Strategic Planning: what it is and how to begin

Abstract. Libraries are a part of a wider organization and their work must fit into the wider work of that organization. Along with the rest of the organization, librarians need to answer the question where to from here? What are we doing, is this right thing? What do we want to do, what do we want our library to do and where do we want to go?

This paper will look at what strategic planning is; why we need strategy and how to kick start the strategic process. I will take you through the process of how the Lakes District Health Board Library strategic plan was devised and what the result of this plan has been.

The strategic plan involved library staff and the library committee. A snapshot environmental analysis was completed using PEST and SWOT analyses. Our core competencies were detailed and a Five Forces Analysis completed.

These analyses enabled us to ask ourselves the question - where to from here? And to devise recommendations under the headings of library users, valuing library staff, partnerships, library facilities, services and resources. An action plan with timelines and performance reviews complete the strategic planning process.

A strategic plan makes one step outside one’s comfort zone and think outside the box.

Keywords: strategic planning, planning, library management

Intended audience: health librarians, special librarians, library managers

Strategic Planning

What is strategic planning?
A strategic plan is about shaping the future, ‘what we want to do, what we want our organisation to be and where we want it to go.’(Norton, 1999, p. 8)

Why do a strategic plan
An organisation with a strategic plan knows where it is going. In libraries we often get bogged down with the day-to-day tasks, sticking to how things have always been done. But if we want our library to have direction, to have value to the organisation and to survive into the future then a strategic plan is essential.

A strategic plan for the library will make us look at where we are now, give a framework for moving into the future and focus us on the key issues that face us, our customers and future customers. The library strategy helps the organisation to achieve its goals. It makes the library stand out from the competition. And yes, even health libraries face competition.

A strategic plan is just the beginning of the process, but nothing can change or progress until the strategic plan is in place. To make the strategic plan successful, it must involve all staff; be flexible so that it can adapt to change; be clear, defined and understandable to staff and customers and have SMART (specific, measurable, achievable and time-framed) actions

Who should be involved?
To get the best strategic plan involve as many of the stakeholders as possible.
**Strategic Planning at Lakes District Health Board.**

So how did a strategic plan come about in the Lakes District Health Board? A library procedure on planning stated that a strategic plan must be written and this task became one of my key performance indicators for the coming year. I discussed strategic planning with my manager and library committee and along with the library staff; one person from the committee was delegated to help. Ideally I think the group should have also included clinical staff, but at each step of the way, the library committee, which does include clinical staff, were involved by providing feedback as we progressed through the steps.

I had been involved before in writing a strategic plan in my previous job as Children’s Librarian at the Rotorua Public Library, and I had also successfully completed the strategic planning paper for my degree with the Open Polytechnic. This is one of the best papers I have ever done.

Hospital libraries must have as their focus patient care. The strategy of the library feeds from the strategy of the District Health Board. Always keep in mind the vision, mission and values of your organisation.

**Analysis**

**PEST Analysis**

Our first step was to look to analyze our position, by doing a PEST analysis. PEST analysis looks at things in the wider environment which affect us. PEST stands for Political, Economic, Social and Technological. Under each of the headings I’ve put some of the factors that affected us. Yours may or may not be the same.

Some of the political factors that affect us?
- Acts e.g. Health & Disability Act, Copyright,
- Government strategies e.g. New Zealand Health strategy, Health Information strategy
- District Health Boards are responsible to the Ministry of Health
- District Health Board strategic and annual plans
- Hospital libraries are governed by the policies of their District Health Board
- Hospitals are required by the Medical Council to provide a library
- Minimum standards for Health Library Services
- Library committees
- Consortium arrangements

Some of the economic factors affect us?
- District Health Boards are tightly resources – libraries sometimes have low priority when resources are allocated
- Budget constraints mean that libraries cannot always take advantage of new technologies or resources
- Libraries are forming consortia which increases their ability to obtain resources they could not afford on their own
- Remuneration packages do not attract skilled libraries to the health sector
- Resources may be stolen from the library

Some of the social factors that affect us?
- Skilled and qualified librarians are in short supply
- Smaller size of District Health Board catchment impacts on library resources
- The Lakes population has a higher percentage in the lower socioeconomic groups and therefore a higher incidence of morbidity and co-morbidity due to lifestyle diseases and some infectious diseases – this has an impact on the library collection
- Over 30% of the population is Maori – need to support Maori Health Services to best serve their needs
Growing number of medical and nursing staff are from overseas. Libraries need to make extra effort to meet their needs in providing resources that assist them overcome the cultural and language barriers.

