ORAL HISTORY INTERVIEWS WITH PATRICIA THIBODEAU
Duke University Medical Center Archives
Submitted April 26, 2017
Researcher: Joseph O'Connell

COLLECTION SUMMARY

This collection includes two oral history interviews I conducted with Patricia Thibodeau on March 28 and 29, 2017. At this time, Thibodeau was preparing to retire from her position as Associate Dean for Library Services and Archives at Duke University Medical Center. The interviews include discussions of Thibodeau's life and career history, from her upbringing in rural New Hampshire through her achievements as Associate Dean. In addition to narrating key events, Thibodeau describes the people who influenced her philosophy of librarianship, her career-long interest in learning and applying new technologies, and the challenges of administration during times of institutional restructuring.

Thibodeau accepted the position of Associate Director of the Duke University Medical Center Library in 1993. She brought over 15 years of health sciences librarianship experience to the job. Her previous work included directing the Health Sciences Information Center and Research Administration at Women and Infants Hospital of Rhode Island (1977-1983) and the Division of Information and Media Services at Mountain Area Health Education Center in western North Carolina (1983-1993). From 1993 to 2000, she led a major effort to revitalize the DUMC Library, instituting clearer policies, establishing new technology services, and fostering a culture of information science research and innovation among staff. In 1999, she was named Acting Director of the library, a title that reflected the responsibilities she had assumed when, shortly after Thibodeau arrived at Duke, the library director fell ill. In 2000, Thibodeau accepted the position of Associate Dean for Library Services and Archives. In this role, she helped forge a strong relationship between information and health sciences at the Medical Center, contributing to curriculum development and research administration in addition to leading the DUMC Library.

This document contains the following:

- Timecoded topic log of the interviews (pg. 2)
- Transcripts of the interviews (pgs. 3-29, 30-51)

The materials I am submitting also include the following separate files:

- Audio recordings of the interviews
- Scan of signed consent form
- Portrait photos of Thibodeau taken after the interviews

I made the interview recordings in stereo, with each participant's microphone routed to its own channel. I took this approach so that Thibodeau's voice can be isolated from mine for production purposes. If using the interviews for production, the channel featuring Thibodeau's voice can be isolated as a mono track.

INTERVIEW TOPIC LOG

Interview 1 (March 28, 2017)

0:00 Introduction
0:49 Early life in New Hampshire
3:55 … Early experience with libraries and technology
6:33 … Love of the outdoors and gender expectations
10:44 Undergraduate education
12:52 … Working at Dimond Library at University of New Hampshire
16:40 … … Cataloging technologies and skills
22:57 Graduate education
… Choosing University of Rhode Island
25:03 … Working at University of Rhode Island library
26:11 … Faculty influences
30:08 … Interest in cataloging and technology
35:33 Early experience with the personal computer
42:00 Working at Rhode Island College
47:59 Working at Women and Infants of Rhode Island
52:45 … Learning to do research administration
1:05:13 Working at Mountain AHEC
1:15:08 Pursuing and accepting Associate Director position at DUMC Libraries

Interview 2 (March 29, 2017)

0:00 Introduction
0:55 Decision to earn MBA
5:55 Conditions at Duke upon arrival
… Problems with prior library administration
12:05 Efforts to reform library
… Working with Susan Feinglos
24:50 … Instituting new technology services
30:36 Career as Associate Dean
… New responsibilities and privileges
33:07 … Curriculum work, IRB work, and development of dual degree with UNC
41:10 Doing research and developing services
47:24 Fellowship in informatics
50:25 DUMC Archives
… Acquiring the archives
53:47 … Current status of archives
54:53 Working relationships
1:00:19 Institutional changes during career
1:06:01 … Loss of space at the library
1:09:14 Hiring young staff

TRANSCRIPTION, INTERVIEW 1

PROJECT NAME: Oral History Interviews with Patricia Thibodeau
PROJECT DESCRIPTION: Two oral history interviews with Patricia Thibodeau focusing on her biography and library science career
INTERVIEWEE: Patricia Leona Thibodeau
TOPIC: This is the first of two interviews with Thibodeau, in which we discuss her upbringing, education, and early library science career.
RESEARCHER: Joseph O'Connell
DATE: March 28, 2017
LOCATION: Thibodeau's office, Duke University Medical Center Library
CITY, STATE: Durham, North Carolina
AUDIO FILE: 1001.wav

Joseph O'Connell's questions are bolded.
Patricia Thibodeau's responses are unbolded.
Timecode is listed periodically.

0:00

Ok. It's March 28th, 2017. My name is Joe O'Connell, and I'm conducting an oral history interview with Patricia Thibodeau. Am I saying your last name correctly?

Actually, it's Thibodeau. But that's ok. I'm used to—people don't know how to pronounce it, so—

So, Thibodeau.

Thibodeau, yes.

Thank you for correcting me.

But you can call me Pat, too.

Ok. Great. And you are the Associate Dean for Library Services and Archives.

Yes, correct.

Ok. And the interview is for the Duke University Medical Center Library and Archives Oral History Program.

So, Patricia, can you tell me your full name?

0:00:49.4

Sure. My full name is Patricia Leona Thibodeau. And that's my maiden name. I never took my husband's name, so that's what's followed me through my career, throughout my life.

Ok. And when and where were you born?

I was born in New Hampshire. I went—I was born in a hospital in Nashua, New Hampshire, but I actually grew up in Milford, New Hampshire, which is about 20 miles from Nashua, and it's in the southeastern part of New Hampshire. A little town. Very rural.

0:01:24.0

Ok. And what was your family's background. Had they lived there for a long time prior to you coming around?

Well, actually, my grandparents had owned the house that we lived in when I was growing up for a long while. It was part barn, part kind of rural setting, plus a house, and then when my parents got married, my father was from Merrimack, New Hampshire, my mother was living then in Milford but had been from Amherst, New Hampshire, not far away. They—my grandparents decided that they should renovate the house, the old farm part of the house, the barn part of the house, and create another living quarters for my family. And so that's where I grew up. I had three sisters and my mother and father in one end of the house and at the other end of the house were my grandparents. My maternal grandparents.

Ok. So you lived with your grandparents all under one roof.

Yeah. Just sort of in separate households.

0:02:22.4

And what were your parents' names?

My father's name was Wilford James Thibodeau. And my mother's was Leona Rosa Buxton Thibodeau. I have both French and English background.

And what did they do for a living, or with their lives?

Sure. My father was a fine carpenter. He actually started out working on a farm. He was born on a farm in rural Merrimack County, and he just started working there with animals. So he worked with chickens and cows and everything else, but then, as he got older, he went into carpentry work, and he ended up being a fairly skilled carpenter even though he had only education up to the eighth grade. He did wonderful math calculations and everything else. And so he worked for another construction company for a number of years but then went on to work for a machine company called Abbot Machine Company that built the weavers that were used down here in North Carolina for doing textiles. And so spinning and weaving machines. He'd box them up, crate them up, and then they'd be shipped down here, and in the meantime he would do odd jobs of carpentry helping people out. He really liked working with people, and he also built really fine cabinets and fine pieces of furniture as well. So that's his background.

My mother was basically a stay at home mom. But she, in her later years, started working in a library. About the time I got interested in libraries but not exactly the same time. I think I was working in the high school library before she started working in the public library, and so she really focused on doing public

library work for a number of years, but then they both retired up in Maine and built their home that they lived in 'til the end of their years.

Wow. Ok. So were you spending time at libraries when you were a kid? At the public library?

Yes. Always at the public library. Always borrowing books. Always reading. So it was kind of a natural progression for me to start being interested in libraries in junior high school and high school. And so I actually started working with media. So I was the one who could thread the 16mm projector. I was the one who could figure out how to do the film strips. So when they figured that out then they put me into the media club. But the media club was actually based in the library, and so then when the librarians figured out that I had a lot of skills they put me in charge of, believe it or not, mimeographing catalog cards. And working on technical things in the library because I had this technical bent, so I started working in the library and learning more about the library from these two school librarians.

0:05:04.7

Ok. So actually your skill with technology came a little bit prior to getting involved with libraries.

Yes it did, actually, now that I think back on it.

Were you teaching yourself that stuff, or how did you have the opportunity to work with that equipment initially?

I think I just saw people struggling with it and to me it just seemed really logical what was going on, and so I kind of figured out how to do it, and then when I became good at it I just started helping people with it and so it went from filmstrip projectors to 16mm to slide projectors. No one could figure out that slide projectors were upside down and backwards for the slides, so I'd load side trays too. But it just seemed to be something that came naturally to me.

You could see it and understand it.

Right.

It was intuitive.

Right.

And so this was being used in your classrooms, and you became the go to person to--

Yep

Sort out the machinery.

Yeah.

And how to work it properly.

Faculty would order it. I'd load it up and then drag it into their classroom and stand there for a few minutes to make sure they understood how it was gonna work, and then I'd leave and go back to working in the library.

Uh huh. I also read in your notes that you really enjoyed the outdoors and that was a big part of your experience growing up. Is that accurate?

0:06:31.3

Yes. You know, I grew up in a rural area. The cows literally looked over the fence into our house. But we were also surrounded by woods, so I spent a lot of time hiking in the woods. I spent a lot of time with my grandfather exploring other forest areas nearby where there were quarries. My family hiked a lot. We'd bicycle through the woods before there were mountain bikes. We'd take our road bikes and run them through there, which is kind of a little rough sometimes. So I've always been outdoors, and my parents always encouraged us to be outdoors. We also spent summers with my grandparents and parents up in Maine on a lake so we learned to row a boat, run a motor boat, fish. We did a lot of fishing. And so it was always active time outside and not inside. We weren't encouraged to stay inside unless we were reading a book.

Ok. Yeah. And so as you started thinking about your career path—I think you mentioned that people's expectations of you as a girl had an influence on which of your interests you chose to pursue. Can you explain what that was like a little bit?

Sure. That was kind of funny. I really wanted to be a conservation officer. I wanted to be out in the field working with forestry or something like that. And basically that was back then when, you know, girls did not go into science. Girls did not necessarily exceed in math, and so my guidance counselors basically said you should look at languages, you shouldn't look at sciences, you shouldn't do that. And so I was like, oh, ok. And then I took an aptitude test and even though the aptitude test said perhaps conservation kind of work they still said no, that's not the pathway you should go. You should probably look more at languages and humanities and those kinds of things. It did get me out of all those science classes. I never had to take physics or chemistry. Which I should have probably done, but—and then I did get involved in languages and that taught me a lot. I took Russian. I took French. They taught me more about culture and what the values are for people outside of their—our standard U.S. kind of culture. So that was—it was a good thing. But it wasn't how I really started, what I thought I wanted to go into. So. But it worked out fine.

0:08:59.5

Yeah.

Ok. And this is all still in high school, right?

This is still in high school, yeah.

And it sounds like you had access to a lot of interesting new technologies even as a high school student. So you were working with slide projectors and film projectors and what other kinds of things were you able to—the mimeograph machine—

Yeah, little mimeograph machine. This tiny little mimeograph machine. That—you know—all the old style catalog cards, you could actually mimeograph—type them up, make a little mimeograph of them and then make copies of them so that you could put them under subject headings and titles and things like that. But that was before the days of computers. Computers weren't quite there yet so I had to wait a number of more years before I really get into computers. So one summer I was at St. Paul's school advanced studies program and we were able to do a little bit of computers with one of those big terminals where you punch keyed in a tape and then fed it through. And so I had a little bit of taste of computer technology when I went to that program.

But I went to that program for German not for computer science.

Right. That was just something they were experimenting with for teaching German.

Yes.

Ok. And—so you were volunteering at the high school library and then when you looked at going to college what kinds of decisions were you making at that time, in terms of where to go and what to study?

0:10:44.9

So at the time I just—I knew at that time, by the time I graduated high school, that I wanted to be a librarian. So I knew that I needed an undergraduate degree but that I would have to go on for a master's degree. There was no other decision. I would just have to do that. So I thought at first I wanted to do languages, so when I started applying for schools, you know, I started to see what kinds of language programs were around at schools in our immediate area. So, Maine, New Hampshire primarily. You know my family was fairly poor and I was the oldest of four girls and so there wasn't going to be a lot of money to send me to school. The University of New Hampshire I applied to because that was the logical one but also they gave me a full tuition scholarship right from the get go so the decision came down to scholarship--no funding. So I chose to go with the scholarship to the University of New Hampshire. So that was a good choice too because it was a good school. I liked the school. Like many schools you can do as much as you want depending on your particular interests. So I started in college pursuing actually a language degree in either Russian or French, but I quickly decided I wanted to do history instead. The languages are a little tougher in a college level course.

Yeah. And did you have a particular focus in history?

