

## LIBRARY SERVICE OR LIBRARY SECTION PROCEDURES

1. **REASON FOR ISSUE:** This Veterans Health Administration (VHA) Handbook is a complete revision establishing procedures regarding the VHA Library Program.
2. **SUMMARY OF CHANGES:** The major changes include updating:
  - a. Information on centrally-directed programs.
  - b. Annual Statistical Report procedures.
  - c. Deletion of the Minimum Standards for Participation in the Department of Veterans Affairs (VA) Library Network.
3. **RELATED ISSUES:** None.
4. **RESPONSIBLE OFFICE:** The Office of Informatics and Analytics (OIA), Library Network Office (LNO) is responsible for the contents of this Handbook. Questions may be directed to 214-857-0379.
5. **RESCISSIONS:** VHA Handbook 1932.1, dated August 7, 2008 is rescinded.
6. **RECERTIFICATION:** This VHA Handbook is scheduled for recertification on or before the last working day of December 2018.

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## LIBRARY SERVICE OR LIBRARY SECTION PROCEDURES

**1. PURPOSE:** This Veterans Health Administration (VHA) Handbook contains procedures for conducting the VHA Library Program to meet VHA goals and objectives. **AUTHORITY:** 38 U.S.C. §§ 7301 and 8153.

**2. BACKGROUND:** The Library Service or Library Section, hereinafter called Library, serves patient care, education, and research program needs. It responds to changing agency priorities and local medical facility programs by identifying, retrieving, and delivering information economically and efficiently in both traditional and emerging formats.

a. **Services to Patients.** The library provides reference, bibliographic, and educational materials supportive of the treatment and rehabilitation of hospitalized and ambulatory care patients and their families or caregivers. A patient health information collection supports formal and informal patient health education programs and is supplemented with consumer health information. Computers, under appropriate supervision, need to be made available for the use of patients and their families. Libraries may also provide therapeutic recreational reading material as appropriate. Patients and their families receive preferential use of materials in the Patient Education Resource Center (PERC) or patients' library or information center. **NOTE:** *In some VA facilities the PERC is not affiliated with the medical library; it is a separate unit not under the control of the library manager.*

b. **Services to Staff.** The library provides reference, bibliographic, and related services for all facility personnel, residents and students in connection with their official duties. **NOTE:** *The library collections and services at each facility need to reflect the informational requirements of that facility, including Outpatient Clinics (OPCs), Community-based Outpatient Clinics (CBOCs), affiliated clinics, etc.*

c. **Services to Other VA Library Network Libraries.** The library provides materials free of cost and on a timely basis to all other VA Library Network (VALNET) libraries.

d. **Services to Others.** The library provides knowledge-based information services related to the needs of individuals, families, groups, and communities. As appropriate, the library initiates and participates in ventures which foster the dissemination of health care information to professionals within VA and the community.

### 3. DEFINITIONS:

a. **Cataloging.** Cataloging is the process of describing an item in the library collection in terms of author(s), title, physical description, etc., and making a record related to that item. This usually includes bibliographic description, subject analysis, assignment of classification notation, and activities involved in physically preparing the item for the shelf. These tasks are usually performed under the supervision of a librarian trained as a cataloger. Records may be maintained within a manual or an automated card catalog.

b. **Compact Disc-Read Only Memory.** A compact-disc read-only memory (CD-ROM) is a high-capacity optical disc used as a publishing medium and for storing information in digital format. The data encoded on a CD-ROM can be searched and displayed on a computer screen, but not changed or erased. The disc is read by a small laser beam inside a device called a CD-ROM drive. In libraries, CD-ROMs are used primarily as a storage medium for bibliographic databases and full-text resources.

c. **Classification.** Classification is the process of dividing items into logically hierarchical classes, subclasses, and sub-subclasses according to a set of pre-established principles for the purpose of organizing them in a collection or catalog. This process of assigning a numeric or alpha-numeric designation to an item, its subject or form, and indicating its physical location in the collection based upon a set classification scheme is accomplished in order to facilitate access and retrieval of materials.

d. **Core Title.** Core Title refers to journal or book titles identified as being basic to the provision of information at the local level. *NOTE: Core titles should be available locally and therefore need not be made available on interlibrary loan (ILL).*

e. **DOCLINE®.** DOCLINE is the National Library of Medicine's (NLM) Web-based ILL request routing and referral system.

f. **Digital Video Disk .** A digital video disk (DVD) is a type of optical disk of the same size as a compact disc but with significantly greater recording capacity, partly because it is double-sided. Although DVD requires special equipment for playback, most DVD players can also read CD media.

g. **Interlibrary Loan.** An interlibrary loan (ILL) is a transaction whereby one library lends an item from its collection, or furnishes a copy of the item, to another library, or conversely borrows an item or receives a copy of an item from another library's collection.

h. **Knowledge-Based Information.** Knowledge-based information is current expert information, produced externally to an organization. Formats may include: journals, texts, documents, and databases in print or electronic format; benchmarks; best practices; guidelines; consensus development statements; research studies; and/or quality-filtered Internet resources.

i. **Library Network Office .** The Library Network Office (LNO) is the VHA Program Office responsible for coordination of the delivery of national library programs, resources and services to Veterans, VHA staff and VALNET.

j. **License.** A license is a formal written contract between a library and a vendor for the lease of one or more proprietary (copyrighted) bibliographic databases or online resources, usually for a fixed period of time, in exchange for payment of an annual subscription fee or per search charge.

k. **MEDLINEPlus®**. MEDLINEPlus is the National Library of Medicine's (NLM) website for consumers containing health information from the National Institutes of Health (NIH) and other authoritative sources.

l. **Network Delivery Program**. The Network Delivery Program is a centrally-funded and managed program ensuring the availability of educational and informational (commercial or VA-produced) audiovisual (AV) and print material for personnel throughout the agency. These materials are sent to VALNET libraries at one of two delivery levels, either all VA Libraries or twenty-two Veterans Integrated Service Network (VISN) delivery sites.

m. **Pamphlet**. A pamphlet is an unbound non-serial publication consisting of at least five, but not more than forty-eight, pages.

n. **Patient Education Resource Center**. A Patient Education Resource Center (PERC), also known as the Patient Health Education Collection or Library, consists of patient education and consumer health print and non-print materials for patients, patients' families or caregivers, and medical facility staff to support patient care and enhance the shared decision-making process between patients and their health care providers. Materials include those suitable for consumer awareness programs. These materials may be housed in a PERC, patients' library or information center, medical library, or other appropriate setting within the medical facility under the purview of the library. *NOTE: In some VA facilities the PERC is not affiliated with the medical library and as such is a separate unit not under the control of the library manager.*

o. **PubMed®**. PubMed is a database that provides free access to MEDLINE, the NLM database of indexed citations and abstracts to medical, nursing, dental, veterinary, health care, and preclinical sciences journal articles, and other citations indexed by the NLM.

p. **Specialized (Administrative) References**. Specialized administrative references refers to materials, books, and journals purchased by the library that are maintained by an individual or office other than the library.

