

# Departmental Libraries: Curse or Blessing?\*

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## ABSTRACT

Communication patterns and working relationships between large health sciences libraries and departmental libraries are examined and discussed. The results of a telephone survey to obtain information on the experiences of twenty-one large New York metropolitan area health sciences libraries with their departmental libraries are reported. Discussion includes the experiences of Columbia University's Augustus Long Health Sciences Library with departmental libraries within the Columbia/Presbyterian Medical Center (C/PMC). A mediated survey of C/PMC departmental libraries and over thirty years of cooperation with some of these departments are reported. The potential detrimental effects of departmental libraries are acknowledged, but the substantial positive benefits of cooperation and ways to achieve this cooperation are emphasized.

"DEPARTMENTAL libraries are a form of empire building. They ultimately and inevitably undermine the total medical library service available in the institution" [1]. This statement appears in the third edition of the *Handbook of Medical Library Practice*. Is this an accurate reflection of the majority opinion in health sciences librarianship?

The experiences of the Columbia University Health Sciences Library (HSL) and the philosophy of the authors do not support such a statement. Departmental libraries serve unique and valuable purposes which support the objectives of the main institutional library. But in order to derive the maximum benefit from them, time and effort must be spent on communication, cooperation, and stimulation of these smaller library units.

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For the purposes of this discussion a departmental library is defined as one which acquires and maintains a collection of monographs and journals for the use of a small group within the medical center such as a department, a section, a school, or an institute. These libraries have evolved from the book collections of professors, gifts, grant funds, departmental service fees, and a number of other sources. Collections which start innocently enough with a few basic reference tools or texts for the convenience of members of a specific department often evolve into unwieldy piles of books and unbound journals which require the constant attention of the already heavily burdened departmental secretary. Sometimes when a department does not have the money or concern to hire a librarian to maintain and control these materials, the secretary may be dispatched to the main library to "find out how to catalog books." The departmental view generally is that the card catalog is simple to construct. This is not a tale of the distant past, as this scenario is repeated over and over again in every moderate to large medical center in this country.

For the purposes of this paper, the literature was searched to examine what methods have been used in the past to work with the "secretary cast as a librarian." What have librarians of the larger central libraries done to guide or seek cooperation with departmental libraries? Can departmental libraries function as sources of materials not available in the main collection? The review of the literature found no substantive discussion of these issues except for a recent article describing library cooperation within one medical center [2]. Therefore, the experiences and attitudes of librarians in other big institutions were of interest. This paper reports on and discusses the relationships between large health science libraries

and departmental libraries from (1) data collected in a survey of twenty-one librarians in medical centers in the New York metropolitan area and (2) documented experiences at the Columbia University Health Sciences Library.

#### SURVEY OF LARGE HEALTH SCIENCE LIBRARIES

In December 1976 a telephone survey was conducted of twenty-one medical school and hospital libraries in the New York metropolitan area. A data-recording form was constructed to assure comparable responses. A copy of the data-recording form is given in Appendix 1. The interview required fifteen to twenty minutes of the head librarian's time. A letter was sent out in advance advising the librarians of the impending phone call and the general topic. It was also requested that no advance data collection be done. Of the twenty-one libraries included in the survey, nine were medical school libraries and twelve were hospital libraries serving institutions of 800 or more beds.

There was a wide variety of answers to each question except to those questions which required only a yes or no response. Specific statistical questions were avoided.

Only one of the twenty-one libraries had no departmental libraries in its affiliated medical institution. Six respondents could not estimate how many there were. Seven could identify a definite number of departmental libraries, and the remainder gave approximations.

Most of the head librarians interviewed said that they became aware of the staffing in departmental libraries only after library assistance had been sought by these smaller units. All but four of the interviewed librarians could identify full- or part-time, professional or nonprofessional staffing of some departmental libraries. One hospital and one medical school library had training programs for departmental library staff.

Two hospital librarians identified formal operational relationships with departmental libraries, and five other hospital librarians identified informal contacts with departmental units. Only four of the seven medical school libraries had any reported contact with departmental libraries or their staff.

