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Formulating a Pharmacy Collection without a Prescription

Kristin Laughtin-Dunker
Chapman University, laughtin@chapman.edu

Linda Galloway
Chapman University, lgallowa@chapman.edu

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Abstract:
Librarians without a background in the health sciences were tasked with building a collection to support a new pharmacy school at a traditionally liberal arts institution. With little subject expertise the team assessed current holdings, conducted a review of recommended resources, and collaborated with faculty to prioritize acquisitions to support the developing program as funds became available. The hire of a health sciences librarian provided new opportunities for assessment as well as continued collecting. Altogether, this process allowed for the creation of recommended best practices that can be adopted by any librarian procuring resources to support new health science programs.

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Introduction

Chapman University’s 2013-2018 strategic plan called for the institution to move in a new direction: instead of remaining a traditionally liberal arts institution, the university would establish a host of graduate health science programs at a new facility fifteen miles south of the original campus. The first was a new pharmacy school, scheduled to admit its first class in the fall of 2015. Its library resources, like those of every other program except for law, would be handled by the main Leatherby Libraries on the original campus. With few relevant resources and no librarians with a health science background, building a collection to support an entire pharmacy school was a tall order. However, despite their lack of subject expertise, a team of librarians was able to develop a robust pharmacy collection through consultation of professional resources, long-range planning, and close collaboration with faculty and resource providers. This paper will describe the process of building a collection before a program admits its first student, and how the collection development team facilitated a faculty invested in the library’s resources.

Literature Review

Though many have written about selection and maintenance of existing health science library collections, few have focused on pharmacy or the challenges to non-health science librarians tasked with building a collection from scratch. The most comprehensive are Shearer and Nagy, who describe the efforts of the then-new Florida State University College of Medicine Medical Library to build a medical collection by analyzing journal subscription lists of peer academic medical libraries to create a selection guide, then collaborating with faculty and administrators to
narrow that down to a core list of journal titles. This iterative process began several months before the start of classes at the College of Medicine and continued throughout the first few years of instruction. In contrast to Chapman University, they eliminated titles related to pharmacy and other specialized areas of the health sciences from their consideration, focusing on more traditional medical topics in line with the mission and curriculum of their College of Medicine. Shearer, Klatt, and Nagy later evaluated the collection they had created, relying on usage data, appearance on core title lists, relevancy to their user base, and cost-effectiveness. Shedlock and Walton describe the use of Doody’s Core Titles in the Health Sciences as a selection guide for collecting core titles in various health science disciplines, and notes that titles thereon are selected by content specialists and health science librarians who are experts in each field. McKnight compares four health science selection guides, including Doody’s, from the perspective of a hospital librarian with less funding than a typical academic library. Simpson, Coghill, and Greenstein examine the collection of electronic resources at health science libraries, and

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1 Barbara S. Shearer and Suzanne P. Nagy, “Developing an Academic Medical Library Core Journal Collection in the (Almost) Post-Print Era: The Florida State University College of Medicine Medical Library Experience,” *Journal of the Medical Library Association: JMLA* 91, no. 3 (July 2003).


and emphasize the importance of an electronic resources librarian without giving specific advice for selecting materials.\(^5\)

Most other research on health science collection development assumes an existing collection. Hendrix and Hasman examine collection development and evaluation policies as they relate to test preparation materials for the United States Medical Licensing Examination and the National Board Dental Examination. They found that most medical academic libraries rely on faculty and student feedback or online trials, finances, and official collection development policies to shape their collecting activity.\(^6\) Blecic, Hollander, and Lanier surveyed academic health science libraries in the late 1990s and found a decline in the use of approval plans and blanket orders as resource collection shifted from print to electronic; they stressed the need for cooperative collection development in response, but did not provide ideas or criteria for selecting new materials.\(^7\) Papadakos et al. compared the actual collection practices of consumer health libraries as compared to their official collection development policies. Although they commented on the lived experiences of health science librarians, they did not offer many suggestions for librarians looking to build a health science collection.\(^8\)


A large proportion of the literature focuses on collection maintenance and evaluation of existing materials rather than selection of new content. Thompson, Toedter, and D’Agostino discuss medical collection evaluation and development based on patron needs at a teaching hospital, in consultation with “liaison” users such as residents, residency program directors, the chief medical officer, and the assistant chief nursing officer. They considered factors such as usage, interlibrary loan requests, and inclusion of one of several lists. Hopkins and Summers-Ables emphasize the use of statistics to evaluate existing medical collections and develop continuing collection policies. Hu (2016) describes a project to replace access to ebooks in a discontinued database with equivalent versions from other vendors, prioritized after evaluating usage, and stresses the importance of obtaining perpetual access when possible. Crawley-Low (2002) describes an effort by librarians at a veterinary medicine library to evaluate an existing toxicology collection through list-checking, citation analysis, classified profiles, and usage.

