
Introduction

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NEARLY TWO DECADES HAVE PASSED since the publication of the last issue of *Library Trends* devoted to health sciences libraries. During those decades, many far-reaching changes have occurred. Arguably, most of these changes can be summarized in two words—technology and economics. The increasing numbers of microcomputers in the early 1980s, followed by the growth of facsimile transmission and the advent of Internet, have facilitated the delivery of information and documents not just to the library, but to that most convenient of all locations, the requester's workstation. Technological advances in medicine have produced a health care system that improves and prolongs health but whose cost has created serious inequities in distribution and access. In the 1990s, the economics of health care in North America occupies national attention and the pace of technological innovation continues to accelerate. It appears today that this decade will be characterized by too few resources—and too much information. Decisions about allocating resources and selecting among abundant information sources are two of the greatest challenges facing libraries today.

Twenty years ago, Harold M. Schoolman (1974) speculated about how libraries and librarians would move into the future. In his 1974 article which concluded the *Library Trends* issue on Health Sciences Libraries, he identified three important themes: (1) changes in education for the health sciences professions, (2) increased accountability in an era of scarce resources, and (3) advances in the production, recovery, and synthesis of information. Schoolman's 1974

ideas are still remarkably pertinent, and many of the issues he identified are addressed by the authors in this volume. In the first article, Frieda Weise provides an overview of developments in health sciences libraries and describes in particular the evolution of the National Network of Libraries of Medicine (formerly the Regional Medical Library Network). She notes many of the same issues that Schoolman identified and discusses the ways in which the National Library of Medicine and the Lister Hill Center have affected academic and hospital libraries.

Two articles in this volume focus on educational issues. Fred Roper and M. Kent Mayfield describe how the Medical Library Association (MLA) identified the knowledge and skills needed by entrants into the profession of health sciences librarianship. *Platform for Change*, MLA's educational policy statement, takes a cue from medical and allied health education and its commitment to a continuum of learning throughout a practitioner's professional lifetime. The document states clearly and unequivocally that health sciences librarians must take responsibility for their own learning, including updating and enhancing their knowledge and skills.

Jocelyn Rankin and Jean Sayre discuss the librarian and the library in the context of the learning environment for all health professionals. Harking back to Schoolman, they call for an increased understanding of educational theory and techniques among librarians so that they can more easily address the learning needs of both students and clinicians. With several reports on medical education providing the background rationale, it has become increasingly clear that librarians must establish links with their colleagues in the health education environment. Rankin and Sayre provide examples in which substantial progress has been made in this direction.

Beginning in the 1970s, the government, the insurance industry, and the medical and allied health professions themselves began calling for greater accountability. Librarians, too, responded to the need to justify their existence, to document their impact, and to scrutinize their operations. The need to be financially responsible for the use of resources is coupled with greater pressure to be accountable for the outcome of the care delivered. Addressing service to health care administration, Holly Buchanan traces the development of what is today known as the "quality movement" and shows how it can be used to demonstrate accountability both in libraries and in the overall health care environment.

Joanne Marshall describes services to clinicians—perhaps the most dramatic aspect of medical librarianship. Accountability here is linked to patient care outcomes. She points to ways in which librarians have documented and demonstrated that providing

information to clinicians at the time and place of need can make a visible and measurable ("life and death") difference in the outcome of patient care. Similarly, access to information is essential in the provision of economically efficient health care delivery.

Other articles in this volume concentrate more specifically on various aspects of health information resources—their organization, dissemination, and synthesis. Nancy Roderer focuses on the dissemination of biomedical information. In addition to the technological advances represented by telecommunications networks, she discusses the organizational and structural changes that have accompanied them.

Stephen Squires's article on the Unified Medical Language System (UMLS) shows how the UMLS is a tool for total medical information management that is not limited to bibliographic control. The UMLS provides access to many types of biomedical data and information to a variety of users—not just library users but health care professionals working in the health care and biomedical arenas.

The emphasis on user needs, so clearly reflected twenty years ago, continues into the present. This user focus, so often articulated by health sciences libraries, takes on an additional dimension, however, in two of the articles contained in this volume. Karen Dahlen traces the growth and development of consumer health information—an issue hardly addressed twenty years ago. She projects new and expanded roles for librarians in ensuring that consumers have access to the information they need to take more responsibility for their own health care. David Ginn, in his discussion of AIDS information centers, describes a type of information need not anticipated earlier. AIDS information centers are an example of how library and information professionals can respond to a need identified by society. While the establishment of such centers is not new, each time another devastating disease such as AIDS appears, the need for such a concerted effort is reemphasized.

The concluding article in this volume, by Nina Matheson and Valerie Florance, describes an evolving role for health sciences librarians as designers and producers of information products and services to meet client needs. Drawing upon their experience at Johns Hopkins University's Welch Medical Library to illustrate their points, Matheson and Florance provide a fascinating glimpse into the future of health sciences librarians as knowledge workers.

In planning this issue of *Library Trends*, leaders in medical libraries were polled for their suggestions on topics and authors. The final selection is the result not simply of personal preference but of a conscious effort to reflect the perspective of the most thoughtful of today's health sciences librarians. The authors were

selected for their broad experience as health sciences librarians, for their vision, and for their intelligent and thoughtful observation. Working together over these months, we reminded ourselves that our purpose was not to produce a literature review in the traditional sense, nor to compete with the well-established and highly respected *Handbook of Medical Library Practice* (soon to appear in its fifth edition) or *Hospital Library Management* whose second edition is currently in preparation. Rather, this collection of articles is intended to reflect the state of health sciences librarianship today from the unique perspective of each of the authors. It is intended to serve as a resource and a stimulus for health sciences librarians today and in the future.

REFERENCE

- Schoolman, H. M. (1974). The future: Libraries, librarians and users. *Library Trends*, 23(1), 165-175.