Modern European. Though I did take a course in Chinese history as well which was really fascinating, so—but I did like history. Modern European was very interesting to me because of the world wars and of course there were a lot of books coming out then about experiences in the wars and what people went through and so it was an interesting time to see the politics going on in Europe and how that played out. But I did a modern China course, too, and that was nice because it kind of mirrored what was going on in Europe or at least gave a sense of what was happening in the Asian side of things, not just the European side.

0:12:52.4

Ok. And you were—were you thinking about all of this as feeding into a library career?

Yeah. Down the road. I wasn't sure what exactly career I would go in. So I actually need to back up because this is kind of—so I arrived at the University of New Hampshire. I wanted to get more library experience. So I went to the Dimond Library and said I wanted to volunteer. And they said ok, fine, but the only job we have is a children's librarian. Well, that is as far from what my interests were, but I knew it would teach me some skills

So I actually worked with the children's librarian because they had the public library inside the university library, and they had this big children's room which also supported the education students as well. And, so I'd sit on this tiny little chair at their tiny little card catalog checking to see which books they owned and didn't own. Which taught me some basic skills in collection development and also got me working with other professionals. Well, the children's room librarian was so thrilled that she went to the technical services people—the catalogers, those that acquire books and said, "This is a great student. Do you have a job for her?" And so she actually introduced me to them, and they hired me, and for my four years of college I actually worked in the technical services unit at the Dimond Library.

Wow. Yeah. So you had a lot of experience actually working in libraries from very early on.

Yes.

A very hands-on familiarity with the profession and the environment.

Which is unusual, actually. Many people go out and get another career or they try teaching or they do something else totally different and then they come to librarianship. I'm one of the few people I know that actually wanted to be a librarian from a fairly early age and planned to do that.

0:14:50.9

Did people think that was unusual when you told them that that was your vision, or what was the perception of that goal?

You know, I don't think I actually really talked about it a whole lot. They just knew I worked for the library and I really enjoyed working in the library, and a lot of my friends were library-based. They were also library workers. Student library workers as well. A whole group of us. There's probably ten or twenty that were working in the area I was working in, so I don't think I talked about it a lot. It just kind of came naturally to me. And then they would give me tasks and I would do them and then they would give me another higher level task and I would do them and so I kept learning more and more.

The really fun part for me, but not so much for the staff, was I became better than some of the staff at some of the tasks and so I was asked to correct their work and to review their work and do special projects that usually were only for the professional librarians. So that was--it was kind of interesting. I loved it because they just taught—they let me learn a lot and experience a lot, but at the same time there's a little tension there because why is this student worker correcting my filing? Why is this student worker working on this when it should have been a professional librarian? But I wasn't gonna argue.

0:16:11.6

Ok. So your skills were significant enough that they kept giving you more and more responsibility to the point where you were doing work at a higher level than the people who were actually on the staff in some cases.

Yes. Yeah. I mean, there were people clearly that were more, you know, had higher level knowledge but they also shared their knowledge. So I worked with a great group of people. They really taught me as much as they could.

And again, technology came into it kind of interestingly because there's a service called O-C-L-C which is where catalog cards come from, and they actually early on put—got a terminal, so before I graduated in '74, I think around '73, they get one of these what they call beehive terminals. It was a hard wired terminal that connected into a network and no one wanted to touch it. So my supervisors at the time looked at me and said, "go over there, play with it, figure it out." And so I was kind of cut loose to figure out how to use this new terminal with these really strange commands and command keys and everything else. Because it was really very much a dumb terminal. So I worked with the head of cataloging, who was one of my mentors, and she and I worked out how it was gonna work, how it was gonna fit into the workflow, and how other people could use it.

Wow. So I am oblivious to what an O-C-L-C terminal even is. Can you—how would you explain that to somebody who is not familiar?

Yeah. How do I explain it? It was an old—how do I explain it? So it was like a giant monitor encased in this kind of beehive shaped--you know, in the old sense of beehive being a curved object--and it had this screen that was—it was either black and green or black and orange depending on the unit. And it had a keyboard mounted in it. So everything was hard wired. So you'd just fire it up and it was through telephone lines at that point. There was no internet at that point so it was through telephone lines, and you'd log in and then you could search it, slowly. Bring up a catalog card you wanted and say, ok, I want this, and they you could make changes to it and then you could order those cards, and they'd be mailed to you to be put into the card catalog. And they'd come in big long boxes.

Ok. So it was a way for you to produce records of your collection

Right. Exactly.

Wow.

0:18:53.0

So we'd take--you know, I was primarily working—at that point I was primarily working with very simple cataloging because I didn't have very many skills. But later on when I went to the next library I worked at all those skills--I was able to do more advanced skills, but this was the brave new world of technology in libraries. Because at that point we had big computerized systems to some degree but there were no personal computers. There was no desktop units or anything like that. At best a library might have a mainframe that was running its budget or something like that.

In fact these are the days when you checked out a book you filled out a card and then we'd—actually they're called McBee cards--when you actually wand the cards to figure out what was overdue and what was not due. It was like IBM cards--it would clip out little spaces on them. It's very hard to explain this until you've seen it, but it was all manual system. You know, everything was filed manually--everything was done manually, not by computer. Except for this new O-C-L-C terminal, which was where a group of libraries get together and say let's share our cataloging, and so they created this network called O-C-L-C. I think it was Ohio Catalog—Ohio Collective of Library Catalogs, I think that was its original name.

Ok, ok. So it was a way to make it more streamlined to catalog your collection and to make it match between libraries.

Yes, exactly.

Ok. Got it.

0:20:26.6

And also, in your notes that I have in front of me, you talked about—you used the phrase "filing below the rod."

Right.

That caught my attention. I was curious what that meant.

So, if you're familiar with catalog drawers, the old style catalog drawers, there was a rod that went through the hole in the bottom of each of the catalog cards. And when you were filing, to make sure you were accurate, you'd file above the rod, which meant the cards would be standing up and so somebody could pull out the drawer and easily see which cards had just been filed and check the filing, and then, if it was accurate, then you'd remove the rod and sink the cards down into the bottom of the drawer, which is below the rod. So, if you were really skilled at filing and you passed their filing tests, which I did, then you get to file directly, below the rod, so I could just pull the rod out, put a card in, put the rod back in.

Oh, ok.

So that means that you have enough authority that they don't believe that anybody needs to come back behind you and--

Right

Check--

That's right

What you've done. Ok.

And I did a lot of filling. They'd hand us like three to four inches of filing and tell us to go file, and then I'd come right back and say, got some more? I was very good at it.

And these are all the cards related to the books that are just coming into—or out of circulation.

Into circulation. So these would be the brand new books that are coming in. Or sometimes we'd—we would what we called reclassify a book, so for instance something might have been in the Dewey decimal system or it was not correctly classified the first time so we'd change the call number and so you had to pull all the cards, change the call number on all the cards, and then put them all back in. And so I did that work as well. And I did also for when items were withdrawn--I'd go out and pull the card set so you have to go through and get all the cards.

Ok.

It sounds so archaic right now.

I remember using card catalogs so not so archaic that I haven't done it before. But, yeah, and so you knew that you were going to go to graduate school in library science after you did your undergraduate degree.

Right.

0:22:57.2

How did you choose where to go where to do that training?

Well, there weren't a lot of schools in New England, and I wanted to stay in New England, and so there was basically Simmons College in Boston and then there was the University of Rhode Island. I actually interviewed at both. Simmons was kind of funny because basically they, I hate to say it, were pretty snooty, and basically said, "what makes you think we want you?" And I was like, fine, really. So I kind of came out of the interview saying, well, I don't really care if I get this or not. The University of Rhode Island, not only did I interview well and they were certainly friendly but they also had reciprocal scholarships so I could pay in-state tuition down in Rhode Island as I would have paid in New Hampshire, so that was really a nice price break, so I basically said I'm going to the University of Rhode Island, I don't care about Simmons. So--even though it's a prestigious school. So I chose the University of Rhode Island and went down there

And what was it like to move from New Hampshire? Because you had lived there your whole life up to that point, right?

Right.

Well, I had not ever gone home after I left high school and went into college. I basically worked through the summers and so I had not been home for a long time. So I was used to not living at home, but it was a little scary to suddenly uproot myself and go to Rhode Island. Now, it's only about two hours away from my home, so it wasn't far, far away, but it was nice down there--it was, again, a small rural community around Kingston, Rhode Island. The campus was really beautiful--it was really nice and friendly. Really good student body, and I worked with great people in both the library school and library, so I was very happy, and I got a job back in the library again, too, which was really helpful in terms of expenses, so it was different but at the same time I was, you know, I was happy down there. I had a good time down there.

Yeah.

0:25:03.5

It sounds like you had—every time you went somewhere new you immediately went to the library to find some work there, it sounds like.

Yes. Yes. Well, you know, I knew what I wanted to do, and I knew it was important to keep my hand in. I also needed to earn money, so it was a great way to keep everything rolling together, and when I walked into that—the University of Rhode Island library, they were looking for someone who had experience with the O-C-L-C terminals who could do input cataloging, in other words somebody else would catalog a book but I would sit there and actually code the stuff into the computer, and so they were thrilled to actually have somebody who understood these terminals and actually understood how to do that kind of work, so I would just sit there with all the brand new books, inputting information on each of them into the catalog. I also did some filing and things like that but it was mostly--I was mostly what they called an O-C-L-C operator, so.

Ok. Yeah, so, you were kind of a technician in a sense.

Yep.

0:26:11.4

And, so it sounds like you were able to work with some faculty in Rhode Island who influenced you. Can you tell me a little bit about some of those individuals?

Sure. I was able to get a graduate assistantship my second semester. And so that got me to working directly with several faculty members. One of them was Dr. Chin, who was a cataloger, and she taught the technical services and cataloging classes, so that was a really good fit for me because that's the area I thought I wanted to go in and that's what I thought was the only thing I wanted to do. And so she was a good fit. The other person was a technology person, Lee Bohner, and she was very involved in technologies in libraries, very active in associations who were pushing technologies at the time, and so I got to play with more computers and do some more work with programming that might impact libraries, and so she—she was excellent in that sense because I just—I was exposed to a lot more about mainframes, I was exposed to a lot more about how computers worked, IBM cards, the tapes we used to feed through the computers, things like that I got a lot more experience from her.

But I also got to work with some other cool people like Evelyn Daniels who is actually at the UNC School of Information Library Science. She was the hot new media person. Who was rabble rousing about more media at school libraries, and so I got to work with her. But I had a lot of other faculty who just were really good people and taught me a lot of basic skills.

The funniest thing is that my—the one who is teaching library administration—he and I would get into arguments because I did not want to be an administrator. I wanted to be a cataloger. And he would say you have to learn this, and I'd go, why, why do we have to learn this, because I will never, you know, do this. And he'd go what happens if they make you queen? Of cataloging? And I said never, I will never do

that. Never say never, which you've probably read in some of my biographies and stuff, it's like, he would have probably laughed heartily to find out within days of graduating I was a library director. Or actually a year--within a year of being—graduating—I was a library director.

What part of administration did you think that you—you know, was it that made you want to go in a different direction?

I think I thought managing people would be the hardest. Because I'd seen some really good supervisors and had some mentors who were really good supervisors. I thought that managing people would be the hardest thing of all, and it's not easy but it's actually one of the most rewarding. So at that time in my career, it was kind of like leave me alone, I just want to catalog my books, I just want to understand all these rules for cataloging. You know, I don't want to learn all this other stuff about motivation and everything else and so—and budget, and other things. So I think that's why I kind of threw up my hands at that. But because I worked for another person out, you know, in my next phase of working as a professional who was a really good supervisor, I realized that if you had a really, really good supervisor that it could in fact it could make or break what a work place was like. And I still didn't—wasn't sure I was that kind of person to do that, but at least I knew that supervision could be done and done very, very well.

Ok.

But as a graduate student you saw yourself as specializing in cataloging and headed for a job as a cataloger.

Yes. Yes.

0:30:08.5

And what does that mean exactly. You know, with that specialization what do you learn and what are you preparing to do exactly?

So as a cataloger, and this is a transition time in cataloging, too, the computers were coming into full force, and so to let the computers understand the work you needed to have them do you had to learn how to code them, and so you had to learn how to tag, you know, simple things like a title within a certain field tag. You had to learn how to put in certain punctuation at certain places. And you had to do things like leave spaces between things because that's the only way computers can really read and people didn't understand that. They didn't understand how computers work. And for some reason I could. And so, in fact, my—Dr. Chin, who was wonderful--she hated the new style of cataloging because you had to know all these punctuation, all these rules, in addition to the normal rules of cataloging which is what is the main entry, what's the title, what should the subject headings be—you had to understand the punctuation. And so she just didn't like that, so she'd have me teach the courses. Those parts of the courses. Because I liked it, and I could teach it, and she didn't have to bother with it.

One of your professors in graduate school would actually hand over the class to you?

Yes. For certain pieces of the class, yes.

I mean she even told me, I don't want to learn this. I do not want to understand why it has to be period space space colon space space--

Ok.