The few articles specifically related to collection development for pharmacy materials tend to focus on one segment of the collection maintenance lifecycle, and are predominantly written by health science librarians and professional pharmacists. Beckett, Cole, Rogers, Bickett, Seeger, and McDaniel detail the process a team of pharmacists and pharmacy librarians used to update the American Association of Colleges of Pharmacy’s Core Journals List as a guide for

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12 Jill V. Crawley-Low, “Collection Analysis Techniques Used to Evaluate a Graduate-Level Toxicology Collection,” *Journal of the Medical Library Association* 90, no. 3 (July 2002).
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developing and maintaining pharmacy collections, including the criteria they applied to make selections for the list. Keogh suggests analyzing local pharmacy theses and dissertations to create core lists of frequently used journals and monographs, which can be added to strengthen an existing collection. Nagaraja and Prashanth (2015) also applied citation analysis and Bradford’s law of scattering to their local pharmaceutical science dissertations to develop core journal lists, which they then refined through analysis of their SCImago Journal & Country Ranks and comparison with Keogh’s list. Flannery offers a guide for collecting retrospective pharmacy materials to build a collection that showcases the history of the discipline, and mentions the use of recommended title lists from professional and academic organizations in the discipline. However, he does not address building a current collection aimed at clinical studies. Kupferberg and Hartel described evaluation of electronic resources as a collaborative effort between medical librarians, pharmacy faculty, and pharmacy students.


16 Keogh, “Resource Use by Pharmacy Graduate Students.”


Fueled by a projected 19% growth in healthcare jobs, new health science programs at non-medical colleges and universities are being created or planned. This paper aims to fill a gap in the literature by describing the process of building a health science collection without the benefit of subject expertise, and then nurturing its controlled growth.

Building a Pharmacy Collection without a Health Sciences Librarian

Building a library collection of pharmacy resources at Chapman University was a collaborative effort between a team of librarians, all of whom lacked a background in the health sciences:

- The Electronic Resources Librarian, a recent hire from a larger state university where she worked as support staff in the collection development department. Despite a background in the humanities, she had experience supporting and interacting with medical librarians.
- The Science Librarian, who covered all of the university’s existing science and technology programs, and who had a background in computer science.
- The Chair of the Collection Management division, who also had a background in the humanities.

These three worked with the Dean and Associate Dean of the Libraries, the Chair of the Systems and Technology Division, and the Head of Serials, as well as with faculty and administrators from the pharmacy school, to build the collection.

The process began in August 2013, two years before the school would open. Because the library team lacked disciplinary knowledge, it relied heavily on the expertise of others to identify

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an initial set of resources to pursue. The Science Librarian analyzed the most recent version of the American Association of Colleges of Pharmacy’s (AACP) *Core List of Journals for Libraries that Serve Schools and Colleges of Pharmacy* (hereafter referred to as the *Core Journals List*) to determine which journals the library already had current access to, embargoed access to, or needed to either subscribe to or obtain through interlibrary loan.\(^{20}\) With that framework in place, the Electronic Resources Librarian began investigating pricing for unsubscribed journals on the list and researching additional journals and databases that might be useful to a pharmacy program. By the end of September, she had compiled a comprehensive, 37-page report titled “An Overview of Library Resources Necessary to Support Chapman University’s School of Pharmacy.” This report detailed existing health science database subscriptions and the costs the library had already invested in them, as well as unsubscribed pharmacy databases available either through consortial deals or through individual subscriptions. The report also listed current relevant journal subscriptions, divided by whether current access, embargoed access, or back file was available through the Libraries. After that came the list of journals to which the library should subscribe. Finally, there came a list of miscellaneous resources to pursue, which were primarily e-book packages. The report concluded with a summary of funding needed to move forward. Individual monographs were not included in this report, as they would be addressed through a later step in the collection development process.