q. **Technical Services**. Library technical services are those operations concerned with the acquisition, organization (bibliographic control), physical processing, and maintenance of library collections, as opposed to the delivery of public services. Technical processing is performed "behind the scenes."

r. **Therapeutic Recreational Collection or Materials**. Therapeutic recreational collection or materials serves a therapeutic purpose in providing diversionary activities to patients and assisting Veterans in finding ways to develop and use their leisure time to enhance their health, independence, and well-being.

s. **User Education**. User education includes all the activities involved in teaching users how to make the best possible use of library resources, services, and facilities, including formal and informal instruction delivered by a librarian or other staff member, one on one or in a group. It includes online tutorials, AV materials, printed guides, and pathfinders.

t. **User Services.** User services refers to library activities and operations, including circulation services, reference, computerized search services, end-user searching instruction, ILL, ward cart, and other services with similar characteristics, which entail regular contact between library staff and users.

u. **VALNET.** VALNET comprises the staff at VA medical facility libraries and the VHA Central Office Library. It is a library network of national significance that shares resources, information, ideas, etc., and offers mutual support and guidance.

v. **VALNET Library Mentor Program.** The VALNET Library Mentor Program is an orientation and mentoring program for new library managers designed to review library and VHA program policies, procedures, and standards.

w. **VA Library Public Access Catalog.** The VA Library Public Access Catalog (VALPAC) is a LNO-funded bibliographic listing of all VALNET books and AVs available for loan within VA. This listing also includes information on the individual holdings of each library.

x. **Veteran Health Education.** Veteran Health Education (VHE) is any set of planned, educational activities, or use of resources designed to improve patients' health behaviors, health care decision-making, or health status.

y. **Video-notebook.** Video-notebooks are locally-developed materials in any of the AV formats, whose primary purpose is to record or document a local event, procedure, etc. Video-notebooks have a limited life span of 1 year or less and are not assigned centralized cataloging.

#### **4. SCOPE:**

a. To ensure that the knowledge-based information needs of staff, residents, students, and patients and their family members are met, each Department of Veterans Affairs (VA) medical facility establishes and maintains a library. The library provides materials, programs, and services in support of clinical, research, training, and patient health education programs. Based on local needs, patient therapeutic recreational reading services may also be provided. Independent Outpatient Clinics (IOC), Outpatient Clinics (OPC), Community Based Outpatient Clinics (CBOCs), regional offices, and other facilities without an on-site library need to align themselves with a VA medical facility having a library and jointly prepare a statement of responsibility for the sharing of library resources.

b. The library is the primary organizational unit at the medical facility level authorized to purchase, organize, control, store, and disseminate books, journals, AV software, electronic resources, and other learning media. Materials are made available at no charge and on a timely basis to other VALNET Libraries except those materials that are designated as core titles or that have license restrictions.

#### **5. SHARING RESOURCES:**

a. VALNET libraries serve as resource centers to support the goals and objectives of VHA

service areas, VISNs, individual medical facilities, and clusters, to enhance the quality of health care delivery to our nation's Veterans. Sharing programs (e.g., shared acquisitions, coordinated collection development, consolidated procurement, AV and print network delivery) support national education, training and information needs, and augment local resources.

b. Sharing is an effective and efficient way to maximize resources. It has particular application in those communities where the local VALNET library provides the strongest health sciences library program and collection. Individual libraries shall consider opportunities to make materials and services available to the local medical community through agreements pursuant to 38 U.S.C. § 8153 or other permissible authorities. **NOTE:** *VALNET libraries need to initiate and participate in local library or information consortia to strengthen and expand resources and services.*

## 6. PRIORITIES FOR SERVICE:

a. The primary users of the library include patients, their families and caregivers, clinical and administrative staff, residents, students or other trainees of the local medical facility, and staff at allied facilities (e.g., CBOC, etc.). Subject to the established information needs of the primary users, locally-based materials, programs, and services are made available for use in the following priority:

- (1) Patients, staff, residents, and students of the local VA facility, OPCs, CBOCs, etc.;
- (2) VA facilities in VISN;
- (3) VA facilities across the system;
- (4) Local libraries with existing formal and informal agreements; and
- (5) All other libraries.

b. The library ensures equitable access to centrally-provided resources held at a local level, e.g., network delivery materials.

## 7. RESPONSIBILITIES:

a. **Library Network Office.** The Director, LNO, or designee is responsible for:

1. Developing, organizing, implementing, and reviewing library program policy, procedures, and projects beyond the scope of an individual medical facility (e.g., network web-based library systems, union lists, liaison with national library organizations). **NOTE:** *For additional information on programs and services see the VALNET website (<http://vaww.vhaco.va.gov/VALNET/>).*

2. Managing the VHA National Desktop Library and the VHA National Core Collection of Online Resources, including budgeting, contracting, access management, and troubleshooting.



3. Managing the national cataloging program.
4. Managing the network delivery program including receiving and responding to written complaints of negligence regarding borrowing or delivery sites.
5. Coordinating the development, maintenance, and updating of VALPAC.
- b. **Medical Facility Director.** Each medical facility Director is responsible for:
  1. Establishing and maintaining a library, providing materials, programs, and services in support of clinical, research, training, and patient health education programs.
  2. Ensuring the library is under the direction of an academically-qualified professional librarian or have access to one on a consultant basis.
  3. Ensuring the library is organized into separate medical library, PERC, or patients' library or information center. *NOTE: The Library is strongly encouraged to establish and maintain a PERC to fulfill the VHA and the local medical facility's mission.* When appropriate, in support of Community Living Centers (CLC) nursing home, domiciliary, residential rehabilitation treatment, or other long-term care programs, the library may provide recreational reading materials and services.
  4. Ensuring the library expands, as appropriate, the range of resources and services available to the local medical facility by participating in local, regional, state, and national government and other professional library or informatics networks and systems.
  5. Ensuring appropriate physical space. Special attention must be given to ensure the library provides accessibility to handicapped users in compliance with applicable Public Laws, including the Americans with Disabilities Act, Title 42 U.S.C. §§ 12101-12213.
  6. Ensuring sufficient quantities of specialized and office equipment is permanently available within the library.
  7. Working actively with the LNO when filling library manager positions.
  8. Ensuring library staff is available during regular business hours.
  9. Ensuring there is adequate clerical support for the performance of such duties as processing correspondence and materials, typing reports, and maintaining library records and report files.
- c. **Facility Library Manager.** The library manager is responsible for:
  1. Directing and managing all aspects of the library program, including strategic planning, marketing, quality management, human resource and financial management, and space

utilization, to ensure proactive delivery of information.

2. Coordinating the selection, acquisition, organization, preservation, and availability of library materials through regular needs assessments, user satisfaction surveys, and other evaluation reviews used to develop or modify programs, resources, services, and materials collections.

3. Maintaining a cooperative, proactive interaction with other services and VA facilities through personal contacts and participation in committee meetings, multidisciplinary planning conferences, and other medical facility activities.

