

Collection Development Best Practices

Version 1.0

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# Purpose

This document was created by members of the Medical Library Association Collection Development Caucus to assist health sciences librarians with collection development. The intended audience is new collection development librarians and librarians whose primary responsibilities are not in collection development. The different sections should reflect the areas of responsibility and the tasks involved in development and management of collections in the health sciences. By no means is the information provided exhaustive, and resource suggestions are provided that may provide more details.

Version 1.0, 2019

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# Collection Development Policies

### **Why have a collection development policy?**

A collection policy shows stakeholders that collection decisions are made thoughtfully and that there is a rationale used to decide how collection dollars are spent. A collection policy should also provide guidance for library personnel with selection responsibilities. In addition, a collection development policy should:

* Set priorities and goals for collection
* Explain criteria used in making collection decisions
* Articulate the programs, clinics, users, etc. that are served by the collection
* Assign roles and responsibilities for collection management/development
* Educate library users and stakeholders on the importance of collection development

A collection development policy should be flexible to accommodate changes in formats, publication models, publisher pricing, etc. It should also be reviewed on a regular basis and the process for making changes to the policy should be outlined.

### **What should a collection development policy include?**

Elements of a collection development policy can vary based on a library’s needs. There is no perfect formula for creating a policy, but these items should definitely be included:

* An overview or detailed list of programs and users supported by the library
* Description of library personnel with responsibilities for the collection and any advisory groups that are involved in collection decisions
* Selection criteria
	+ Formats collected (print, electronic, AV/media, etc.)
	+ Subjects collected – these can be listed explicitly by call number range, or it can a more general overview
	+ Depth of the collection – for example, are materials collected to support research, teaching, clinical needs? Does it support PhD vs Master’s level students?
	+ Other selection criteria that describes factors considered before selecting an item for the collection. Examples include scope, publication date, cost, authority of author/publisher, language, reviews, etc.
* Weeding/deselection guidelines – how often is weeding done, what criteria are used to decide if something should be removed from the collection, what material is never removed, etc.
* How are requests for materials to be added to the collection evaluated? Less important for health sciences libraries is how challenges or requests to remove items from the collection are handled, but if you think this may be an issue for your library, you will want to include a section about this.
* How often is the collection development policy reviewed and what is the process for making changes to the policy? Who has authority to change and/or approve the policy?

Additionally, you may want to consider including:

* RLG Conspectus collection levels for each subject area (see<https://www.loc.gov/acq/devpol/cpc.html>)
* Overview of collection budget and funding sources
* Policies related to special collections and archival materials
* Donation/gift procedure and/or policy
* Licensing considerations – For example, some state-funded institutions cannot sign non-disclosure clauses that prohibit them from releasing cost information outside of their institution. If this is your local policy, you may want to stipulate this in the collection development policy so that everyone is aware. If there are other terms you cannot agree to in a license, you may want to include them in your policy.

The length of your policy will vary. Some institutions may prefer to separate policies or combine them all in one document. For instance, you may want to have a separate special collections policy. This will probably depend on the size of your special collections and if there are different library personnel in charge of special collections.

### **Sample Policies**

### University of New Mexico Health Sciences Library & Informatics Center<http://libguides.health.unm.edu/colldevmanual>

Ohio State University Health Sciences Library

<https://hsl.osu.edu/resources/collection-development-policy>

MLA DocKit #3, Collection Development and Management for Electronic, Audiovisual, and Print Resources in Health Sciences Libraries, compiled by Lina Walton; Christa M. Modschiedler, Patricia M. Rodgers et al., Medical Library Association, 2nd revised edition (2004)

(**Note**: Though dated, contains sample collection development and collection management policies for academic and hospital libraries.)

### **Sample Collections Philosophy**

Galter Health Sciences Library & Learning Center, Northwestern University Feinberg School of Medicine

<https://galter.northwestern.edu/about/collection-statistics#sectionTitle9824>

### **Resources**

Richards, D., & Eakin, D. (1997). *Collection development and assessment in health sciences libraries* (Current practice in health sciences librarianship, v. 4). Chicago, Ill.: Medical Library Association.

Swogger, S. (2018). Managing a Health Sciences Collection. In S. K. Kendall (Ed.), *Health sciences collection management for the twenty-first century* (pp. 33–78). Lanham, Maryland: Rowman & Littlefield.

*Collection Development and Management for Electronic, Audiovisual, and Print Resources in Health Sciences Libraries* / compiled by Linda Walton; Christa M. Modschiedler; Patricia M. Rodgers; BJ Schorre; Julie Schneider; Judith L. Rieke; Hope Barton

(MLA DocKit #3, 2nd revised edition), 2004

# Collection Assessment

Officially, collection assessment refers to how effectively the collection meets the needs of the library and its visitors and collection evaluation compares collections to other collections or bibliographies. For the purpose of this document, both terms will be used. Collection assessment combines comprehensive knowledge of departmental needs (personal experience, professional organizations and accreditation guidelines) and comparison with official lists and evaluation tools, such as Doody’s Core Titles or Journal Citation Report.

### **Frequency of assessment**

* According to a survey of 71 ARL member libraries in 2016, 42% of libraries complete collection assessment as needed, 39% assess annually, and 6% assess continuously. Nominal percentages of libraries have collection assessment semiannually, quarterly, or monthly.
* The frequency of assessment depends on the needs of the library, the amount of time, energy, and staff available to devote to the project, and the intended scope.
* One of the factors related to assessment frequency is change at the institution that the library supports. Changes could include new user groups (such as the addition of new academic programs or hospital specialties), modifications to curriculums or accreditation guidelines, adjustment of library or institutional goals, and changes to collection budgets.

### **Assessment Methods**

Measurements. What to measure?

* Service, electronic resources, access
* Speed of access rather than quantity of titles available.
* Use/Circulation
* Subject coverage

How to measure

* Frequency
* COUNTER or other standards
* Peer-to-Peer comparisons with other libraries.
* Core collections
* Cost per Use. (E-resources)

### **Assessing Monographs**

* + Assessing monographs requires decisions about what monographs best meet your library’s needs. Considerations might include choosing print versus electronic versions, staying up-to-date with the most recent edition, and the distribution of the monograph
	+ When considering investing in a new monograph or updating an old edition, selectors may want to consider the publishing history, primarily the number of previous editions and how often new editions are released. If a text has multiple previous editions, the audience has found the content valuable enough to encourage publishers to update and release new editions. Newer texts without a history of past editions may require closer scrutiny.
	+ Sources for comparison when assessing a monograph collection:
		- Recommended bibliographies from professional organizations
		- Comparison to peer institutions
		- Usage statistics and ILL statistics
		- Accreditation guidelines
		- Doody’s Core Titles (\*)

<https://www.doody.com/dct/>

Collection development tool produced annually, available for purchase, that highlights book titles recommended by content specialists and librarians.

* + - Tools such as OCLC (Worldshare) Collection Evaluation (\*)

and other OCLC products that include:

Sustainable Collection Services (SCS) and GreenGlass

<https://help.oclc.org/Library_Management/SCS_and_GreenGlass>

These allow single libraries and library groups to explore and visualize their collection in the context of the collective collection, quickly model deselection and print management scenarios, and generate custom reports and lists to support weeding and other collection management activities.

\*Fee-based services or tools

### **Assessing Journals**

* + Factors to consider when assessing journals:
		- H-factor
		- Eigenfactor
		- Impact Factor
			* Impact factors [(Callaway 2016)](http://f1000.com/work/citation?ids=1645600&pre=&suf=&sa=0)
		- Faculty editors and authors in the journal
		- Other publishing and citing studies of the institution’s authors

Tip: Many publishers/platforms do not have their customer database integrated with their publications database. This means that titles that have had no usage during the time period of the report will not appear on the report at all. COUNTER release 5 will not rectify this (COUNTER Release 5 Free Webinar-20170717 1800-1 Monday, July 17, 2017).