--don't do that.

0:31:49.2

There was some resistance to the idea that you had to format information to communicate with the computer. They just wanted it to be stand-alone. They didn't want to have to reconfigure it to be compatible with a—system, a computer system.

Exactly. And so she would leave—the new rules were called A-A-C-R-2, and she would just say, I don't want to have anything to do with it. Please teach the students how to do this because I don't understand it. And you know she was an old school cataloger. She probably retired about a year after I graduated or so, so—she just didn't want to make that leap into the computerized world.

But I had used computers already. I kind of understood how they were working. I could intuitively think how do computers work behind the scenes. And translate that to people. So I'd come in and teach those parts of the class.

What kinds of conversations were going on in library science at that time in general about how computing was going to affect the field? Was there a lot of, you know, resistance to that influence, or—what was your experience like? What kinds of—I don't know. What were you hearing people say at that time?

Well, you know it was so new that a lot of people weren't exposed to it. So a lot of my classmates were still going through very much on the very traditional pathway. I think—and also, most people hate cataloging even today. They hate cataloging classes. So I was kind of this odd ball in terms of liking the technical services, the cataloging, the computer piece. I think inside the library, the actual library, there was a lot of resistance from some of the older people about changing because it was a big change. However the younger people were adapting and using these computer terminals and they were not having problems with it.

The field as a whole knew it was coming but weren't quite sure what it was really gonna look like. Except everyone kept saying by the time we graduated we would be paperless. Ha ha ha. Years later, we still are not paperless. We're getting there. But that was a big thing, and then you know people just felt everything would be computerized in 25 years. Well that didn't happen. Either—you know it really--digital journals and books didn't really happen until about 25 years later, 30 years later. And now we've seen a big switch. So I think there was still a sense that while the big thinkers in the field were saying we're gonna go electronic, we're gonna go digital--there still wasn't a real belief that that was gonna happen, and for years it didn't.

For years people were not really using computers very much in libraries. It was pretty limited. If you think again, you had to use mainframes. There were no personal computers until, what, the 1980s personal

computers started coming in—the late 1970s. And a few people had those but they still didn't have really good applications in the library.

0:35:02.7

Ok. Yeah. Were you excited about the idea of a paperless library?

Oh, I was, like everyone else, cynical. I mean it was like, really, ok, maybe. And then of course everyone was scared that we'd have no jobs. That was the other thing. We all go through—this field goes through scares every so often that computers will replace us and I haven't seen that either, so I wasn't particularly concerned because with cataloging I knew that computers would be part of that but wouldn't replace us for a long time to come. So.

0:35:33.2

Ok. And I read that you met your husband while you were in graduate school and he had a shared interest in technology. How did the two of you cross paths?

Graduate happy hour. We just happened to be sitting next to each other while our roommates were floating around with their graduate programs. They were both in the zoology, and they brought us to the same happy hour, and so we just happened to sit next to each other and started talking, and then we found out we did have these common interests, you know, reading, being outdoors, but also computers. He was taking machine language, so he was doing huge reams of IBM cards running through the computer mainframes, so he and I have always had this technology interest from the get go.

And you actually had a home computer pretty early on?

Yes. A T-R-S-80, better known as a trash 80.

What year was that? Was that still when you were a student?

That was later. I think it was probably around 1977, '78. I mean, this is the early days of home computers. This is when a cassette recorder was how you loaded your computer software and you couldn't do too much, you know, and using a word processing program involved embedding code into your documents. But he had a real interest in it. He had a very strong passion for computer science. I had an interest. We both learned it. And so, when I eventually left Rhode Island and went to North Carolina I was one of the few people who had actually had a personal computer and had actually used it to any great extent and so it was kind of interesting. But, yeah, we had that for years. We used to play weird little games like Quantoid.

Quantoid?

You know it was an M-B-A game. Go kill little M-B-As.

M-B-As?

Yes. Masters in Business Administration. Quantoids.

Oh, really?

But we had some others too. There were other things—believe it or not, you know, back then, no joysticks, no nothing.

So you had to do everything with a cursor and then load it up and down off this cassette recorder. So it was a very different time.

Yeah. Where would you even get programs for your machine at that time?

You could buy them through computer stores sort of--I can't remember the name of the one we used to do. There were companies where you could mail order and they send them to you and you could buy it through Radio Shack because it was a Radio Shack computer.

Ok. So it was available, you just had to put some effort into--

Exactly

Obtaining it.

We sold that computer as an antique.

Really?

Yeah. In the late 1980s.

Wow.

Early 1990s actually.

Did someone buy it to preserve it?

Yes.

Really?

Yes. They were thrilled because we had the box. We had the—all the computer parts. The games and everything else. We still had all the parts and pieces. And we actually mounted the first five and a quarter inch floppy drive into it when they first came out, and then we moved to two drives in the thing. So we kept pushing the technology forward and the other fun thing we used to do, and this is while Steve was still a student and was—and actually I was taking a course at the time, too—we figured out how to remotely access mainframes, so we would run it through the phone lines and we would load up a job and then send it to a main frame, in downtown Providence in that case, and we'd run downtown and get our job out.

Wow.

0:39:19.6

And then go back home.

So what kind of job would you send?

It would be a—for Steve it would be a programming job. For me it might be exercises that a class had assigned to me. But we were doing a little bit of programming like in Basic and other things, so. Different time.

Wow.

It sounds like fun though. I can see how that would be really entertaining. It's so new and so unprecedented.

Yes. And we would also frustrate people because when we'd run in and pick up our jobs we hadn't been sitting in the lab for four hours. We'd been at home working on the programs that we were doing for four hours. Then we'd just run down, pick up our jobs, and leave. And the people would be looking at us like where are you guys going? Where were you? How did you get a job down here?

So you anticipated the home office.

Yeah. We figured out modems and remote access pretty quickly.

0:40:16.5

So when you say job, are you talk about--like a printout?

Yeah. A printout. Yeah.

Ok, so just like regular printer paper.

Yep. It would come streaming out and let us know whether the programming we had been doing was correct or not. And whether it ran the job correctly and calculated what we wanted calculated or did the little routine we wanted it to do, so.

Wow. And you didn't know until you got there.

Right.

So you could make a trip to pick up the printout and find out that it hadn't worked.

Right.

And you had to go back.

Exactly.

But it worked the same way when we were at the University of Rhode Island and Steve was doing computer programming. He would, you know--these big boxes of IBM cards--and we would put them into the computer center and then run down there in an hour or two to see if the job had run or not and then usually it would go like six inches into the box of cards and then there'd be an orange card sticking up which meant it failed. And so then you have to sit down and retype the card or figure out where the error occurred and then you rerun the stack again. And sometimes it took five or six runs, so.

0:41:24.2

It was a very complicated part of doing computer programming at that point.

Yeah. That's interesting.

Yeah. But I'd accompany Steve to pick up his cards and find out what had not worked.

Right. Ok. And you found a job as a librarian right out of grad school I understand. So was that in the same town?

So we went to school in Kingston, Rhode Island, but my husband lived in Providence, and that's where I found the job, in Providence. And so they had an opening at Rhode Island College for a cataloger. And so I was able to get a job there, and so he continued his degree in pharmacy by commuting back and forth from Providence down to Kingston. And I worked at Rhode Island College as a cataloger. So that's what–where I went next. So I stayed there for a little less than a year. I was a cataloger but then they also put me on the reference desk, which I thought I'd never, ever like, but it actually turned out to be a really good experience, too, so I was reference librarian on the weekends and cataloger during the week. So a little bit of everything in that one.

0:42:42.7

Ok. And did you like the cataloging work? Was it what you expected?

Yes. It was what I expected. It was really great. I was doing some unusual cataloging of things that no one else wanted to touch. So people tended to leave the really difficult cataloging behind and they gave me the opportunity to take courses and learned advanced skills in cataloging and so I was doing microfilm and manuscripts and Portuguese literature books and other things. So I got a smattering of everything at Rhode Island College.

Ok. Yeah. That sounds like a good first job.

Yes. It was. It was actually very good. And that's where I met one supervisor who was really good. I had a somewhat bad supervisor initially but then a really phenomenal woman took over and really showed me—modeled what leadership was and what good management was.

Yeah. What kinds of things were you noticing about your supervisors that informed what you did later on?

A lot of things. The bad one was bad because she was just always nit picking and always kind of micromanaging, but at the same time she wasn't nice about it. Wasn't constructive. It was all very negative. She only looked for faults. She only looked for errors. And that creates a really toxic environment.

And the person who took over for her was exactly the opposite. It was constructive. Let's look at your cataloging. Let's see how we could improve it. Had you thought about doing this and that. And she was just a totally wonderful person. She was calm. She was cool. She just wanted people—not happy, I hate to

say that word—but she wanted people to enjoy their work and to really get it done and get it done well. And so things ran very smoothly with her, whereas the other person was always a panic or always something going wrong, always some crisis. And when there are, I'm sorry, crises in cataloging, I don't think so.

The stakes aren't high enough to have a cataloging crisis?

No. Everything could get fixed. If it didn't get done immediately it could be done later.

Ok.

0:45:00.5

Well we're right at about 45 minutes.

Ok.

I just wanted to mention that in case you want to take a break or anything, or need water or--

I'm fine to continue.

Yeah, I'd like to keep going for maybe 20 to 30 more minutes.

That'd be fine.

Ok. Great.

So I wanted to ask you about the Rhode Island Library association, because I noticed that you had a lot of involvement with professional organizations in your career, and was that the first one that you were involved in?

Yes. It was funny because someone just recently asked me about my association work and I was thinking oh yes, health, health, medical, and then I was like no, I started with Rhode Island Library Association, and that's really where I got involved in things. And that was--two reference librarians at Rhode Island College said, Pat, come with us. Be part of our planning group. Get involved. So I was actually planning conferences for librarians across the state of Rhode Island. They weren't even health sciences librarians but they were all kinds of librarians. And so I got very involved in the Rhode Island Library association and stayed involved in that for my time in Rhode Island. When I became a health sciences librarian there was another group of librarians that met from the various hospitals around the area, and so we had kind of our own network, but I always stayed involved in that larger library association. Because there were school and academic and a lot of different people in there and I learned a lot. Again learned about good leadership skills and keeping an association volunteer group moving forward.

Ok. Yeah.

0:46:53.1

And your motivation was mostly—what would you say was—inspired you to want to get involved in the field outside of your job?

I think it was contributing to the field but also getting to network and learn from others, and then also just getting exposed to other ideas and not just being in my own little world. But that was really kind of generated from these two reference librarians who were great people and they just kind of—it was like, wow, yeah Pat, of course you want to be involved in the field. You know, it's like, there was no question, and so I don't think I thought about it one way or another. I just got involved and stayed involved and then I made such great connections. I didn't want to break those connections. And so I continued to work for them. And I get a lot of satisfaction from planning conferences. You know. Getting speakers to come and meet with librarians and update them with their skills and on new issues, so I just enjoyed the work.

Right. Ok.

0:47:59.4

And, so after your time at Rhode Island College, you made another significant change in terms of the style of librarianship you were doing. Can you tell me about how your next position—how you found out about it and what your first impression was about the possibility of applying for that job?

So I'd known there were such creatures as health sciences or medical librarians. At that time it was hospital librarianship. But I just never thought with a background in history and, you know, humanities that I would ever be able to do it. But again these two reference librarians said to me, hey, there is a job down at Women and Infants Hospital, which was just about two miles from Rhode Island College. Why don't you try for this job because you're in a one year contract. The contract's coming up. The person's coming back into the job. And why don't you try for it. So I say, oh. Ok. So I went down for an interview and I was like, really? I don't know anything really about medicine and health, other than my own personal experiences. But I got there and first of all there was a woman hospital administrator who interviewed me, and that was really rare in that day to have a hospital administrator, and she was—Meredith was her name—and she was excellent. What she was looking for is somebody who understood librarianship and had the core skills and could apply those core skills. And so after talking to her I felt a lot better about maybe I could take that leap. It was also a teaching hospital and I didn't really think about it at the time but teaching hospitals teach all the time. And so I got into an environment where residents would teach me, nurses would teach me, physicians would teach me, and so if I didn't know something they would show me what was going on or teach me about it, or I could find the resources to teach myself. So I felt a lot more comfortable.

So I made the leap from general cataloging to being a – well actually it was a two person library—I was director. I would be doing cataloging—so that was my first love—but I'd also do collection development and I'd also do reference services and whatever else needed to be done.

0:50:23.9

So I made that leap into becoming director of the library and also research administration, which is another whole new area that—where I applied my skills—organizational skills to. And so I learned a lot through working with the institutional review board.

Ok. So that sounds like a lot of new--

Yes.

New responsibilities to be plunged into all at once. Was that a difficult transition?

