

Health library spaces and the COVID-19 pandemic: insights from the Australian healthcare sector

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In response to the COVID-19 pandemic and subsequent stay at home orders, libraries in health services across Australia moved to virtual service models with limited or unstaffed physical libraries. This article considers the impact of the pandemic on physical library space in clinical environments. To investigate, seven interviews were conducted with library leaders from the Australian health care sector at the end of the momentous year of 2020 – as the country caught its breath following the initial waves of the virus.

The numbers from the pandemic are staggering. At the time of writing there were over 200 million coronavirus cases worldwide and over 4 million deaths. MEDLINE showed just shy of 100,000 records indexed against the COVID-19 MeSH subject heading and Cochrane had more than 10,000 registered clinical trials. Yet the numbers don't tell the whole story. Anecdotes and stories from the people who went through the experience provide essential context, enabling greater understanding as well as reflections on wisdom gained and lessons learned.

The authors would like to thank our interview participants:

- Barry Nunn – Library Services Manager at Northern Sydney Local Health District
- Helen Ried – Librarian at Central Gippsland Health
- Jane Orbell-Smith – Health Libraries Manager at Redcliff & Caboolture Libraries
- Mary Peterson – Knowledge Manager, South Australian Health
- Michele Gaca and Jessica Ware – Chief Librarian and eResources Coordinator, Health Sciences Library at Austin Health
- Richard Sayers – Clinical Knowledge Resources Manager at Queensland Health
- Trudi Maly – Director, Library Services at the NT Department of Health

In their response to the COVID-19 crisis each of the above library leaders found opportunity amongst the challenge. They drew on decades of previous change such as growth in digital infrastructure and library projects that had progressed technology. Also as a result of preceding change, physical library space had evolved to provide essential education spaces and social infrastructure where there is a strong sense of sanctuary for clinicians.

Responding to the crisis

Early responses involved developing COVID safe plans for physical spaces and urgent business continuity measures to keep providing research support services while transitioning library education to virtual delivery. As described by Trudi Maly, this largely involved “hunkering down and getting on with it” with a focus on solving the most pressing issues. Jane Orbell-Smith also talked about reaching out to colleagues in strict lockdowns to offer invaluable assistance with access to resources.

Projects in the pipeline were fast-tracked, such as the implementation of a RefTracker CRM in the Northern Sydney Local Health District. Richard Sayers described expediting plans to add icons for library resources to mobile devices in ambulances for quick access by paramedics. He went on to explain that this part of the experience was actually very positive because, “It created a sense of urgency, emergency and *mission*”. This was also evident in the way libraries moved swiftly to curate content about the virus, which resulted in phenomenal spikes in usage.

Reflecting on their experiences many months later, all interview participants urged health librarians to continue to market themselves and “jump in” even in the most challenging times and even if your organisation has not yet caught up. Barry Nunn for example, moved services to free Zoom accounts in his library before Skype was adopted by the organisation some months later. There was a need to just get on with it. Michele Gaca emphasised, “Don’t wait to be asked, stick your nose in at every opportunity”.

In-demand space during the pandemic

Shrinking physical collections have not only made way for online resources but also physical library zones for informal learning, training and meetings. Trudi Maly explained that the importance of this space, “was brought to the fore during COVID” particularly with meetings and education occurring online when few health professionals have access to a private office or the option to work from home. Barry Nunn added that hospitals remained open and busy, with physical and digital library spaces both supporting clinical care and mandatory education for all employees – as they always do.

It is not surprising that access to information and evidence was on an upward trajectory during the pandemic. Statistics correspondingly indicated that usage of physical libraries remained steady. Interviewees reported that door counter traffic was similar or only marginally down through 2020. This demonstrates that visitors use the physical space for a wide range of reasons beyond consulting with librarians about research and resources. While some patrons bring their own devices and seek to work in a quiet zone, Mary Peterson explained that across South Australia Health the highest demands are for quick access to a computer or to work on research, study or education.

Moreover, physical library space has importance as a clinical breakout space. Barry Nunn observed, "Space is very important and maybe more so now". It is important to allow the patrons to decide what they are going to use the space for, as long as it is within reason. Within reason is still important as Richard Sayers noted, "There is a difference between a student doss house and an actual working space!"

Value of library space

Librarians well know that, "[Libraries] are much more than an expensive room with books" (Trudi Maly). In reality the purpose of physical library space in clinical environments shifted away from print circulation a long time ago. Nowadays, hospital libraries contain adaptable areas with a focus on learning. In addition they can be routinely unstaffed (not just during lockdowns). Mary Peterson referred to examples in regional parts of her state and advised librarians to, "get over the thought that all libraries have to be [staffed] at all times during office hours, because we are not going to be able to do that". Richard Sayers also reminded us, "librarians can operate without a library" and when difficult choices have to be made, "developing online resources and keeping staff expertise" should be the priority.