Existing resources were identified by subject area. Chapman University already had a physical therapy program and an online nursing program, so databases with general health

sciences content were easy to pull from those subject guides. Relevant journals were identified by filtering the journal finder for titles under either the Pharmacy or Pharmacology subject headings. New titles were identified through several criteria. Unsubscribed journals on the AACP Core Journals List were included automatically. Additional databases and journals were added after examining the holdings of other pharmacy schools to determine what was widely considered useful. Still more were identified through examination of resources available through consortial deals.

Additional databases were discovered through developing relationships with vendors, often prompted when the Electronic Resources Librarian reached out for pricing on one resource and was made aware of others that each company offered. Because the budget for pharmacy resources had not yet been set, and because it was known it would start small and grow over time, it was necessary to bring vendors into the loop early and plan together for the long term. When possible the report included pricing projections for inflation several years in the future, so that resource acquisition could be planned over a long timeline if funds were not immediately available to acquire everything of interest. The report was designed to be as comprehensive and thorough in its selections as possible, ideally reflecting the widest possible range of resources that could be acquired to support a broad and diverse pharmacy school. It also became the foundation for the pharmacy subject guide that the Electronic Resources Librarian created to keep librarians and pharmacy faculty apprised of the library’s holdings. It was also useful for administrative meetings between the library and the pharmacy school’s administration when discussing current progress and future budgeting and needs.

In October 2013 the pharmacy school administration used Doody’s Core Titles and the June 2013 edition of the AACP’s Basic Resources for Pharmacy Education, (both lists of
recommended monographs for pharmacy programs) to create a prioritized list of books they
wanted the library to acquire.\textsuperscript{21,22} The Electronic Resources Librarian analyzed this list to
identify existing holdings and to determine format availability and costs for unowned titles. After
discussing with the pharmacy faculty and administration, it was agreed that the Chair of
Collection Management would begin purchasing this foundational monograph collection at pre-
determined intervals throughout the next year. While most of the titles were only available in
print, the few that were available electronically required the Electronic Resources Librarian and
the Chair of Collection Management to work closely with the library’s book vendor to put a
license in place and set up a process to purchase single-title ebooks, which was a departure from
the library’s normal practice of purchasing only ebook packages. They also began purchasing
customized MARC records that allowed the Chair to acquire and make ebooks available via the
OPAC quickly, easing the cataloging process for new materials.

Additionally, the library worked closely with the Dean of the pharmacy school to secure
access to its first pharmacy database - one of the “big two” the pharmacy faculty had decided to
aim for after reading the initial library report. In exchange for a signed license guaranteeing a
paid subscription at a pre-set date closer to the school’s opening, they were able to secure
immediate access to a “sandbox” account, i.e. an extended, password-protected trial, for the half-
dozen faculty already hired. This allowed the faculty to begin using the database to plan
curriculum, as well as to show the accreditors a signed license indicating library support for the

\textsuperscript{21} “Doody’s Core Titles 2016,” \textit{Doody Enterprises, Inc.}, 2016,
http://www.doody.com/dct/.

\textsuperscript{22} Sharon Giovenale and Barbara Nanstiel, eds., “Basic Resources for Pharmacy
Education,” \textit{American Association of Colleges of Pharmacy}, June 2013.
school, without having to invest a lot of money up front in a resource that only a few people could use. It also guaranteed the vendor a future sale and promoted good relations with the university. As it turned out, the faculty liked the resource so much that the library ended up initiating a paid subscription six months later, so new faculty could use the full database as they were hired.

In October the Libraries also expanded its Web of Knowledge holdings, in the process acquiring two databases that were included in the initial Overview of Library Resources report. The Electronic Resources Librarian wrote an addendum to include these updates in future budgeting discussions.

In December 2013 the Electronic Resources Librarian worked with a different vendor to strike a deal for the second key database identified by the pharmacy faculty. Eventually a four-year license was signed, with small, tiered increases to the cost each year to account for growing pharmacy FTE. In exchange for paying for all four years up-front, the vendor provided a steep discount and the library avoided unpredictable inflation that might have resulted from a standard yearly renewal. An additional database and e-book collection were acquired in January 2014, following consultation between the librarians and the pharmacy faculty.