I was surprised myself, where I didn't find it that difficult. I actually thrived in that environment, I guess because it was challenging and new. I also worked with really good people, again, I had a—I had a person who was a full time assistant who kind of knew the collection and knew where things were located so that helped a lot. And then there is this gruff old doctor called Doctor George Anderson, and he was head of the institutional review board. And he just again was a teacher, and so he taught me all about what I needed to do for research administration. And it was an exciting new era because it was really-- That was at the cusp of when institutional review boards were really being developed, you know, the Belmont report and some other legislation had just gone through about the protection of human subjects. And so I was right in the throes of those early days of figuring out how do we do it, what do we do. I was working with brilliant people who were taking care of very sick babies. We had a neonatal intensive care unit as well as pregnant women. So, two high risk populations. So I learned a lot in a very short period of time. But again, great doctors that taught me. Other people who really supported me in learning a lot of new things, and Meredith. I think her last name was Conte. Meredith Conte. She was just excellent because she was a mentor. She was a role model. I'm a woman administrator. You know, in a men's world, and I see no big deal with that. And so she taught me to be very self confident and to know that I had good skills and therefore I could do whatever I needed to and wanted to do.

That's great.

0:52:45.8

And this was your first library directorship, correct?

Yes. It was.

At Women and Infants of Rhode Island.

Yes.

And, so when you're talking about research administration, that means that you had a role in the I-R-B interpretation process, or—can you tell me how that worked?

Sure. So the rules were fairly new in terms of the federal regulations regarding the I-R-B so a lot of the process had to be developed and librarians are really good at creating processes and organizing. So I was sort of like the administrative support person for this I think it was about a 12 to 15 member board, and doctor Anderson was the chair, but I was the person who would, you know, get the protocols in, which described what they were going to do. I looked at the informed consent forms and eventually I could actually help the researchers write those consent forms in human terms, not in medicalese, and then I'd actually sit at the committees taking the notes and track the projects and know when they had to be renewed and everything else, so a lot of it was organizational but as new ideas came out about how you

treat pregnant women and children and other just issues like better informed consent, I was on top of those issues and would help them interpret them. In fact, on my little personal computer at home, I typed up a lot of policies regarding how the I-R-B should be working. And they were all amazed. Oh my gosh, she's bringing in this typed thing. And here are our policies for the institutional review board and here are forms for the institutional review board. It's really funny now. I remember it because the secretaries downstairs in administration just had the old word processing machines and I was actually using a personal computer at that point, so.

Wow. Was that unusual for a librarian to have that big of a role on an I-R-B board?

Yes. Yeah. At that point it was. Ironically, now many librarians—not many, but quite a few librarians are members of I-R-Bs. But it was—I don't know of anyone else at that point that was responsible for research administration in teaching hospitals.

0:55:16.8

Wow. And that was—this is all at the same time that you were just getting your introduction to medicine as a field.

Yes.

So that is quite a lot of responsibility.

But they actually worked together really well. And that's because I was working with research fellows, I was working with researchers who were also clinical physicians, and so you know if they said we're trying to solve this problem in neonates, then I also knew what they were going to be looking for in terms of literature. I also knew what they were going to look for in books. I knew pretty much the terminology, so the research informed my work in librarianship, and so, and that kind of followed me through my career, too, working with the I-R-B, and so I've never quite put that aside. But they are very much interlocked, and so it was like the perfect storm for me because it brought everything together.

I can see that. Yeah. Because you're just that much more integrated into the work that your patrons are doing in their research.

Right. So when they came in and asked me some bizarre question that they wanted searching I could almost understand what they were asking me to do. And sometimes I'd then later see it come out as a research protocol. And I'd be like, oh, wow, that's cool. I remember doing that search for this doctor.

Yeah. What kinds of things do you think you brought to the board that wouldn't have been present if it had been all physicians or all scientists?

In what ways do you mean?

Do you think that you had a perspective that they didn't?

Oh yes. So a very simple example is, you know, I'm going to do a heel stick on your baby and draw x amount C-Cs of blood, and I would say to them, "What is that? An eighth of a teaspoon?" "Oh, yes, it's an

eighth of a teaspoon." I said, "Why don't you use that terminology instead." You know, and sometimes I'd read their consent forms and say, ah, this sounds awful. And they'd tell me about it, and I said how would you put it in these terms, and they were like, oh, ok. So I finally got—there were a couple of researchers who just automatically brought me their consent forms, and I would rewrite them. Because I was not into that medical terminology as much. I could translate it into words that parents would accept and pregnant women would accept.

Ok.

0:58:00.9

So, sometimes you were helping with the public communication.

Yes.

That makes sense.

And sometimes I would just sit down with them and talk about how patients reacted to some of the things. Back then they thought that postpartum depression didn't exist. Back then they thought nausea and pregnancy didn't exist. There was a whole bunch of other things, and I would sit down with them and say, "Really? Because I don't think that's true." And I tried to get them to see the patient's point of view. If a woman says she's nauseous she's probably nauseous. You know. Maybe you need to—and then I'd try to find literature that might help them understand that, yes, it wasn't all in her head, it was—because I worked with a lot of older doctors.

I also worked with a lot of residents who were very cutting edge and they taught me more cutting edge viewpoints on medicine and talking to patients.

Wow. That sounds like a pretty big influence in a lot of cases.

0:59:00.5

I read that you also were working with media in this job--

Yes.

And media resources. Can you tell me a little bit about what those were and what your involvement was?

Sure. So this was a teaching hospital, so we had medical students and nursing students that were coming through the door as well as residents. We were connected to Brown University and New England University as well. And so we--and we also did patient education. So there was a whole patient education piece. So I worked with nursing on the patient education piece. I worked with the department of o-b-g-y-n on the training pieces. And so we had films. Filmstrips were pretty much gone by then so we had a number of films. We'd do that traditionally. We helped people with their slides and slide trays. Things like that, but then we got a little bit more involved in actually trying to video tape things and again this was back in the early days before a lot of that technology was three quarter inch I think when I left. So a lot of that

technology was pretty cumbersome back then. But we did keep collections materials for both the patient education side as well as the training side for physicians and other types of students.

Ok. And how were you using video? Were you actually filming practices?

No. I think we did a little bit of filming for some people now and then of a procedure but most of it was pretty much buying materials and helping them to use the materials. When they were actually in training programs. So I don't think we did a huge amount of videotaping at that point. I think we were experimenting with it but we didn't get into actually being in the O-R or–I think the only thing we did was probably worked with photographers who came in and sometimes would create slides for a training program. So I would bring them into the neonatal intensive care unit and made sure they respected the patients and things like that.

Oh, interesting. You helped produce some photographic documentation.

Yeah. And then that they could use them for orientation purposes. With both patients as well as new employees.

Ok.

1:01:17.5

And how long were you in the positon at the hospital—

About seven years. So, and then they decided to merge Rhode Island Hospital and Women and Infants Hospital together. And at that point they wanted only one library. And so I went through the process as an administrator to actually plan away my library at Women and Infants. And so I had a choice of staying in research administration or going with my library career, and I decided I wanted to stay a librarian. I didn't want to become a pure research administrator at that point. And so that's when I decided to apply for other jobs and then moved to Asheville, North Carolina. Ironically they didn't close the library. Ironically they kept the library. Though they didn't have a librarian for a year or two. But ultimately they did get another librarian and another library. But again the move to Asheville was a great move so I didn't regret that at all.

And it was an interesting process to go through a proposal for merging. Again, it taught me business plans. It taught me–the administrators really taught me how to come up with a proposal and do the analysis and figure out what the best recommendations were.

And at this point, after seven years as library director, had you reconciled some of your concerns about being an administrator or were you still kind of questioning whether you wanted to be in that role?

1:02:57.3

I liked being an administrator. I really liked the challenges of it. The analysis, the thinking it through. My bosses. And I had two really great bosses during that time, and they taught me a lot and they put me into training programs for the–the hospital was really committed to training their managers, and so I had courses on motivating employees. I had courses on management by objectives. I had courses on basic

management techniques. And so they actually taught me how to be a leader and good manager and I liked working with other managers and working on institution wide projects and proposals and so I really liked working at that level. And so—I realized I could do that job. The question was how much higher did I want to go.

I see. And what was it about the position in Asheville that made you want to relocate to a different region and try that as an experience?

So picture this. We're leaving Boston. Logan Airport. It's cold. Like 32 degrees. We fly to Asheville, North Carolina. It's 72 degrees when we step off the plane.

So, blue skies, beautiful mountains. Yeah. I did realize that it would get colder in the winter, but it was an incredible environment. And then when I got to talking to the people I realized this is a job that just extended what I had been working on. It was media services full-fledged with video and video editing. Photography services. And it was full library services. But it was outreach to a 16 county region. It served a residency program. It served two immediate tertiary care hospitals. But I'd also be looking at a lot more extensive work in terms of trying to do outreach. It was just--the people were great. The organization felt just right and so--and it was just a very beautiful high quality community, and I just wanted to be part of it. So yes. Off to Asheville.

1:05:13.6

Ok. And so this is at Moutain A-H-E-C.

AHEC. Mountain AHEC. Area gealth education center. Yeah. They just really refer to it now as MAHEC.

Ok. So you made that change and you made a decision to stay in medical librarianship. So you must have been fairly happy with that kind of happenstance change in your plans.

I think health sciences librarianship is wonderful because, you know, we all have health issues, we all need to learn more about our bodies. So it's a great match. And it's also just an exciting field because it's always changing. You know. It was evolving. There were new people you get to meet with and work with. Incredible minds. And really contribute to the healthcare of the community. So I just fell in love with the field, and I never thought after that that I'd ever want to do anything else except in health sciences.

Ok. And is an AHEC a pretty different kind of organization than an academic teaching hospital for example? What are some of the differences between those kinds of organizations?

So the AHEC I was at was a stand-alone AHEC. Some of them are based at hospitals. But we were serving 16 counties in western-most North Carolina. So it went from a fairly—well, a small city but a fairly active city in Asheville to very, very rural, out to Robbinsville and Almond, North Carolina. Including the Cherokee reservation. And so all the healthcare facilities from very tiny nursing homes and other things were part of my domain. And our staff served them, and so it was all about outreach. It was all about learning the community values. It was all about figuring out how physicians in very rural settings and hospitals in really rural settings could function and get access to information. So a totally different world. Totally different. I was in a central place.

I had to learn about politics too because we were connected to University of North Carolina and in the mountains there was a lot of suspicion about us university folks coming out and telling the locals what to do or what not to do. So I had to learn about politics and learning to fit in. I had to drop my Yankee accent. And have a softer approach. And culturally fit in to an area that was very different. But it was a wonderful opportunity because I learned about what it was like to be in Clay County where there's no healthcare providers. I got to see what it was like to be in a Cherokee Indian reservation where healthcare providers literally rotated every 6 to 12 months. And so there was never the same person there. I got to see that a small hospital is really struggling to get any information at all to their people. And I worked with public health departments and other groups. So I got a great exposure to what health care is all about and how you serve a very rural area.

1:08:40.6

So, the AHEC is there to serve both the health care providers in this region as well as the general public?

A little less so the general public though what we did was we reached out to the public libraries and especially the Buncombe Asheville public library. We worked with them a lot on how to train their people to answer questions. And people did come in to us because we were right next to the two major hospitals in Asheville so people would wander in and ask us. So we served consumers but it wasn't our major focus. But we tried to make sure that we did help them answer their questions and frequently the hospitals would send them down the road to us and we—you know, they'd come in with their questions like, you know, what does this mean. What does this term mean. Or I have to make this decision, what information can I see. What are the best treatments for this. And so we would help them through the literature.

Yeah. Ok.

1:09:39.3

So you went from an environment where you're serving medical students and people who are in the process of their medical education and focused on educating themselves to people who are just in the routine of their practice.

Right. We did also serve—we had a residence, family practice residency program with faculty, and so I did still work with faculty and residents and because many of the schools in North Carolina sent students to Asheville I worked with physician assistant people, physical therapists, and other residents like cardiology residents that came from Duke and UNC and Wake Forest and other places and stayed in the mountains for a rotation, and so they would come in to our library, too, but not as much as say the local nursing students or the local medical students who rotated through the University of North Carolina rotations in the family practice center. So we had a mix. But it was more the practitioner. It was more serving the two hospitals on either side of us. Which were—one was tertiary care and one was a little lower key care but was still an important hospital.

1:10:58.5

And did that kind of setting require a different set of resources in terms of the materials you were providing people?

Yes. I mean it was a much bigger collection. We also then had to also send copies of things to the hospitals and health care agencies throughout western North Carolina so we did a lot of mailing and faxing, eventually faxing. We also would do the central searching for all these groups as well, so it was a different kind of clientele. Because when I was in the hospital I knew just about everybody and they'd walk in and just drop in and ask me questions and this became much more of a network where I had to set up systems so that you could request things from us and we had to use national systems like the Docline system for requesting materials. I had to train people how to use that. I had to set them up on it. Then we offered computer training, too. That was a new thing again. I was one of the few people to have a personal computer, and when I arrived at AHEC they were just getting computers in the library and other parts of the AHEC system, and so we started some computer training for health professionals. Because that was all new to them as well so we were training them in basic skills.