Research information system tools that are used in publications impact & evaluations study work at an institution that may also be used to provide insights into collection use or gaps. These include:

* InCites Institutional Profiles (\*)

<https://clarivate.com/products/incites/>

* Symplectic (\*)

<https://symplectic.co.uk/>

* Dimensions (\*)

<https://www.digital-science.com/products/dimensions/>

\*Fee-based services or tools

### **Weeding and Deaccessioning**

Libraries may weed periodically or only upon occasion to downsize print collections to keep only a current collection, or because of space constraints, off site storage. The library’s collection policy should provide guidelines on what the library consider to be its strengths.

Considerations for weeding may include:

* Multiple copies of the same title, now outdated (retention of one or no copies)
* Currency-removal of older editions
	+ Library’s mission to only provide a current collection (eg. 10 years)
	+ Examination review, reference works, or other materials for which currency is paramount
* Out of scope materials
	+ May have been on reserve or donated, no longer relevant
	+ May have been acquired for a program or department no longer served
* Audiovisual formats no longer in use
* Damaged materials that will not be replaced
* Broken, non-functioning, or outdated teaching tools
* Lost or missing items that will not be replaced
* Print journals that no longer will be retained
	+ Year ranges may be available online
	+ Other reasons

Thresholds (eg. usage history) and criteria (eg. relevance to collection scope; availability in the library system, state, etc.) can be added to reports produced as part of collection assessment and can serve to guide removal of print items from the collection. Library collection management practices guide the actual deaccessioning of items (process in the library’s ILS, OCLC, Serhold, etc.) Institutional guidelines and policies may guide what can and should be done with deaccessioned print items, whether they can be offered to other institutions, put in a book sale, offered to an online bookseller, sent to a regional repository, or need to be otherwise discarded.

Sometimes, the same phrases of “weeding” and “deaccessioning” are used to describe activities with electronic collections, particularly with outdated versions or editions of e-books, media programs. The principles are the same, but the activities may differ. A library’s collection policy should determine what is managed and how in the electronic space.

### **Resources**

<http://www.ala.org/alcts/resources/collect/collmgt/collasmt>

Brennan, D (2015). Collection assessment and the library liaison program: A practical focus. *Pennsylvania Libraries* 3, (1): 41-52. doi:10.5195/palrap.2015.88

Kelly, M (2014). Applying the tiers of assessment: A holistic and systematic approach to assessing library collections. *The Journal of Academic Librarianship* 40 (6): 585-591. doi:10.1016/j.acalib.2014.10.002

<http://www.arl.org/storage/documents/publications/collection-assessment-webinar-slides-and-script.pdf>

Johnson, P (2018). “Chapter 8: Collection Analysis, Accountability, and Demonstrating Value.” *Fundamentals of Collection Development and Management*.

American Library Association, 4th edition.

Kendall, S.K. (2018). “Chapter 4: User Oriented Collection Assessment.” *Health Sciences Collection Management for the Twenty-First Century*. Rowman & Littlefield (for the Medical Library Association).

# Collection Development Staff

There is great institutional variation in the titles, professional training, and duties of staff involved in collection development and management activities. Administrative structures may vary:

* Some academic health sciences libraries are part of a larger university library system and do not have a department or departments devoted to the entire cycle of health sciences resource management, from collection development through acquisitions and management. In this scenario, selection only may take place at the health sciences library.
* Some academic libraries collect in the health sciences to serve health educational programs based in that college or school, though they are essentially general academic libraries. In this scenario, staff may be designated to serve as the health sciences collection subject experts.
* A number of academic health sciences libraries may mix or combine collection responsibilities across various staff members or in a team-based environment that incorporates: collection development, acquisitions, cataloging and metadata work, electronic resources.
* Collection development staff may have additional responsibilities that could include work in management of open access funds, institutional repository, scholarly communication, or other work.

Notes about special considerations that may affect staffing and collection activities in non-academic environments are listed elsewhere in this document.

### **Job Description and Performance Review**

Given the demands of working in a busy workplace with numerous competing priorities, collection development responsibilities in most libraries can and often do drop to the bottom of the librarian’s priorities. In order to support professional librarians engaged in collection development we recommend:

* That managers specify a percentage of the librarians time to work on selection, weeding and/or evaluation of resources on each librarian’s performance review and provide feedback with specific examples during the performance review process.
* In the organizational structure of the library invest a position with primary responsibility for collection development with authority to make routine purchase decisions and to lead a work group or to chair a committee to make decisions on large expenditures and/or subscriptions.
* Create clear definitions of what constitutes routine purchases versus large expenditures.
* That managers in consultation with “library liaisons” or “subject specialists” formulate clearly defined projects with deadlines in which the liaisons/specialists will participate. Examples of projects include evaluation of resources in a specific subject area, weeding print materials in a specific subject area, scanning archival materials into an appropriate graphic format or reviewing journal use data.

### **Competencies for Collection Development Staff**

The ACRL "Competencies for Special Collections Professionals" part III A. Collection Development: (<http://www.ala.org/acrl/standards/comp4specollect#development>) contains a list of core competencies for a librarian participating in collection development of a special collection, such as medicine.

The RUSA “Guidelines for Liaison Work in Managing Collections and Services” (<http://www.ala.org/rusa/resources/guidelines/guidelinesliaison>) provides guidance for the liaisons to carry out their collection development tasks.

The Ohio State University Libraries’ “A Framework for the Engaged Librarian: Building on our Strengths” contains lists of competencies and best practices for subject specialists in academic libraries.

### **Resources**

Johnson P (2018). “Chapter 2: Organization Models, Staffing, and Responsibilities”. *Fundamentals of Collection Development and Management*. American Library Association, 4th edition.

# **New Resource Evaluation**

### **Responding to requested resources**

* Who is the requestor and what is the reason for the request (eg. course adoption, personal research, “should have”...)
* As warranted, the library should: acknowledge the request, communicate the evaluation and budgeting considerations of the library, keep the requestor in the loop about any trials, and ultimate decision.

### **Evaluating a new platform**

* Audience
	+ Is this resource appropriate for the library’s audiences?
	+ Is it intended for use in research or clinical care?
	+ Is it intended for students, faculty, staff, or the general public?
	+ Will this resource be available beyond the library, for alumni or via ILL requests?
* Access
	+ Does the resource work with the library’s existing modalities of access (e.g.: EZProxy, SFX link resolver, etc).
	+ Does the resource appear in the list of resources included in the discovery layer for the institution? (E.g.: Summon, Alma, etc.)
	+ What will the resource setup entail? Do you have the staff to fully set up and maintain the resource?
	+ For instance, if a vendor will only allow access via usernames/passwords that the library must manage, does that fit the library’s normal practice for e-resources?
	+ Are there any ADA accessibility concerns? Will the company share up-to-date Voluntary Product Accessibility Template (VPAT) documents with you in advance and send you revised VPAT documents over time?
* Cost
	+ Is there a discount for a multi-year contract?
	+ Is there a way to share the resource with other libraries?
	+ Does the vendor offer a free trial that lasts long enough for all interested parties to evaluate the resource?
	+ Is there another department at the institution that should manage the resource? For instance, if the resource is predominantly or solely for the use of one particular group, perhaps that group should purchase directly.
	+ Vendors of new products often start out selling to businesses before they enter the academic market. Consider the personnel cost for administering access modalities such as:
		- one-person=one-password
		- Pricing and access based on a fixed number of accounts
* Content
	+ Is the content unique?
	+ Is the resource a solution to a gap in the collection?
	+ Will the resource be easy to use or easy to teach?
	+ Is the design intuitive or frustrating?
* Continuing Education
	+ Are continuing education (CE) modules available through this resource to provide providers with credits for their ongoing credentialing requirements?
	+ Does the CE module come at an extra fee?
	+ Would the library have to manage the CE function or is there someone else at the institution who could?

Have a process/procedure in place for evaluating new resources that makes clear

* + A list of tasks that need to happen to evaluate the new resource
	+ Who will carry out a given tasks (internal staff, external stakeholders)
	+ Deadline(s) for evaluation and acquisition decision
	+ Evaluation criteria or a checklist that applies to your library’s acquisition concerns
	+ Evaluation modality (e-mail messages, online polls, etc.)
	+ Archiving of the written evaluations / poll results

Tip: make sure that you can read full-text of the resource and can print out and save as PDF.

