

# Electronic Collections Development : Strategic Choices and Pragmatic Decisions at the Medical University Library Lausanne

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**Abstract.** *Many questions remain unanswered concerning the electronic publications : mainly the issues dealing with pricing, licencing and archiving. Some earlier strong beliefs have lately been shattered : library consortiums have shown limits, the benefits of packages are questioned. In this context it is a real challenge to make strategic choices on how e-collections and e-services should expand in a library. However in a medical library the expectations of the physicians put a strong pressure on the librarians and drive them to improve and to extend the accesses to the electronic resources. At the medical University Library in Lausanne, a rather pragmatic approach has been taken to promote and integrate the electronic collections in a perpetual quest for performance and innovation.*

The e-collection (databases, books and journals) of the Lausanne Medical University Library was built over less than a decade around three major strategic options.

- **Package acquisitions of journals and books from vendors and publishers**
- **Collaborative negotiations and cooperative licencing at many levels through the participation to local, national and transnational consortiums**
- **A databases server which was meant to be the entry point to the electronic resources**

## Packages acquisitions

In the field of digital full text materials, a package is an aggregation of publications (journals, books) in electronic form. Packages are numerous and vary in sizes, content, structure and target.

We can mention two main types of packages such as :

- Vendor-based packages which include publications from numerous publishers aggregated on a single platform by a vendor.
- Publisher-based packages in which all the journals in the aggregation are from one publisher.

But whatever the provider, the package size may differ depending on the option chosen : either all the titles available or a limited number of titles related to a subject (business, medicine/health, law...) or related to a printed collection (presence or absence of a printed version in the library).

In Lausanne, the use of electronic databases was firmly established since 1994 with the installation that year of a local Ovid server offering access to Medline, Current Contents, PsycLit from all the computers of the campus. The first step into electronic journals was in

1997 through the acquisition from a vendor of a subject package in the medical field : the Core Biomedical Collection (CBC), on the Ovid platform. At that time that “html-only” collection covered 17 prestigious biomedical titles of various publishers - including Elsevier with the Lancet being part of the package (this was before the Sciencedirect launch !). The subscription to the CBC lasted for two years and was stopped when most titles became accessible on the publishers’ own platforms.

The choice of a subject-based package met the needs for a limited period of time, but it became rapidly obvious that a strategic change should be made in order to concentrate on subscriptions (licences) to publishers’ full packages as the offers that came onto the market encouraged bundling and going direct. As a package specialised in the medical field, the CBC was too specialised to cover the needs of the Lausanne multidisciplinary campus. At the same time university libraries, challenged by these new offers and motivated by the prospect of reconquering in electronic format some titles lost in repeated past cancellations due to the serials price increases, started to get organised. They united to decide that it was important to rapidly offer large electronic collections and thus build a critical mass in order to attract the end-users to the new means of information dissemination. So librarians joyously embarked on “Big deals” with publishers.

## **Cooperative licencing and consortiums in Switzerland.**

Even though Switzerland is a small country, cooperation between university libraries confronted with e-journals explosion was slow to develop at a nation wide level, since it is a federal state with a highly decentralised administration.

The country is culturally divided into 3 linguistic regions (French, German, and Italian) and politically divided into 26 cantons in charge of local administration, including education. Swiss universities are thus local -cantonal- institutions. Although there are 26 cantons, there are only 10 campuses. Considering the size of the country this means a university every 60 kilometers ! Each campus gathers on average around 10 000 students, with the notable exception of Zurich with 25 000 students. Out of the 10 campuses, only 5 have a medical faculty, two medical faculties in the French speaking part of the country, the three others are in the German speaking part with no medical faculty in the Italian part of Switzerland. Even in the age of globalisation and worldwide networks, cultural barriers still influence political, social and educational decisions in the Swiss confederation.