In March 2014 the Electronic Resources Librarian analyzed the newest edition of the AACP Core Journals List. This allowed the Libraries to benchmark their progress since the last iteration of the list and update their progress to pharmacy faculty and, eventually,

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accreditors. The list of unsubscribed titles was sent to the pharmacy faculty, so they could mark priorities for new subscriptions with fiscal year-end funds. In July the pharmacy faculty also provided their priorities from the June 2014 update of the AACP Basic Resources for Pharmacy Education, as well as the most recent iteration of Doody’s Core Titles. The Electronic Resources Librarian noted which titles were available through existing subscriptions, then worked with the Chair of Collection Management to purchase the remaining monographs. Both of these analyses were used to create new comprehensive reports on resources acquired for review by the Deans of the library and the pharmacy school in May and August.

With most of the core collection in place, the library team visited the health sciences campus, provided advice on the space that would come to be known as the Health Science Study Commons, and began preparing for the transfer of print monographs that had been purchased for the program. The team also assessed the space remaining for future print collections, which would impact collection decisions going forward and solidify the commitment to finding electronic versions of, or alternatives to, requested texts. Electronic collection development still continued, albeit at a slower pace, with the Electronic Resources Librarian coordinating trials for new resources periodically, per faculty request.

As the accreditation site visit in November 2014 drew near, the Dean and Associate Dean of the library, Science Librarian, Electronic Resources Librarian, Interlibrary Loan Librarian, and the Chair of the Systems and Technology division coordinated to prepare a document detailing library resources and services. This report was well-received by the accreditors during

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their meeting with the library representatives. A new version of the AACP *Basic Resources for Pharmacy Education* monograph list was released in January 2015, and analyzed for collection ideas as previous lists had been.\(^{25}\) In spring 2015 five students began a joint Bachelor of Science in Biochemistry and Molecular Biology/Master of Science in Pharmaceutical Sciences program, the pharmacy faculty and the library team began preparing accreditation documents for a future PhD in Pharmaceutical Sciences program, and the search began for a full-time health sciences librarian.

With accreditation received the inaugural cohort of 80 Doctor of Pharmacy students began classes in fall 2015. The Electronic Resources Librarian and the Science Librarian filled in as interim health science librarians, each traveling to the health science campus one day a week and offering dedicated virtual office hours at the original campus for reference, instruction, and troubleshooting access issues to make sure patrons could use the collections properly. The Electronic Resources Librarian continued consulting with the Chair of Collection Management to develop the collection, and in October once again analyzed the newest iteration of the AACP *Core Journals List* to track progress and identify new subscriptions. At the end of the year, the Electronic Resources Librarian consulted with the pharmacy faculty, who opted to cancel one of the original database subscriptions that had been difficult to work with in favor of another resource. A Health Sciences Librarian was finally hired in February 2016, and the Electronic Resources Librarian created one final overview of available pharmacy resources, highlighting this cancellation so the new librarian would be prepared for any questions about it.

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Collection Development After the Hire of a Health Sciences Librarian

Upon arrival at Chapman University’s Harry and Diane Rinker Health Science Campus, the new Health Sciences Librarian found a small, highly relevant print collection, a robust suite of electronic resources, an under-used study commons, and a faculty invested in the library and institution’s success. A unique aspect of this job is that it is situated in the building that houses pharmacy faculty offices, administration, and student services, rather than in the library. This affords the Health Sciences Librarian the luxury of both casual and intentional encounters with faculty, staff, and students as well as the ability to informally but continuously assess collection usage and unmet needs.

Attending faculty meetings, programs, and events offered by the pharmacy school facilitated learning about the pharmacy program and its future direction. As the third trimester (P3) of pharmacy school was beginning shortly after the librarian’s arrival, teaching opportunities arose including a guest lecture in the school’s Drug Information and Informatics class, a course (at other schools) sometimes taught or co-taught by health science librarians. Beyond teaching one class, the Health Sciences Librarian continued to attend this course to help students access necessary resources during in-class activities and later with homework. Participating in this class allowed the librarian to immediately recognize gaps in the collection and work to address them. The first database identified as essential was needed to provide authoritative information on dietary supplements and natural medicines. As it was nearing the end of the fiscal year, the Electronic Resources Librarian expedited trial access to a database for the campus and the students relied heavily on this resource for P3 assignments. The library later licensed this database.
Working closely with the students as they begin their professional placement rotations has illuminated another unmet need: quick, reliable, high quality, access to drug information on their smartphones. When asked questions during rotations, the students need to know where to find resources to help with clinical decision-making. While Chapman University licenses a common pharmacy database, students have been reluctant to download the associated app because of user reviews. The Health Sciences Librarian used the app and was able to recommend it before the start of the upcoming academic year.