* Communicating your process and procedures to vendors
* Evaluations / Cancellations of existing resources
* Bundles / collections / “Big Deals”
* Managing relationships with Vendors
	+ Exercise caution when providing information to vendors
	+ If your library belongs to a private institution, consider limiting the distribution of your Collection Development Policy only to members of the institution.
	+ If your library receives state or federal support, carefully consider the kinds of information you include in your Collection Development Policy
	+ Never make assumptions

The publishing industry and inelasticity of demand

Bear in mind that the advantage copyright law gives to the publisher/vendor has the potential to create what economists call “inelasticity of demand.” Although you cannot avoid publishers discerning the obvious cases of a resource you “must have” and cannot do without, avoid including in your communications with vendor representatives any indication of such a need. Actively seek out alternatives to expensive resources and consider new, “upstart,” products that show potential. If you must make your collection development policy public, avoid including lists of “must-haves” or specific titles.

Do Not Make Assumptions

Make sure you know all the details of the deal you make with a vendor/publisher. Sales Representatives will face disciplinary action and the business they work for will face potential legal jeopardy if they knowingly make a false representation to you. However, they may not volunteer all pertinent information -- so long as they answer truthfully when asked a question they have fulfilled their legal obligation. You must ask clear, direct questions in order to negotiate the best deal possible. Examples of important information you must ask for include (but not limited to)

* Access modality (e.g.: passwords vs. IP authentication)
* Embargo periods (any subscription-based license, not only e-journals)
* ILL permissions
* Platform fees, license fees, other fees
* Digital Rights Management (DRM)

### **Resources**

*Acknowledgements:* Ashley Krenelka Chase, Adjunct Professor at the Stetson University College of Law and Associate Director of the Hand Law Library shared her ERM Acquisitions Checklist, ERM Implementation Checklist, and ERM Cancellation Checklist. These inspired some of the recommendations for evaluating a new platform.

# **Licensing**

Most e-resource subscriptions will require a license agreement between the publisher/vendor and the institution the library serves. The most important thing to know about licensing is that you can negotiate the terms of the license. If a vendor is unwilling to negotiate any terms with you, you may want to reconsider licensing that product.

### **Authorized signatory**

* Most librarians will not have the authority to sign licenses on behalf of the institution. Most likely, you will need to work with your institution’s purchasing or legal department.
* However, it is still important for the librarian to review the license and negotiate terms related to use of the product since purchasing/legal staff members probably aren’t well-versed in these areas. Their main concerns are complying with institutional and state policies.

### **Considerations for Public/State Institutions**

Public and/or state institutions are usually subject to state laws governing contracts. Issues include:

* Open Records: Some states have open records acts that prevent the institution from including non-disclosure clauses in licenses. Many vendors will ask to include a non-disclosure statement that prevents the library from sharing the terms of the license with anyone outside their institution in order to keep their pricing confidential.
* Indemnification: Most licenses will ask the institution to indemnify the vendor ([see Liblicense definition here](http://liblicense.crl.edu/resources/licensing-vocabulary/)). Many states have laws that will prevent the institution from indemnifying any vendor, so this clause will need to be removed.

### **Things to Consider**

* **Avoid language** such as ‘warrants’, ‘promises’, ‘makes every effort’ or anything that asks the library to police user behavior. It is very difficult for any library to monitor what users are doing with licensed materials. In general, you don’t want to include any terms that you can’t enforce, but sometimes it isn’t possible to remove them.
* **ILL:** Make sure you have the ability to provide material from the licensed product to other libraries via ILL, if appropriate. Avoid specifying a specific ILL product, such as ILLiad, since systems could change over time. Most vendors will just ask that you use a secure system. Make sure you have the ability to supply electronic copies (e.g.: PDFs, TIFFs, etc.) of articles/chapters.
* **Course Reserves:** Make sure you have the ability to include materials in electronic course packs or on course reserves. You may also want to ask for language that allows materials to be posted on course management sites, such as Blackboard.
* **Authorized Users:** Ensure that all your user groups are included in the authorized users section of the license. The default for most licenses will be affiliated users of the institution (students, faculty, staff). If you allow access to groups such as preceptors, private practice physicians, volunteer faculty, and/or alumni, you may need to request additional language that covers these users. However, be aware that adding more users may affect your resource cost, particularly if you have a large group you want to add. Walk-in users are another consideration; many times you will need to request language to allow access for unaffiliated users using resources within the physical library.
* **Method of Access:** The license should specify the manner in which your library can provide access, such as via IP authentication, username/password, or proxy server. Consider what is feasible for your library staff -- IP authentication and proxy server access require some IT/systems support, but managing usernames and passwords can be very labor intensive for library staff. In most cases, you will want to use the same access method for all your e-resources to make things easier for your users.
* **Accessibility:** The license should include language about using reasonable means to make the content available to users, regardless of their perceptual abilities. This could be through built-in features, compatibility with other software, or through permission for the licensee to make the content available through other means. At a minimum, the license should include the right for the licensee to receive up-to-date VPATs upon request. The license may make reference to [Web Content Accessibility Guidelines (WCAG)](https://www.w3.org/WAI/standards-guidelines/wcag/), Sections [508](https://www.section508.gov/) and [504](https://www.hhs.gov/web/section-508/what-is-section-504/index.html) of the Rehabilitation Act, or other guidelines.
* **Text or Data Mining rights**: If you have users that may want to do research wherein they download massive quantities of information from e-resources for text or data mining purposes, your institution's license should include a clause as to how this can be done. Most publishers will allow this, but may ask your library to inform them in advance if someone is going to do this type of research.
* **Shared licensing and consortial relationships**: If some of your licenses are handled at a consortial level, make sure you have access to a copy of the agreement. Typically, the consortia will task someone with reviewing the license on behalf of the group, and you may not see the license before it is signed.
* **Record keeping**: Keep a copy of the license, preferably the version that has been signed by all parties. In particular, the library should retain records that specify perpetual access rights, especially when the institution has a records retention policy that discards financial records after a given period of time. Many electronic resource management (ERM) tools allow you to track license terms.

### **Resources**

Liblicense website (<http://liblicense.crl.edu/>)

* The Liblicense listserv/discussion forum is very active and is a great place to ask questions and get advice about licensing.
* Model license: <http://liblicense.crl.edu/licensing-information/model-license/>
* Licensing terms and vocab: <http://liblicense.crl.edu/resources/>

ALA Libraries and Licensing: <http://www.ala.org/advocacy/copyright/librariesandlicensing/LibrariesAndLicensing>

ARL Marketplace & Licensing: <http://www.arl.org/focus-areas/scholarly-communication/marketplace-licensing#.W04PvtJKiUk>

Claire Dygert & Jeanne M. Langendorfer (2014) Fundamentals of E-Resource Licensing, The Serials Librarian, 66:1-4, 289-297, DOI: [10.1080/0361526X.2014.881236](https://doi.org/10.1080/0361526X.2014.881236)

*Fundamentals of Collection Development and Management* / Peggy Johnson

American Library Association, 4th edition, 2018

Chapter 5: “Vendor Relations, Negotiation, and Contracts”

*[Acknowledgement Note: Thank you to* ***Erin Wentz****, Electronic Resources Librarian at MCPHS University for offering suggestions for this section of the document.]*

# **Budget and Planning**

The administrative structure of the library in the institution, its funding sources, the fiscal year alignment with the calendar year, institutional financial management policies, and other factors affect collection budget and planning.

### Institutional differences in collection budgeting

There may be differences in:

Which staff members are responsible for creating or formulating the collection budget and expense reports.

Line items that make up (are tracked in) the collections budget, resource type tracking and resources that are paid for out of collection funds

* Information resources (books-print and e, journals, databases)
* Clinical point of care or research tools
* Productivity tools, computer programs
* Models
* DVDs, streaming video
* PDA programs (books, streaming video, etc.)
* Service fees
	+ - * + Vendors
				+ Platform maintenance
				+ Additional fees for apps, mobile access fees

Auxiliary services, tools, scholarly publishing initiatives

* + - Open access fund, memberships), etc.
		- Collection analysis tools
		- Document delivery fees
		- Other: training; consortium membership, etc.