4. Ensuring the professional development of library staff; e.g., there is equitable access to continuing education and in-service training opportunities for all library personnel, subject to national and local facility guidelines.

(a) New library managers should participate in the VALNET Library Mentor Program.

(b) Library staff are encouraged to become actively involved in professional organizations in order to update, reinforce, and broaden professional knowledge and skills.

5. Determining budget needs and being the Control Point Official for acquisitions.

6. Preparing the annual statistical report (RCS 10-0020).

7. Establishing a written collection development policy.

8. Conducting an annual evaluation of the collections.

9. Approving or disapproving requests for items to be purchased and housed outside the library.

10. Submitting holdings for inclusion in the VALPAC.

11. Reviewing any license for electronic resources.

12. Ensuring library equipment is inventoried, maintained, and serviced appropriately.

13. Participating in NLM and National Network of Libraries of Medicine (NN/LM) programs including DOCLINE, training programs, and grants.

14. Ensuring the accurate and timely updating of the VALNET directory and comparison chart.

15. Ensuring the annual update of online book and journal holdings are submitted for Serials Solutions.

## 8. LIBRARY STAFF:

a. **Library Manager Positions.** The library manager positions are not centralized; however, LNO staff takes an active role in working with VA medical facility management where there are vacancies. *NOTE: The controls stated in VA Handbook 5005, Staffing, must be followed.*

b. **Additional Library Staff Positions.** Additional library staff positions are authorized locally at the discretion of facility management based upon the size and type of the facility, complexity of programs offered, training responsibilities, affiliations, network or cluster library roles, sharing programs, and consortia participation. Recruitment and retention of professional librarians is critical for quality, knowledge-based library programs and services. *NOTE: Suggested staffing guidelines for hospital libraries may be found in the Medical Library Association's Standards for Hospital Libraries 2007.*

c. **Recruitment.** Selection of VALNET librarians must follow local VA medical facility policies and procedures.

## 9. PHYSICAL FACILITIES:

a. **Space Criteria.** The latest VA guidelines for planning VA facilities related to libraries, VA Space Planning Criteria (400), March 2008, (SEPS Version 1.6), Chapter 400: Veterans Health Administration: Library Service (<http://www.cfm.va.gov/til/space/SPchapter400.pdf>) must be used to determine minimum space requirements. Libraries not meeting space criteria need to develop plans addressing corrective measures, submit plans to medical facility management for inclusion in facility development plans, and keep the LNO apprised of both plans and actions taken by the medical facility. Special attention must be given to ensure the library provides accessibility to handicapped users in compliance with applicable Public Laws, including the Americans with Disabilities Act, 42 U.S.C. §§ 12101-12213. *NOTE: VA Guideline PG 18-13, "Barrier Free Design Guide," was written to comply with all Federal regulations.* In facilities where space is not specifically designated for a patient information center or library, materials are made available through the health sciences library program until such time that a physically separate, designated PERC or patient information center or library space is available.

b. **Compact Shelving.** Compact shelving may be installed when space limitations within a medical facility prohibit expansion of the library to meet space criteria, or when the library has outgrown existing shelving capacity but still needs to retain materials essential to the mission and vision of their medical facility. Before considering the use of compact shelving, Engineering Service needs to be consulted to determine if the flooring and structure are able to support the weight.

c. **Location.** The medical library and patient information center or library need to be located in contiguous areas to increase efficient use of library staff and office and workroom areas should serve both libraries. A single circulation desk area may serve both libraries when it is possible to do so. Medical and patient information centers or libraries need to be conveniently located for users. *NOTE: If patient information centers are not located adjacent to health*

*science libraries, it is suggested that they be located within the outpatient clinic areas for ready access by patients and their families.*

d. **Environment.** In all renovation, construction, and space planning activities, the library needs to be viewed as an integrated information and learning center containing print and non-print materials and equipment. Space needs to be designed for efficient workflow, the comfort of users, and the use of information technology by both library staff and users.

**10. EQUIPMENT:** Sufficient quantities of specialized and office equipment must be permanently available within the library. Specialized equipment includes photocopiers, ½ inch VHS video cassette players or monitors, fax machines, scanners, DVD players, audiocassette players, viewing screens, microform readers or printers, and computers for library staff and users.

**11. FISCAL CONTROL:** Annually, the library manager determines budget needs and prepares a program budget conforming to VA facility guidelines, and presents it, through appropriate channels, to facility management.

a. This budget includes personnel, materials, equipment purchase and rental, ILL, consortia participation, contracts, collection preservation, and on-line bibliographic access. The budget justification is based on existing and projected workload, program standards, and documented need for new or modified programs and inflation.

b. Separate budget entries may be prepared for books, journals, AV software, educational computer software, data bases, ILL, contract needs for special resources, and specialized reference collections. *NOTE: An additional budget request may be required for Information Technology (IT) resources and equipment.*

c. The library manager is the control point official for the acquisition of books, journals, AV software, and educational computer software purchased with library funds through the Medical Care Appropriation. In order to avoid unnecessary duplication of expensive materials, and ensure facility-wide access to these resources, concurrence of the library manager is recommended for the acquisition of all such items using funds from other appropriations.

**12. SECURITY:** The library manager implements policies and procedures to ensure the security of library personnel, equipment, and materials according to VHA policy. All equipment must be properly marked and inventoried in accordance with local procedures.

**13. PRIVACY:** The Library Manager and library staff must protect each user's right to privacy with respect to information sought or received, and materials consulted, borrowed, or acquired. Social security numbers are not to be recorded or maintained.

**14. VA, NLM, AND THE NN/LM INTERFACE:** VALNET libraries need to participate in NLM and NN/LM programs including DOCLINE, training programs, and grants. VALNET librarians should participate in the NLM goal-setting process to ensure VA interests are considered.

**15. REPORTS:**

a. **Library Statistical Report (RCS 10-0020)**. The Library Manager prepares this report using the web-based version of VA Form 10-1405, Library Statistical Report, and submits it within 30 days following the close of the fiscal year (see Appendix A).

b. **Union Lists of Library Materials**.

(1) **Journals**. Annually, all library managers submit reports of changes in locally-maintained journals to the NLM DOCLINE Serial Holdings database following guidelines and schedules provided by NN/LM.

(2) **Books and AVs**. Library managers must submit changes to their site's book and AV holdings to the catalog contractor.

**16. RESOURCES:**

a. **Selection**. The library manager establishes a written collection development policy based upon professional library selection standards, the information needs of the facility, and information requests submitted by patients, staff, residents and students, to ensure the availability of a balanced collection.

(1) **Gift Materials**. The library manager may review all books, journals, and AV software donated to the medical facility for appropriateness. Materials meeting established library collection development policy criteria may be added to the collection; rejected material must be disposed of according to local procedures. Unsolicited donations of religious literature must be referred to Chaplain Service for disposition (see VHA Handbook 1111.02, Spiritual and Pastoral Care Procedures).