Some of the technological factors that affect us?
- Resistance by some staff to use computers – possibly resulting in lack of evidence-based treatment of patients
- Lack of training in using online resources – lack of desire to learn, lack of time
- Information overload – Librarians needed as a filter
- New technology has improved access and speed of access
- Opportunities exist to further promote the use of electronic resources
- Librarians need to keep up-to-date with new technologies
- Increase expectation that resources will be available online

Once the PEST analysis has been completed, summarise the main points.

Core Competencies
Another analysis to look at is the core competencies of the library. These could be
- Experienced, professional library staff
- Consortium arrangements provide greater access to more resources than would be available otherwise
- Responsive to client needs
- Proactive e.g. Tables of contents, current awareness initiatives- providing clients with resources on areas of interest
- The high standing of the library in the organisation

Five Forces Analysis
The five forces analysis looks at the competition – the cost of entering the market and how easy it, what substitutes there are and the bargaining power of the suppliers and buyers.

The threat of entry was low
- Cost of entry is high – Medical libraries expensive to set up and maintain
- Shortage of trained staff
- Librarians manage library resources in print and on-line – someone needs to do it

There was a medium threat of substitutes.
- The services could be contracted to another supplier e.g. another medical library
- Competitors are other medical libraries, World Wide Web, online databases and journals
- Management could say that staff do their own literature searching and libraries are not needed – everything is on the internet
- The library is valued by the organisation

The bargaining power of suppliers was medium
- There are several different suppliers of books, journals and databases, even though medical books and journals are a specialised topic
- Switching supplier costs are high – cost of retraining staff, customers, updating library records, evaluating different suppliers
- Monopoly of supply e.g. only one supplier for Cinahl

And the bargaining power of buyers was also medium
- Consortium arrangements increase buyer’s power – but a small number of buyers
- Many suppliers
It is therefore unlikely that there will be an alternative to our library. However it is important to keep in mind that there are alternatives and a library will want to minimise the risk of substitutes by being valued by their organisation.

Libraries do have some choices of supply, but as smaller organisations are swallowed up by competitors this number of suppliers is decreasing, hence the value of consortia arrangements.

**SWOT Analysis**

Our next analysis was a SWOT analysis. A SWOT analysis looks strengths, weaknesses, opportunities, and threats. Strengths and weaknesses are internal and opportunities and threats are external. It is a chance to look at how well we are doing and provide some ideas for the future. Remembering to look at what the organisation needs not just what the library wants (Plutchak, 2004, p. 294)

Some of our strengths are:
- Librarians’ knowledge of library resources and their skill in reference work
- The internet makes library resources available hospital wide and 24 hours a day
- Consortium arrangements facilitate access to more resources than would otherwise be possible
- Collaboration between health libraries facilitates interlibrary loan
- Robust library management system
- Librarians’ rapport with other DHB staff and management
- Library committee’s brief to provide vision and support – they are there when you need them

Some of our weaknesses are:
- The library is not in a centralised place – people have to want to go to the library, little by chance traffic
- Lack of study space
- Under-resourced in some areas e.g. social work, community health
- Security of books – we provide after hours access, no security system
- Small staff mean that it’s hard to bounce ideas around
- Library committee not hugely active
- Lack of safe storage for older journals. They are presently stored in the basement and subject to floods, heat, cold, insects and animals

Some of our opportunities are:
- Enhanced library services to Taupo – librarian presence, more online material
- Market library services to hospital staff and DHB staff including management
- Develop and market library services to community health workers e.g. GPs, practice nurses, dentists
- Grow consortia arrangements – support national consortium
- Develop more training modules on library services e.g. databases, use of online journals
- Actively pursue LHSIP opportunities for site development including the library and education centre
- Continue to develop intranet to facilitate access to library resources
- Building relationships with other libraries including libraries in Rotorua and other health libraries
- Review and take advantage of new technologies e.g. RFID
- More online information available

Some of the threats are:
- Marketing could result in library staff being swamped
• Theft and loss of valuable resources
• Competition from other sources of information
• Maintaining access during power cuts and disasters
• LHSIP fails to take into consideration the library, library storage and an education centre
• Accreditation
• Lack of storage for older print resources

Increasingly people are expecting more online resources to the desk top at their work site. This is especially important for off-campus sites such as Taupo Hospital and other satellite services.

