – capable of facing the challenges of the changing health information delivery environment.

Licensing More Resources

As health education programs grow across the province and as practitioners and researchers feel an increased demand for reliable information to help support their work, e-HLbc members are required to grow their electronic library collections and license costly health resources.

Leveraging existing consortial infrastructure, in 2010/11 e-HLbc will begin providing members opportunities to develop their electronic library collections. While maintaining the core resource suite, e-HLbc will also offer boutique licenses. Members may opt in to these licenses as their institution's priorities and budget dictate.

Adding More Members

e-HLbc is only as strong as its members. In 2009/10, the consortium tripled its affiliate member roster and in the coming year, e-HLbc will continue to nurture relationships with organizations across the province in order to build our membership base and work toward fulfilling our vision:

"Now that there is continuity in the health sciences information resources available at educational institutions and in professional practice through e-HLbc, new teaching and learning opportunities are possible. Students become familiar with the resources during their program of study and use the same resources when learning in a professional setting."

Charlotte Beck

Reference Librarian Woodward Library, UBC

e-HLbc Licenses e-CPS and e-Therapeutics+

The online edition of the Compendium of Pharmaceuticals and Specialties, **e-CPS** contains information on proprietary and nonproprietary Canadian drugs intended for human use.

e-Therapeutics+ is a comprehensive drug information resource that includes e-CPS, Therapeutic Choices (the condensed online version of CPhA's text on treatment options for conditions and diseases), Lexi-Comp's drug interaction analyzer Lexi-Interact, printable self-care information for patients, and links to Health Canada advisories, warnings and recalls.

To provide the entire British Columbia academic and health care community with province-wide, consistent, high quality, costeffective, equitable, and easily accessible health library resources that will support and improve practice, education, and research.

What would be the provincial impact if e-HLbc no longer existed?

e-HL*bc* provides the entire BC academic and health care community with province-wide, consistent, high quality, cost-effective, and equitable health library resources that support and improve practice, education, and research. Without e-HL*bc*, health and post-secondary libraries across the province would experience:

Increased costs

Licensing a core suite of health resources for both the post-secondary and health sectors allows e-HLbc to leverage larger numbers to garner substantial discounts on expensive health information resources. Without e-HLbc, individual institutional costs would rise significantly.

Loss of equity

Through e-HLbc, all health practitioners and students in the province have access to the same set of health information resources. Since costs for licensing these resources would rise significantly were institutions licensing these materials individually, without e-HLbc many health authorities and smaller post-secondary institutions would find licensing these critical resources impossible. Health practitioners and students at these organizations would be deprived of key health information, resulting in a negative impact on students' learning outcomes and BC patient care.

Decreased collaboration between health and post-secondary sectors e-HL*bc* serves as a major strategic forum for effective collaboration, partnership and leadership by library leaders in health care and education. Without e-HL*bc*, there would be no forum to communicate, develop consensus on strategic planning, and identify strategies for achieving those objectives.

"Due to strained manpower resources, I often find myself outside my area of expertise. In these cases, I have to get the best information in the timeliest manner. e-HLbc helps me accomplish this. Even within my practice areas, information and best practices are constantly changing and I find I need to update myself. e-HLbc offers me a quick avenue for information gathering so I can give patients the best care possible."

John Weber, BEd. RN. MN. Clinical Practice Educator, Kelowna General Hospital