(2) **Censorship**. Materials are not excluded from the library because of origin, background, or views of those contributing to their creation. Materials and information representing different points of view on current and historical issues, within the scope of the local collection development policy, are provided in the medical library, PERC or patients' library or information center. Materials are not prescribed or removed because of partisan or doctrinal disapproval. VA does not endorse the censorship of materials.

b. **Collections**. Materials organized into reference and circulating collections support the informational, therapeutic, and educational needs of medical facility patients, residents, staff, and students, and reflect the commitments of any sharing agreements. Material and format selection is based on such factors as: frequency of use, availability of equipment, and cost-effective alternate sources. Collections are accessible to facility patients, staff, residents, and students for browsing and other independent use. Library staff evaluates the collections annually, using data from needs assessment activities, user inquiries, circulation, and ILL, to identify items to be withdrawn and subject areas to be expanded. Materials that are outdated or which are infrequently used are removed from the materials collection in accordance with locally-established library materials weeding criteria, unless they are of historical value and it is

determined that they need to be retained in the collection. Excessed materials are disposed of according to local facility guidelines.

(1) **Medical Collection.** This collection is intended for use by medical facility staff, residents, and students and is developed to meet the information and education needs of the facility as a whole.

(a) The collection includes materials in such subject areas as: clinical medicine, pre-clinical sciences, allied health, management, personnel administration, nursing, engineering, quality management, etc.

(b) Appropriate formats include, but are not limited to: books, journals, AVs, computer software, microforms, and electronic resources. When patients or their family members request clinical materials, the library makes these materials available according to established local facility guidelines.

(2) **Patients Collections.** Patients should have access to consumer and patient health information materials in a variety of formats and reading levels. The PERC includes materials supporting planned, coordinated patient health education activities and programs of the facility. Materials are for the direct use of patients and their families in order to help them understand about wellness and diseases in general; and the specific diagnoses, prognoses, and treatment regimens. Information allows them to become active participants in the shared-decision-making process. Where there is not a separate PERC, the library provides access to health information materials (e.g., books, pamphlets, AVs, journals, electronic resources, etc.) through the medical library.

(3) **Collection Organization.**

(a) Reference. Reference material may exist as hardcopy or electronic products. The basic reference collection includes such items as: standard subject and language dictionaries, encyclopedias, manuals, handbooks, and directories necessary to support facility programs. The medical reference collection includes materials used on a daily basis, such as basic clinical and drug information resources. Reference materials must be readily accessible for consultation and are generally non-circulating except in special circumstances.

(b) Circulating. A collection of current knowledge-based materials, in a variety of formats, selected to meet facility information and education needs is available for use within the library, the facility, or for ILL. Loan periods are determined by local policy.

(4) **Specialized (Administrative) References.**

(a) Books, journals, electronic resources, and other materials routinely housed in the library, which are critical to the successful accomplishment of official duties and used on a daily basis, may be housed in services or sections outside of the library. Specialized Reference collections should not be created within a service based solely upon the ease or convenience of access by an individual, service, section, or educational program. To avoid unnecessary duplication of

expensive purchases, all requests for items to be housed outside the library must be submitted to the library manager for approval. If approved, these requests are processed according to locally-established library procedures and funding availability. **NOTE:** *No more than 10 percent of funds designated for the library collection should be used to purchase specialized reference items during any fiscal year.*

(b) Upon receipt, materials are processed by library staff and released to the appropriate individual from the requesting service or section; however, the materials remain the property of the Library.

(c) Specialized reference collections are inventoried periodically. If the materials cannot be located, especially in the case of excessive loss of materials by a service, a local decision must be made regarding replacement. Materials that are outdated, superseded, or otherwise found to be excess to service or section needs must be returned to the library for disposition.

#### (5) **Types of Materials.**

(a) Journals. Current subscriptions for key health sciences and management journal titles are maintained. The number of subscriptions and back file retention period is to be based on:

1. The variety of medical facility programs and affiliations, special local needs, and the extent of participation in shared acquisitions programs;
2. Scope, depth, and indexing of the journal;
3. Copyright restrictions; and
4. Alternate availability, such as the National Core Collection of Online Resources.

(b) Microforms. Titles in microform may be purchased in lieu of binding print materials to retain back files of journals or to enable retention of low-use materials.

(c) Monographs. Current editions of monographs are acquired, cataloged, classified, and maintained in support of the patient care, education, research, and management activities of the facility.

(d) AVs. All facility AV software is under the purview of the library for control, cataloging, housing, circulation, and ILL. **NOTE:** *AV formats approved for VHA are: 1/2 inch Video Home System (VHS) videocassette, DVD, CD-ROM, 2 by 2 inch slide, audiocassette, and multi-media material.*

1. The collection may include computer-based training courseware.
2. Programs distributed through the Network Delivery Program are publicized and made available for use by all facility staff, residents, students, and patients as appropriate.

3. Video-notebooks and copies of satellite broadcasts supporting local facility education and training programs may be housed in, and controlled by, the library, but should not be loaned outside the VA system. The content and documented use of these materials needs to be reviewed annually.

(e) Pamphlets. Pamphlets are not within the sole purview of the library. Pamphlets used as handouts for VHE activities and programs are to be purchased through a central VHE control point. This control point is the fiscal responsibility of the facility VHE Coordinator. *NOTE: In the absence of this position, the fiscal responsibility may be assigned to the Education Coordinator or the library manager.* Bulk supplies of pamphlets are not to be funded from the annual library budget.

(f) Databases. Bibliographic or full-text databases appropriate to the needs of the facility are accessible to library users.

#### **(6) Electronic Resources.**

(a) Several of the types of the preceding materials may be available online or in electronic format.

(b) Licensing. The library manager needs to review any licenses for electronic resources, in consultation with a local Contracting Officer and, if necessary, legal counsel. Particular attention must be paid to technical issues and programmatic issues to determine if conflicts with government policies, rules, or regulations exist.

### **17. USER SERVICES:**

a. Reference. Reference services include, but are not limited to: on-site bibliographic database searching, response to patron inquiries, readers advisory, current awareness service, evidence-based quality filtering of the literature, and bibliographic verification.

b. Database Service. Library staff offers mediated, professional searching of the literature, as well as education on how to search the literature.

c. Circulation. Policies and procedures for the circulation of library materials, including restricting library privileges of delinquent borrowers, are detailed by local facility policy. Library materials are not issued on indefinite loan to an individual or a service unless special circumstances exist.

d. ILL. Informational needs beyond the scope of the library collection are met through ILL agreements established with other libraries. Payment for loan charges is authorized using the same fiscal subaccounts as those used for book, periodical, and AV software procurement.

(1) VALNET libraries may charge fees to non-VA libraries for providing ILL under authority of 38 U.S.C. 8153. Monies received must be handled according to VHA Handbook 4721.



(2) Access to DOCLINE is required to expedite the transmission of ILL requests to other VALNET and non-VALNET libraries. Material required for decision making in immediate patient care should be acquired in the most expeditious manner possible and should be sent by electronic means, i.e., fax or scanning into e-mail, when possible.

