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Preliminary report prepared for Moreland College's
Mary White Library and Mark R. Davies Library
on March 15, 2007¹

¹ The libraries used for this example are fictitious. Report created for [LI 814 Organization of Information \(Spring 2007\)](#)

Introduction

This report has been prepared to independently advise on the following question: should the Mark R. Davies Library (MRD) retrospectively reclassify its collection? Currently, it uses a mixture of Library of Congress Classification (LCC) and National Library of Medicine Classification (NLMC), but MRD Library's parent campus, Moreland College, has proposed that the MRD Library consider using LCC exclusively in the future.

For those who are not familiar with NLMC, The NLMC scheme can be thought of as an expansion set for LCC. The Library of Congress agrees to leave QS-QZ and the letter W in its schedule free for NLM classes, which non-medical libraries ignore. NLM libraries, in turn, do not use LC's letter R for general medicine, but instead break down their entire schedule into QS-QZ and W-WZ. Whereas LC puts anatomy in one place (Q science) and diseases in another (R medicine), in NLMC, books are clustered together according to physiological system, so that books about heart medicine are close to books about the heart itself. Also, NLM numbers are distinguished from LC numbers through a different method of cuttering that uses fewer decimals (US National Library of Medicine, 2006, <http://www.nlm.nih.gov/class/nlmclassintro.html>).

Although the MRD Library may potentially change its NLMC numbers, it will not need to abandon its use of Medical Subject Headings (MeSH). According to Kristina Womack (2006), Science/Nursing/Technology Librarian for the Catholic University of America, "some health sciences libraries may choose to employ LC call numbers, but Medical Subject Headings" (p.101). The co-existence of MESH and LCSH in a single OPAC is not problematic as both terms can be

kept in a single MARC record and most systems will map both to keyword searches (Womack, 2006, p.97).

Current scenario

The MRD Library is located on the campus of the Portland Methodist Hospital (PMH) and currently serves doctors and practicing nurses from the hospital as well as third and fourth year students who have transferred from the Moreland College campus in Salem to pursue a specialized nursing degree. When the Moreland College started its school of nursing, the Portland Methodist Hospital generously offered to let the newly formed MRD Library share its library building and interfile collections so that nursing students might benefit from hospital books and hospital staff might access the MRD collection. At that time, the hospital library was using an NLM/LC classification system because, as the current director for the PMH Library says, "it is the most appropriate system for a serious research library serving medical professionals."

Reason for proposed change

The Moreland School of Nursing is growing rapidly and to accommodate their growth, they have purchased a larger campus that is farther away from the Portland Methodist Hospital. The current library will be split in two: the existing building will become the PMH Library exclusively and the MRD Library will be moved to the new location. The School of Nursing will shut down for the summer term of 2009 in order to facilitate the campus's relocation. Significant amounts of collection development will be made by MRD Library at this time. Library staff from the school's main Mary White Library in Salem have suggested that the MRD Library consider using the move time to transition the NLM labeled books in their collection over to Library of Congress call numbers. They suggest that changing the collection to LC only would allow for greater uniformity between the two campuses and would promote increased cooperation between libraries.

Analysis

While NLM is the most appropriate system for professional doctors, is it the most suitable scheme for Moreland College's School of Nursing students? For students, the most noticeable differences between LCC and NLMC are:

1. What the call number label on the spine of the book looks like (decimal or no decimal)
2. How books are grouped together on the shelf (by physiological system or by medicine)
3. How call numbers appear in the OPAC: in the current shared OPAC only the LC number is searchable and displays on the main screen, meaning that NLM numbers are currently "invisible" to patrons unless they view the item records

Patron preference for a particular organizational system is often difficult to determine because patrons typically only know what they have been exposed to in high schools and public libraries, which is the Dewey Decimal System (Shorten, 2005, p.123). However, in this case, the students at the Moreland School of Nursing have transferred from an all LC system at the college's main campus to an NLM/LC system at the School of Nursing. From a student's point of view, there is little obvious difference between using a library that employs LC classification (such as the Mary White Library) or a library that uses both LC and NLM classification (like the MRD Library). In either case, "Whether or not they can locate a book on the shelf is probably more important to many patrons than the classification used" (Shorten, 2005, p.32).