In those institutions with routine relationships with departmental collections, various special services were provided. In three institutions the central library handled acquisitions, processing, and binding for their departmental libraries. None

of the libraries charged for these services. Consulting was the most frequently cited special service provided by the central library.

All but four of the twenty surveyed libraries received gifts on a regular basis from some of the departmental libraries. Eight librarians did note that at some time they had received substantial parts of departmental collections from libraries whose operations had been discontinued.

Apparently there are several primary factors that affected the relationships between the departmental and the main libraries. The most frequently cited element was the department's proximity to the main library. The closer a departmental library was to the main library, the more likely it was that some working relationship would exist between the two. Other factors identified included historical precedents, lack of trained departmental personnel, appropriation of funds, the chairman's awareness of his departmental library's needs, personalities, and, possibly most important of all, the head librarian's attitude toward departmental libraries.

The degree of benefit derived from a close relationship between departmental and primary libraries is hard to assess. However, eight institutions responded that, of the two types, the departmental libraries had received the greatest benefits; two respondents believed the main library had benefited most; and two librarians believed that both parties had enjoyed certain benefits.

Few institutions appeared to want to change their relationship with their departmental libraries. A passive attitude toward departmental libraries characterized the majority of the responses. Only three librarians strongly supported the concept that the departmental libraries are beneficial when they can provide basic materials or reference works already overused in the main library or when they can provide specialized collections beyond the scope of the main library.

Several librarians expressed the wish to integrate all of the departmental collections into the main library. A few readily admitted that they would not be able to manage the resulting increased collection. Nor is it likely that they could handle the resulting increase in demand for resources and services that would be transferred to the main library.

Many hospital libraries see departmental libraries as rivals, especially in those situations where money for materials for the departmental libraries comes from the main library's budget.

Obviously, creating departmental libraries at the expense of the central library is not acceptable. Several interviewees did admit that departmental libraries, if included in a centralized acquisitions or cataloging program, could provide a distinct service to the entire institution. But few institutions have made the attempt to establish such a liaison.

#### THE COLUMBIA HEALTH SCIENCES LIBRARY EXPERIENCE

In an earlier (1975) study for which a comprehensive survey of information sources was made, thirty-one active departmental libraries were identified in the Columbia/Presbyterian Medical Center. All thirty-one libraries are financially independent of the HSL. Even before the survey, the HSL staff was familiar with the larger, well-staffed libraries. Active working relationships between the main library and some of these departmental units cover a period of more than thirty years. This survey provided an opportunity to examine the character of the smaller, unmanned libraries. The survey data were collected by specially trained personnel who gathered the information in face-to-face interviews with the persons who were administratively responsible for each of the thirty-one libraries. The interviews were arranged so that the interviewers could actually see the libraries and speak with the personnel in charge of the daily operation of each library. A copy of the data collection form is given in Appendix 2.

The following observation was noted in the summary of the survey: "The most striking finding is the variety of responses for virtually every question. For example, book expenditures ranged from zero to \$8,500; one library had no bound volumes while another reported 14,246; and some collections are old and well-established while others were organized recently" [3].

Some of the characteristics of these libraries which influenced their growth and development were revealed in the survey results. At the time of the survey, seven of the departmental libraries were housed in the same building as the main library. All but two of the thirty-one libraries could be reached from the HSL by hallways, elevators, or tunnels. Those libraries the greatest distance either vertically or horizontally from the main library tended to be more substantial. The internal organization and control of the libraries was as varied as the departments they served. The

following is a profile of some of the statistical data obtained.

The total identifiable annual expenditures in thirty of the libraries was \$190,165, only 40% of which went for resources and the remainder for salaries. Two-thirds of the thirty-one libraries have collection policies, weed their collections, and bind all or some of their journals. The staffing of the libraries ranged from the five libraries which have full-time professionals to the fourteen which have no staff.

Geographic location, personnel, fiscal resources, and historical precedents are some obvious factors which contribute to the current communication patterns between the Columbia HSL and the departmental libraries on campus. For instance, within the past year, personnel changes in two of the larger departmental libraries have provided new avenues of contact with the Health Sciences Library. Former staff in these libraries were apparently intimidated by the larger HSL and resisted cooperative contact or activities of any description. The new personnel in these libraries have now joined three other full-time departmental librarians at a quarterly meeting with members of the Health Sciences Library staff.

