

# **UTHSC Health Sciences Library**

## **Collection Development Policy**

**Revised: September 24, 2013**

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## **Introduction and Purpose**

The UT Health Sciences Library Collection Development Policy includes descriptions of the roles and responsibilities of the library collection development faculty and a list of their liaison subject assignments. It also identifies the selection principles to build and maintain the library's collections. The policy reflects the Health Science Center's curriculum, patient care, and research priorities; it documents how and why we build our collections and provides a vehicle for communicating this information to the university community.

The policy also provides a budgetary perspective, as well as the process for not only adding and maintaining resources, but should it become necessary, for making needed collection cuts. Faculty, staff, and student input is critical to collection development, and the criteria that our professional librarians consider in their deliberations for the collection provide a foundation. Weeding of the collection, and the reduction of the print footprint in libraries are important considerations for collection development.

This policy was reviewed by the Library Resource Development Committee (LRDC), which consists of library faculty from Access, Reference and Outreach, Instructional, and Electronic and Collections Services.

The LRDC is responsible for the policy's implementation and for keeping the policy up to date. Feedback on this policy is encouraged.

This policy should be reviewed annually and revised if needed.

## **Philosophy**

The Health Sciences Library (HSL) is strategically focused on developing collections of materials to support University of Tennessee Health Science Center (UTHSC) research, education, patient care, and service missions. To make information accessible at the point of need, the library selects current and actively updated electronic materials supplemented with textbooks and critical print materials.

The HSL focuses on eliminating print resources, where possible, in favor of providing widely accessible online resources. In keeping with this collection philosophy, our print collection continues to decrease as access is increasingly provided to online materials delivered seamlessly to the user's desktop.

As a parallel strategy to complement items not available in the collection in print or electronic form, the library uses a interlibrary loan and document delivery system to provide fast access to needed journal articles for the UTHSC community.

Selection of books, journals and databases for inclusion in the library is based upon suggestions from UTHSC faculty, students, and staff; benchmarking with other institutions; health science selection resources; and the LDRC's assessments and judgments on the relevance, coverage, and usefulness of specific resources.

The philosophy of collection development that centered on physically acquiring resources on important UTHSC subjects has given way to the realization that no academic health sciences library can obtain comprehensive coverage of multiple disciplines and specializations. Factors that have contributed to this change include the growing number of print and electronic publications in the health sciences field, cost escalations that far exceed increases in appropriations for library materials, the broadening of academic program and degree offerings, and the demand for the increased research capability and clinical care materials (at point of contact) that electronic indexes, journals, and full text databases provide.

## **Mission**

The mission of the UT Health Sciences Library is to provide an environment conducive to student learning and the biomedical information resources necessary for teaching, research, service, and patient care, and to support efforts to improve the health of Tennesseans.

## Goals

Selectivity and response to specific information needs are the hallmarks of collection building in the 21st century. Our collection development goal is to identify, select, manage, and preserve collections that support the research, education, and patient care needs of UTHSC faculty, students, and staff, and is focused on facilitating access to electronic and other resources and services that may or may not be physically located in, or owned by, the Health Sciences Library. Faculty, staff, and students must be able to rely on the library to provide the information needed for research. The campus must also maintain accreditation of its programs. While few libraries have budgets that permit in-depth coverage of any one subject, a collection budget that at least meets national standards is essential to ensure that the library is an aid and not an impediment to institutional productivity and accreditation.

### UTHSC Components

#### Colleges

*College of Allied Health Sciences*

*College of College of Dentistry*

*College of Graduate Health Sciences*

*College of Medicine*

*College of Nursing*

*College of Pharmacy*

#### Centers of Excellence

*Pediatric Pharmacokinetics and Therapeutics*

*Neuroscience*

*Connective Tissues Diseases*

*Molecular Resource*

*Rheumatic Disease Research Core Center*

#### Research Programs and Institutes

*Center for Cancer Research*

*Center for Integrative and Translational Genomics*

*Clinical and Translational Science Institute*

*General Clinical Research Center*

*Hamilton Eye Institute*

*Proteome and Transcription Database*

*Tennessee Mouse Genome Consortium*

**UTHSC Mid-South Center for Biodefense and Security**

## **Allocation of Funds for Library Collection**

The decision for the allocation of budget will be based on the previous year's expenditure, inflation rates, new courses and programs offered, and new focuses of research by the institution.