Other considerations for funding sources and documentation

* + - Allocation
			* One time purchases
			* Continuing resource funds
		- Expenditure history over time
		- Sources of funds:
			* Endowments
			* One time gifts
			* Other sources of funds
		- Shared funding for resources: within the institution (departments, other libraries) and outside the institution (affiliates, consortia, other)

Policies and procedures

* + - Carry-over into a new fiscal year, leftover funds
		- Replenishment of funds when funds run out (eg. Open Access Fund; one time purchases)
		- Pre-payments
		- Multi-year payments
		- Methods of billing and payment: credit card, invoices, EDI, etc.

### Budget planning and projections

Staff involved in collection budget planning need to understand:

* + The library’s methodology used for calculations: expenses, projections, encumbered and free funds
	+ The role of special funds or endowments as it affects the collection budget
	+ The library and institutional system used to track the budget (ILS, institutional financial system, spreadsheets, other)
	+ The budget approval process and who ultimately approves the budget
	+ What types of reports and data points are needed for library or institutional administrations
		- Note: Often, it is warranted to keep separate records or Excel spreadsheets in the library or department for collection specific budget tracking.
	+ Be prepared to envision and forecast various budget planning scenarios, including: budget with projected inflation rate, flat budget, reduced budget, increased budget...

### Resources

*Financial Management of Libraries and Information Centers /* Robert H. Burger

Libraries Unlimited, 2017

*Fundamentals of Collection Development and Management* / Peggy Johnson

American Library Association, 4th edition, 2018

Chapter 3: “Planning, Policy, and Budgets”

Chapter 9: “Collaborative Collection Development and Management”

*Health Sciences Collection Management for the Twenty-First Century* / edited by Susan K. Kendall

Rowman & Littlefield (for the Medical Library Association), 2018

Chapter 3: “Managing a Collections Budget”

A basic accounting book may provide necessary definitions for accounting terms.

*[Acknowledgement Note: Thank you to* ***Elizabeth Lorbeer,*** *EdM, MLS, AHIP, Library Director, Associate Professor & Chair, Department of the Medical Library, Western Michigan University Homer Stryker M.D. School of Medicine for vetting and offering suggestions for this section of the document.]*

# Faculty and Other User/Patron Participation

The involvement of users (including faculty and students in an academic setting, or clinicians and health team members in a hospital setting) can inform, guide, and drive collection decisions, though it is recommended that these be advisory, and the library staff be left the ultimate responsibility for building a balanced collection that remains within the budget and benefits the entire user population and the institution.

User participation can be personal (formal and informal conversations with individuals or groups, focus groups), through committee or task force work, or surveys. For committees and advisory groups, the structure, roles, responsibilities should be defined in a charge document.

Patron-driven acquisition, at this time mostly a technology driven solution for electronic resources, is addressed in another section.

Means to solicit input, provide patron participation:

* Suggestions for purchase (specific titles and resources)
	+ Mechanisms may include receipt of e-mail to targeted library staff, filling in an online form, or reports forwarded from library staff, including those doing liaison or outreach work
* Friends of the Library
	+ May be an advisory or a fund-raising group
* Library Committee
	+ Members from the library user community and key library staff
* Library collections committee or working group
	+ May include representatives from library administration, collections, and other departments
* Tracking user interactions
	+ User studies
* Trials

Trialing and testing highly priced or specialized electronic resources may especially benefit from input by specialists in that area. This may be time-limited by the vendor, and should include a feedback mechanism.

* Surveys/Focus Groups

Surveys and in-person focus groups can be used at various points in the life cycle of a collection as a whole or of particular resources and products: during trial or testing (consideration for adding); during decision-making processes (considerations to discontinue, downsize).

* Specialized Resource Advisory Groups

Clinical tools, research tools, data sources may be among the collection areas under consideration that require subject expertise.

### Resources:

*Health Sciences Collection Management for the Twenty-First Centur*y / edited by Susan K. Kendall (Lanham, MD: Rowman & Littlefield), c. 2018.

Chapter 4: User-Oriented Collection Assessment / Linda A. Van Keuren

*Fundamentals of Collection Development and Management* / Peggy Johnson

(Chicago, IL: ALA Editions)

4th ed., c.2018

Methods of Use- and User-Centered Analysis (Chapter 8: Collection Analysis, Accountability, and Demonstrating Value)

# User-Driven Acquisitions

User-Driven Acquisitions (UDA) is an umbrella term to describe acquisition models that incorporate library users. There are multiple UDA models, but they are all similar in that users participate in the decision on what titles will be added to the collection.

**Patron-Driven Acquisition (PDA)/Demand Driven Acquisition (DDA)**

PDA and DDA are the same program; the terminology used depends on the vendor you are working with. In a PDA or DDA model, the library will select a set of titles to make available and will load the titles into their library catalog, discovery layer, or whatever e-book search tool is used. Users will discover and access the books just like they do with any e-book titles the library owns. The library will only be charged for the book if it is used; if the book is used multiple times, it will be purchased and the library will own the title perpetually.

### Set Up - STLs and Purchases

Many libraries will choose to rent the e-book first, and then purchase it upon subsequent uses. These rentals are often referred to as Short Term Loans (STLs). For example, you could set up your PDA/DDA plan to do two STLs and then purchase the book outright on the the third use. Or you could set up your plan to do one STL and buy on the second use. The price for an STL is usually a percentage of the total book cost and can vary widely by vendor, anywhere from 10-40%. Some PDA/DDA vendors may allow even further customization where factors like the price of the loan and the full price of the book can be considered. If that is the case, you could opt to purchase a book outright on the first use if it is over or under a certain amount. The amount you spend on STLs does not apply to purchase of the book, so you will spend more than the full price of the book if the book ends up getting purchased. On the other hand, you can potentially save money if you have a lot of books that are only used one or two times and never trigger a full purchase.

The PDA/DDA vendor you are working with should be able to give you a list of the rates for different publishers, and you may want to exclude certain publishers based on their rates. Some PDA/DDA vendors will also allow you to set a limit for STLs that will be the highest dollar amount and/or the highest percentage you are willing to pay. How many loan periods you allow will depend on your library, but you probably won’t want to have more than three. As PDA/DDA plans have become more common, many publishers have increased their STL costs, so it is now more common to see STLs that are 25-30%. If you were to have 4 loans at 25% each, you will have paid for the book by the time the time the purchase gets triggered on the fifth use, at which point you would pay for the book again.

### Set-Up: Profile

The set up process also involves creating a profile which will determine which titles are made available to your users. This process is similar to developing an approval plan, and includes choosing factors such as subject area, publisher, and price. Depending on the vendor you work with, you can choose LC or NLM call number ranges you would like to include. The vendor should also be able to give you a list of the publishers that are included, and you can exclude publishers based on quality, reputation, or pricing. If you have access to a publisher’s content on another platform, you will probably want to exclude them from the PDA/DDA plan so you don’t purchase content you already have. The PDA/DDA vendor may also allow you to submit a list of ISBNs of books you already have so they can dedupe against your pool of available titles.

### Assessment and Monitoring

It’s a good idea to monitor the plan, especially in the first several months. You will want to look at the titles in your profile to make sure they conform with the types of e-books your library usually purchases. If you see a large number of titles you don’t think fit your collection, work with your PDA/DDA vendor to have them removed.

You will also want to look at your expenditures to determine if you are using the right number of loans. If you are seeing a lot of titles being purchased that are never used again, you could consider using more STLs. Or you may see that you are spending more money than you would like on loans and want to purchase earlier. The important thing to know is that you will be able to change any of your settings, so you can start off conservatively and then make adjustments. The PDA/DDA vendor should also allow you to stop the program at any time.

### Access to Own (ATO)

Access to Own is the same as PDA/DDA except that the loans count towards the purchase of the book. Once the loans add up to at least 100% of the list price, the library will own the title. ATO loans are usually more expensive than STLs.

### Evidence Based Acquisitions (EBA)

In an EBA plan, the library works with a single publisher to get access to all or part of their title list for a certain amount of time, usually one year. The library agrees to pay a certain amount of money up front to have unlimited access to the set of titles and can load the titles into the catalog, discovery layer, etc. At the end of the access period, the library will be given usage reports to review and can select the titles they would like to own in perpetuity up to the amount of money you paid up front. For example, if you pay $10,000 for your EBA plan, you will be able to choose $10,000 worth of books to own perpetually. If you want to purchase more than that amount, your library will need to pay the difference.