1:12:15.0

So—it was a much broader group of people.

It sounds very outward facing.

Yes.

As opposed to centralized.

Inward facing. Yeah, I didn't do too much for the staff that were on board. The rest of the AHEC does continuing education and I would assist them if they needed help but it was much more, you know, what's the cardiology group need? What does, you know, the hospital in Silva need? What does the Cherokee Indian reservation need? So I'd be thinking more outwardly thinking. So I learned a lot from that and my boss had a public health background, a PhD in public health, and he was –he really taught me the value of really looking outward understanding what was happening on the ground. What their values were. And how to--how to meet their values and be politically sensitive. Because we're coming from big Asheville. How did we treat little Silva?

Yeah. And that seems like that would be an extension of the kind of feedback you were giving in research administration in some ways. Because you were looking at the public perception of how medicine was being practiced and how to create positive communication at that interface.

1:13:38.6

Yes. And I actually became involved in I-R-B research or I-R-B administration again in Asheville because they were doing some cancer research and they were mostly protocols coming out of Duke or UNC and they had to bring it into the community and so they needed their own I-R-B. They needed to be able to express things in language that the local community could accept. And so I get to work with their cancer research board and actually chaired it for a while, and we actually reviewed a number of protocols. And that was again another expansion of my initial work because I went from the administrator to the I-R-B chair and really looking at it from a patient perspective even more so, like, really? Is this what we're really going to tell them in terms of side effects? It's pretty awful. And so you know really sounding out whether

this was said in terms that people understood but also were these risks really valid enough to ok this research. So it was a nice complement to my being library director.

And how much time did you spend in Asheville in total?

Almost ten years. It was like nine point seven nine three or something like that. They worked it out. But--so I spent ten years there.

And what made you decide to move on?

Well you know I think like many jobs you've kind of done the basics, you've done a lot of the good things. The organization was changing around me. I wasn't sure exactly—I liked exactly how things were changing and some of the new leaders, but my husband also wanted out of pharmacy. He had been a pharmacist for years. He was tired of the long days and weekends and so he wanted to go to law school. So we needed to find a law school and so he applied—I applied to Pittsburgh and he applied in Duquesne at Pittsburgh. I applied to Duke and he applied for UNC law school. And then one weekend we had four acceptance letters.

Ok. And the other position that you applied for was also at an academic medical library?

Yes. It was a health sciences—it was the Pittsburgh Falk Library which is a University of Pittsburgh health sciences library. So--and so, which also seemed to be a really attractive job. Though the interesting thing was--is that they already had very strong leadership there. Not only their director but they also had several associate directors who were extremely strong, and what I really liked about Duke was that it had problems and it was trying to grow and it needed somebody who could come in with some strong management skills and help the staff grow the direction they wanted to. They had a new director. She had all the right political connections and a big network but they needed to figure out a way to make things happen and bring the staff together to make it happen, so. That attracted me and of course going to UNC was far less expensive than going to Duquesne so it was a perfect--again, another perfect storm where everything fell into place, and I accepted the duke job.

1:17:01.0

Great. And what was the initial position that you took?

I was associate director. So I was responsible for a lot of the daily operations, but I was really over collections services, technical services, again, cataloging, acquisitions, where I had had my strengths before, and the director was over reference services. But that quickly changed. So then I ended up being kind of involved in everything.

Ok. And who were the people here who you met initially and who were interviewing you for the job and who made the decision to hire you?

So Susan Feinglos was the director at the time, and so she was the one who hired me in, and then Dr. Gordon Hammes was the Vice Chancellor for Academic Affairs, and he was the one who hired me, but I met with all the staff that were there at the time and so Beverly Murphy, who's still here, was one of those

people. Virginia Carden, who's still there, was one of those people. But basically, pretty much everybody else has left. Either retired or gone on to other jobs, so we have a fairly new staff since I've come on board.

There's a few people that work in like interlibrary loan and work in the service desk who have been here a while but we had a big turnover in staff for both retirement reasons and people just wanting to move to a different location, so.

Right. Well when we pick this up again tomorrow I might ask you more about what, you know, what was going on here when you first arrived.

Sure.

What some of those areas of potential growth and change that you saw were. So maybe we can start there tomorrow.

That'd be a perfect place to start.

Ok. Thank you, Pat.

Ok.

TRANSCRIPTION, INTERVIEW 2

PROJECT NAME: Oral History Interviews with Patricia Thibodeau
PROJECT DESCRIPTION: Two oral history interviews with Patricia Thibodeau focusing on her biography and library science career
INTERVIEWEE: Patricia Leona Thibodeau
TOPIC: This is the second of two interviews with Thibodeau, in which we discuss her career as a library administrator at the Duke University Medical Center.
RESEARCHER: Joseph O'Connell
DATE: March 29, 2017
LOCATION: Thibodeau's office, Duke University Medical Center Library
CITY, STATE: Durham, North Carolina
AUDIO FILE: 1003.wav

Joseph O'Connell's questions are bolded.
Patricia Thibodeau's responses are unbolded.
Timecode is listed periodically.

0:00:00.0

It's March 29, 2017. My name is Joe O'Connell and I'm conducting an oral history interview with Patricia Thibodeau. Who is the Associate Dean for Library Services and Archives at the Duke University Medical Center Library and Archives. And this is for the oral history program of the library and archives.

So, when we talked yesterday, we covered a lot of your career and your life leading up to your arrival at Duke. And there is one topic that I didn't get to mention yesterday that I want to ask you about.

And I'm going to move the microphone a little bit closer to you. Is that ok?

Yep. That's fine.

Great. So while you were living in western North Carolina you received a master's in business administration.

Yes.

Can you tell me about the context of that training that you received?

Sure. You know, as a director I had become more and more used to having to deal with business issues and understanding where administrators were coming from. How to think like a top level administrator. So somebody in finance, somebody who is having to set priorities. And I just needed to understand more of the business world because health care and libraries were headed more into being businesses. I began to realize that libraries could just be this great beneficial good that people just handed money to. That we had

to prove our value and really work with administrators in showing that we were a value to their institution but a value to their constituents and that we were worth the money that they were putting into us. So I actually looked at maybe a master's in public health because that would be a logical one. Working at the Mountain Area Health Education Center. And I looked at a master's of health administration as well. And I sat down with my boss who was a public health person and he said that, you know, unless I was really working in public health that probably business would give me a better edge, especially if I was gonna remain in health care because health care was becoming more and more industry oriented more and more business oriented. Having business proposals and budget analyses and things like that. So I decided to get the M-B-A and I pursued that.

At the time, though, that was not a good move—well, it was a good move, but it was not an appreciated move by my colleagues. Because my colleagues in library science thought that people who had M-B-As were their doom. And they were the ones that were cutting their budgets and they were the ones that were questioning their value and so many of my colleagues thought it was horrible that I was getting an M-B-A but I thought it was one of the best things I did.

0:03:03.4

Because I really did understand the whole processes, the analysis, the formulas, everything that goes on behind the scenes that as librarians we just don't usually see, and I got to work with a lot of different people from the banking industry, from the healthcare industry, manufacturing industries and get a really broad view of the different types of businesses and the different cultures that those businesses bring forward, so it was a very good thing for me to do and I think taught me a lot of good skills.

Ok. So some of your colleagues thought that the changes in the libraries field and the development of more business-like perspectives was a bad thing to be resisted, and you saw it a little bit differently.

Yes, you know, I was betraying the field. I was becoming what was referred to back then as a quantoid. Everything was becoming quantified and, you know, the libraries up to that point had been societal goods. They didn't really have to worry about money or ask for money and so therefore why did anyone need an M-B-A? M-B-As were the enemies not somebody that should be in the field with the librarians.

Yeah. Ok.

0:04:19.7

So you had been playing video games about quantoids.

Yes.

Prior to this in a much earlier era, so you were really familiar with that stereotype.

Yes.

Definitely. And working in health care generally it was always a sense that the bean pushers, the accountants were making the hospitals cut back or reduce things and you know, and that's where I knew that the pressures on health care were not going to go away. So either you understood those pressures

and understood how to work with those people and how they thought, how they might strategically think about the library, was the only way for us to survive as a library field. But a lot of my colleagues didn't agree with that.

Ok. And so you did your M-B-A degree while you were still working at the Mountain AHEC?

Yes.

Ok. And we talked a little bit about transitioning to your first position at Duke. And one of the things you said that struck me yesterday was that you were choosing between two different jobs, one in Pittsburgh, correct?

Correct.

And one here, and what interested you about working here was that the institution had challenges that the other didn't. So can you tell me a little bit more about what those were and why you saw them as something you wanted to get involved in?

0:05:55.5

So I like to think of myself as a problem solver, and I like to make things better, and I like to work with teams of people to make things better. So one of the reasons I said no to the Pittsburgh job was also because they had a very strong team, and I would have had to fight to find my place in that team. In fact a couple of those people actually became directors at other places later. And so I knew that at Duke I could probably make a bigger difference.

So what was going on here? Well for many years they had a director who the staff dearly beloved, but he was mismanaging the library. He was not moving with the times. He had kind of, you know, I like to think of it as he's drawn the blinds, closed the windows, shut the doors, and said we don't have to look at the outside world. What we do here is fine. I don't have to benchmark. I don't have to think strategically. We're doing what we need to do.

0:06:44.4

What was his name?

His name was Warren Bird.

Ok.

And so he chose to take that stance, and he kind of shut down the staff. So staff were not encouraged to do professional development. They were not encouraged to think creatively. They weren't encouraged to look at, you know, like what UNC health sciences library was doing right down the road. And he kind of put them into the dark ages.

Then what happened was the new chancellor came on board. Chancellor Snyderman--Ralph Snyderman--and he evidently asked Warren for a strategic plan and Warren said I don't have time to do it. And so that

led to an external review where leaders from the field were brought in to look at him and his management style and they basically said you're mismanaging the library and felt that his leadership was not going in the right direction. There were literally no computers in this library at that point so this is around 1990 and he wasn't pursuing that technology except for a couple staff members who he decided should have that. It was not great communication. He had two strong associate directors and basically they made all the decisions and never talked to staff, never communicated, people didn't even know who was hired here or fired here or anything else. It was a very closed shop.

So he was asked to leave. And then Susan Feinglos was hired as the director. And she was the wife of an endocrinologist here so she had a good network and she really understood what Duke was all about but she wasn't necessarily trained as a director or leader but she had the bright mind and--really smart woman, actually--that she could do the job to some degree but she really needed an associate director to kind of do the operational things. So when I came on board the staff were upset that she had been chosen because she was chosen from their midst. So she was just a reference librarian and suddenly she becomes director. They felt that Warren had been unfairly let go, which was not the case, but they felt strongly about that, so--when I came here to interview. And this is always the fun part. Staff never think that they're letting on what's really going on but all their questions told me that they had major problems, that they were not trusting each other, they weren't talking to each other, there was distrust of the director. And that was a staff that was full of pain because they didn't really understand why their favorite director had gotten fired and told to leave and he couldn't come back on campus. So, and there were other things going on with him and they just—none of that was shared with them. At all. So I came into this kind of mess and with a woman who was very brilliant but liked to claim responsibility for everything that went on which also alienated her from the staff. But she was trying to fight for the library and was trying to open the doors and the windows and put up the shades and say we've really got to look at what's going on in our profession.

0:09:45.6

And we can't just be at Duke we do it this way. So it was a time of kind of--staff were fearful, they were hurt, they were angry. So believe it or not I thought I could come in and make a difference with this staff.

Ok. And what did you find when you got here.

All those things were there, so. I was put over the two people who were associate directors. So they were actually demoted down and I was put over them and they became my direct reports. Talk about a tough situation. But I have to admit they rose to the challenge, and this is Marianne Brown and Judy Woodburn, and they rose to the challenge and worked with me. They weren't happy with me but they worked with me and so I initially spent a lot of time and they were over the collection services so one of them selected things and–collections—books and journals—and the other one kind of controlled all the books and journals so they were collections people and that was my strong suit, technical services, and so--and then I worked with an acquisitions librarian, actually paraprofessional, who was glad for the change and so she was actually very helpful, so I worked with them and I did finally decide to work with them but I had to teach them basic processes. There were no policies here. People would come to me with things and say, you know, I'm going to take off the next two weeks because I'm having comp time because I've been working on weekends because I enjoy it. And I was like, really? You're gonna be gone for the next two

weeks? So I did a lot of policies and procedures and learned about Duke's policies and procedures. And then slowly as I worked with them I started working with other people like reference services. The history of medicine people. People who were doing the audio visual services. And then I started working with special projects. So my domain quickly went beyond just the daily operations of how people were buying the collection, preserving the collection. It went into all the service areas and so I was doing–I was looking at how databases were shared on main campus, how the budget was put together, in fact I ultimately put that budget—put the budget together from about 1994 'til today.

