

Canadian Virtual Health Library FAQ

The Canadian Institutes of Health Research (CIHR) has approved the Canadian Virtual Health Library (CVHL) application for \$800,000 to establish a CVHL. The grant is designed to move the CVHL vision from the conceptual framework developed and validated over the past 10 years into a coordinated and sustainable national network that will ensure that all health professionals in Canada have ready access to health information of high quality. While development of the detailed structures and processes that will be required for the organization and operation of the CVHL will be finalized over the course of the three year project, this FAQ addresses some of the immediate questions that have arisen with regard to the CVHL initiative.

1. What does the CIHR grant cover?

The CIHR grant provides funding over a three year period to:

- i) launch and develop the CVHL - including hiring staff, forming a board, creating processes for input and consultation with stakeholders and libraries, and establishing a portal, and
 - ii) develop a funding model, organizational structure and strategy for ensuring ongoing sustainability of the CVHL
- The grant does not cover the costs of licensing content – content identification, licensing models and funding strategies are a key component of CVHL work.

2. What staff will be hired?

Three senior positions will be created: a project leader, a project manager for technology and a project manager for content. The project leader will have overall responsibility for the project including network formation and stakeholder engagement. The project leader position has been posted at <http://chla-absc.ca/nnlh/cvhl/ProjectLeaderPosting.pdf>. Postings for the other positions will follow once the project leader is in place.

3. Is the public included?

The focus of the CVHL is to ensure access to high quality health information resources and services to all health professionals across Canada, and this will be the priority over the next three years. Once the CVHL is firmly established, it is possible that it could be expanded to include resources for the Canadian public. The recent national Cochrane pilot demonstrated broad public interest in quality health information and evidence.

4. How will the CVHL impact provincial consortia and local libraries?

From the beginning the CVHL model has been that of a network of networks. Provincial consortia and local libraries are core to the vision of the CVHL. The primary role of CVHL is to link, leverage and coordinate the strong base of resources and services that already exist. The CVHL will work with consortia and libraries to identify and license a core suite of resources that will be nationally accessible. The goal of any national licensing model will be to enhance and expand access, while reducing costs for consortia and libraries. The national Cochrane pilot provided a clear demonstration of the benefits of a coordinated national approach.

5. How will Canadian health libraries align themselves with each other to provide cost-effective access to electronic content, without necessarily adopting one particular Canada-wide model?

Canadian health libraries will adopt the portions of the Canada-wide model that best enable them to enhance services to their clientele, to coordinate more effectively with other libraries and to reduce costs. The CVHL won acceptance because it is:

- (1) A library-based model
- (2) Designed for the Canadian health care system

The CVHL will support professionals working in the Canadian health care system across jurisdictions (federal, provincial/territorial, regional) and with multiple affiliations (universities, professional associations, patient groups).

Hence, the CVHL plan anticipates variations in approach will be necessary. Canadian health libraries are the foundation of the CVHL and will be called upon to provide input on content and governance. The CVHL will coordinate national licensing of core electronic resources, selected after consultation as being essential by libraries for all health professionals. Beyond core resources, other initiatives will be based on requirements identified through library and stakeholder consultation; each library may opt in, or not, as they wish. The successes of core licensing programs in other countries (e.g., UK, Norway) and of coordinated training and outreach models (e.g., US) will be emulated by the CVHL.

6. If major products are licensed, will this impact negotiations between consortia and vendors?

Of course, but the overall effect will be to give more Canadian health professionals access, eliminate overlaps that see double payments to publishers for the same people and reduce the amount spent by Canadian organizations on health e-resources. Consortia may no longer be paying for some resources and will have more money to spend on others. The large licenses that the Canadian Research Knowledge Network (CRKN) negotiates do not detract from a university's ability to negotiate for other products. Publishers recognize the expenditures via each university's participation in CRKN together with each university's purchases outside of CRKN, including via other consortia. The Cochrane pilot demonstrated increased access (from 10% to 100% of Canadians) for a modest increase (approx. 15%) in the total spent by all Canadian organizations.

7. Will the CVHL replace my hospital library and library services?

No. The CVHL will provide a platform for existing libraries to coordinate initiatives, leverage buying power and access training. The CVHL does not replace local services and professional staff, it is built upon them. It is hoped that the CVHL will in fact increase the visibility and profile of local and specialized libraries by highlighting and recognizing their unique resources and expertise.

8. How will the CVHL impact services offered by professional associations and non-profit organizations?

The CVHL will enhance the visibility and accessibility of existing services and resources and will assist in ensuring the licensing and resource sharing agreements provide the best possible value for their constituencies. Key is the expertise of libraries and their broad distribution across Canada in all sectors and jurisdictions.

9. What will the governance structure be?

There will be an independent board of directors representing stakeholders, partners and funders, including (but not limited to) libraries, professional associations, and government. Key to the structure is consultation and consensus development involving the full range of stakeholders and libraries.

10. What will the Web Portal do?

The bilingual web portal will be the point of integrated access and authentication for licensed resources. The web portal will also identify collect, and organize evidence and information on Canadian health care, reflecting both the needs of Canadian health professionals and the structure of the Canadian health care system. The web portal will allow health professionals to navigate easily and intuitively to all resources available to them, including those available through national, regional or local licensing initiatives as well as those resources that have been specifically developed and provided through their local libraries, professional associations, or other bodies. It is hoped that the web portal will significantly enhance and increase access to the many unique and valuable tools and resources developed by libraries and other information providers across the country

Additional information is available at: <http://chla-absc.ca/nnlh/cvhl.htm>