These quarterly meetings are intended to keep the departmental librarians informed of activities and services within the main library as well as to ascertain the activities and concerns of the departmental libraries. A major focus of the meetings is the cooperative acquisition of material—especially between the HSL and the well-funded, highly specialized libraries. In a time when the HSL must cancel a subscription before a new one can be placed, it is vital to tap all available resources, especially those resources within the medical center. Fortunately, at least two of these departmental libraries have worldwide reputations and are in a position to, and in fact do, enhance the resource base of the medical center.

Ideas and specific operational problems are also discussed at these meetings. Some of the participants might not otherwise have convenient opportunities to raise questions of policy and receive immediate answers or to participate in a discussion of the issues. All participants concur that they benefit from these contacts, which not only provide an exchange of information but also tend to develop a sense of institutional cohesiveness and loyalty that transcends departmental allegiances. The participants begin to understand that each library within the medical center plays a vital

role in the transmission of required information in this particular environment. It is clear that the benefits flow both ways. Personnel of the Columbia HSL learn just as much about the departmental participants as the latter do about the HSL.

#### ATTITUDES TOWARD DEPARTMENTAL LIBRARIES

It is hard to say whether the admonition in the *Handbook* has poisoned the atmosphere surrounding departmental libraries or whether general attitudes toward these collections resulted in the *Handbook* passage.

From the survey of twenty-one other libraries, it would seem that a positive attitude toward departmental libraries is not widespread. Generally, the librarians surveyed were not familiar with the departmental libraries in their own institutions in terms of number and collections, which may suggest a lack of concern for these resources. It seems logical, whichever position one takes, to know your information environment, and no matter what one's attitude toward departmental libraries might be, they are a part of the information environment on every campus. At Columbia the survey of departmental libraries, in addition to making the staff better informed on local resources, also served a public relations function by showing interest in the smaller collections. This interest was welcomed by most departments and distrusted by a few.

As was expected, many of the Columbia departmental libraries carry the traditional journal titles and texts as well as specialty titles. Though they duplicate material in the Health Sciences Library collection, these materials still appeared heavily used. At the same time, these duplicate materials were also being heavily used in the Health Sciences Library. If these departmental copies did not exist, the pressure on the HSL resources might be overwhelming. This is the site, the small departmental or section collections of convenience, that cuts down the total potential demand for information on this and most other campuses. If these collections were suddenly wiped out, the HSL could not meet the increased demand, especially for the very common titles. The ultimate result of eliminating these resources would be the development of personal or office collections to deal with the frustrations resulting from the HSL's inability to meet these demands. Such a set of hypothetical circumstances is

likely to lead to another set of departmental libraries. The time involved might well be long but the result would be the same. The central library, after struggling for several years to respond more effectively to the information demands brought on by the disappearance of the departmental libraries, would once again be faced with the opportunity to cooperate and cultivate a new crop of departmental collections.

#### BENEFITS

A good relationship with departmental libraries as well as with departmental chairmen has brought both unique collections and new staff to the Columbia Health Sciences Library. Departmental budget constraints, coupled with a long history of cooperative efforts, recently resulted in the transfer of two collections to the HSL. One case involved a major departmental library which served a special segment of the graduate school within the medical center. The second case involved an affiliated hospital/research institute library. Growing financial burdens as well as increasing space problems precipitated the merger of these two smaller collections with the Health Sciences Library. Thus, the Health Sciences Library obtained two very specialized collections and the services of two professional staff members. The librarians are still supported by, and have primary responsibility to, their respective departments. Yet they both function within the guidelines of HSL and give service to all its users. They often function as library ombudsmen in behalf of their primary constituency. The HSL is committed to continuing the development of these specialized collections within the HSL's own budgetary constraints.

The communication between the HSL staff and staff of the departmental libraries is of benefit to both. First, the staff of the departmental libraries have the opportunity to learn and to improve their service to the members of their department. They also become even more aware of specialized services that their clients may require. The HSL benefits because any increase in the quality of departmental library service decreases the potential demand upon the HSL's limited resources—both collection and personnel.