The library director is responsible for fund utilization for the purchase of materials, such as book orders, e-journal subscriptions, and databases.

## **Identifying and Selecting Resources**

The library welcomes faculty, student, and staff input on the collection. Through the liaison program, the library solicits input from the faculty of each department on campus. Suggestions for purchase may also be submitted through the library's online suggestion form located on the library web site. All requests for additions to the collection will be evaluated based on the library's collection development goals, selection criteria, and available funding.

The Library Advisory Committee (LAC) provides a communication mechanism for faculty and students and the library and serves in an advisory capacity to the library director with respect to library planning and policy.

The library director makes final collection development decisions with the assistance of the head, Electronic and Collection Services, and the recommendation of the Library Resources Development Committee (LRDC).

## Levels of Coverage

The definitions of collecting levels are based on those defined by the American Library Association to describe the levels at which various subject areas are collected.

### Research Level (Highest level)

*The collection includes the major published source materials required for in-depth research and instruction, including materials containing research reporting new findings, scientific and experimental results, and other information useful to researchers. It is intended to include important reference works and a wide selection of specialized monographs, as well as a very extensive collection of journals and electronic resources in the field.*

### Clinical and Instructional Support Level

*The collection includes materials required to support patient care and clinical decision-making, and graduate level instruction. The collection includes a wide range of monographs, a selection of representative journals, fundamental reference tools, and electronic resources intended for instructional support and for practical use in clinical point-of-care decision-making.*

### Minimal Level (Lowest level)

*The collection includes only the most basic works for the given subject area.*

## General Resource Selection Criteria

Faculty/Student/Staff requested or recommended

Subject area covered

*see Levels of Coverage*

Availability in electronic format is preferred where possible

*Some resources may not be available in electronic format, or their cost, accessibility, or usability may make the print version of the resource a better option.*

Cost

Needed for accreditation

Intended audience

Currency

Authority

Critical reviews / reputation

Language

*The library collects and provides access to primarily English-language resources.*

Consortia/Multi-campus contracts

*Consortia or multi-campus purchases should be pursued as a means of saving money and/or increasing access to resources.*

## Print Resource Selection Criteria

### Monographs

*Most monographs are only available in print and selection of print monographs should follow the General Resource Selection Criteria, and the Level of Coverage for the subject involved, of this policy. Preference should be given, however, to purchasing the electronic version of a book if it meets the guidelines set out in Electronic Resource Selection Criteria—E-books.*

### Journals

*Print journal subscriptions will be maintained only if the journal is not available in an electronic format, or if the electronic format does not meet the requirements set forth in Electronic Resource Selection Criteria – E-journals.*

### Reference

*Boorkman, Huber, and Roper. Introduction to Reference Sources in the Health Sciences 5<sup>th</sup> Edition (ZWB 100 I56 2008) is used as the guide to selection and collection analysis of reference materials.*



## **Textbooks**

*Each semester the library will purchase at least one copy of every required textbook used by faculty and students. The textbooks will be put on reserve behind the circulation desk for checkout. The decision to add additional copies of textbooks will be made on a case-by-case basis.*

## **Electronic Resource Selection Criteria**

### **E-journals**

#### ***Required Guidelines***

IP Access: Access is available from an IP authenticated site. Resources available via username/password access only will be evaluated on a case-by-case basis.

Off Campus Access: Reliable remote access should be available 24/7/365. Resources that do not offer off campus access will be evaluated on a case-by-case basis.

Journal Ranking: Citation indexes and impact factor give guidance in journal selection.

Stable Platform: The journal must be available from a stable platform, either direct from the publisher or from a third party such as JSTOR or EBSCO.

Simultaneous Users: The number of simultaneous users supported by the system must be sufficient to meet the needs of the UTHSC community.

Timeliness: The full content of each issue should be available online no later than the publication of the print issue.

Printing/Downloading Capability: Users must be allowed to print and/or download all articles covered by subscription.

Interlibrary Loan and Fair Use: License must allow interlibrary loan of articles, preferable in electronic format, and explicitly comply with Fair Use guidelines.

#### ***Preferred Guidelines***

Archiving: Publisher should provide an archive of content.

Perpetual Access: Publisher should provide perpetual access of all content to the library for the years subscribed.

Format: Publisher should provide full text content in PDF format or other equivalent full image content identical to print edition.

Interface Quality and User-Friendliness: Product should be powerful, flexible, well indexed, and include numerous points of access. In addition, it should have a user-friendly, accessible interface.