# **Cooperative Arrangements and Consortia**

Cooperation and collaboration have been a tradition in libraries for many years. Cooperative arrangements, may be in place for a variety of activities and services. The focus here is on arrangements, the sharing of responsibility that is done for collection management purposes.

Arrangements with external partners may be library with internal partner, library to external library, or due to an agreement in place at an institutional level.

### **Types of arrangements**

*(These are not mutually exclusive)*

Library with an internal partner

* Example:

The library may share the cost of a resource with another department in the same administrative structure

Affiliations

* Examples:
	+ Administratively separate libraries of the same institution or corporate parent (academic, hospital, commercial, government agency, or other.

Narrowly defined subject areas

* Examples:

Hospital, pharmacy, veterinary medicine, osteopathic, chiropractic, government health agency...

State or regional consortia

Across libraries in a defined geographic area. Membership or other arrangement that may include health sciences members or ability to acquire desired resources-

* Big Ten Alliance (BTAA)
* Boston Library Consortium
* California Digital Library

### **Criteria for selection of a partner institution**

* The arrangement is mutually beneficial to the parties that are part of it
* An agreement is in place so guidelines, restrictions, and rights are known
	+ It is clear to all parties what is opt in, opt out, and the relevant timing (for activation, renewals)
	+ Each member has a vote on the kinds of resources targeted or part of the agreement
* There is some type of arrangement in place for centralization of the licensing and budget (billing and payment) process
* Legal expertise is available and sought for licensing issues that are pertinent to the partnership agreement itself and the resources that are involved
* Cataloging, record maintenance (ingestion into the ILS), and other collection management expertise and support is available, negotiated, or shared

### Resources

Machovec, G. (2018). Consortial partnerships with libraries and vendors. *Against the Grain,* *30*(2), 26-27.

*Fundamentals of Collection Development and Management* / Peggy Johnson

American Library Association, 4th edition, 2018

Chapter 9: “Collaborative Collection Development and Management”

*Health Sciences Collection Management for the Twenty-First Century* / edited by Susan K. Kendall

Rowman & Littlefield (for the Medical Library Association), 2018

Chapter 5: “Collaborative Collection Development”

# Interlibrary Loan (ILL)

Examination of interlibrary loan patterns, statistics, and costs for acquiring for patrons the books, journals (articles), and other materials they need that are not held or licensed by the library can inform collection assessment as well as development.

* ILL statistics show the frequency of requests for items not held. The library can establish a threshold, guidelines, and procedures for when a library should proceed with purchasing a book or licensing a journal.
* Document delivery and interlibrary loan costs are likely to be a portion of many health sciences library budgets, whether they are in the collection budget category, or not.

### **Collection considerations**

CPU-cost per use

Weighing the cost of ILL or document delivery (or pay--per-view) against subscription costs is a common technique used for analyzing potential new journal titles. A patron driven model for journal article acquisition costs may be weighed against subscription costs.

CONTU

[www.copyright.com/Services/copyrightoncampus/content/ill\_contu.html](http://www.copyright.com/Services/copyrightoncampus/content/ill_contu.html)

Collections staff should be aware of CONTU guidelines for ILL that limit the number of articles from journals that can be obtained without paying copyright fees. Library staff time and budget come into play when a library starts to incur copyright fees because of repeated ILL of articles from the same journal. Examination and analysis of the requested titles report and associated costs should be done periodically for collection development purposes.

Licensing and ILL

Electronic resources licenses should be examined for pertinent sections that relate to ILL permissions. Library procedures should be in place for informing and training ILL staff about what is and is not permitted on meeting incoming ILL requests.

### Resources

*Health Sciences Collection Management for the Twenty-First Century* / edited by Susan K. Kendall

Rowman & Littlefield (for the Medical Library Association), 2018

Chapter 3: Managing a Collection Budget

Section: “Document Delivery and Interlibrary Loan as Elements in the Collection Budget Plan”

# Open Access

Open Access (OA) literature is freely available to everyone. Both the copyright holder and publisher agree in advance to unrestricted reading, downloading, copying, sharing, printing, and linking.

An open access repository or archive allows copyright holders to upload their content and make it freely available. However, an open access repository does not include a peer review process.

An open access journal, similar to the traditional publishing process, puts submissions through peer review, prepares the manuscript, and makes the manuscript available online or in print, freely available to anyone. Because open access journals do not charge subscription fees in order to access content, open access journals often charge authors an article processing fee (APC), which can cost anywhere from hundreds to thousands of dollars. Some libraries or institutions offer open-access publication funds that cover open-access article processing fees for authors.

A hybrid open-access journal is a subscription journal in which authors can pay additional processing fees in order to make their articles open access. Some argue that hybrid journals are “double-dipping” by charging article processing fees for authors while still charging libraries for subscriptions, even though some of the content in the journal is open access. However, many academic faculty prefer publishing in hybrid open-access journals because the journals are usually more well-known and have higher impact factors. Additionally, some publishers are using the hybrid model as an intermediary step before moving the journal to a fully open access model.

### **Institutional Memberships and Open Access Funds**

Some larger OA publishers offer institutional memberships that eliminate or reduce article processing charges for authors. Examples are [BioMed Central](https://www.biomedcentral.com/about/institutional-support/membership), [PeerJ](https://peerj.com/pricing/institutions/), and [PLOS](https://www.plos.org/institutional-account-program). Some institutions may pay for these memberships out of library collection budgets; others may purchase them using research funds. Before purchasing a membership, consider the discount in the context of the number of faculty you have that could potentially publish in those journals, as well as how many have published in the past. For instance, if the membership costs $10,000 per year and provides a $1,000 discount to authors, your institution will need to have at least 10 publications before breaking even on the deal.

As an alternative to institutional memberships, some libraries offer OA funds to provide authors with assistance in paying for APCs. In this model, the library designates a certain amount of funding to pay for OA publication fees. This funding may come from the collection budget. The library will determine the criteria authors need to meet in order to qualify for the funding; some institutions may limit funding to junior faculty or to those faculty who do not have grant funding. Additionally, some libraries only pay APCs for certain journals and may exclude predatory or even hybrid journals. In that case, the library will need to have a criteria in place in which to evaluate the journal in which the author wants to publish. It is worth noting that many libraries have established these funds only to have to cancel them due to declining budgets.

Examples of Library Open Access Funds

* <https://new.library.arizona.edu/about/awards/oa-fund>
* <http://guides.lib.uiowa.edu/scholarly_publishing/OAfund>
* <https://www.library.ucdavis.edu/service/open-access-publishing/>

### **Predatory Publishing**

The emergence of Open Access publishing has given rise to unscrupulous individuals who attempt to exploit the pressure on researchers to publish in order to collect money from authors without performing most or any of the tasks that reputable publishers do (e.g.: peer review, editorial oversight, vetting conflicts of interest, etc.). Attempts to combat predatory publishing have encountered impediments such as the labor-intensive process of vetting as yet unknown journals, controlling for individual biases, the difficulty of formulating criteria and the application of the criteria to distinguish predatory from naive publishers and society publications.

Work with instruction librarians to formulate guidelines and design instruction to enable library users to identify potentially predatory journals.

Resources for Assessing Journal Quality

* <https://thinkchecksubmit.org/>
* <https://hslibrary.ucdenver.edu/predpub>

### **‘Whitelists’ and ‘Blacklists’**

A ‘whitelist’ is a list of journals that have been vetted and have been found to be reputable publications with good business practices. Conversely, a ‘blacklist’ is a list of journals with dubious publication practices and business policies that are not recommended for publication. There are many examples of whitelists and blacklists. A well-known blacklist was Beall’s List, but it is no longer maintained (read the Wikipedia article for more information about the history and controversy around Beall’s List: <https://en.wikipedia.org/wiki/Beall%27s_List>). [Cabell’s International](https://www2.cabells.com/) maintains both a whitelist and a blacklist, but they require a subscription to access.