This major benefit for the HSL cannot be taken too lightly. Regardless of the size of a library or the size of the medical center which it serves, the likelihood that it can serve all potential library users is small. Though the Columbia HSL has

seven reference librarians, the HSL would have to offer a reduced level of service if a portion of the potential 6,000 library users did not have their information needs satisfied to some extent by services of the departmental libraries. It takes substantial amounts of time to help improve the level of service rendered in these departmental libraries, but the rewards are a higher level of library service to the entire medical center.

Once a sense of cooperation exists between a departmental library and the central library of a medical center, every unit benefits. This heightened sense of cooperation has enabled the HSL to occasionally borrow material from departmental libraries in emergency cases, even to the extent of semester-long borrowing of course reserve materials. It is easier for the HSL to manage these reserves than for the less well-staffed departmental libraries. Consequently, the semester-long reserve loan produces benefits for all concerned. These measures also help ease certain budgetary constraints. A continuing awareness of the collection contents of the larger specialized department libraries has released the HSL from a financially impossible commitment that it once held to develop a comprehensive collection of health science materials.

#### OTHER CONSIDERATIONS

As suggested earlier, several of the interviewed librarians of metropolitan New York medical schools and hospitals expressed a desire to integrate the smaller departmental collections into their own. But these materials are already heavily used in the individual departments. Why not leave them there? There is a certain validity to the "too busy to go to the library" syndrome well known among health scientists. It should be part of the librarian's attitude toward user services to meet the needs of the clientele, not to alter clientele needs for the library's convenience. The Columbia Health Sciences Library has applied this principle in one specific case with the creation of a photocopy/delivery service which brings one of the library's services (photocopying) to the departmental site. There is a fee, but the members of the medical center have been receptive to this extra service. This service is especially useful to those members of the campus community who have limited time for library activities. They can now concentrate on the search for information and forget about the routines of copying, such as

"Have I enough change?" "What is my account number?"

#### CONCLUSION

If the quotation from the *Handbook* is our professional position, have we bred an attitude that does more harm than good? It may be fashionable to fight against departmental libraries, but it probably does no good since they are likely to continue to exist in one form or another. Of more significance, adopting a discouraging, nonhelpful attitude toward these resources probably reduces the efficient information transfer process within the institution. A massive program to organize the departmental libraries in your institution is not an instant solution. There is already some sort of organization in each one. But consider a questionnaire or some other means of identifying what the local resources are in your medical center. Consider training programs for the staff of the departmental libraries. Such a program could save you time in the future and ultimately provide more service to the entire medical center, though the main library may not be the provider of more than 60% of that service.

The development of a collection in a major library is only half the battle. The more difficult half is getting the information to the user. For this task, allies in the departmental libraries become assets. They function as "shock troops" providing the first line of required information. Departmental libraries are not going to disappear even with budget cuts. Therefore, we must capitalize upon their existence and enhance their utility. We need to reevaluate our stand on these resources, for they are likely to outlast even the longest-lived librarian.

#### REFERENCES

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APPENDIX 1

DEPARTMENTAL LIBRARY QUESTIONNAIRE

Questionnaire administered by telephone in 15- to 20-minute interviews  
to librarians at 8 medical school and 12 large hospital libraries.  
(Anonymous replies.)