Ok.

0:12:05.6

And this is initially as Associate Director.

Associate director, yes.

And there were other associate directors working alongside you?

No.

They were demoted to a different role. So they were department heads.

So we had department heads in those two roles and there was a department head for reference and a department head for circulation services. So I didn't have to deal with those other two what we consider public service areas. I dealt directly with the patrons initially, but clearly and quickly I had to start working with those people and figuring out what was going on and that was for two reasons. One, my director decided to get some neck surgery done so about two months after I was on the job she was out for surgery, major surgery. And so it was great because I was thrown into the fire. I had to learn about people and learn about Duke and so I quickly got up to speed. It would probably take me a lot longer if she had been around.

But then really tragically a year later she was diagnosed with a glioblastoma, a deadly brain tumor. And so she basically from that point forward--it was 1994--fall of 1994 forward she really could not act as the director from that point forward.

0:13:26.5

So I had. I was basically serving in dual roles without being called director I got to do her job and my job at the same time. So thankfully I had learned a lot about Duke quickly.

Ok.

And it sounds like a lot of what was on your—what your responsibilities included was trying to transition out of this era where the library was mainly improvising and operating based on customs and actually try to create systems and procedures.

Is that roughly accurate?

Yeah. I did a lot of the systems kind of work. The procedural kind of work that sets things up and gave them rules and set some expectations. I Also tried to follow Duke policy rules as well. But then I also realized that we also had to get through this really awful schism that was going on. So fairly quickly into my time at Duke, it still would have been in 1993, maybe early 1994, we actually brought over personal assistance services--people could let go of the past and actually speak about their anger, get out their frustrations, talk about what bothered them most about the transitions that had been going on before I arrived, and really try to heal. So we brought in experts in counseling and got the staff together and had those kind of hurtful discussions, but at the same time gave everyone an opportunity to either let it go or, you know, continue to harbor little grudges. So.

Ok.

Most of them let it go. Most of them let it go. Which is good. Or at least decided to move on past it.

Yeah. Had you ever been in a situation where you needed to facilitate that kind of communication?

No. No. That's why I reached out for the personal assistance services because Duke has a strong program here and they're here for supervisors as well as for personal reasons and so I just said this is what we need to do. And so Susan and I planned those kind of sessions and got the staff together and that was the only way we were gonna move forward.

Ok.

0:15:48.5

So that was a pretty desperate measure.

Yes.

Ok. And was it successful in large part?

Large part, yes. You know. I mean, I think—right up to today I think there are some staff that carry scars from that period, but most of those staff from that period have either retired or moved on. So we had sort of a whole change of staff. Which was actually a really good thing because it kind of diffused some of the old feelings, the old suspicions, the old distrust. But a few things are still there.

Right, ok.

Couldn't fix them all.

Do you want to describe any of those in detail or do you want to leave them sort of anonymous?

I think I'll leave them just anonymous only because, you know—basically the people that are still holding these grudges, they do good things, it's just that they can't get past some of the things that happened so many years ago. It was just too hurtful and most of the people are gone. So the couple that are left, you know. It's not—it's not really historically relevant to talk about who they are except that it was that kind of process that left people scarred right up—24 years, 25, 26 years later.

Yeah. And I guess the point really is that you were interested in the challenge of trying to transform that environment.

Yes.

Great. And fairly early on, you weren't officially the acting director but you were helping fill that role because there wasn't a director who was able to work.

Right.

0:17:38.2

So it was really—it was very heartbreaking, because Susan was a brilliant woman. She had this surgery. They saved her life. And then they did cutting edge therapy by place anti—I can't even say it anymore—they placed antibodies that irradiated in her brain and what they didn't know was that that then started killing her brain cells. Not just the bad ones but the good ones. So she went from a person who had brain surgery to a person that was losing her memory. Her short term memory. Which made it pretty impossible for her to work, but she was in here every day. And then it went on to starting to lose long term memory and ultimately she started to have symptoms like she had a stroke, where she was actually losing her physical abilities as well. But that was quite a few years later. So she would come to work. She would sit in her office next door. That's why I'm in this office because I didn't want to sit in that one. And she would sleep. Most of the time. Or she would ask me in to talk about budget and I'd talk about budget and then five minutes later she'd come back into my office and say can we talk about the budget. So it was really pretty sad.

Yeah. Yeah. That sounds like that would be difficult to know how to respond to and possibly a distraction from the actual work process, too.

0:19:08.1

Well, definitely, and then staff didn't want to work with her because she was disruptive. I mean, she would go to a meeting and you never knew if she would be on target or not. Or she'd talk about shopping or she'd talk about something that was decided six months earlier. You just didn't know. And it got so—this is really terrible, but they'd get so they would call me and say she's headed up the stairs, can you get her. So I had like to race out of my office and try to head her off at the pass so she wouldn't disturb the staff. Because they all felt sorry for her. You know. And it was really tragic what was going on. But at the same time she was disruptive.

Right.

And then it became really bad when external people said can you leave her out of these meetings. But she was there enough to know that she was being left out of meetings. So either I had to have meetings out of here or she had to sit in the meetings, and then she was very disruptive. So it was a very sad situation, a very difficult situation.

0:20:01.0

So how did you deal with that situation? Or did you have any choices that you could make?

I didn't have a lot of choice except the vice chancellor who was over the library, Dr. Gordon Hammes—he was really a good person—he basically said, you know, Pat, you're going to have to run this place–to do it. And he trusted me. And so even though I was only Associate Director and he had supposedly still a sitting director he kind of knew what was going on and just let me have my way and let me do the things that needed to be done. But trying to make sure that I was respectful of Susan and what was happening, but I wrote him many a angry letter, a heartfelt letter, that said this person's gotta go, she's not doing it, you don't understand how much she's hurting the library. And finally after a number of years he did realize that she needed to move on. So he brought in—does this sound familiar?--an external review team, and the external reviewers met with her and basically said no, she's having problems, she can't cope. So they then found another job for her in the development area. I mean, she was one of a kind. She did this incredible experimental treatment that saved her life. And that others were going to use. So she became a spokesperson for that treatment and the adult brain tumor center. She was one of their, like, you know, poster children. And so—so she could do development work and things like that because she could talk to other patients and so they tried to find a place for her to go but finally she got so bad that even though the tumor didn't return she ended up being in a nursing home and dying probably about two years after she left Duke. So she left around 1999, 2000, and she died shortly after that. But she got to see her kids grow up and everything else.

Yeah. Well that sounds like another additional difficulty of that transitional period.

Yeah.

0:22:02.9

Well, you know, it's hard when you watch someone who you respect to really start losing and to lose their short term working memory. That's the most difficult, and she could not admit that she was having difficulties to her husband, to herself, or to us so that made it even more difficult. And I think for Dr. Hammes he had difficulty because two people, two key people, Susan Feinglos and a department chair were both diagnosed with this type of tumor at the same time. And so he was faced with this awful thing and how does Duke as a healthcare institution support somebody who's going through this incredible trauma. He died fairly quickly because he had a very invasive tumor. She looked like there might be hope. But there wasn't. And they just kind of let it drag on for too long.

Yeah. That sounds really sad.

Yeah. But in the meantime I was kind of given free rein, which is nice. So I put together the budgets, I did the negotiations, I made decisions about staff. I mean she was—I always sought her input and sought her, what she was doing, but she pretty much followed my lead. And so we had to make some different—difficult and different decisions about restructuring. Because Susan was brilliant in terms of the profession and her knowledge about things but she was not necessarily a good manager in terms of picking the right leaders, picking the best supervisors, and so we had to unravel some of the stuff she did. She did quick fixes and then years later you find out the quick fixes are bad ideas and then you have to unravel those so. I had to take a couple staff members who were department heads and I had to demote them and because

they were not good supervisors and the staff was having difficulty working with them. And then restructure everything so there would be better leadership in those units.

0:23:56.4

That's one of the difficulties of being an administrator, I guess, is delivering bad news to people sometimes.

While at the same time trying to find ways to support them. And those people weren't fired. I mean, I kept them here. And I found productive positions for them but it wasn't necessarily easy for them or anybody else but we tried to make, you know, as a friend of mine always said, if you have lemons try to make lemonade. And that's what I tried to do. I tried to have them save face but get us out of a bad situation where staff were literally mutinying because they couldn't work for these people any more and moved them in to productive positions where they could continue, to this day they still are on this staff. They are still working here and are productive members of our staff.

Ok. And you mentioned that—so in the early '90s the library didn't have any computer technology. How quickly were you able to turn around the technology resources that were available here?

And I have to give credit to Susan Feinglos because when she came on board she immediately ordered computers. So she got computers for the users. She got computers for the library staff. And part of the external review said that as well. So when I came here they had kind of leapt over and gotten the personal computers on everybody's desk and started the networking. So that was really great.

When I came on board it was how do you make big databases accessible. And back then there wasn't the internet that we have today. So you had to work with Unix servers or other mainframe type servers and load cd roms onto these servers and make them accessible, so one of the exciting parts when I arrived here is Susan had me working on that, and so I immediately started working with I-T people throughout the medical center and got to really get to know them, but also they taught me a lot. Because they taught me about how do you use a Unix box, how do you set up remote access when there's no internet. You know. How do you do dial up access into a server. And so we spent probably most of 1993 and '94 working on those issues and bringing up a lot of new technology and doing things that were cutting edge that other libraries weren't doing.

0:26:25.6

And that was exciting. That was a lot of fun.

Yeah. What were some of the more exciting examples of that kind of project?

Well, I think just, you know, the fact that we had these two massive Unix servers. And let me tell you they used to cost a lot back then. We brought them in set them up and then we actually figured out how somebody who is sitting on the other side of campus could dial in and search them with their computer on the network here at Duke. So that was just technically amazing, and all these brilliant I-T minds and programmers and everybody else are sitting around the table trying to figure out how to do it. And then testing the system and then announcing that it was here and doing events so that people became aware

that now they could suddenly access resources not just in the library but from outside the library. From their offices. And so that was really exciting. I mean it was still like—we were still like babies crawling along because it still was not very fast or very reliable but other people were just not doing that.

0:27:37.5

Ok.

And then we quickly moved into bringing in electronic journals. So in addition to loading databases the companies were getting ready to give us digital journals and so also loaded some of the digital content on those servers as well and so that positioned us when journals were available through the internet and the internet really took off we were able to move very quickly to a digital world faster than most libraries because our people were in place, our I-T was in place and our users were ready for it. So that was great too.

We also built a computer classroom. So that was another whole adventure in terms of building it. Those were common then but we used power Macs which were half DOS half Apple. Never again. But it was a new technology. We had to explore it, and we brought in new designs for computer classrooms. Bringing in equipment. Integrating computer screens so the instructor could see the computer screen. So I worked with technology people from UNC and down in the research triangle park who are experts in the field, so I worked a lot with that as well. Now that I think about it I worked a lot with technology when I got here

0:28:54.1

But it was great because we were trying to move as fast as we could. And the I-T infrastructure was willing to support us which was great because they wanted to try some of these new things too.

Ok, yeah. So it was a lot of—it had a sense of experimentation to it.

It definitely did.

Yeah.

Collaboration. Experimentation. Innovation.

Ok.

0:29:21.9

And so you were in that role for—'til roughly 1999.

Yeah. In 1999 I was officially called interim director and then in mid-2000 after—well, they started up a search for the new director and I applied. And then they shut down the search. Out of the clear blue. And said they weren't going forward. So for about a year and a half I worked in this kind of limbo and then I applied for a job at U-C-S-F and was about to get offered a job at U-C-S-F and they called me and said don't go anywhere.

Is that University of California?

San Francisco. I interviewed there. And everything clicked. It was really good. The cost of living was a little high. So I really still wanted to stay in the area but obviously deans were talking to deans or something because they called me up while I was actually on a cruise and said don't go anywhere. When you come back we're going to interview you for the job of director and then my new boss at that time made me associate dean. So.

Ok.

0:30:36.9

So you wound up sort of skipping the director role, at least on paper?

Right. I kind of held the dual role but he just decided it was time to call the position associate dean.

And what was different about the dean role than—compared to the associate director role?