(3) When requesting routine ILL of either print or non-print library materials, VALNET and local consortia collections need to be considered first.

e. **Ward Service.** The library may provide ward cart service for patients who are unable to visit the patients' library, information center, or PERC. Ward cart visits may be provided in cooperation with Voluntary Service. Consumer health information may also be delivered to the bedside or to clinicians' locations, as requested, for use in the provision of patient health education.

f. **User Education.** Library staff teaches their users to efficiently and effectively locate and evaluate authoritative healthcare information, using, but not limited to, tools such as Online Public Access Catalogs (OPACs), PubMed, MEDLINEPlus, and databases in the National Core Collection of Online Resources, with emphasis on the location of clinical practice guidelines, evidence-based medicine, and the establishment of current awareness alerts.

g. **Hours of Operation.** The library needs to be staffed during regular business hours. Expanded hours for early morning, evening, or weekends may be authorized when such need is documented. After-hours, access to the health science library is authorized in compliance with medical facility policies and the standards of The Joint Commission.

## 18. TECHNICAL SERVICES:

a. **Acquisitions.** The library manager, in conjunction with the Contracting Officer, is responsible for determining the method of procurement for library materials. Library materials must be procured through contracting services using established contracting procedures that comply with applicable acquisition laws and regulations. ***NOTE: Links to regulations governing advance payment, multiyear subscriptions, and licensing, especially regarding the purchase of periodicals and electronic resources, are available on the subscriptions page of the VALNET website <http://vawww.vhaco.va.gov/VALNET/Periodicals.asp>.***

### b. **Organization of Material.**

#### (1) **General.**

(a) Books, AVs, and similar materials must have cataloging records that include full descriptive cataloging and subject classification. These materials are to be shelved in subject classification order.

(b) Periodicals, whether in original or microform formats, are to be shelved alphabetically according to title.

(c) Pamphlets may be indexed by broad subject classification and shelved or maintained in filing cabinets according to the subject classification.

(d) Library staff offers access to library materials either through a library web page or through a web-based Integrated Library System.

(2) **Cataloging and Classification.** Library materials are cataloged and classified through a centralized contract using the Online Computer Library Center database for bibliographic records. All requests for centralized cataloging services must originate from the LNO.

a. **Preservation.** The library staff arranges for the preservation of library materials according to locally-established retention policies.

b. **Excess Materials.** Materials that are outdated, in poor physical condition, or in excess of the information needs of the facility are to be removed from the collection.

(1) Excess materials that are current and in good condition may be offered to other VALNET libraries using Outlook VHA Library Excess Mail Group at: [VHALibraryExcess@va.gov](mailto:VHALibraryExcess@va.gov).

(2) Materials not required by other VALNET libraries may be used as duplicate exchanges with public or private agencies whenever it is to the advantage of VA to do so.

(3) Remaining materials are to be considered in excess of all VA requirements and given to Logistics Service for disposal in accordance with facility guidelines.

(4) Excess materials will not be given to individuals for personal use or transferred to other facility services as specialized reference materials.

c. **Accountability.** When library materials charged to personnel or patients are lost through negligence or returned in unusable condition, a Bill for Collection may be initiated utilizing the Veterans Health Information and Technology Architecture (VistA) Billing Program. Fiscal Service is responsible for the billing program and can provide access as needed.

## 19. CENTRALLY DIRECTED PROGRAMS:

a. **Network Delivery Program.** The Network Delivery Program supplements individual medical facility learning resources. Multiple copies of select AV programs and print materials are bulk-purchased and delivered centrally to designated locations to conserve funds. This system provides equal access to materials necessary to support VA-wide information, staff development, and training activities (see Appendix C).

b. **Union Lists.** LNO coordinates the development, maintenance, and updating of VALPAC, a union list of monographs and audiovisual holdings appropriate for sharing within the Department. A national subscription for VALPAC is funded by the LNO.

c. **National Core Collection of Online Resources.** LNO centrally contracts and funds a

collection of online resources, including databases, electronic journals, and electronic books, in support of the work of VA staff nationwide. The National Core Collection of Online Resources covers a wide variety of medical specialties and administrative topics.

d. **OpenAthens Service.** The OpenAthens product provides VA staff remote access to Athens-enabled electronic resources, including both those purchased nationally and at the VISN or facility-level. A national subscription for the Department is funded by the LNO and an administrative account for each VA medical facility is managed centrally.

e. **Serials Solutions.** The Serials Solutions product provides a comprehensive list of electronic resources made available by a VALNET library, integrating purchases made at the national, VISN, and facility-level. A national subscription for VALNET is funded by LNO and an administrative account for each VALNET library is managed centrally.

f. **Cataloging Services.** LNO funds contracts that support the cataloging needs of VALNET. Cataloging requests for material owned by a VALNET library are electronically delivered to a cataloging contractor that employs the services of an international database to select corresponding records. Another vendor aggregates the holdings of all VALNET libraries into a single database for ILL purposes (see Appendix B).

**DEFINITIONS AND INSTRUCTIONS FOR VA FORM 10-1405  
LIBRARY STATISTICAL REPORT, RCS 10-0020**

*NOTE: The Department of Veterans Affairs (VA) Form 10-1405, Library Statistical Report, Report Control Symbol (RCS) 10-0020, can be found on website: <http://vaww.vhaco.va.gov/VALNET/Statistics.asp>. This is an internal website and is not available to the public. A library's 4-letter cataloging code is required to access the form.*

**1. REPORTING REVENUE:** The facility library must report all dollars expended by that library. This includes:

- a. Funds deposited by Fiscal Service into the library fund control point as its fiscal year budget allotment.
- b. Funds transferred from other resources into the library's fund control point. For example: Pharmacy transfers funds to the library for the purchase of American Hospital Formulary Service (AHFS) Drug Information books. The library would report those funds in the Expenditures Section; Books, Media, Journals: Administrative.
- c. Funds in the facility General Post Funds designated specifically for use by the library.
- d. Funds transferred by the library out of its fund control point for use by other services or groups. For example: The library transfers \$5,000 to the Veterans Integrated Services Network (VISN) Fiscal Office to pay their facility's portion of a contract for access to "MDConsult." The library would report that \$5,000 in the Expenditures Section: Electronic Resources.