Usage Statistics: Vendor should make available usage statistics for the journals titles subscribed to.

## **E-books**

### ***Required Guidelines***

IP Access: Access is available from an IP authenticated site. Resources available via username/password access only will be evaluated on a case-by-case basis.

Off Campus Access: Reliable remote access should be available 24/7/365. Resources that do not offer off campus access will be evaluated on a case-by-case basis.

Stable Platform: The e-book must be available from a stable platform, either direct from the publisher or from a third party such as STAT!REF or EBSCO.

Simultaneous Users: The number of simultaneous users supported by the system must be sufficient to meet the needs of the UTHSC community.

Printing/Downloading Capability: Users must be allowed to print and/or download all articles covered by subscription.

Vendor Reliability: Speed and access availability must meet users' expectations, with minimal server downtime. Planned downtime for maintenance must be communicated in a timely fashion.

Interface Quality and User-Friendliness: Product should be powerful, flexible, well indexed, and include numerous points of access. In addition, it should have a user-friendly, accessible interface.

## Databases

### ***Guidelines***

IP Access: Access is available from an IP authenticated site. Resources available via username/password access only will be evaluated on a case-by-case basis.

Off Campus Access: Reliable remote access should be available 24/7/365. Resources that do not offer off campus access will be evaluated on a case-by-case basis.

Stable Platform: The e-book must be available from a stable platform, either direct from the publisher or from a third party such as STAT!REF or EBSCO.

Simultaneous Users: The number of simultaneous users supported by the system must be sufficient to meet the needs of the UTHSC community.

Printing/Downloading Capability: Users must be allowed to print and/or download all articles covered by subscription.

Vendor Reliability: Speed and access availability must meet users' expectations, with minimal server downtime. Planned downtime for maintenance must be communicated in a timely fashion.

Interface Quality and User-Friendliness: Product should be powerful, flexible, well indexed, and include numerous points of access. In addition, it should have a user-friendly, accessible interface.

License:

*Definition of Authorized Users should include all current Faculty, Students, and Staff of the University of Tennessee Health Science Center, as well as walk-in visitors to the library.*

*State of Legal Recourse clause must be listed as Tennessee.*

*Must comply with University of Tennessee contracting guidelines.*

## Gifts

While the library appreciates gifts of print and non-print resources that are in scope as defined by this Collection Development Policy, it reserves the right to refuse, add, exchange, or discard the gift resources as it sees fit.

With regard to gifts accepted, it shall be made clear to the donor that:

*A typed list of resources must be submitted. The list will include all facts of publication for monographs, and volume number and year for serials.*

*If possible, a list should be provided to the Serials or Acquisitions Librarian in advance of receiving the gifted resources, so the donor can be notified as to which resources will be retained.*

*Gifts should be delivered to the Lamar Alexander Building. Donors should call before bringing gifts so a staff member can meet with them.*

*Except in rare instances, collections that must be kept intact are not accepted.*

The appraisal of gifts to the Library for tax purposes is the responsibility of the donor along with all costs associated with the appraisal.

## Free resources

Once identified, these resources need to be evaluated (based on our Resource Selection Criteria) to determine their suitability for inclusion in the collection.

Another factor to consider with free electronic resources is the amount of time and work involved in maintaining access.

## Wish List

Budgetary constraints often prevent the library from purchasing all suitable items immediately. Materials that are not purchased in a timely fashion are added to our Wish List for future consideration.

The Wish List should be kept up to date at all times with all the pertinent information needed to make a decision on a resource, and to add that resource to the collection in a timely manner.

## **Year-end money**

*Occasionally at the end of the fiscal year, there are monies available that must be spent expeditiously. The Library should identify resources, preferably that do not have a recurring cost associated with them, which can be purchased quickly under a tight timeline. As these resources are identified they should be added to the Wish List and marked as candidates for purchase with end of fiscal year money.*

See General Resource Selection Criteria above.

## **Resource Evaluation**

### **Database trials**

*During database trials the General Resource Selection Criteria and Electronic Resource Selection Criteria – Databases should be used as the basis for evaluation along with the Level of Coverage appropriate for the subject(s) of the database.*

### **Preview copies of resources**

*Evaluation of preview copies should be based on the General Resource Selection Criteria and Print Resource Selection Criteria as well as the appropriate Level of Coverage for the subject(s) of the resource.*

## **Duplication of Content**

In most cases, only one copy of materials is purchased.

