Mapping Medicine: Collaborative collection management for biomedical resources

Background

- Why collaborate? I'm sure that most people are aware of many of the problems facing libraries in all sectors- with two of the bigger problems include being able to balance the issue of rising costs with ever declining budgets and the ever present problems presenting librarians relating to space and retention issues.
- Publishing output is growing at an alarming rate, to put this into perspective, approximately 50% of all existing biomedical material has been published since 1970
- It is now becoming more and more the case that no one library can ever be expected to provide the complete subject coverage that their users require. The question that everyone has therefore been asking is how can a library keep up with demand for current materials yet still maintain their often historic collections of older materials
- Conference '*A healthy heritage- Collecting for the future of medical history*' February 1999-
    - Highlighted the problems associate with trying to keep up with increase in volume of printed bio-medical material
    - Suggested commissioning research into the ways in which libraries can plan a future based on co-operation as a possible solution to this problem
- Mapping Medicine is an 18month pilot project led by the Wellcome Library and funded by both the Wellcome Trust, partner contributions and a substantial commitment from Resource: Council for Museums, Archives and Libraries.

Partner organisations

- British Library
- Kings Fund
- Royal College of Nursing
- Royal College of Surgeons
- Royal Society of Medicine
- University College London
- Institute of Neurology
- Wellcome Library

- It was decided to limit the numbers of partners to 8 which is a relatively small number of partners compared with many projects in order to keep it to a manageable size, however, we do feel that the organisations chosen do reflect the diverse sample of institutions with an interest in Bio-medicine
- More importantly we feel that the partners are sufficiently diverse to be able to anticipate most of the problems that would arise if the pilot is successful and the scheme is rolled out to a much wider scale. For example, the Wellcome Library has a different access

conditions to that of the Royal College of Nursing and the British library has a considerably different collecting remit to that of University College London. If we can anticipate and address these issues then it is more likely that on a much larger scale we could also be successful

Aims and objectives
- 2 main aims:
  - overall aim to establish a formal collaborative collection management policy between the partners. Which will act as a model potentially if the scheme is rolled out on a larger scale
  - but before we can achieve this, we need to carry out a mapping exercise of partners' holdings of printed biomedical materials

Deliverables
- In terms of actual deliverables, we hope to deliver:

  - A database hosted on the web which will display the agreed aims including:
    - partner libraries' collection strengths supported with relevant statistics,
    - access agreements,
    - policies relating to acquisition, retention, storage and disposal issues.

  - A model for a formal collaborative scheme to:
    - Reduce duplication within libraries whilst increasing subject coverage
    - Allow libraries to discard lesser-used material in the knowledge that they will be held elsewhere

Methodology

- The project methodology has been split into four distinct areas: the first and most important one is the actual collection assessment process. When designing the project it was agreed that where possible the project would look to adopt a quantitative, statistical based approach to collection assessment, rather than a more descriptive approach. Therefore we have adopted the iCAS software (interactive collection analysis system) for collection analysis which I will come back to in a moment
- The second approach is to carry out an assessment of existing partners' collecting and access policies which we hope will become the foundation that we can build upon when the collaborative agreement is reached
- During the initial visits with partners, it immediately became apparent that there are also significant resources within all the libraries that remain either only on card catalogues or indeed not catalogued at all. Therefore we have adopted a survey based approach to identify and highlight these resources for the group
- To serve as a dissemination device the project has launched a basic web site which will, once complete, host the results of the iCAS analysis so librarians will be able to identify what materials are held where as well as other related resources, and sources of information relating to access, retention and disposal.

Collection analysis methodology

- Adopting an objective methodology will allow us to analyse partner holdings and identify areas of strength within their collections which can be used as a base for implementing collaborative collecting and retention.
- This product based on Conspectus will produce an analysis at division/subject/category level and an analysis of title overlap and uniqueness based on NLM subject headings.
- This could be carried out for all partner automated bibliographic records regardless of classification schemes.
- Electronic bibliographic records are ftp'd to OCLC where they are matched by call number. If the records are incomplete OCLC will then attempt to match the record using WorldCat
- After analysis is complete all data will arrive to us as a database in CD-ROM format, which will allow us to search, sort, and analyse data in various ways
- With regard to partner collections this product will show a history of a collection with a clear indication of its depth and breadth and will allow us to ask questions such as 'how many' 'how old' or 'how often'.

Advantages of iCAS

- Offers a quantitative and objective approach
- Of most use to Mapping Medicine is that the service offers a complete age and content analysis, providing title overlap and levels of uniqueness. It will be able to provide the number and percent of uniquely held titles for each library and its overlap with every other library using NLM divisions, categories and subjects.
- Uniqueness measures are included, as well as the number of titles each library shares with one and only one additional library, 2 and only 2, 3 and only 3 and so forth
- Clearest presentation of comparative holdings available
- iCAS is a new product from OCLC, and to date has only been used by CURL in the UK. CURL funded a pilot project to evaluate the iCAS approach. The initial stages have been completed and the results have been particularly encouraging, supporting our approach. The project has generated a great deal of data for the 6 participating libraries and revealed some interesting and unexpected statistics. I am told that the results will be made publicly available later this year.

Alternatives to iCAS:

- Before adopting iCAS we examined other potential methodologies, however none were deemed as appropriate as iCAS
- Collections survey: we looked at the various survey based collection assessment approaches that have been conducted but felt that it would be too difficult to maintain objectivity with using a more descriptive approach . It was also felt by partners that this would involve extensive staff time at each institution

- 'In house' method- we also investigated whether it would be possible for partners to access their own library systems in an attempt to get a rough 'count' of materials within subject areas. However it was felt that this approach would be very cumbersome due to the diverse classification and library systems throughout the partners making any approach reliant on extensive staff time once again.

Funding implications
- it was soon apparent that the project budget would be insufficient to cover the costs of an iCAS analysis therefore we have had to look for extra funding.
- Partners have been asked to contribute based on the number of records that they had which they have all agreed
- various external funding bodies were also contacted.
- Happily we have received a substantial contribution from resource which will make up the remainder required. There is also the possibility of funding from other sources at a later date.

Progress
Since May work has begun in a number of different areas:

- **Methodology for collection analysis:**
- Before the OCLC approach was adopted we had to ascertain the cost of the product.
- Also have to ensure that iCAS does in fact work (as it is a relatively new product), so we have conducted a sample test of 1000 records from partner catalogues to ensure that OCLC will be able to transfer records from the various classification schemes into NLM.
- The results showed what we had expected, that some partner records would need more work than others but all would be compatible for the analysis. All data has been sent to OCLC for analysis and we are expecting the results in early November.
- We have also adopted a methodology for the assessment of uncatalogued materials. It was felt that these resources need to be highlighted both for librarians and potential users. Unfortunately the project does not have sufficient time or resources to implement some kind of statistical assessment therefore we have implemented a simpler survey based plan. We should be receiving the completed data by the end of September.

- **Marketing:**
- Important to market the project to as wide an audience as possible so we have been regularly disseminating information either in the shape of articles, or presentations given to various interested and/or related bodies:
- ensuring that the project remains in close contact with various other relevant projects, in particular some of the RSLP funded schemes

The Future:
- We recognise that collaborative ventures come with considerable obstacles but we hope that the Mapping Medicine pilot project will put the foundations in place for successful partnership between all the members involved we hope that the project will be able to prove that a link between collection analysis and collaborative collection management is indeed possible.