Whitelists and blacklists imply each other. A title that does not appear on a list of “approved” or “vetted” journals implies guilt that the journal has low quality or its management engages in predatory practices. Neither may be true. A title that does not appear on a list of “predatory” journals may itself engage in predatory practices but has not yet come to the attention of the people maintaining a blacklist. Both blacklists and whitelists can have people applying criteria in an uneven manner or using criteria that does not necessarily indicate clearly a publishing practice that is predatory or “bad.” For these reasons we recommend caution when using black or white lists. The lists can be a good starting point, but should not be used to outsource the decision making process or supplant the librarian’s or the researcher’s judgement and expertise.

Additionally, the terminology “whitelist” and “blacklist” is problematic because of its racial connotations. See this JMLA editorial for more information (<http://jmla.mlanet.org/ojs/jmla/article/view/490>).

### **Resources**

<https://scholarlykitchen.sspnet.org/2018/02/06/focusing-value-102-things-journal-publishers-2018-update/>

<https://dash.harvard.edu/bitstream/handle/1/3715477/suber_crln.html>

<https://doi.org/10.1002/asi.23446>

*Health Sciences Collection Management for the Twenty-First Century* / edited by Susan K. Kendall

Rowman & Littlefield (for the Medical Library Association), 2018

Chapter 3: Managing a Collection Budget

Section: “Open Access and the Collection Budget”

# Publicity and Promotion of Resources

“Regular communication with user communities is essential for gathering the information needed to perform collection development and management activities, and to plan for the future.” Continuous market research can uncover new user groups and/or user needs or, conversely, changes in trends in your institution’s research activities indicative of topics no longer of interest. Promotion of resources can also lead to greater engagement between the library and its users, resulting in increased feedback that can improve the collection development policy and practice. We recommend formulating a marketing plan, distributing this plan to all involved (e.g., library liaisons), and subjecting the plan to continuous review and revision.

### Marketing Plan

Recommended attributes of a medical library collection marketing plan

* Identify users by discrete thematic categories and advertise the resource features that will be most important to that audience (i.e., ease-of-use, applicable content, assistance for research or clinical support, etc.)
* Decide on assessment and research tools that can be used to gather more information on collection needs (e.g.: surveys, one-on-one meetings, visits to dept. meetings)
* Identify methods for distributing information (e.g.: display cases/spaces/monitors, web pages/blogs, newsletters, posters, emails, etc.)
* Specify staff marketing responsibility and amount of time to spend on collection marketing activities
* Develop plan for regular engagement with users regarding collection management, including:
	+ Social media posts highlighting resources or unique collection items
	+ Emails or newsletter blurbs about discontinued or new subscriptions
	+ Clear signage and/or shelving placement in prominent places in the library to highlight new collections
* Assess marketing methods when collecting information on collection needs from users

### Resources

Fundamentals of Collection Development and Management. Outreach, Liaison Activities, and Marketing. [online course March 12 - April 6 2018] Association for Library Collections & Technical Services. <<https://ecourses.ala.org/?redirect=0>>

*Fundamentals of Collection Development and Management* / Peggy Johnson

American Library Association, 4th edition, 2018

Chapter 7: “Marketing, Liaison Activities, and Outreach”

# History Of Medicine and Special Collections

Building of a history of medicine or health sciences collection and Special Collections can be driven from a variety of sources for the materials.

* A general history of medicine or health sciences collection can be built through purchase and gifts, as well as licensing of electronic historical collections.
* Special Collections growth can take place from purchase of materials for the collection, gifts, and move of items from the general collection. (Special Collections activities may include digital resources, but that is not addressed further here).

In general, the practice of responsible collection building, weeding, and downsizing is inherent in the practice of collection development and management. Collecting history of medicine (or health discipline) materials and selecting/designating materials for retention in Special Collections or designated history of the health sciences areas are activities that are guided by institutional priorities, practices, and available funds. Stewardship is optimally accomplished when a documented, regularly updated, collection policy or philosophy is in place. If there is a separate special collections or history of medicine collection policy or philosophy, it should be referred to in or linked from the main overarching policy or philosophy.

**Considerations for both may include:**

Acquisition

* Budget: This may change from year to year and should be documented.
	+ What (if any) is the budget or fund amount for acquiring currently published materials on historical topics?
	+ Is there a budget or fund for acquiring materials from other sources (eg. out of print or auction sites)?
* Gifts:
	+ There should be a policy in place that outlines what subject matter, types of materials are accepted and who is authorized to accept gifts in kind that may include books of a historical nature or vintage.
	+ Procedures should determine record keeping, acknowledgement, ingestion, processing, preservation, and other activities.
* Requests:
	+ How will faculty, staff, or other user requests be considered?
	+ What is the response to requesting users, how are requests reviewed and tract?
* Housing
* It should be determined where history of medicine materials will be stored- in the general collection, in a specially designated area such as Special Collections.
* If acquired materials are in poor condition, what preservation processing is warranted?

Non-print materials

* There should be policies and procedures in place for collecting, housing, retaining of non-print materials of a historical nature
	+ Audiovisuals that may be locally produced or otherwise have historic value. What are the conversion, retention, playing considerations.
	+ Charts, supplemental, or other print materials that may have been acquired or donated.
* Will the library license (alone or cooperatively) collections such as JSTOR, EEBO, ECHO that contain digitized back years of journals, or historical works?
* Will the library make free online historical resources (such as Medical Heritage Library) discoverable.
	+ Some works may make partner with print historical holdings, but be more accessible in electronic form.

Retention (see also the section on Withdrawal and Deaccessioning)

* If a weeding or downsizing project of a collection is undertaken, clearly outline what types of materials will be retained. Criteria to retain books may include those:
	+ Authored or edited by local authors
	+ Published by or about the institution
	+ Published in certain ranges of years (pre-1850? pre-1800? other?)
	+ Published on the history of certain disciplines that are areas of collection for the institution
	+ With significant ex libris (bookplates), autographs, other markings, or inserts

Selection

* It should be clearly outlined which staff are responsible for which collection activity. For example, a collections librarian may be responsible for selecting or acquiring materials on history of medical disciplines, while the designated special collections staff deal with gifts of a certain vintage, select materials for the Special Collections area.

Transfer

* In a multi-site or multi-library institution, it may be decided to designate one central location for history of medicine materials or Special Collections. This is especially pertinent when a weeding or downsizing project is undertaken.

### Resources

*Health Sciences Collection Management for the Twenty-First Century*, edited by Susan K. Kendall

Lanham: Rowman & Littlefield

c. 2018

Chapter 6: “*The Hunt of the Unicorn: Collection Development for Special Collections in Health Sciences Libraries”* by Stephen J. Greenberg

*Fundamentals of Collection Development and Management* (4th edition) / Peggy Johnson

Chicago: ALA editions

c. 2018

Of note - chapter “Managing Collections” (weeding, preservation, storage)

McElfresh, K. R., & Gleasner, R. M. (2019). Evaluating a historical medical book collection. *Journal of the Medical Library Association*, 107(4), 560–565. <https://doi.org/10.5195/jmla.2019.666>

### Identifying classic works

*Morton’s Medical Bibliography: An Annotated Check-list of Texts Illustrating the History of Medicine*

*(Garrison and Morton)* / edited by Jeremy M. Normal

Last print edition: 5th, 1991

Online continues print source:

History of Medicine and the Life Sciences

*Life Sciences from Circa 2000 BCE to Circa 2015 by Fielding H. Garrison (1870-1935), Leslie T. Morton (1907-2004), and Jeremy M. Norman, Traditionally known as “Garrison-Morton”:* [http://www.HistoryofMedicine*and*Biology.com](http://www.historyofmedicineandbiology.com)

 Related: HistoryofMedicine.com (blog): <http://www.blog.historyofmedicine.com/>

### Identifying classic works in specific health disciplines

*Sample sources-*

**Dentistry**

*A Sourcebook of Dental Medicine: Being a Documentary History of Dentistry and Stomatology from the Earliest Times to the Middle of the Twentieth Century /* Gerald Shklar and David Chernin.

Dental Classics in Perspective. Waban, Mass.: Maro Publications, 2002.

**Nursing**

American Association for the History of Nursing

<https://www.aahn.org/bibliography>

Please also see a reprint of Peg Allen’s original article, ["Celebrating nursing history: What to keep"](http://nahrs.mlanet.org/resource/reports/weeding.html).