In addition to students and teaching faculty, the pharmacy school has a growing research presence and is beginning a PhD program in pharmaceutical sciences. To gauge the need of these constituents, the Health Sciences Librarian reviews faculty and researcher publications, inquires about research directions, and meets with new health sciences faculty and researchers. Because the pharmacy school is currently in a hiring phase, frequent requests for additional resources and access points are fielded. While this list of periodicals and databases is diverse and growing, the library expects to continue to work with the pharmacy school to provide the necessary scholarly materials.

This logical approach to collection building – consulting the literature, reviewing existing holdings, and vendor outreach -- is supplemented by significant end-user input. Before purchase or licensing, the library evaluates quality, relevancy, and cost and considers trial-access feedback. This leads to empowered faculty invested in the library and appreciative of the services and resources provided. However, like all schools, some constituents remain uninformed of the resources available. Initiatives to increase awareness of available resources are an ongoing process. Combining networking, class instruction, faculty interactions, and targeted communications, the Health Sciences Librarian hopes to increase knowledge and usage of
subscribed resources. Additionally, the once under-used study commons is now humming with activity.

Best Practices for Non-Health Science Librarians Looking to Build a Health Science Collection

Building any library collection without disciplinary knowledge can be daunting, but in the case of the health sciences, and particularly pharmacy, it is not necessary to start from scratch. A wealth of resources exist to enable non-health science librarians to build a strong core collection, such as lists of recommended titles from professional organizations, accrediting institutions, and even certain vendors. In particular, Chapman University relied heavily on the Core Journals List and the Basic Resources for Pharmacy Education list from the American Association of Colleges of Pharmacy, and to a lesser extent on Doody’s Core Titles for broader health science collections. These lists are generally updated at least every few years, if not more frequently, so it is easy to determine which resources are recommended without fear of obsolescence.

Collaboration is key, whether it is between librarians and library staff, with faculty and administrators in the health science program, or with vendors. Solicit faculty input to decide which resources to pursue, or at least which to pursue first. This can be done by sending prepared lists of recommended titles to prioritize, or by asking for recommendations based on faculty experience at prior institutions. As faculty develop their curriculum, maintain open communication and encourage them to send you recommendations for specific titles or feedback about gaps in the collection that you can then take to vendors to fill. If the library does not have a health science librarian, it is vital to utilize an electronic resources librarian as a critical player
and collaborative partner in these early stages. The required expertise in navigating the electronic resources landscape will allow this individual to fulfill the crucial tasks of keeping a pulse on the budget, tracking offers and deals from multiple vendors, and weighing the needs and desires of different factions to build the best collection possible.

A competent electronic resources librarian will also be skilled in developing relationships with key vendors, which can help with identifying new resources that might fill gaps in the existing collection, as well as aid in brokering deals that are advantageous to everyone. In some cases vendors may be willing to negotiate a reduced price or an extended trial if there is a guaranteed sale down the line. If only a few faculty will be using a specific resource, try negotiating a deal for discounted access until the program launches, or a tiered inflation structure that matches FTE growth, so that prices are lower when there are few students. Locking in multi-year deals often results in steep discounts over year-to-year pricing, since there is little risk of cancellation in the middle of the subscription period. If the university has available funding, pre-paying for several years of access can also encourage beneficial price structures.

Begin planning early and think in the long term when it comes to building a collection. Obtain quotes for resources of interest early, plan which will be priorities, and then wait for an advantageous time to purchase or subscribe. Developing a well-structured, far-seeing collection development plan both helps the library budget how to spend new pots of money and strengthens requests for additional funding, by showing that care and attention has been paid to supporting the new program in its early stages while also anticipating its future needs.

Finally, remember that collection development plans can be adjusted as a program grows. Some resources may not fill needs as well as hoped. In Chapman University’s case one database was cancelled after a year because the vendor put so many restrictions on access that it was
difficult to get students to use it. Throughout the previous semester, though, different needs had become evident as the faculty transitioned from planning to teaching and used the library’s resources to support the approved curriculum, and so the funds were diverted to a new database instead. Library collections are not static, nor should they be in support of a program as dynamic and evolving as the health sciences. Through collaboration and consulting of trusted resources, though, new collections can flourish even without a disciplinary expert in the librarian’s role.
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