This context impacts strongly all cooperation activity. No surprising that collaborative efforts to share accesses to electronic resources emerged first on a local basis, even though on the local level the situation was not homogenous either. In Lausanne, the university hospital - and its medical library deserving both the medical students and the hospital medical and nursing staff - is attached to the canton’s department of health affairs and not to the department of education like the other university departments. This also means two different computer networks, two different ranges of class B IP addresses, etc... Besides, each Swiss university campus encompasses a great diversity of libraries, since there has been a long tradition of one specialised library per department (geography, biology, morphology, etc..) which resulted in printed collections scattered throughout the campus buildings and a relative autonomy of every single library responding solely to the academic head of the department. This proved a real hindrance when time came to consolidate inventories to get a better view of turnover and activity with the publishers.

In Lausanne, persistence and determination of a few librarians within the bigger university libraries (the medical library, the chemistry library and the main university library dedicated to social sciences and humanities) succeeded in a first bundled contract signed for the Lausanne campus with Springer quite early on, in 1999, and then in 2000 for Elsevier's Sciencedirect. These contracts were taken over two years later by the Swiss national consortium when it became operational.

The Swiss national consortium for university libraries takes the form of a central office of two FTEs in charge of negotiations and contracts for the sake of the academic community. It is supervised by a steering committee responsible for the consortium's strategic policies. The consortium - its activities, and some of the contracts - are partly subsidised by federal funding distributed through the Swiss University Conference. But the subsidies which presently cover about half the administrative costs and contract expenditures are due to disappear in 2007. All the costs of the consortium will then be shared between the members, that is to say the university libraries.

The Swiss consortium has also struck alliances with German and Austrian consortiums to form a transnational consortium dealing with the Nature Publishing Group licence. In-between a specialised collaboration had emerged among the five medical university libraries which formed a Swiss Medical Academic Consortium to negotiate for example with Blackwell the access to STM collection or with Ovid for the Lippincott titles. The national consortium was too heavily charged with the negotiations with large and multidisciplinary publishers to embark on negotiations for smaller or more specialised collections. However it is the wish of the Swiss consortium to gradually take over all the deals with the publishers, whatever the field and the size, with subsidies or no subsidies. It wants to establish itself as the sole responder to publishers when it comes to negotiate a contract even though not all campuses of the country are concerned.

All these layers being added, the number of electronic resources accessible in Lausanne now represent : 5 000 electronic titles, 100 online databases, mainly bibliographic and around 100 e-books.

Now when you have so many e-resources, how do you signal them ?

## **Databases server as the entry point to the electronic resources**

When so many resources are available, locating and accessing information is critical. Abstract – bibliographic – databases are in our opinion still central to the organisation of scientific information and must be presented to the users as the main gateway to access reliable information. In Lausanne, the most well-known and heavily used databases in the biomedical and clinical field, that is to say Medline, Biosis and Psyclit have been hosted for 10 years on the same platform, an ovid server, run locally until 2002, then online.

Linking from the abstracts to the full text was the very first step to integrate the resources. This was made not only from the ovid databases, but also from ISI Web of Science and from Pubmed after requesting from the NLM the permission to administrate the links to the resources available on the Lausanne site. Static web lists of electronic resources were also made at the beginning, but quickly replaced by a filemaker database which dynamically generates browsable and searchable lists on the

website of the library. The traditional catalog of the library run with the American library system Virtua was left aside, since it appeared too expensive and time-consuming to catalog and maintain with this system, as it is set up in Lausanne, all the electronic titles available.

However difficult they are to consolidate, the usage reports of the main providers of electronic information show a good and stable usage of the resources (see tables in the powerpoint presentation). Yet considering the money and efforts put into the system one may wonder where is the critical mass for the usage and what are the figures that tell you that you are approaching an optimum point between the expenses for the library budget and the gains for your end-users ?

However apparently the strategic choices were met with successes, and resulted in :

- a wealth of new resources for end-users
- a new drive for librarians to innovate, collaborate, interconnect
- a renewed image for libraries in the digital landscape.

Yet, in 2005 this patiently built organisation seems now to begin to shatter on its foundations and the three main options detailed above are seriously questioned. These changes of perspective are mainly due to changes in the marketplace.