**Ophthalmology**

*One Hundred Important Ophthalmology Books of the 20th Century* by H. Stanley Thompson M.D. & Donald L. Blanchard M.D.

<http://webeye.ophth.uiowa.edu/dept/20thcenturybooks/100Books.htm>

# Collection Considerations in Non-Academic Health Sciences Libraries

*(Hospitals, Health Associations, etc.)*

This document largely focuses on academic health sciences library collection activities and considerations, but it should be acknowledged that collection activities take place and services are also provided in other environments: hospitals, health associations and societies, health industries...

## **Hospitals**

In addition to collection services, librarians working for or in hospitals may have a number of responsibilities. They may work solo or with some staff, often support staff. The types of hospitals may vary, including hospitals that are: federal or regional government (eg. VA, state or county), specialized (eg. rehabilitation, pediatric, psychiatric, osteopathic). They may be community, for profit, or some other variation.

Before collection considerations come into play, librarians working in hospitals become familiar with their library’s place in the institution when it comes to:

* Reporting structure
* Budget and purchasing structures
* Specialization/type of hospital
* Mission and role of the library in the hospital

*(Does the library provide information support: clinicians-physicians, nurses, other healthcare professionals, residents, researchers, patients, administrators, families/consumer health, the community, other?)*

* Physical footprint of the library
* Library staffing and support-solo, paid or volunteer staff, part-time/full-time
* Affiliations & consortial or other arrangements that may be pertinent
	+ Academic affiliations
	+ Hospital corporations
	+ Other networks (eg. VA)
	+ Consortia (for purchasing, licensing, education)
* Collection management considerations that may be specific to with working in a hospital:

Eg.

Infection control and prevention practice plan for collection items

Each hospital has different policies for circulation of items, to protect patients from contagious hospital spread infections. (Librarian & hospital infection control team should come up with a plan together. So, sometimes, materials are lost or thrown out due to not being able to be fully cleaned. Books may need to be circulated in a plastic bag, and infection control plan could include: a hand hygiene plan, and wipe down procedure).

* Other factors/roles of that library/librarian that may affect collection scope, decisions, financing

Examples:

-Library services as hospital archives, AV support, CME registry, etc.

-There is a central licensing point for other resources licensed by hospital units

### Resources

*The Medical Library Association Guide to Managing Health Care Libraries*, Second Edition (2011) / Margaret Moylan Bandy; Rosalind Farnam Dudden

The 16 detailed chapters also cover planning and marketing of the library, financial and human resources management, and evaluating and improving library services, as well as collection management…

*Health Sciences Collection Management for the Twenty-First Century* / edited by Susan K. Kendall

Rowman & Littlefield (for the Medical Library Association), 2018

Chapter 3: “Managing a Collections Budget”--One Library’s Story: Creating and Sustaining a Hospital Library Consortium for Purchasing Online Journals

Chapter 10: “The Future of Health Sciences Collection Development”, p. 254

Hammond, Patricia A. (2011) "Immersed in Patient Care: Mission Critical Decisions for Hospital Libraries," *Against the Grain*: Vol. 23: Iss. 6, Article 6.

DOI:<https://doi.org/10.7771/2380-176X.6026>

<https://docs.lib.purdue.edu/atg/vol23/iss6/6/>

[Where Are We? Providing Information for the Clinical Enterprise](https://urldefense.proofpoint.com/v2/url?u=https-3A__docs.lib.purdue.edu_cgi_viewcontent.cgi-3Farticle-3D1955-26context-3Dcharleston&d=DwMGaQ&c=yHlS04HhBraes5BQ9ueu5zKhE7rtNXt_d012z2PA6ws&r=DSGlYAMbckjvuF42p75AdcSjjoG5rBmfSF5Fje8wm0A&m=dgn5sizrTy-WlSycA0NqZ3lj_b-Xe282nI5C1VFZDLI&s=D4fGEX2MhFCLnHZJYxlNdmkxfnSKjh5qWWDv7A5g-TE&e=)

*Charleston Conference Proceedings,* 2017

DOI: <https://doi.org/10.5703/1288284316665>

[https://docs.lib.purdue.edu/charleston/2017/analytics/3/](https://urldefense.proofpoint.com/v2/url?u=https-3A__docs.lib.purdue.edu_charleston_2017_analytics_3_&d=DwMGaQ&c=yHlS04HhBraes5BQ9ueu5zKhE7rtNXt_d012z2PA6ws&r=DSGlYAMbckjvuF42p75AdcSjjoG5rBmfSF5Fje8wm0A&m=dgn5sizrTy-WlSycA0NqZ3lj_b-Xe282nI5C1VFZDLI&s=1hY1nwS9WPTBYXBSUeZ2a4tu_x2kx11Vb9FEbUY4SfE&e=)

Creating a library holding group: an approach to large system

integration. *J Med Libr Assoc*. 2016 Oct;104(4):315–8. DOI:

http://dx.doi.org//10.5195/jmla.2016.149.

Correction in:

*J Med Libr Assoc.* 2017 Jan;105(1):112. DOI:

http://dx.doi.org/10.5195/jmla.2017.129.

[Point of Care Tools and Libraries](https://urldefense.proofpoint.com/v2/url?u=https-3A__docs.lib.purdue.edu_cgi_viewcontent.cgi-3Farticle-3D1343-26context-3Dcharleston&d=DwMGaQ&c=yHlS04HhBraes5BQ9ueu5zKhE7rtNXt_d012z2PA6ws&r=DSGlYAMbckjvuF42p75AdcSjjoG5rBmfSF5Fje8wm0A&m=dgn5sizrTy-WlSycA0NqZ3lj_b-Xe282nI5C1VFZDLI&s=5XSuZmX3_79_85MwpRMTeQvL1eHs1U3L8DcOzBJ6nW0&e=)

Charleston Conference Proceedings, 2012

DOI: <https://doi.org/10.5703/1288284315086>

[https://docs.lib.purdue.edu/charleston/2012/Collection/4/](https://urldefense.proofpoint.com/v2/url?u=https-3A__docs.lib.purdue.edu_charleston_2012_Collection_4_&d=DwMGaQ&c=yHlS04HhBraes5BQ9ueu5zKhE7rtNXt_d012z2PA6ws&r=DSGlYAMbckjvuF42p75AdcSjjoG5rBmfSF5Fje8wm0A&m=dgn5sizrTy-WlSycA0NqZ3lj_b-Xe282nI5C1VFZDLI&s=XXe5MFTtoJEVxZci4TmBnOb_sqzGml0xjPwbVH_fghY&e=)

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## **Health Care Associations**

Librarians working for or in health care associations and societies may have a number of responsibilities, may work solo or with some staff support or with colleagues with other professional backgrounds. Some associations have chapters, divisions, units or service models and priorities that may impact library services and collections.

Collection considerations-

* Administrative: reporting and budget structure
	+ How are information resources funded? Who approves the budget? Who licenses, orders and pays for information resources?
* Mission of the library in the association
	+ Does the library serve or support: All association staff or only specific divisions or departments? Society/association members? The general public?
	+ Does the association have branches or other offices that the library supports? State or regional chapters?
	+ Does the library purchase or license specialized resources for other departments?
* Consortia (for purchasing, licensing, education)
* Physical footprint of the library
	+ Is there a physical designated space for housing print collections? For computers to access electronic resources?
* Collection management considerations:
	+ How are the information resources made discoverable to those entitled to use them? (Is there a library system, intranet, proxy access?)
	+ If there is a print collection, how is it made discoverable? How is it kept secure? What are the use or other policies?
* Other factors/other roles and services of that library/librarian that may affect collection scope, decisions, financing

Examples:

* Collection may include print holdings, mixed, or all be all virtual (an online library)
* The library has association archival responsibilities
* The library or librarian is involved in the association’s practice guideline development, publications, peer review, marketing, education, or other roles and services
* The librarian’s role is secondary to other responsibilities in the association, not full-time, not on-site

### Resources

Hyde, Mary A. (2014) "Health Association Libraries: The Spackle Needed for Member Societies," *Against the Grain*: Vol. 26: Iss. 2, Article 9.