1. Are there departmental libraries in the medical center and/or hospital with which you are affiliated? Yes\_\_\_\_; No\_\_\_\_; Unknown\_\_\_\_.  
If yes, how many? Number\_\_\_\_; 1-9\_\_\_\_; 10-19\_\_\_\_; 20+ \_\_\_\_; Unknown\_\_\_\_.
2. Do you have information on the following aspects of any or all of these libraries?
  - a. Location of the libraries: Yes\_\_\_\_; No\_\_\_\_.
  - b. Do any of the libraries have full-time professional or nonprofessional staff or part-time professional or non-professional staff? Yes\_\_\_\_; No\_\_\_\_; Unknown\_\_\_\_.
  - c. The size of the holdings: Yes\_\_\_\_; No\_\_\_\_.
  - d. Hours the libraries are open: Yes\_\_\_\_; No\_\_\_\_.
  - e. Is the access to the libraries restricted? Yes\_\_\_\_; No\_\_\_\_; Unknown\_\_\_\_.
  - f. Do materials circulate? Yes\_\_\_\_; No\_\_\_\_; Only to department staff\_\_\_\_; Unknown\_\_\_\_.
  - g. Do you know the size of the budget? Yes\_\_\_\_; No\_\_\_\_.
3. Are there any formal communication channels between staff of your library and staff of departmental libraries, such as regularly or irregularly scheduled meetings? Yes\_\_\_\_; No\_\_\_\_. If yes, please explain.
4. Are there any informal communication channels between staff of your library and staff of departmental libraries such as telephone calls or meeting in the hallway? (Any exchange of information) Yes\_\_\_\_; No\_\_\_\_. If yes, please explain.
5. Do you perform on a continuing basis any of the following processing services for departmental libraries? Acquisitions\_\_\_\_; Cataloging\_\_\_\_; Processing\_\_\_\_; Binding\_\_\_\_. Do you charge? Yes\_\_\_\_; No\_\_\_\_.
6. Have you received any requests for special services or information from departmental libraries (such as photocopying, consulting, checking in journals, or any of the aforementioned processing services)? Yes\_\_\_\_; No\_\_\_\_. If so, what kinds? Have you filled them?
7. Do you perform any services on site in departmental libraries? Yes\_\_\_\_; No\_\_\_\_. If yes, what are they?
8. Do you have any programs for the training of staff in departmental libraries? Yes\_\_\_\_; No\_\_\_\_.
9. Do you use departmental library sites for any of the following?
  - a. Delivering photocopy requests, computer search requests, etc. to departmental members: Yes\_\_\_\_; No\_\_\_\_.
  - b. Funneling requests from departmental members to your library: Yes\_\_\_\_; No\_\_\_\_.
  - c. Announcing programs and services of your library: Yes\_\_\_\_; No\_\_\_\_.
10. Do you borrow items from any departmental libraries? Yes\_\_\_\_; No\_\_\_\_.
11. Do you give gifts to any of these libraries? Yes\_\_\_\_; No\_\_\_\_.
12. Do you receive gifts from these libraries? Yes\_\_\_\_; No\_\_\_\_.  
If yes, what kind of materials? Books \_\_\_\_; Journals\_\_\_\_; Other\_\_\_\_.
13. When a departmental library has been discontinued, have you received any benefits from the library such as the whole collection or departmental library staff? Yes\_\_\_\_; No\_\_\_\_. If yes, explain.
14. Do you feel that the work of the staff of the departmental libraries serves to reduce some of the work load for your library staff? Yes\_\_\_\_; No\_\_\_\_.
15. What factors, if any, do you believe affect your relationship with departmental libraries, such as geographic location/proximity, type and size of library, personnel, financial resources, historical precedents?
16. Would you like to change your relationships with departmental libraries? Yes\_\_\_\_; No\_\_\_\_. If yes, in what ways?
17. In the case of your library, have you or departmental libraries benefited most from the relationship?
18. Do you feel that departmental libraries are on the increase?\_\_\_\_; decrease\_\_\_\_; status quo\_\_\_\_.
19. Do you have any other experiences or comments you can share with us?

DEPARTMENTAL LIBRARIES: CURSE OR BLESSING?

APPENDIX 2

MEDIATED QUESTIONNAIRE
DEPARTMENTAL LIBRARIES—C/PMC
LIBRARY DEVELOPMENT COMMITTEE

Department \_\_\_\_\_ Date \_\_\_\_\_
Name of library (if distinctive) \_\_\_\_\_
Location \_\_\_\_\_ Phone \_\_\_\_\_
Faculty member responsible for library \_\_\_\_\_ Phone \_\_\_\_\_
Library supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Source of support
Endowment \$ \_\_\_\_\_ per year
Gifts \$ \_\_\_\_\_ per year
Gifts of materials only
Books \_\_\_\_\_ No./year
Journals \_\_\_\_\_ No./year
Departmental funds \$ \_\_\_\_\_ per year
Grants \$ \_\_\_\_\_ per year
Other—please specify \_\_\_\_\_
Unwilling to respond

