

The State of Wisconsin's Health Science Library Resources in 2017

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Abstract

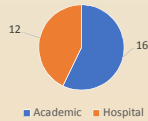
Objective: To identify trends in library resource acquisitions and cancellations among different types of libraries serving health science users in Wisconsin.

Methods: A Qualtrics survey was created. Introductory questions were designed to collect information on what major databases and resources the various libraries make available to their users. Subsequent questions concentrated on anticipated cancellations as well as desired additions. Additional questions about factors in decision making and whether the libraries were participating in consortia purchases were asked. Libraries serving health science users were invited to participate in the survey conducted in May 2017. Responses were limited to one per library.

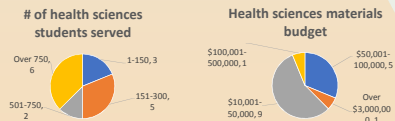
Results: 54 libraries responded to our survey. 28 libraries satisfied all participation criteria and completed the survey. 57% were academic libraries and the remainder were hospital libraries.

A "Picture" of our Respondents

28 Respondents



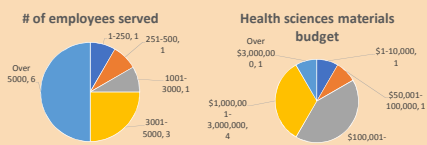
Academic Libraries



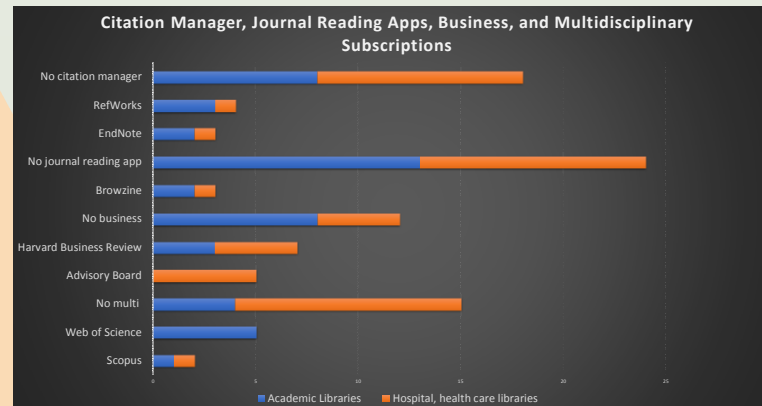
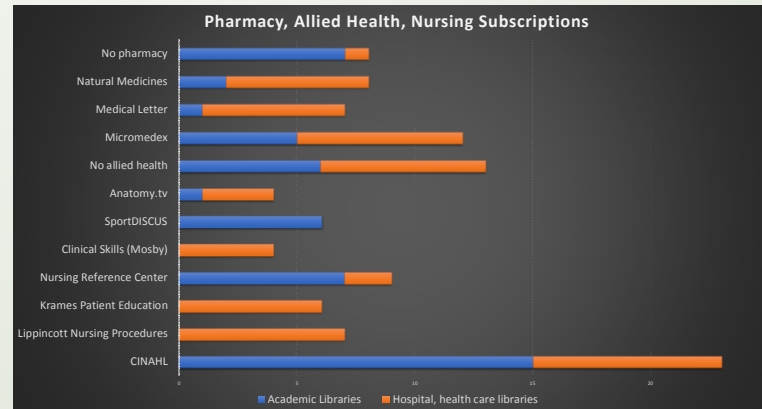
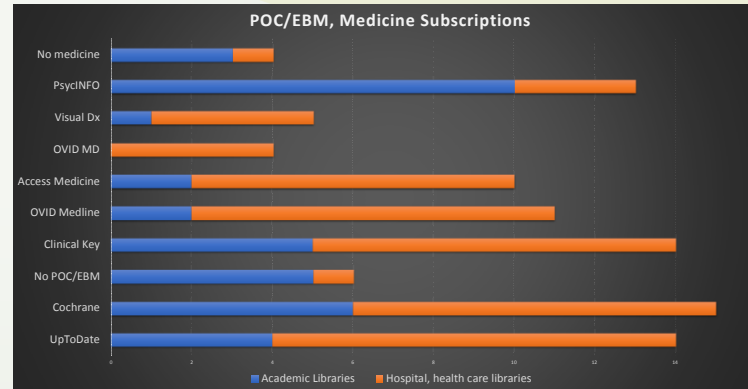
What health science programs do you serve?

Medicine – MD, DO	1
Physician Assistant – PA	4
Nursing – RN	12
Advanced Practice Nursing – MSN, NP, DNP	5
Advanced Practice Nursing – DPT, DOT, DSLP	3
Therapy – PT, OT, SLP	8
Psychology – PhD	1
Pharmacy – PharmD	3
Other	6

Hospital/Health System Libraries

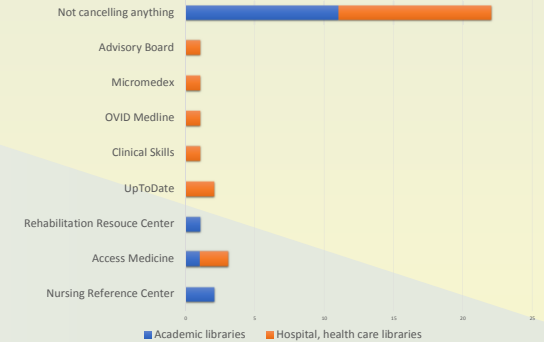


Resource Charts

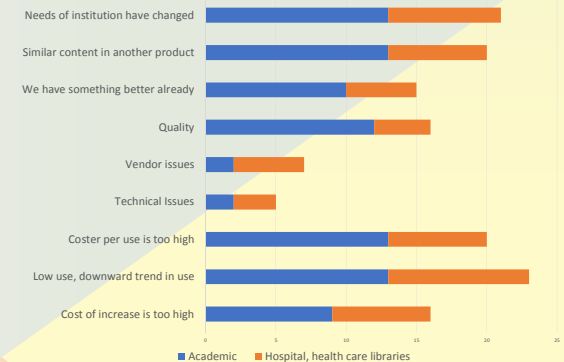


Cancellations

Considering Cancelling in the Next Year



Top Cancellation Reasons



Discussion

We were surprised at the relatively high number of libraries that reported that they are not planning on cancelling any of the resources next year. Since it is generally known that library budgets are not increasing at a rate that matches or outpaces market/inflationary increases, it is assumed that many libraries will have to make adjustments somehow in order to stay within their budgets. Since we were only asking about databases and major reference works, perhaps the libraries who are not planning to cancel will be making adjustments in other areas of their budgets, such as in their journal or book budgets.

It is worth noting all of the academic libraries who responded reported that cost per use is a factor in cancelling resources at least some of the time. But, while the majority of hospital libraries cited cost per use as a factor they always or almost always use, not all of them used that factor. Perhaps those hospital librarians are keenly familiar with the amount of help/questions/comments from users and use that information as evidence of use.

The low number of respondents makes it difficult to find many trends among the respondents. Having additional participants might result in more significant differences among the respondents.