However, the notion of a library as a place and the visibility that provides should not be under-estimated. Jane Orbell-Smith explained that as soon as you lose the physical space, "you almost become invisible ... and this is how we could end up losing qualified and highly experienced health librarians". Helen Ried and Jane Orbell-Smith both spoke about delighted reactions when physical spaces reopened after lockdowns. Jane said, "When [the library] reopened people were so grateful to have access again and to be able to use the space for time out". Similarly, at Central Gippsland Health patrons commented that "it is great to see the library open" as they quickly returned to the physical space for study and stress relief. Helen reported that even more patrons than usual were making use of their indoor and outdoor library space during that time.

Physical space vs Digital space

Virtual online resources are mandatory in modern libraries, particularly in the 24/7 health care environment where clinicians need high-quality information at their fingertips. This online accessibility has countless benefits such as enabling reach to more cohorts across large geographic areas, ensuring information equity. Nonetheless, the digital space does not encompass the whole service. Jessica Ware suggested that the digital and physical spaces are, "both equally as important... the physical space is just as important to clinicians for getting time to themselves off the ward". Other interviewees supported this view by stating, "You need both" (Trudi Maly) as, "They are completely different" (Michele Gaca).

A complementary trinity exists between physical libraries, digital resources and library staff. The three elements work together, exemplified by accessible librarians in physical libraries teaching information literacy and building users' digital skills so they can make the most of online resources. Helen Ried claimed that, "face-to-face in this is really important" particularly for engaging with shy or new users who need to feel welcomed. The ideal health library service will therefore have digital resources aplenty, with highly visible librarians who reach out to clinicians from a supportive and egalitarian physical space. While Richard Sayers manages a virtual library he noted that, "it doesn't matter how good the online collections are, it is no substitute for having shoes on ground ... faces, names, people doing that outreach work".

It is undeniable however, that only libraries with well-established digital resources were able to thrive in the pandemic and this will apply to the future. Online resources and library websites have to take priority. In South Australia, Mary Peterson explained that her library service has progressed to stop thinking about physical space because, "We are in the health library area so the priority is digital" and librarians should stop being "precious and possessive" about traditional books. Jessica Ware also encouraged librarians to think differently by, "Making spaces that can be repurposed in the future".

Expected changes in 2021 and beyond

The experience of the COVID-19 pandemic will see all employees pivot from how they have traditionally worked, testing each of us while offering the prospect of something new. This unusual moment in time was summed up by Michele Gaca: "2020 brought about change to the way we structured and attended our workplace, but it has also given rise to other opportunities that we can focus on and market".

The interview series in this investigation revealed a positive outlook for health libraries, with interviewees commenting on the potential for good to come out of their experiences. They made the following recommendations and predictions for health libraries:

- It will be important to boost WiFi and increase charging ports.
- Libraries will need to accommodate hot desking because they will be used more often for online training/meetings and as an alternative place to work.
- There will be an increased need for individual study rooms and single study corrals with soundproofing.
- As social distancing will continue, libraries need to make space for patrons to spread out.
- There will be an end to shared headsets with more BYO peripherals.
- Adjustable desks will be needed to ensure inclusivity for all users.
- Access to IT equipment will increase, accompanied by guidance from embedded librarians.

- There will be a renewed focus on outreach and initiatives such as pop-up libraries.
- Online orientations will be ongoing for new employees.
- Virtual education is here to stay.
- Digital research repositories will become an important aspect of library services in health care organisations.
- Establishment of a core set of shared resources and common tools at a national level, freeing up hospital librarians from collections work.

Another positive outcome from the 2020 pandemic year has been improved access to online professional development. Trudi Maly remarked, "It took a pandemic to get an online conference". Mary Peterson also spoke about the enjoyment of attending library events all around the world from the comfort of her dining room table. These changes will improve connections between hospital libraries, add to the sector's knowledge sharing and strengthen collegial support.

Most importantly, the library leaders interviewed for this investigation implored librarians in the health care sector to leverage the headway made during the pandemic, which was actually a great opportunity to reach out to health professionals to remind them about the library services on offer. Jane Orbell-Smith suggested that, "If libraries are able to grab the kudos that we have received over this time... we can really elevate our position".

Conclusion

Not all change feels positive in the beginning. The COVID-19 pandemic began as a disaster and forced change into all aspects of our lives. In response libraries across Australia swung into action to continue to curate, share and disseminate high-quality information by any means. Savvy librarians built on previous changes while pushing through the turmoil of their pandemic experience to discover an array of positive outcomes. Physical library spaces proved to be well utilised and appreciated in clinical environments during this challenging time, even when the focus was on providing digital access and online services.

As we interviewed library leaders about the pandemic, we learned that although each library took a unique approach to keeping their services available they each kept the same endgame in mind: excellent information services for optimal patient care. When their stories are assembled together it provides an inspiring example of resourcefulness. All health librarians should look to this example and feel proud of the sector's professional response to a most unusual set of circumstances.

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