Expenditures per year
Books \$ \_\_\_\_\_ Journals \$ \_\_\_\_\_ Professionals \_\_\_\_\_ FTE
Vols./year \_\_\_\_\_ Subscriptions \_\_\_\_\_ Supporting staff \_\_\_\_\_ FTE
Staff \$ \_\_\_\_\_ Adequacy of support \_\_\_\_\_
Unwilling to respond

Collection: Size \_\_\_\_\_ Vols. Monographs (books) \_\_\_\_\_ Vols.
Selection criteria \_\_\_\_\_
Retention policy \_\_\_\_\_ Final disposition \_\_\_\_\_
Special items or comments \_\_\_\_\_
Journals \_\_\_\_\_ Bound volumes
Subscriptions—paid
Subscriptions—gift
Subscriptions—exchange
Selection criteria \_\_\_\_\_ Retention policy \_\_\_\_\_
Final disposition \_\_\_\_\_ Binding policy \_\_\_\_\_
Special items or comments \_\_\_\_\_

Nonprint materials \_\_\_\_\_ Items
Type of material \_\_\_\_\_ Selection criteria \_\_\_\_\_
Retention policy \_\_\_\_\_ Final disposition \_\_\_\_\_
Special items \_\_\_\_\_ Special equipment (list) \_\_\_\_\_
Comments \_\_\_\_\_

Documents/Reprints \_\_\_\_\_ Items
Selection criteria \_\_\_\_\_ Retention policy \_\_\_\_\_
Final disposition \_\_\_\_\_ Special items or comments \_\_\_\_\_

Loss experience
Monographs—no. lost per year \_\_\_\_\_ No. replaced \_\_\_\_\_
Journals—no. issues lost per year \_\_\_\_\_ No. replaced \_\_\_\_\_
Journals—no. bound volumes lost per year \_\_\_\_\_ No. replaced \_\_\_\_\_
Comments \_\_\_\_\_
Unwilling to respond

Service Provided
Reprography \_\_\_\_\_ Charged to user \_\_\_\_\_ Cost/exposure \_\_\_\_\_
Reference services (identify) \_\_\_\_\_ Other services (identify) \_\_\_\_\_
Unwilling to respond

Use of library
Can everyone use the library? \_\_\_\_\_ If limited, to whom? \_\_\_\_\_
Borrowing allowed? \_\_\_\_\_ All materials? \_\_\_\_\_ If limited, to what? \_\_\_\_\_
All authorized users allowed to borrow? \_\_\_\_\_
If limited, to whom? \_\_\_\_\_
What is the loan period for: Unbound journal? \_\_\_\_\_
Bound journal? \_\_\_\_\_ Books? \_\_\_\_\_
How many different individuals use the library? \_\_\_\_\_
How often is the library used per week? \_\_\_\_\_

(continued)

APPENDIX 2 (continued)

Can the library be scheduled for classes? \_\_\_\_\_ Meetings? \_\_\_\_\_  
Conferences? \_\_\_\_\_ How many times per week is the library so scheduled? \_\_\_\_\_ What are the hours of the library? \_\_\_\_\_

Supervised? \_\_\_\_\_ All hours? \_\_\_\_\_ Type of supervision \_\_\_\_\_

Are there keys for library use after hours? \_\_\_\_\_

Departmental keys? \_\_\_\_\_ Personal keys? \_\_\_\_\_ Characterize personal key holders \_\_\_\_\_

Deposit required? \_\_\_\_\_ Rental? \_\_\_\_\_

*Staff of library*

Unwilling to respond

Full-time

Professional librarians? \_\_\_\_\_ How many? \_\_\_\_\_

Supporting staff? \_\_\_\_\_ How many? \_\_\_\_\_

Part-time

Professional librarians? \_\_\_\_\_ How many? \_\_\_\_\_

Supporting staff? \_\_\_\_\_ How many? \_\_\_\_\_

*Relationship with Augustus Long Health Sciences Library*

Any relationship anticipated? \_\_\_\_\_

What effect will the move have? \_\_\_\_\_

Can the Health Sciences Library serve this library in any way? \_\_\_\_\_

Comments \_\_\_\_\_