According to library staff at the MRD Library, many students express confusion about the lack of decimals on NLM books, while others say that they are not confident enough to browse on their own and are afraid to approach the collection without first consulting a librarian. Once students have been guided to a specific area of the collection, however, they often remark that it is easy to find what they want because their topic of interest has been grouped together. In other

words, although the spine labels and OPAC information are confusing to students, the actual organization of books under NLM is clearer. Another obvious advantage of having nursing students become more familiar with the NLM system is that they will most likely encounter NLM in the future, in hospital libraries. The disadvantage is that most students have just mastered LC at the main campus when they are then transferred to the nursing school where they must again learn a new system. This could leave students feeling frustrated and as if library schemes are too difficult and varied to be worth learning. Also, in a very small collection, the NLM books shelved next to the LC books can make the call numbers appear as if they are a bit random. Work study students tend to make more mistakes in shelving with the combined NLM/LC collection than they do at the main campus library.

Before making a decision, other factors, such as accreditation requirements, institutional support, and staff consensus must also be considered (Chressanthis, 1995, p.176). What sort of financial ties does the branch library have to the main library? Will changing classifications affect the library's membership in general academic or medical associations (Womack, 2006, p.103)? It is not just a matter of the library's wishes to conform to its main branch library, but also its "desire to conform to NLM as the national authority in the medical field" (Womack, 2006, p.107). Although joining with the main campus in having an LC only collection will promote uniformity that could result in cost savings for the college as a whole (the branch campus would no longer need a separate cataloger, for instance), remaining separate also has advantages. A separate classification system could indicate that the branch library has a measure of independence from the main library, which may be especially valuable as the Nursing School attempting to forge a new identity as a larger, more prestigious campus (Womack, 2006, p.107).

There are a number of practical implications that a NLM/LC to LC change would have for the MRD Library, including:

- Workflow: Does technical services need to assign original call numbers more often with NLMC than they would if they were only using LCC? Will the MRD Library's single current paraprofessional be sufficient for the growing library's future cataloging needs? How often will it be sending books to be cataloged at the main campus?
- Cost: How much would vendors charge to reclassify the MRD collection? How much of the work can be done in-house? If reclassification is done in-house, how much can the library afford to spend on staff time and supplies, especially if it is directing financial resources towards collection development? How much money and time will reclassifying save the institution in the future (Chressanthis, 1995, p.173)?
- Time frame and quantity of work: If a changeover cannot be completed before the new campus opens, is it acceptable to have a split collection (Shorten, 2005, p.24)? What back-end computer work will need to be done in addition to re-shelving and re-labeling the collection (Chressanthis, 1995, p.177)?
- Project organization: Who will be in charge of the changeover project? Do both libraries expect to be involved? What about faculty and library staff? What roles will they be expected to play?

Recommendation

It is our recommendation that the MRD Library stay with its current classification system. Many of the current problems that MRD Library students experience with the NLMC, such as the confusion caused by NLMC and LCC interfiling, could be solved with simple educational measures or additional space. Preliminary financial estimates indicate that it would be more cost effective for Moreland College to invest in the one time cost of employing a technical service to solve its OPAC

display problems. In addition, it is always easier to go from a more complex standard (NLMC/LCC) to a simpler one (LCC), while transitioning from a simple system to a more complex system is significantly more challenging should the MRD Library wish to go back to NLMC in the future.

If, however, Moreland College would like to pursue changing the MRD Library to LCC only, we at Younglove Library Consulting Firms will be happy to obtain vendor quotes and prepare a thorough financial estimate for you. Please let us know if you have any questions or comments about this preliminary report and if there are any additional reports that we can generate to meet your future needs.

Works Cited

- Chressanthis, J. D. (1995). The Reclassification Decision: Dewey or Library of Congress? *Cataloging & Classification Quarterly*, 19(3/4), 169-181.
- Shorten, J., Seikel, M., Ahrberg, J. (2005). Why do you still use Dewey? Academic Libraries That Continue with Dewey Decimal Classification. *Library Resources & Technical Services*, 49(2), 123-133.
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- Womack, K. (2006). Conformity for conformity's sake? The choice of a classification system and a subject heading system in academic health sciences libraries. *Cataloging & Classification Quarterly*, 42 (1), 93-101.