A lot of it is you're suddenly at the table with people. And you're suddenly making decisions. And I had been making those decisions but suddenly I had the power to move much faster than I could have before and say things like this is a great opportunity we'd like to work with you—I got to sit on other committees. I got to meet other people. So you're just kind of working at a higher level. And that's when I really became involved in the curriculum. I used to be when I was associate director attending meetings—because my boss hated those meetings. But it wasn't very exciting. But our boss over the library changed. So Doctor Gordon Hammes retired. They brought in was it Edward Holmes for a very short period of time. He left again for California. And then when he left they decided to give me to the vice dean for education. So when the vice dean for education took over my position I suddenly was put on all this curricular type of activities. Attend the curriculum committee. Help us with the accreditation process. Help us with this. And he was a wonderful mentor. Russel Kaufman. And he was a phenomenal mentor. And he really supported me. He wanted me to be at the table for many things. So he started inviting me to things the director hadn't been included in before. So you work at a higher level. You get more attention. If you ask for a meeting you usually get a meeting. Yeah. So it was just-- And having, you know, more, how would you say it? Authenticity. When you're interim director it's like ok Pat's making decisions but when you're director it's like yeah she can make these decisions, she's made these decisions. They're moving forward. And this is how it's gonna be. And I could start to really change the culture even more than I had been. I had been changing the culture over the years but I could really put my mark on it, you know. What was going to be my leadership style.

Yeah.

What was going to be how I approached what was going on in the library and communicating with people.

0:33:07.4

It was the university making a bigger commitment to giving you those responsibilities or those authorities.

Right. And looking legitimate in everybody else's eyes.

And can you tell me a little bit about the curriculum work and how you contributed to that process? Is this the curriculum at the medical school?

Yes. At the medical school. Yeah. School of Medicine. So initially I was involved in what they call L-C-M-E, liaison committee for medical education. That's the accrediting body. And so I was very involved in putting tougher the self study as part of the accreditation visit and I think I chaired a group. I put together documentation. I summarized documents, dug out facts and figures. So I was really part of that team. But then when we went through the accreditation and we got cited for a few problems along the way, such as stronger curriculum, more integrated curriculum, pretty standard things that most schools were getting cited for, my boss said I want you on the curriculum committee and I want you to serve in curriculum administrative groups more. And so I was put on lots of planning groups where courses were being redesigned or you know the third year of the curriculum which is kind of unique here at Duke, it's a research year. I was asked to get more involved in that and so that really helped streamline my involvement into other curriculum issues down the road and then when Russel Kaufman left for Wistar, Edward Halperin came on board and he was the vice dean for education too and he said, he pulled together a senior group, administrative group , that would meet weekly to talk about the curriculum and we talked about everything from what are students complaining about to how do we, you know, how do we restructure the first year, to you know, what kinds of policies do we need in place and so he put me on that curriculum administrative group and I got to work with a team of about 10 to 12 other people who were responsible for the school of medicine and making sure it operated on a daily basis. As well as made good curricular decisions.

Yeah. What kind of influence did you have on those decisions? What kinds of ideas were you advocating?

0:35:43.5

Well, I think a lot of it is just looking at other ways of looking at the same issue or problem, making suggestions, so there's probably hundreds of little things where I'd say well how about we do it this way or maybe we should have a policy on this or end of course resources, you know. You know, the library has these resources in place, why aren't we using these resources? Or we can go talk to the first year faculty and ask them about what kind of resources they need, so it was a continuum of things and that has been that way over the years.

I did get involved, remember I talked about I-R-B work, well, I did research here at Duke and I was, became a, you know, certified investigator here at Duke, but then I realized that students in our third year, our third year is a research year, that many of them were struggling with protocols. Getting their protocols for their research projects approved. And so I started working with the third year group to talk about more streamlining, how the students could use the I-R-B, which is an online system, and how they could go through this process, and then I realized students who were not at Duke had to go through a full I-R-B approval. It's a kind of unique approval, but they really had problems trying to figure out what to do and the staff within the school of medicine were not researchers. These were, you know, very good people at handling student issues but not necessarily understanding what research protocols looked like, what was expedited or exempt reviews and things like that. So I volunteered to be the administrative principal

investigator for all the students who conducted research away from Duke. So over the last five or six years I took that role on as well.

0:37:31.3

So that took me into a different curriculum pathway and then as part of that we, well actually this goes back before that, Dr. Halperin was really interested in physicians learning more about information science, and so he had put together a grant with University of North Carolina's school of library science to create physician informationists and these were students, medical students, who would also take library science courses or I-T courses, information science courses, and understand more about the information science world and it could influence the development of electronic health records, the development of internal systems in a hospital or educational program. And so we got that grant as well and so because of that grant we got approval for a dual degree program with UNC and I became what we referred to as a study program track director which meant I overs aw the students, I answered student questions or recruited students into that dual degree, and worked with them while they were here including their theses and picking them a faculty mentor to work with and picking them a research project, so.

Ok. And that program continues?

That program does continue but they have reassigned it to, because there's the other programs that have taken its place--Duke had created a master's of management and clinical information which is more of an informatics degree, and so that is now offered through the school--it was school of business, now school of medicine--and so that has kind of been the preferred program for medical students, and I also took the UNC program which is health informatics degree. It's a, I think, a master's in professional health informatics, or chip program and we get that approved as a dual degree program as well. But that's now because I'm leaving it's been transferred over to somebody who is strong in informatics so it's now with a faculty member in the medical informatics program, so.

Ok.

But that's brought me into a lot of different roles and also got me involved with the informatics faculty because we have a center for health informatics so I get to work with a lot of people who happen to be leaders in informatics as well, so I keep having—technology keeps getting woven through my career here.

I'm getting a sense that you've had an influence over a lot more than just the library and archives here, that you've been involved in a lot of different aspects of just the way the school of medicine has made decisions--and maybe that's part of a dean role.

It is part of the Associate Dean role. But, you know, it's an opportunity that's given to you. Some associate deans take very minor roles. Mine, fortunately--I've been at the table and my bosses from, well, Russel Kaufman, Edward Halperin, and now Edward Buckley have just been great because they've kept me at the table and kept me as a key person within the development of this and, you know, as of just a few weeks ago Edward Buckley sent me a whole bunch of stuff to say can you research this for me for the double-a-m-c which is the Association of American Medical Colleges so I am involved in little bits and pieces and grants and research. It's been very exciting, very interesting work.

Yeah.

0:41:10.0

And the research you were doing, was that what was--is this the research that was behind some of the publications that you've had? Some of the journal articles that have been in the field of medical librarianship?

Some of it was. We did, we worked with iPads for a number of years when they first came out. How can somebody—iPhones and iPads—how can somebody use those devices? And so we did some research, small research projects there. We also had a Kindle project that I was involved in where we used Kindles to send students for away rotations where they didn't have a hospital library or didn't have easy access to us. And so we did a project there. Another project that I don't think has been reported in the literature was looking at what do junior faculty early career researchers need? I think we did a poster but we didn't actually write that one up. But yes, many times the research led to it. But it also, the research was also very much what should we be doing, where should we be headed, you know, so sometimes the research was just our sort of informal research, which is internal quality improvement, and sometimes it was, we did the more official, let's really look at what's happening, let's do an I-R-B protocol, let's get approved for using human subjects, and took it through the entire process.

Ok. So sometimes it was just a practical step in making a decision of what kind of – what to implement here. Other times it was to contribute to the field of medical libraries in general.

Yeah. So that was a big change for us because the old director, Warren Bird, his attitude was that if you're speaking at conferences or writing then you've got an ego problem. So that was not good. I mean. Our librarians are smart people and they need to be contributing. So we had to shift the culture from never looking outside and never sharing outside to yeah, we're doing good things, we should share, we should do some research, we should do some benchmarking, we should look at the literature, and so over the years the culture has gotten stronger and stronger where we'll have six or seven posters or presentations at an annual conference and people are going, wow, how do you do all this stuff. Well, you know, we didn't—we were doing it, but we also took the time to structure it so we could report on it and really look at how we could share it with the profession.

Which is a total turnaround from when I first arrived here.

0:44:04.1

So you've made sure that that's a priority and that people are thinking about what they're doing and not just going--not just improvising.

Right. Yeah.

I mean, I don't mind trying things. I'm also one of those people who—if you don't take risks you're not gonna learn and somebody in fact asked me in an interview once what was my biggest failure, and I said I don't think of them as failures I think of them more as areas where I have learned a lot, you know. I've made mistakes or things didn't work quite the way they were, but they informed me and informed the

libraries as to where we should be going next. And that's why we've tried to be innovative here, take some risks, try some thing. I have no problems with saying, too, this is not working, let's walk away from it. You know, a good example is P-D-As, personal assistant devices. Those were really big. We actually pushed that issue here at Duke and got them and showed the I-T people that people were using the devices and needed to use them, pulled together a symposium about it, and we trained for a couple years people how to use them and how to use the apps, but then we finally said, enough is enough, you know, they, everyone seems pretty savvy now, do we really need to be trainers when these devices are so intuitive and people just seem to be really at ease with them? So we stopped the training. You know, and said let's move on to something else.

Ok. So the general knowledge out there caught up with what you were offering and you made the call to focus elsewhere.

Exactly.

0:45:47.0

And we've done that a number of ways. We'll try something with somebody. And if they're not ready that's fine. We aren't gonna push the issue. If somebody's ready to roll we'll try something with somebody and then assess whether or not it's going to continue or not, but I have no problem saying yeah, this is not working, please let's get out of this business.

Do any other experiments come to mind that you feel like paid off or that were really—made a difference?

Yeah, there're so many different pieces that we've done over the years it's kind of hard sometimes to tease them out. And I think the liaison program that we put together, and again that wasn't just me it was working with Megan Von Isenburg whose gonna be taking my place as Associate Dean, I mean we hammered out what a liaison program should look like so that in an educational program has a specific person they can go to and ask questions, and I think that has worked really—it wasn't super innovative because other people were doing it. It's, again, we just did it, we did it a little differently, and that's the other thing we've done. We just don't look out there and say this is how Yale's doing it so we're gonna do it exactly the same. We say how is it--can it be aligned to Duke's needs and how's it gonna work at Duke because some things just clearly do not work at Duke. The same way, they're not ready or they don't want to do it, or it's just not a good fit and so we have to customize what we're doing to—so we take an idea, bring it here, massage it see how it fits here, and then decide if it's worth pursuing further or not.

Ok.

0:47:24.5

Right. I want to ask you—this is kind of backing up a little bit, but I know that you did a fellowship in library informatics, and I wonder if you could tell me a little bit about what that training was and how that informed the way you were looking at your work.

That was excellent training. The National Library of Medicine takes people who are gonna be change agents, they view as change agents, away for a week and puts them on a campus, and when I did it it was Woodshole in Massachusetts, and they bring in informatics experts from around the U.S. and---as faculty members—and as well as the National Library of Medicine staff members. And you spend an intensive week with residents, physicians, social workers, other librarians, I-T professionals, learning about what it takes to do informatics in a health care field. It was excellent. Just learning about new technologies, emerging technologies. These are people that were doing research in the field of medical informatics. And then in addition you got this network of colleagues, both library and other colleagues from around the country and you get to meet big names in the field so if somebody said oh, yeah, so and so is doing this you could go oh, yeah, I met him, I met Randy Miller. You know, I know who he is. Yeah he's the one who gave us a lecture on that. So it was a very intensive time, it was really great. And they still run the program today. It's not located in Georgia. And several physicians here at Duke have gone and I always recommend that our librarians pursue it too, but a lot of people aren't interested in going that in depth in informatics.

Yeah. Was that a new idea at that time?

Informatics was a growing, yeah, at the time it was not a super new idea, but it was—at that time if you were an informaticist especially in medicine you had a PhD or an MD. The PhD was probably in engineering or computer science. And in fact Duke had a medical informatics degree program and one of my colleagues kept trying to talk me into going into it and I said well, what would I have to do to prepare, and he says well, you're gonna have to take medical school courses and some engineering courses and I was like, no I don't think I want to spend my time doing that. So to bring in people who didn't have the time or the energy or the inclination to learn—to go to a PhD program—it was a great program because it kind of bootstrapped you up into understanding concepts, the terminology and some of the players in the field and the future directions without spending four years getting a PhD. So it was a fairly new program.

0:50:25.0

It was a good program.

Ok. And another question that I have, which is pretty broad, but--were the archives here a factor when you first arrived, or is that something that you have developed out of your own priorities and interests?

So the archives existed but they were way off campus and behind an adult book store.

Really?

The gentleman, James Gifford, who ran them was kind of this grouchy grumpy dissatisfied gentleman who really created the archives and got it going but really didn't want to spend the time and effort on it. He was a historian and he really wanted to do historical research but he had the archives put together and I think it gave him a position here at Duke. And so when I arrived here it was this big warehouse of documents stored. No one knew what was really in there. They had in a Word file a long list of all their boxes but you couldn't always tell what was in each of their boxes so it was a mess. So we talked to them. We had a copy of their big list of boxes but ultimately we had little to do with them. And then one day I was sitting—well actually I have to back up. One day I was asked to help recruit the main university archivist and I actually

questioned whether we needed a separate archives at that point and whether they combined and everyone decided they should be separate. So I was sitting a couple of years later in the chancellor's office and the chief of staff for the chancellor came out and said I need to talk to you. And I said what about. And she said, archives. I want you to take over archives. And I go well really because I think Doctor Gifford's still here. I don't know but I want them combined with the library. So I went out and I found out that in fact Doctor Gifford had not been at work for two years. He was still getting paid but he hadn't been there for two years because he was sick and he just kind of disappeared and he kind of worked from home on and off but he really hadn't been a presence for a long time so I went back to the chancellor's office and said this is what I found. They said what? This is terrible. And so they did some more research and said yes in fact he should—he really needs to be retired, he really should not be working any more, and so Pat you get archives. And then I got to recruit a new archivist and I recruited Rusty Koonts from NC State University and so he, he was gold, and he is gold, and very technology oriented, knew his field inside and out and brought rationality to our archives and he came in to a mess because some things were processed some things were not--they were just dumped in large boxes sitting on tables. And so he had to take this total mess and really make it into a big service area and he's done an excellent job doing that. And bring technology to it.