**2. DEFINITIONS USED FOR VA FORM 10-1405, LIBRARY STATISTICAL REPORT:**

- a. **Administrative Materials Collection, (formerly titled Specialized Reference)**. The administrative materials collection is material (e.g., books, journals, audiovisuals, etc.) purchased by library that is maintained by an individual or office other than the library.
- b. **Media (formerly titled Audiovisual Software)**. Media is any stand-alone audiocassette, slide set, videocassette, digital video disk (DVD), or multimedia kit that is cataloged and considered part of the local library collection. For reporting purposes, all audiovisual software formats are counted together.
- c. **Books (also called Monographs)**. Books are cataloged, this includes classified material (such as hardbound or paperback book, document, pamphlet, technical report, manuscript, proceeding, and monographic or publishers series) either complete in one part, or complete in a finite number of separate parts. Materials may be in print, microform, or electronic format, and may have been cataloged locally, by an outside contractor, or by the national contract cataloger.
- d. **Circulation**. Circulation is the number of materials used by library customers (staff,

residents, students, patients, etc.) either within or outside the library. One book "checked-out" and two books and one journal retrieved from a study carrel or table and re-shelved by library staff needs to be counted as four circulations. Include materials transferred, circulated, or loaned between or among the divisions of a consolidated facility, and materials "checked-out" from a ward cart (see Handbook, paragraph 2t). Circulation of equipment (i.e., overhead projectors, video projectors, slide projectors, etc.) is not included here.

e. **Consolidated Facility.** A consolidated facility consists of VA medical facilities of more than one division operating under one administration and considered by VA to be a single facility.

f. **Electronic Resources.** Electronic resources include online or Internet accessible packages of information, such as databases, or clinical information (e.g., UpToDate, MDConsult, etc.). These are resources for which the library has already paid a fee for acquisition or access. Include electronic books or journals that are individually selected to be part of the facility's collection. Include any electronic or online resources purchased by the library regardless of whether it is for the medical, patient education, patient or general libraries, or administrative purposes. Do not include dollars funded by the Veterans Integrated Service Network (VISN) office (purchases for which money is not removed from the library's control point). Direct VISN funding information is gathered in a separate report.

g. **Operating Expenditures.** Operating expenditures are funds expended by the library during the reporting fiscal year. This includes funds from the library fiscal fund control point, facility General Post Funds, funds transferred from other accounts into the library control point, budget supplements, etc. This does not include funds expended by the VISN or by another service or section's fund control point to purchase products that may be considered 'library' material.

h. **Interlibrary Loan (ILL).** ILL is a transaction whereby one library lends an item from its collection, or furnishes a copy of the item, to another library or conversely borrows an item from another library's collection. This does not include items transferred, loaned, and/or circulated between divisions of a consolidated facility.

i. **Library Fiscal Control Point.** The library fiscal control point is the budget or funds under the sole purview of the library.

j. **Local Facility.** The local facility is the VA medical facility, domiciliary, or outpatient clinic in which a library is located including those remote sites for which it has direct responsibility for providing service, e.g., single division medical facility, two or more division medical facilities, and independent outpatient clinics.

k. **Network Delivery Materials.** Network delivery materials are distributed to medical facility libraries and identified with a network designation of "All HCF or VISN", in the call number field. These materials may be in any format, e.g., audiovisual, print, or electronic (Compact disc-read only memory (CD-ROM)). They are not considered part of the local site's collection and are not to be reported as part of a site's local collection in Section B Materials

Collection. *NOTE: Usage of networked materials is reported in the Circulation Section.*

l. **Non-VA Libraries.** Non-VA libraries consist of all libraries, other institutions, and individuals outside the VA system.

m. **Patient Education Collection or Library.** The Patient Health Education Collection or library consists of patient education or consumer health print and non-print materials for use by patients, patients' families or caregivers, and medical facility staff to support patient care and enhance the shared decision-making process between the patients and their providers. Materials must also include those suitable for consumer awareness programs. These materials may be housed in a Patient Education Resource Center (PERC), patients' library, medical library, or other appropriate setting within the medical facility under the purview of the library.

n. **Patient or General Library (formerly called the Patient Information Center, General Library, or Patients' Library).** The patient or general library is the responsibility of the library. It contains therapeutic recreational print and non-print materials for long-term patients in Nursing Home Care Units, Rehabilitation and Spinal Cord Units, etc., as needed.

o. **Periodicals.** Periodicals are publications, which have no foreseeable end, that are issued over a period of time, usually on a regular basis, with some type of numbering used to identify issues.

p. **Photocopy.** A photocopy is material (e.g., journal articles, book chapters, etc.) copied from original material or microform. This includes material printed directly from electronic sources (e.g., CD-ROM, Internet). For reporting purposes count the number of articles, book chapters, whole or in part, or topics. Do not report the number of pages photocopied.

q. **Searching.** Library staff does mediated searching for users. Mediated searches usually involve a reference interview with the patron to determine appropriate resources and construction of the search strategy.

r. **Specialized Reference.** See Administrative Materials Collection (see Handbook, paragraph 2a).

s. **Title.** A title is an item for which a separate shelf-list card, on-line catalog entry, or separate entry on a journal title holdings list has been made.

t. **Ward Cart.** A ward cart is a mobile unit (e.g., cart, book truck, etc.) that can be transported throughout the medical facility and used by the library to circulate (check-out) library materials or to distribute free materials (e.g., magazines, paperback books, pamphlets, etc.).

### 3. INSTRUCTIONS FOR FILLING OUT VA FORM 10-1405

a. **Page 1 – Expenditures.** Report the funds obligated from the Library Service or Library Section fund control point during the reporting fiscal year. This includes funding received from

any source: e.g., transfer from other accounts into the library control point, budget supplements, General Post Funds, etc. This does not include funds expended by the VISN or from another service or section's fund control point to purchase products that may be considered 'library' material. The library is to report only dollars expended from its fund control point, to include:

- (1) **Electronic Resources.** Dollars spent on online or electronic books, journals and databases for all areas (medical, patient education, patient or general, or administrative) of the library.
- (2) **ILLs.** Dollars spent on ILL activity.
- (3) **Books, Media, and Journals.** Dollars spent on print or hard copy items for each area of the library: medical, patient education, patient or general, and administrative.
- (4) **All Other Purchases.** Dollars spent on all other expenses not covered by the preceding areas.

b. **Page 2 - Collections.** Report the total number of titles held within each of the collections. Under Journal Titles, only count active, unique titles for which you have active subscriptions. Do not include networked titles. Include only locally-acquired titles.

(1) **Medical library, patient education library, patient or general library - book titles.** Report the total number of books held in the medical library at the end of the fiscal year. This means unique book titles.

(a) All formats, print and non-print, of a title are to be counted here. Multiple copies of titles held in different formats are only counted once. For example: A library holding a copy of Harrison's Principles of Internal Medicine in print and in CD-ROM format would only count one title.

(b) Monographs that are included in the purchase of an audiovisual program are to be considered part of the audiovisual and are not to be counted as an addition to the monograph collection. For example: the book The One Minute Manager is included in the purchase of the audiovisual by the same title. The book is part of the audiovisual "kit" and is not to be reported as an addition to the monograph collection.

(c) CD-ROMs or computer programs that are included in the purchase of a monograph are to be considered part of the monograph and are not to be reported as an addition to the electronic and/or Internet resources. For example: the book Neuropsychological Scales includes a disk of neuropsychological testing instruments. The disk is part of the monograph and is not to be reported separately.

(d) Networked titles are not to be included as part of the local collection on the Annual Statistical Report. If networked items have been counted as part of the local collection, use the distribution number supplied by Library Network Office to adjust the size of the number of titles held at the end of the reporting year. A networked title that has been weeded from the network collection and which has been retained may be considered part of the local collection. If needed;

networked titles may be included as part of the local collection when reporting this data to local (facility or VISN-level) management. However, when submitting the Annual Statistical Report to the Library Network Office in VHA Central Office, a site must remove networked titles from the total count of titles held.