Occasions in which multiple copies of a resource may be justified include:

*High user demand (e.g., dictionaries)*

*Need for a circulating copy and reserve copy*

*Need for archival copy*

## Collection Maintenance

An ongoing analysis of the collection and library resources, employing objective measures of its strengths and weaknesses, is an essential part of the collection management process. This entails a serious commitment of staff time since institutional priorities change. The library must monitor these developments, and whenever possible, anticipate them.

### Print Collection

***The print collection should be inventoried every five years and analyzed to determine if each resource should be retained using the following factors:***

Level of Coverage for the defined subject area

Usage statistics

Currency

Boorkman, Huber, and Roper. Introduction to Reference Sources in the Health Sciences 5<sup>th</sup> Edition (ZWB 100 I56 2008) is used as the guide to selection and collection analysis of reference materials.

A copy of every currently required textbook will be kept on Reserve.

Other factors from the General Resource Selection Criteria (see above)

### Electronic Resources

***Electronic resources should be analyzed annually to determine if they should be retained using the following factors:***

Level of Coverage for the defined subject area(s)

Usage statistics

General Resource Selection Criteria (see above)

Electronic Resource Selection Criteria (see above)

## **Replacement**

**Demand, replacement cost, subject matter, and alternative availability are among the factors considered in deciding if a lost or damaged item is replaced. If a later edition is available it will be ordered as the replacement.**

## **Weeding and retention**

**The Library strives to provide current, authoritative print and electronic resources to meet the information needs of the various University communities.**

**The Library is also obliged to retain older materials that hold intrinsic and historical value.**

**Resources that are determined to be outdated, out of scope of this policy, or are used rarely and do not have any historical value should be removed from the collection.**

**Print copies of a journal must be considered for weeding if electronic archives, or back files, have been purchased for that journal. Guidelines for purchasing electronic archives should follow the Required Guidelines for subscribing to e-journals.**

## **Inventory**

**State auditors require that some portion of the collection be inventoried.**

## **Historical Collections**

**The Historical Collections supports the mission of the Health Science Center by focusing primarily on materials related to the campus and the colleges, and secondarily materials related to Tennessee and the Mid-South.**

**The Historical Collections Coordinator is the access point for all materials designated for inclusion in the collection. Materials can be in the form of gifts, or of items within the library transferred from the public stacks to the Historical Collections. Acceptance is based on the relationship of the material to the collection, the need for the material, the ability of the library to preserve item, clear title, and compliance with all laws. Materials are de-accessioned if they are no longer needed, in poor condition, duplicate materials in the collection, or can no longer be preserved.**

**The Historical Collections coordinator should always be consulted if materials in the library's public collection are no longer needed and designated for weeding. The coordinator will then decide whether to accept or refuse them.**



## **Appendix I: UTHSL Collection Development Subject Areas**

### **Research**

**Allergy and Immunology**  
**Anatomy and Neurobiology**  
**Cardiology**  
**Dentistry**  
**General Internal Medicine**  
**Genetics**  
**Hematology/Oncology**  
**Microbiology, Immunology and Biochemistry**  
**Neurology**  
**Neuroscience**  
**Ophthalmology**  
**Pathology and Laboratory Medicine**  
**Pediatrics**  
**Pharmacy**  
**Physiology**  
**Preventive Medicine (includes Biostatistics)**

### **Clinical and Instructional Support**

**Anesthesiology**  
**Clinical Laboratory Sciences**  
**Comparative Medicine**  
**Connective Tissue (Rheumatology)**  
**Cultural Competency**  
**Dental Hygiene**  
**Dermatology**

**Emergency Medicine**

**Endocrinology**

**Family Medicine**

**Gastroenterology**

**Health Informatics & Information Management**

**Infectious Diseases**

**Interprofessional Education & Clinical Simulation**

**Nephrology**

**Neurosurgery**

**Nursing**

**Obstetrics and Gynecology**

**Occupational Therapy**

**Orthopedic Surgery**

**Otolaryngology**

**Physical Therapy**

**Plastic Surgery**

**Pulmonary**

**Psychiatry**

**Radiology**

**Surgery**

**Thoracic and Cardiovascular Surgery**

**Transplant Surgery**

**Trauma Surgery**

**Vascular Surgery**

**Urology**

**Minimal**

**Consumer Health**

**Library Science**

**Nutrition**

**Patient Education**

**Psychology**

**Public Health**