Right. Ok.

0:53:47.2

So that was sort of an idiosyncratic collection that was on the margins of campus, and how would you describe it now?

It is a well organized, findable collection. I mean he's got everything electronically listed in an inventory system. They can retrieve things in a matter of minutes. It's well preserved. It meets the needs of many people because they can do exhibits and events like if somebody wants some pictures up for an event or something like that, or a publication, so it is a thriving service. While preserving the documents here at Duke. And that is the other thing. It was hit or miss. It was like oh school of nursing, you sent over three boxes, I'll just put them on the floor, you know. Oh, I like this office so I'm gonna organize his or her stuff. And now we know who we're and what we're collecting and we target certain groups and certain offices and certain faculty and we try to make a real rational approach to what the medical center archives is all about.

Right. Ok.

0:54:53.8

So, one of the things I want to make sure we document is sort of who you've worked with and what have been the important collaborative relationships. You mentioned a couple of mentors who were vice deans of education. Who have been some of the other either colleagues or other people at the university who you've had a close working relationship with?

There's so many. I mean it just, gosh, it's where do you start and where do you end. And some of the relationships come and go, that's the interesting thing. You know I think Dr. Harvey Cohen, who was

director of the Center for Aging, who was always a library person. He and I have always kind of connected together, have we been best buds, no, but we've always been there kind of working with each other. He became chair of medicine and now has stepped back to the Center for Aging. He's just, he's just a great guy and he has a good perspective on what goes on at Duke and I really think he has taught me a lot about what Duke is about and again seeing a leader like him because he's a really good leader, he asked really smart questions, so I think he was a big influence in my life here. Let's see. Who else?

0:56:20.4

Some of the informatics people I worked with were really good. Joe Hales who's now at intermountain health in Utah, he taught me so much about informatics. He was the one who was always trying to talk me into informatics. He talked me into doing web work. So we had the first website for the medical center here because Joe Hales said we need to move on past gopher, and so we built the first medical center website and maintained it for a number of years until it got too political and we finally said, here again, when do you back out of something, we said it's too political, we'll keep our site and we'll work with others but we're not gonna do the web work for the whole medical center anymore. So Joe Hales was really influential and probably David Loback who is also an informatics person right behind Ed. Ed Hammond, who is nationally and internationally renowned for informatics was another influence and he and I talked a lot about the Woodshole experience and what I learned there and encouraged a lot of informatics developments here at Duke.

So I was trying to think who. I mean just all the people I've worked with in school of medicine. The advisory deans who were thoughtful, great people who are also physicians. I've worked with phenomenal emergency medicine physicians who were also educators. One person who was head of emergency medicine and another who was staff physician and both of those were wonderful educators, very thoughtful, gave me insights into their world, which was exciting to do. But also just shared the wisdom about teaching and learning. Recently Doctor Alan Kirk in surgery. We've had a lot of interesting characters in surgery.

Oh really?

Well, we had the big names like Doctor Sabiston, you know? I'd never really got to know him, he's so high up the food chain. And then we had a couple other surgeons who made changes and I'd get to see their leadership style but I've been working more closely with Doctor Alan Kirk and he's just thinking about medicine and faculty effectiveness differently and so he's kind of got us thinking differently about metrics and bibliometrics and how we—how he assesses but how we can support in his assessment of what his faculty are doing in terms of research and publications. So he's been kind of thought provoking.

Some people that I think I've just seen from afar and just wondered at their leadership style are Doctor William Fulkerson, who is head of the health system. When I first came here he wasn't the head of the health system, he was an influential member of it. But his commitment to quality, his commitment to data driven decision making, his leadership style, being firm but listening at the same time, being contemplative but also coming down hard when you know I've seen at meetings where he said this will not happen again. Never under my watch will this happen again. So I learned a lot just watching him and listening to him.

And Kevin Sowers. So he's head of the hospital. Kevin, when I was here, was a nurse, staff nurse. And I met him at a joint commission meeting, and I have watched him go from staff nurse to head of the hospital. Again, incredibly thoughtful person, listens, talks. So he and I have worked together but not intensely, but it's just being in the same room, learning from that person, hearing from them their knowledge about what's going on in health care has been just remarkable so I've had these great role models throughout. There's nurses, too, there's so many people here.

1:00:19.6

There're junior people like Clay Musser who does a lot with electronic health records and he's a physician and I've learned a lot from him.

Yeah. Ok. What kinds of things—I'm kind of zooming out a little bit. What kinds of changes have you seen at the university level that you've had to respond to and just over the course of your tenure as a dean, what have been some of the points, transition points and, you know, important moments in your leadership, in terms of responding to what's going on at the university and advocating for the libraries?

Well, you know, I think when I came here to Duke, the medical center was very separate from the main campus and there was always this tension of, initially it was the medical center will not drag down the university and then it's shifted to the university will not drag down the medical center.

In terms of reputation?

Well, financially more than anything. Financial pressures are always at the forefront around here, so it was kind of financially. It was interesting to see the different presidents and whenever there's a presidential change there's a change in style and approach and how the components of the medical center are being viewed, and I think when the medical center started buying practices and buying hospitals in the late 1990s I think that became a very suspicious time and there was a lot of I don't want to say hostility but there was a lot of trust issues that the school of medicine or the health system didn't really know what it was doing and it was a time where health care was in turmoil you know, managed care was not working well, physicians weren't happy, hospitals were struggling and so how do you balance all of that and keep it afloat while you've got a university too you can't let suffer at the expense of that, so it's been interesting to be in here during these tough financial times and that's probably what's true in a lot of what's gone on here from the hospital saying they're gonna cut their contribution to our budget in half, which then opened a whole bunch of discussions with main campus about what does that mean because we're gonna have to cut things, and their people rely on our resources just like we rely on their resources, and so I had to work more with main campus on some of those issues. At the same time trying to decide how do I redefine the library. How do I cut down what we're doing, how do we handle a budget that needs to shrink not grow and they want to have stable. And so those were some real inflection points in terms of my leadership but also in terms of working with others as well and seeing how the university was kind of gonna respond to what the health center was-- because we weren't the only ones I mean they were talking about massive layoffs in the hospital at that point. They didn't want to mention that we were doing layoffs in the library and I did do a number of layoffs here so that—

What time period was this?

This was in the early 2000s, so yeah, so there was a lot of suspicion about layoffs so I couldn't talk about it but it was going on here but when you have seven hundred and fifty thousand dollars pulled out of your budget which is about a third of your budget or a quarter of your budget you have to do some pretty drastic things and so finances probably drove some of the big inflection points here. But at the same time, it kind of let us really rethink what was important. So that's the interesting part. Layoffs are horrible and I hope Megan who is coming in behind me never has to do them but at the same time it made me look—the analytic business side again, at what was really necessary and there were some positions that were not necessary anymore. You know we were getting to be electronic, why did we need people shelving things. We had people using—who took care of an A-V collection that was dying. We weren't buying anything more, you know, no one was using filmstrips and films and slides. You know. Videos yes but not even then. And so you really have to go through and take a look at the staff and where are you going and then say how can you restructure to offset the financial losses you had without cutting the collection.

So—but then people are very upset because we did have to do some collection cuts and their attitudes are well you're destroying the library. Well are we destroying the library? So we went through a lot of soul searching and so we kind of went from you know the keepers of the collection to you know, we're more than our collection, and that became kind of a buzz word around 2002, 2004, we are more than our collections, and then it became we are a collection of services, and so we kind of transferred our whole cultural look at where we were going into service orientation as opposed to keepers of the stacks and then as we lost space we also lost some huge amounts of space because this place was growing, they didn't have space so that was probably another big inflection point in terms of leadership because I had to bring the staff through that thing and not only are we gonna have less money but we're also gonna have to get rid of our collection.

So the libraries essentially shrunk at some point.

Yes.

1:06:01.0

We used to be this whole building except for the bottom floor, and right now we've lost, I think we—I figured out we lost about 60,000 square feet ultimately because they took the top floor, they took half the next floor down and those are the two largest floors and then more people have moved in down the hallway and so we've just been shrinking in space so we also had to go through that process of ok how do we prepare for this change, we can store things because Duke has a storage facility but materials aren't on site, so how do we function as a library if materials are not on site. Technology again, the answer made better services not worse services. You have to take people through those traumatic changes because some people were like no you've destroyed the library. And people actually said that to me, not patrons, my own staff said that to me. You're destroying the library. They felt very strongly and that's usually about time somebody retired, you know, you can't do things the old way any more. But I think we're better, we're stronger, we're faster, we're nimble. We respond to things so much better because we aren't weighted down by these huge hundred and fifty nine thousand volumes, you know. And I involved staff in the decision making so that was the other thing. They helped weed the collection and determine what we kept and what we did not. We involved people in the actual move of the collection. People helped bar

code the collection so it could go into storage so people pulled together as a team to trouble shoot how we're gonna do this but to actually do the work. So it—I think that's the thing that kept us going through it, and that kind of looking in the future saying, you know, collections are our past, we need to look at how were serving Duke and this is how we're gonna serve Duke.

1:07:54.0

I think I saw that you either--an article or a presentation that was on that topic of losing some of the real estate.

When you're in prime real estate, yes. Losing space when you're in prime real estate.

So that was around 2010?

2008 was the first time we lost space and then 2011, '12 we started losing more space because the school of medicine was building their building, the Trent Semans Center which is next door, right against our building and actually building a bridge into it. But they didn't have enough space to bring over all their staff. So this is a tough point when you're—you report to the vice dean for education who also runs that section of the school and you—he can make decisions about what may be happening to your space. He didn't do horribly, and again because we had already moved things we were kind of intellectually prepared that yes, we could do this other move and clear some more space for the curriculum. Again, one of the best things that happened. Were staff pleased when it was announced? No. But now students rush in here, students hibernate in here, they want to be here, and we have this wonderful working relationship with the school of medicine because they're right next door, they're inside our building.

1:09:14.0

So that just works so well. So that was probably another big inflection point.

Ok. What else is important that we haven't talked about yet? Are there things that I've completely glossed over that you want to make sure to talk about?

I think the thing that--perhaps it's the one thing that sometimes gets ignored is just the people. It's that we've done a good job selecting people to replace the people who have left. So we did have to lay off a number of people. We probably laid off about 10 or 12 people. We had to freeze some positions. It got to be a joke. Do we want to pay this bill? We have to freeze this empty position. And that was hard. That was difficult but I think it made us a tighter group, a more efficient group. But then as people retired we started hiring younger people. Many libraries right now have older staffs that are about my age or five, ten years younger. And they're all looking at retirement and don't want to move and they're trapped because they have this older staff that isn't willing to change. I was fortunate that the two associate directors decided to move on pretty early on in the 2000s and so I could replace them and then I also just made it an imperative that we hire younger people, you know, we brought in, this is kind of funny, we brought in this really incredibly experienced librarian with Medline searching and she worked for the National Library of Medicine and she'd done all this stuff. By the end of the interview we realized she was the last person we wanted to hire because she was so set in her ways. And so we closed down the search, brought it back up, and said we need to hire people who are willing to learn, who are flexible, who are open to change, and

who are willing to move as fast as we can, because this place moves fast. This place changes so radically and you have to be ready to move with them, and so we made a commitment to hiring younger staff, not necessarily people who were versed in health sciences librarianship but who could be trained in it and who had an interest in it and I think that's made all the difference. We were at a strategic planning meeting one time and I said how many of you plan to be here in the next 10 years and I think one or two hands went up beside my own and that's when I realized I had a problem on my hands, that if I didn't hire young there'd be no one left behind me when I left, so but now I have this great staff, it's a young staff, it's a dedicated staff, so I think that's one of the things we've done really well here at Duke.

1:11:59.9

Ok. Great. Well thanks for your patience with the process.

Sure. This has been fun.

Yeah, and I'm sure there are lots of other topics that we could cover. It's impossible to talk about everything that you've done.

You can't, no.

Yeah. I think I've covered most of what I wanted to make sure to ask you about, so unless you have anything else to add then I think we can leave the interview here.

I think you hit all the key points. I think we're done.

Ok. Thank you, Pat.

1:12:43.1