(e) Count titles not volumes. For example: count the two-volume edition of Harrison's Principles of Internal Medicine as one title.

(f) Do not include second or additional copies of a previously-counted title within a collection in this count. For example: a library holding two or more copies of Harrison's Principles of Internal Medicine would count the title once no matter how many copies are on the shelf within a given collection.

(g) Previous editions of monographs which are retained as part of the collection are counted as a separate title if they are a separate catalog entry. For example: the library has the current edition of Harrison's Principles of Internal Medicine plus the previous edition. That would count as two titles. Serial monographs such as Physician's Desk Reference (PDR) that have open entry cataloging are counted as one title no matter how many editions the library has retained in the collection.

**(2) Medical library, patient education library, patient or general library – journal titles (active, unique titles).** Report the total number of journal titles held in the medical library at the end of the fiscal year.

(a) All formats, print and non-print, of a title are to be counted here. Multiple copies of titles held in different formats are only counted once. For example: a library subscribing to Journal of the American Medical Association (JAMA) in print and in an electronic format would only count one title.

(b) Count titles, not volumes or issues. For example: count JAMA as one title. Do not count how many volumes or issues of the journal are on the shelf.

(c) Do not include second or additional subscriptions of a previously counted periodical title within a collection in this count. For example: a library with two or more subscriptions to JAMA would count the title once no matter how many subscriptions have been purchased.

(d) All previous titles of a periodical currently being published and to which the library has an active subscription are counted as part of the current title. For example: a journal that has undergone three title changes and to which the library has an active subscription to the current title is counted as one title.

**(3) Medical library, patient education library, patient or general library – media titles.** Report the total number of media and/or audiovisual items held in the medical library at the end of the fiscal year.

(a) All formats are to be counted here.



(b) Networked titles are not to be included as part of the local collection on the Annual Statistical Report. If networked items have been counted as part of the local collection, use the distribution number supplied by Library Network Office to adjust the number of titles held at the end of the reporting year. A networked title that has been weeded from the network collection and which is retained may be considered part of the local collection. Only current networked titles may be included as part of the collection when reporting this data to local (facility or VISN-level) management.

(c) Do not include second or additional copies of a previously counted audiovisual title within a collection in this count. For example: A library with two or more locally purchased copies of I am Joe's Lung would count the title once no matter how many copies are on the shelf within a given collection.

c. **Page 3 - Circulation.** Report the number of materials used by library customers (staff, students, patients, etc.) either within or outside the library. One book “checked-out” and two books and one journal retrieved from a study carrel or table and re-shelved by library staff is to be counted as four circulations. Include materials transferred, circulated, or loaned between or among the divisions of a consolidated facility and materials checked-out from a ward cart. Circulation of equipment (i.e., overhead projectors, video projectors, etc.) is not included here.

(1) **Medical Library, Patient Education Library, Patient or General Library – Books.** The number of materials (including networked materials) circulated to local facility patrons, i.e., staff, residents, students, patients. This includes: photocopies made by library staff for local facility patrons; materials transferred, loaned, and/or circulated between divisions of a consolidated facility; photocopies made by patrons from library materials; or materials circulated (checked-out) from a ward cart.

(2) **Medical Library, Patient Education Library, Patient or General Library – Journals.** The number of materials (including networked materials) circulated to local facility patrons, i.e., staff, residents, students, patients. This includes: photocopies made by library staff for local facility patrons; materials transferred, loaned, and/or circulated between divisions of a consolidated facility; photocopies made by patrons from library materials; or materials circulated (checked-out) from a ward cart.

(3) **Medical Library, Patient Education Library, Patient or General Library – Media.** Number of materials (including networked materials) circulated to local facility patrons, i.e., staff, residents, students, patients. This includes: materials shown over closed-caption television (CCTV), if data is available; materials transferred, loaned, or circulated between divisions of a consolidated facility; and/or materials circulated (checked-out) from a ward cart.

d. **Page 4 - Interlibrary Loans – Items Loaned.** Report the number of items loaned to other to other libraries

(1) **Medical Library, Patient Education Library, Patient/General Library – Books, Journals and/or Articles, Media (VA).** Report the number of materials (including networked

materials) loaned to all other VA locations using ILL. This does not include items transferred, loaned, and/or circulated between divisions of a consolidated facility.

(2) **Medical Library, Patient Education Library, Patient or General Library – Books, Journals, and/or Articles, Media (Non-VA).** Report the number of materials (including networked materials) loaned to all non-VA locations using ILL.

e. **Page 5 - Librarian Mediated Searches.** Report the total number of searches performed by library staff separated by the categories medical library (i.e., a clinician asks for a search on treatment for gout), patient education library (i.e., a patient asks for information on a drug the patient is taking), and patient or general library (i.e., a staff person or patient asks for information on Veterans education benefits).

f. **Page 5 – Comments.** If needed, provide any explanatory notes regarding numbers reported.

## PROCUREMENT OF CATALOGING RECORDS

**1. PROGRAM DESCRIPTION:** Cataloging records are provided for the Department of Veterans Affairs (VA) Library Network (VALNET) through a centralized contract funded and monitored by Veterans Health Administration (VHA), Office of Informatics and Analytics (OIA), Library Network Office (LNO).

**2. PROCEDURES:** Centrally-produced cataloging records, including catalog cards, must be provided for all titles, except those specified in the document Policies and Procedures Related to Centralized Cataloging (see:

[http://vaww.vhaco.va.gov/VALNET/Documents/Policies\\_and\\_Standards/Centralized\\_Cataloging.doc](http://vaww.vhaco.va.gov/VALNET/Documents/Policies_and_Standards/Centralized_Cataloging.doc)). *NOTE: Libraries may obtain cataloging records for all other materials through commercial sources using local funds. This is an internal Web site and is not available to the public.*

a. **Classification.** Materials are classified according to National Library of Medicine (NLM), Library of Congress (LC), or Dewey Decimal classification schemes, to be specified on VA Form 10-7018, Electronic Catalog Service Request.

(1) NLM classification is the authority for the majority of medical titles; NLM Medical Subject Headings (MESH) must be followed.

(2) LC classification and subject headings are used to supplement NLM classification for most non-medical titles included in medical library collections.

(3) Dewey Decimal classification may be used for other titles, especially Patient Information Center or library recreational materials. Classification numbers ordinarily do not run beyond one decimal point. The LC List of Subject Headings must be followed.

b. **Special Identification Codes.** Reference indicators, delivery level abbreviations, and centrally directed subjects may be included as either part of the call number or in the body of the descriptive cataloging.

c. **Descriptive Cataloging.** Descriptive cataloging is provided primarily from LC records and authority files.

d. **Delivery of Cataloging Records and Card Sets.** According to each library's requirement, either a full set of cards (author, title, appropriate subject and added entry, shelf-list, and one additional main entry card) or a shelf-list card only will be furnished for all titles. When no catalog cards are required by a library, an electronic cataloging record is available for download from the VALNET union list database, the VA Library Public Access Catalog (VALPAC).