The reasons people do not use library resources are many; time, lack of skill, lack of inclination. Finding information is a skilled job and librarians can act as mediator between the information and the seeker of the information.

Maintaining access during power cuts and disasters is a real challenge which highlights the importance of a national agreement on the maintenance of print journal collections

**Directions**

Now comes the fun part – deciding on the direction to take. There are a number of choices. The most likely directions for the library are to protect and build on its current position by building its resources; or develop new markets such as community health professionals. Other alternatives are product development or to diversify into new markets or products. These are unlikely choices because the core business of the library is to provide information and these directions do not fit into the core business, nor do they reflect the vision, or objectives of the organisation.

While all this analyses are happening the planner must always keep their stakeholders in mind. There is no point in coming up with a strategic plan that does not meet the needs of its stakeholders, both internal and external. In our case the stakeholders include the DHB management, doctors, nurses, allied health staff, patients, trainee staff, IS department, the community plus our suppliers.

**Writing the plan**

Once the analysis has been done, its time to write the plan. Start with the mission and values of the organisation followed by the library vision and mission. If you haven’t already got one, then now is the time. Remember the library vision and mission must be consistent with the organisation. And again thinking what the organisation needs and not just what library wants.

We chose to write the plan under the following headings: Library users, valuing library staff, partnerships, services, facilities, resources and knowledge management. Under each heading we used our analysis to come up with recommendations which were then transferred into actions.

**Library Users.** The library aims to provide an effective service to all users and library staff are very customer focused. Some community health professionals already use the library, but service to them is not actively pursued. Corporate DHB staff are also not well serviced and the library does not subscribe to any health management journals.

Our recommendations included writing a marketing plan to promote the library to staff and health professionals in the community and Lakes management

**Valuing Staff.** Well-trained and customer focused staff in the library is of paramount importance in achieving the aims and objectives. The best facilities and resources in the world can be useless without library staff committed to providing good service.

As a small library, we rely on already qualified staff being recruited. This can be difficult – well qualified staff are in short supply and Rotorua finds it difficult to recruit these staff. There is not
enough work for a trainee librarian, though that could be considered in the future. Therefore it is important to value the staff that we do have, by providing a good salary, good facilities and continuing education.

Therefore recommendations included supporting staff to attend relevant library conferences and meetings and Lakes District Health Board training opportunities and to support staff through the registration process.

**Partnerships.** Partnerships are important as a means of sharing resources, ideas and collaborating on purchases. For us partnerships include Health Lib, NZ Health Database Consortium, and regular meetings with other health libraries in our region and the other libraries within Rotorua. As well as the external partnerships there are partnerships internally e.g. with the IS department.

Our recommendations include continuing with existing partnerships and looking for new ones as appropriate, supporting the national e-library initiative, providing opportunities for librarians in Rotorua to visit other libraries and work on internal partnerships with IS.

**Facilities.** Despite increasing number of electronic resources, libraries will still be wanted as places to work, study and read. Our library here was built in the 1970s and little has been done to it since. The work place for library staff is inadequate and there is a lack of study and reading spaces for staff, a lack of storage. A recent survey highlighted the need for refurbishment and modernisation. There’s no real study space, not enough computers (now there’s all those electronic resources) and a lack of storage space. Despite access to electronic information the library as a place is still valued (except if it is outdated or inconveniently located). Users flock to a library that is attractive, centrally located technologically current and arranged to meet the needs of groups and solitary users (Lindberg, 2005, p. 1067) Lakes DHB is currently planning a building programme which will in the last stage, includes a library and education centre.

Therefore recommendations include the library staff being fully involved in the planning process, review technology requirements and security of library resources.