DOI:<https://doi.org/10.7771/2380-176X.6694>

<https://docs.lib.purdue.edu/atg/vol26/iss2/9/>

Pinkowski, Patricia (2008) "Trends in Consumers' Health Information Needs and Expectations," *Against the Grain*: Vol. 20: Iss. 5, Article 6.

DOI:<https://doi.org/10.7771/2380-176X.5184>

Bender, David (2018) “The (Not So) Accidental Ontologist and other Tales of Alternative Librarianship,” *Against the Grain*: Vol. 30: Iss. 4: 18,20-21.

-print only; e-embargoed for 3 years in <https://docs.lib.purdue.edu/atg>

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## **Health Business, Corporations, Pharmaceutical Companies**

Librarians working in the health for-profit sector may have a number of responsibilities, may work solo or with some staff support or with colleagues with other professional backgrounds.

Their responsibilities may also differ, depending on the mission and industry sector of the business: health technology, pharmaceutical, health information, etc.

**Collection considerations**

If the librarian in that setting is responsible for participating in acquiring or collecting information resources, activities may be similar to those of other specialized libraries (specialized hospitals, health associations). Depending on the size of the company, licensing of electronic resources may be done centrally.

Collection considerations-

* Administrative: reporting and budget structure
	+ How are information resources funded? Who approves the budget? Who licenses, orders and pays for information resources?
* Mission of the library in the company
	+ Does the library serve or support: All company staff or only specific divisions or departments?
	+ Does the corporation have branches or other offices that the library supports?
	+ Does the library purchase or license specialized resources for company departments?
* Is there a consortia (for purchasing, licensing)?
* Is there a physical library?
* Collection management considerations:
	+ How are the information resources made discoverable to those entitled to use them? (Is there a library system, intranet, proxy access?)
	+ If there is a print collection, how is it made discoverable? What are the use policies?
* Other factors/other roles and services of that library/librarian that may affect collection scope, decisions, financing

Examples:

* Collection may include print holdings, mixed, or all be all virtual (an online library)
* The library has company archival responsibilities
* The library or librarian is involved in the company’s research or other competitive intelligence development, publications, peer review, marketing, education, or have other roles and services
* The librarian’s role is secondary to other responsibilities in the company, maybe not full-time, or not on-site

### **Resources**

Special Libraries Association (SLA)

<https://www.sla.org/>

Note: SLA has divisions as well as state and regional chapters that may provide additional (and local) networks of health industry corporate colleagues.

*Setting Up a Library: Special and Office Library*

<https://libguides.ala.org/SettingUpaLibrary/SpecialLibrary> [viewed 4/16/2019]

# Current Awareness Tools

**Professional Organizations & Conferences**

**Medical Library Association (MLA) Annual Meeting** ([www.mlanet.org](http://www.mlanet.org))

Location: varies, see website for list of upcoming sites

Time of Year: May, usually second or third weekend

Description: 3.5 day meeting, attendees mainly from the U.S. and Canada with some international attendees. Programming on all topics of interest to health sciences librarianship, only a small amount on collection issues.
Membership: not required for conference attendance, but members do get a discounted rate.

Service Opportunities: many ways to get involved, including committees, scholarship juries, task forces to work on special issues. You can also join communities and caucuses focused on specific interest areas, such as the Collection Development Caucus. Communities and caucuses also offer leadership positions and committee work.

**The Acquisitions Institute at Timberline Lodge (**<http://acquisitionsinstitute.org/>)

Location: Oregon

Time of Year: May

Description: Opportunity for acquisitions and collection development librarians, vendors and publishers to meet and discuss pertinent trends and issues in libraries

Registration is capped.

Membership: none

**Charleston Conference** (<https://www.charlestonlibraryconference.com/>)

Location: Charleston, SC

Time of Year: early November

Description: Conference for librarians and vendor representatives, focused on acquisitions, collection development, and technical services, but may include topics from outside these areas. Attend the Health Sciences Lively Lunch to meet with other health sciences librarians.

Membership: none

Service Opportunities: Volunteer to report on a session for *Against the Grain*.

**Electronic Resources & Libraries (ER&L)** (<https://www.electroniclibrarian.org>)

Location: Austin, TX

Time of Year: Early to mid-March

Description: 2.5 day meeting focused on issues related to e-resource management, collection development, electronic serials, and other technical services topics.

Membership: none

Service Opportunities: volunteer to help plan upcoming conferences

**NASIG** (<http://www.nasig.org/>)

Location: varies

Time of Year: Early to mid-June

Description: formerly the North American Serials Interest Group, this conference is focused on issues related to serials and e-resources. NASIG is very involved in developing new NISO standards related to information delivery and access.

Membership: not required for conference attendance, but members do get a discounted rate.

Service Opportunities: opportunities to participate on committees and with conference planning.

**American Library Association-Association for Library Collections & Technical Services (ALCTS)** (<http://www.ala.org/alcts/>)

Location: varies

Time of Year: January & June (coincides with ALA Annual and Midwinter conferences)

Description: Focused on collections and technical services functions, such as acquisitions, cataloging, metadata, collection management, preservation, electronic and continuing resources.

Membership: Not required for conference attendance, must join ALA first, then add an ALCTS membership

Service Opportunities: opportunities to participate on committees, juries, and task forces, as well as opportunities for ALCTS leadership positions.

### Regional Conferences

There are many other regional conferences that may be available to you. The best resources to find information and announcements about these conferences are the listservs listed below, in particular Liblicense and ER&L. Your local MLA chapter may be another good resource.

### Listservs

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Description | Link | Membership required? |
| MLA-CDS | Listserv for the Collection Development Caucus (formerly Collection Development Section CDS) of MLA. Focuses on collection issues in health sciences and medical libraries. Good place to get information on products specific to health sciences libraries. |  | Yes, must be a member of MLA and Collection Development Caucus |
| ALCTS e-forums | 2-day, moderated, email discussion forums on technical services issues.  | http://www.ala.org/alcts/confevents/upcoming/e-forum | No |
| ER&L(ERIL) | Members are from all types of libraries. Good resource for help with e-resource management issues, access problems, licensing questions, and more. Also provides information about the annual ER&L conference. | <http://lists.eril-l.org/listinfo.cgi/eril-l-eril-l.org> | No |
| Liblicense | Focused on e-resource licensing issues and scholarly communications. Open access is a frequent topic. Good place to get help with licensing questions - listserv includes people from all types of libraries all over the world.  | http://liblicense.crl.edu/ | No |

### Publications

Against the Grain, <https://www.against-the-grain.com/category/articles/>

Journal of the Medical Library Association (JMLA), <https://jmla.mlanet.org/ojs/jmla/index>

Journal of Electronic Resources in Medical Libraries, <https://www.tandfonline.com/toc/werm20/current>

Medical Reference Services Quarterly, <https://www.tandfonline.com/toc/wmrs20/current>

Library Resources and Technical Services, <http://www.ala.org/alcts/resources/lrts>

The Charleston Advisor, <http://www.charlestonco.com/>

### Books

*Health Sciences Collection Management for the Twenty-First Century*, edited by Susan K. Kendall

Lanham, MD: Rowman & Littlefield

c. 2018

*Fundamentals of Collection Development and Management* (4th edition) / Peggy Johnson

Chicago, IL: ALA editions

c. 2018

*Collection Development and Management for Electronic, Audiovisual, and Print Resources in Health Sciences Libraries* / compiled by Linda Walton; Christa M. Modschiedler; Patricia M. Rodgers; BJ Schorre; Julie Schneider; Judith L. Rieke; Hope Barton

(MLA DocKit #3, 2nd revised edition), 2004

### Online courses

ALA (http://www.ala.org/alcts/confevents)

[Fundamentals of Acquisitions](http://www.ala.org/alcts/confevents/upcoming/webcourse/foa/ol_templ)

[Fundamentals of Collection Development and Management](http://www.ala.org/alcts/confevents/upcoming/webcourse/fcdm/ol_templ)

[Fundamentals of Electronic Resources Acquisitions](http://www.ala.org/alcts/confevents/upcoming/webcourse/fera/ol_templ)

[eBook Management: What Works, What Doesn’t](http://www.ala.org/alcts/confevents/upcoming/e-forum/111318)

Library Juice Academy, <http://libraryjuiceacademy.com/courses.php>