**3. PROCEDURES:** The Catalog Service Request (VA Form 10-7018) must be completed for all cataloging requests, unless otherwise authorized, and forwarded directly to the contractor. Requests for cataloging must not be submitted prior to actual receipt of the materials for which

cataloging is being requested. LNO cataloging policy serves as the final authority for cataloging decisions.

a. **Local Responsibility.** Local Libraries are responsible for submitting accurate and complete cataloging requests, following up on delinquent receipts, and reporting cataloging errors.

b. **VHA Central Office Responsibility.** LNO seeks adequate centralized funding to:

- (1) Support VALNET cataloging needs;
- (2) Provide mechanisms for producing cataloging records;
- (3) Monitor the program using VALNET input;
- (4) Provide status, error, and statistical reports to VALNET; and
- (5) Serve as liaison with the Ohio College Library Consortium and other contractors involved in providing cataloging products and services.

## NETWORK DELIVERY PROGRAM

**1. DEFINITION:** The Network Delivery Program provides access to audio visual (AV) and print materials for Veterans Health Administration (VHA) employees nationwide through the Department of Veterans Affairs (VA) Library Network (VALNET). Materials included in the program are commercially purchased or agency produced. AV and print materials acquired for this program must support VHA strategic plans and policies, training, or information programs directed by the Under Secretary for Health. The Library Network Office (LNO) directs the placement or removal of specific materials based upon accuracy and content of the materials.

### 2. ACQUISITION AND DELIVERY

**a.** Materials are considered for inclusion in the Network Delivery Program if they are:

- (1) Produced by the agency;
- (2) Represent a major agency program thrust; or
- (3) Represent materials that would be difficult to acquire at the local level.

**b.** Donated materials are accepted for distribution and inclusion in the Network Delivery Program when the content of such material is within the scope of the agency's mission and goals and is approved by the appropriate Service in VHA Central Office. Personal recreational reading materials are not included as part of the Network Delivery Program and are referred to Voluntary Service for appropriate action.

**c.** Based upon projected use and fiscal constraints, networked AV and print materials are acquired and delivered at the following delivery levels (delivery levels are periodically adjusted to accommodate changes in patterns of use):

**(1) Veterans Integrated Service Network (VISN).** One copy of the material to each VALNET network delivery library and one to the VHA Central Office Library.

**(2) All Health Care Facilities.** One copy of the material to each health care facility (HCF) library and one to the VHA Central Office Library, unless the facility Director notifies the LNO that due to space issues, the facility opts out of the program.

**3. ACCESS.** Availability of networked materials may be determined through the Networked AV/Print Database at: (<http://vaww.vhaco.va.gov/AVLibrary/>), the medical facility library card catalogs or online public access catalogs, and the VA Library Online Public Access Catalog (VALPAC), where the union list of materials is held in VALNET.

**4. OWNERSHIP.** All networked materials are the property of the LNO, which is responsible for their maintenance and replacement. Queries regarding lost or defective materials need to be directed to the Library Network Office for replacement.

## 5. LENDING AND BORROWING POLICY AND PROCEDURES:

a. **Scope.** The lending and borrowing policy and procedures apply to all centrally-provided AVs and print materials received and loaned by Veteran Integrated Service Network (VISN) delivery sites. The designated VISN delivery site library for a field facility corresponds to the VISN catchment area.

b. **Responsibilities of VISN Delivery Sites.** The VISN delivery site must ensure fair access to the collection by all libraries in the catchment area served.

(1) For scheduling and use, access to networked materials is based on a first-come, first-served basis. Reserves are accepted up to a maximum of 2 months in advance of need. Delivery sites must use the following list of priorities to resolve scheduling or waiting list conflicts:

- (a) VALNET libraries within the designated delivery area;
- (b) Other VA offices within the designated delivery area, e.g., cemeteries, regional offices;
- (c) VALNET libraries outside the designated delivery area, referred by another delivery site;
- (d) Department of Defense libraries or libraries of affiliated institutions;
- (e) Libraries which belong to consortia with VALNET; and
- (f) Community libraries.

(2) Networked titles circulate for 3 weeks, including the time required for both transit and use. The delivery site must notify the requesting library of the unavailability of a requested title within 2 days of receipt of the loan request. Unless a specific request for confirmation is made, no notification is made if the title is available for the requested dates.

(3) If borrowers habitually neglects to return the complete program, or to return the program on or before its due date, the library manager at the delivery site advises the library manager, at the borrowing site (or responsible official at sites with no library) of the recurring problem and documents specific incidents on VA Form 119, Report of Contact (<http://vaww.va.gov/vaforms/va/pdf/VA119.pdf>) and transmits a copy to the Director of LNO. If the problem continues, the library manager at the delivery site advises the Director of LNO, in writing, that the borrowing site has not been able to resolve the problem.

(4) Delivery sites are responsible for requesting replacement of lost or damaged networked titles from LNO within 1 week of confirmation of loss or damage.

c. **Responsibilities of Borrowing VALNET Site.** The borrowing VALNET site must ensure that all networked titles are returned by the due date to the delivery site or sent to another borrowing site if so instructed by the delivery site. If local use for a single networked title (other

than All/HCF titles) exceeds one use per quarter, the borrowing site should consider acquiring a local copy.

(1) Requests for an extension of the loan period need to be made as far in advance of the due date as possible. An extension is granted only if there is no waiting list for the title or if it does not conflict with a scheduled showing at another location.

(2) The library manager at the borrowing site advises the library manager at the delivery site of recurring problems, documents specific incidents using VA Form 119 (<http://vawww.va.gov/vaforms/va/pdf/VA119.pdf>) and transmits a copy to LNO, if the delivery site habitually neglects to:

(a) Notify the borrowing site of the unavailability of a title within 2 days of receiving the request;

(b) Honor advanced bookings; or

(c) Deliver materials on or before confirmed need date.

(3) If the problem continues to occur, the library manager at the borrowing site must advise LNO in writing, that the delivery site has not been able to resolve the problem.

d. **Responsibilities of the Director of LNO.** The Director of LNO is responsible for:

(1) Receiving and responding to written complaints of negligence against a borrowing site:

(a) The supervisor at the borrowing site must be advised of the situation;

(b) The service to that facility may be suspended for 1 month; and

(c) Continued violation may result in termination of Network Delivery Program borrowing privileges for an extended period.

(2) Receiving and responding to written complaints of negligence against a delivery site:

(a) The library manager at the delivery site must be advised to resolve the problem;

(b) The library manager's supervisor may be notified; and

(c) Continued violation may result in reassignment of the Network Delivery Program materials to another facility.

e. **Technical Services Librarian.** The Technical Services Librarian is responsible for:

(1) Developing and maintaining the networked collection;

(2) Ensuring access to the collection by providing copies of materials and replacements, on request, to designated delivery sites; and

(3) Ensuring currency and usefulness of the collection by conducting an annual review.

f. **VALNET Responsibilities.** The VALNET delivery sites are responsible for notifying LNO of items with more than a 1-month waiting period.