**Services.** The library provides services to staff of the District Health Board and increasingly to health professionals in the community. These include literature searching, interlibrary loan, a current awareness bulletin, user education, and after hours access.

Rotorua Hospital staff have the advantage of being on site so it is particularly important to build relationships with people off site so they don’t feel disadvantaged.

It’s important to make sure that people know about library services so a marketing plan is essential.

Our recommendations included conducting a survey of Taupo library needs and the investigating providing library services to health professionals in the community.

**Resources.** Library resources must support the work of the Lakes District Health Board staff in patient care and services. These resources include print and online books, print and online journals, and online databases. All library resources are housed in the library and are available to all staff.

Off campus staff have the same information needs as those on campus, but those in Rotorua have an advantage over those in the satellites.

Online resources are available to all staff via the intranet. It is essential that training be given and that there is uninterrupted access.
The debate regarding electronic or print resources continues. There are points for and against each one. Print resources allow continuing access into perpetuity, but only to one person at a time; electronic resources are great because they allow access to many people at a time in a variety of settings but they are available only as long as there is electricity, computers are available and the publishers allow that archival access.

As e-resources become more prevalent, a regional and national deposit system for print resources becomes crucial. In the event of a disaster these print resources may prove lifesaving.

As a small DHB, Lakes does not have the range of resources that are available in larger DHBs. Increasingly people expect to have access to wide range of resources, preferably electronic. The national e-library project will help address these issues.

Therefore the recommendations included: reviewing the collection management policy every 2 years, continuing to build electronic collections while maintaining core print collections, investigating the licensing of resources for health professionals in the community, advocating to increase the library budget to keep place with expected price increases and to allow for new journals, and planning to manage for the risk of interrupted access.

**Knowledge Management.** Knowledge management refers how organisations identify, create, represent and distribute knowledge for reuse, awareness and learning across the organisation. This knowledge links to the organisation objectives and lead to shared improved performance. There were also statutory obligations to maintain records. It may be sensible to record and archive management to be part of the library.

Recommendations included: That theses, research and reports produced by DHB staff be deposited in the library, the library is represented on the Content Management Group for the internet and intranet. The further work is done on the best way forward to manage records and archive management.

The result of the strategic plan was to give us clear direction for the future. Out of the strategic plan, a marketing plan, and measurable, achievable, realistic and time-framed (SMART) action plans for the coming years were developed.

**What Happened Next?**

The strategic plan was presented to my manager, who filed it. It was expected that the library staff would work its way through the recommendations, but it was clear the plan wasn't going anywhere else.

Our CEO gives road shows two or three times a year and at one of these road shows, she spoke on the strategic and annual plans for the DHB about improving health of our community. For Lakes District Health Board the level of deprivation is high. There is high avoidable mortality, higher than average rates of smoking, obesity, cardiovascular disease and diabetes. (Lakes District Health Board, 2008)

Following the road show, we emailed her a copy of our strategic and marketing plans, pointing out how our plans fitted with the organisation strategic plan. She was most appreciative and passed our strategic plan around the DHB senior management team and as a result Planning and Funding came up with a one-off $10,000 to spend on books with a primary health focus in week before the end of the financial year. A list was publicised to the PHO and get regular use by our staff, though less frequently by outside health professionals in the community.

The new General Manager, who also became my line manager, was also given a copy, and as a result, I presented the plan to the hospital management team. Again it was well received.
The strategic plan is at the forefront in all we do. It is constantly referred to. It provides us with focus. The reasons for this are the action plans. Action plans are essential to ensure that the library actually does something with the strategy.

The action plans were placed in a spreadsheet and are regularly updated. Progress is shared with my manager and the Library Committee. However the strategic plan and the action plans are not set in concrete and can change as circumstances dictate.

In conclusion, writing the strategic plan was worthwhile. It highlighted the library’s direction to the rest of the organisation. It ensures that the library has a vision for the future and that the library will remain relevant to the organisation. I have taken you through our journey of strategic planning; of using the PEST, Five Forces and SWOT analyses to discover where we were and where we wanted to go and how to get there.

So I recommend going through the process of writing a strategic plan. Step outside your comfort zone, think outside the box and write that strategic plan.

Bibliography