## **Reasons to reconsider strategic choices**

Though libraries certainly gained a new image through the development and administration of electronic collections, their position remains extremely weak and vulnerable within their institutions and in front of the commercial providers.

### **A two-front struggle**

Over the last 5 years, many small departmental university libraries have been closed in Lausanne for two main reasons.

In some cases heads of department decided that the large electronic offer built by the major libraries of the campus was enough to cover the information needs of their departments. In some other cases, entire university departments were reorganised, downsized or even shut in Lausanne in order to merge with an equivalent department on another campus. Whatever the reasons for the closure of the libraries, collections were given away to libraries which showed interest, new acquisitions were stopped and subscriptions of course cancelled. But in that case no regard was paid to the non-cancellation clauses in the consortial agreements. Of course the closure of libraries may be considered as a case of “force majeure”. However this decline in subscriptions puts a strain on the relations with publishers, as the turnover is affected. Written and detailed explanations concerning the drop in subscriptions were requested by some of them.

Presently university libraries in Lausanne, are facing a new phase in the “journal crisis”. The current electronic services have not reduced costs but are creating new financial and administrative constraints. Human resources in libraries have already been partially cut, but there is level below which it is impossible for a library - even a digital one - to function correctly. In short, the libraries are fighting on two fronts :

1. publishers price increase of digital information,
2. reduced or insufficient institutional funding.

## **Fragmentation**

In this context it is difficult to continue buying large packages without discriminating more between the pricing options and the constraints. Libraries want more freedom in their choices. But in a complex environment, freedom is a demanding experience in a complex situation. Multiple options must be considered and analysed in order to get the best mix for each library. The analysis must take into account use and cost of resources. This new perspective encourages fragmentation instead of collaboration between the libraries. Local specificities tend to emerge. When we compare in Lausanne the usage statistics of the University on one side and the Hospital on the other side for different providers, Scencedirect for example, the ranking of the most heavily used titles are completely different (see table in the powerpoint presentation). User preferences in format (electronic vs. print) are also certainly different between clinicians in the hospital and researchers at the university. Does this mean that the hospital has to negotiate with Elsevier a different contract from the rest of the university ? Would it be cost effective ? Anyhow the national consortium licence with Elsevier Scencedirect has not been renewed at the end of 2004. Now the negotiations are run locally on each Swiss campus and some sites have already announced that they are dropping out and renounce to access the full package. At least libraries have gained the freedom to drop out !

## **Interconnection instead of aggregation**

Freedom of choice is also far from being guaranteed since on the providers' side on the contrary, there is a tendency through mergers and acquisitions towards concentration, bigger publishing houses, intermediaries and aggregators and consequently towards monopolies. Each big house now tends to keep hold of either specific content or specific technology and avoid diversifying the distribution channels for their digital materials.

Aggregation of electronic resources on a single interface is becoming more and more difficult since producers of databases and publishers of journals and books are becoming "content exclusive". Elsevier titles are only accessible on the publisher's own platform, same situation with Lippincott titles only accessible for institutions on the Ovid platform. Ebsco is planning a Cinahl Plus version with a broader and retrospective coverage that will be only available on the Ebsco platform. The other vendors being only entitled to sell "light" versions of the database. For an unknown reason Wiley seems to have the monopoly for distributing the pdf versions of the Cochrane reviews. Of course aggregation on a single interface sounds old fashioned since all information services now interlink. But efficient interlinking requires software (link resolvers), and maintenance.

## **Conclusion**

Although alternatives theoretically exist to unlimited use subscriptions, pay per view for example, or open access sources, at the moment there is no suggestion that these offerings

will be efficient enough to cover in the short term the needs of the end-users. Yet the challenge for the libraries is to convince the end-users themselves that they help the library to maintain its mission of information dissemination when they publish in open-access journals or participate in institutional repositories. Now it is time for libraries, particularly in the medical field to forge alliances with their users to counter global external providers.

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