Wellcome Library

Collection Development Policy
2010-2015
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Definitions
Throughout this document the following terms are defined as:

Acquisition: the act of obtaining ownership or access to materials which then become a constituent part of the Library’s collection, or an item or items thus obtained.

Collection: a set of materials in any format which, taken with other sub-sets of materials, comprise the entire Library collection.

Conservation: hands-on interventive techniques applied to the physical forms of museum, archive and library materials and objects to achieve chemical and physical stabilisation, in order to extend their useful life and ensure their continued availability.

Deposit: any addition to archival holdings, usually a transfer of materials from another location or agency; term also applies to materials on loan for a period of fixed or indefinite duration. The depositor usually retains legal ownership and responsibility.

Digital resources: broad term covering all digital material held in, or accessible via the Library, normally categorised as either born-digital (i.e. resources that never had any physical or analogue manifestation, such as emails, websites and many subscription journals) and digitised (i.e. resources that are digital manifestations of analogue originals, such as digitised image collections, digitised backfiles of journals and digital surrogates of books and manuscripts)

Deselection: the process of identifying materials for disposal, in compliance with the criteria defined by the Library.

Disposal: permanent physical removal of materials from the Library’s collection, by planned destruction or transfer to another organisation.

Format: the physical or other manifestation in which a given object or text is presented.

Preservation: all managerial, financial and technical considerations applied to retard deterioration, prevent damage and extend the useful life of materials and objects. These considerations include monitoring and controlling appropriate environmental conditions; providing adequate storage and physical protection;
establishing exhibition and loan policies and proper handling procedures; providing for conservation treatment, emergency planning and the creation and use of surrogates.

**Public records:** records created by public bodies and selected for permanent preservation under the terms of the Public Records Act (1958)

**Relegation:** withdrawal of an item or items from the open shelves in the Library for transfer to closed storage.

**Selection:** the procedures used by professional librarians and curators to identify suitable materials for acquisition.

**Surrogate:** a manifestation of an object or text in another format (e.g., a digital image of a painting), created to facilitate access to a unique, rare or fragile artefact or to relatively inaccessible content.

**Abbreviations**

**BRA** British Records Association  
**HARG** Health Archives and Records Group  
**MLA** Museums, Libraries and Archives Council  
**NLM** National Library of Medicine  
**OCLC** Online Computer Library Center  
**RIN** Research Information Network  
**RLUK** Research Libraries UK  
**SUNCAT** Serials Union Catalogue  
**UKWAC** UK Web Archiving Consortium
1. Overview

1.1 Purpose of the policy
The purpose of the Collection Development Policy is to set out the framework for the development of the Library’s collections for the period from 2010 to 2015, and to provide a commonly agreed baseline document that will inform decision-making on both acquisition and disposal.

The documented policy will make the process more transparent and assist the staff who have stock selection and collection management responsibilities.

The Policy is part of the wider Library Strategy, and is also informed by the Library’s and the Wellcome Trust’s other strategies and policies.

The Policy will be reviewed on a regular basis.

1.2 The Library and the Trust
The Wellcome Trust is a charity registered in England and Wales, no. 210183. Its sole trustee is The Wellcome Trust Limited, a company registered in England and Wales, no. 2711000 (whose registered office is at 215 Euston Road, London NW1 2BE, UK).

The mission of the Wellcome Trust is to support the brightest minds in biomedical research and the medical humanities.

In 2010 the Trust published its ten-year Strategic Plan, in which three focus areas were highlighted for the future

- Supporting outstanding researchers
- Accelerating the application of research
- Exploring medicine in historical and cultural contexts

The Wellcome Library’s unique contribution to the Wellcome Trust’s mission lies primarily in its ability to support the third of these areas.

The Strategic Plan further identified five broad challenges as themes of the Trust’s activities over the coming decade

- Maximising the health benefits of genetics and genomics
- Understanding the brain
- Combating infectious disease
- Investigating development, ageing and chronic disease
- Connecting environment, nutrition and health.

The Library will concentrate on these broad themes in developing its collections over the coming five years, to respond to areas of current and growing research interest in the medical humanities, to address areas of relative weakness or underdevelopment in our existing holdings, and to maximise the benefits of engagement with Trust-funded biomedical research and public engagement projects.

1.3 Library collections – historical perspective
The Wellcome Historical Medical Museum and Library was created by Sir Henry Wellcome during the last forty years of his life and systematic purchasing for the Library can be traced back to the end of 1903. Sir Henry’s collecting was on a grand
scale, covering the whole of the history of mankind, with medicine as the central core. By the time of his death, Sir Henry Wellcome had aimed at and, to a large extent, succeeded in acquiring a copy of every significant printed text in the history of western medical science, at least prior to the twentieth century. On his death, it was decided that - in order to bring the vast accumulation down to manageable size - its scope should be more closely restricted to the history of medicine and science.

1.4 Library collections today
The Wellcome Library is one of the world’s greatest collections for the study of health in historical and cultural context. The print, manuscript, audio, film, pictorial and digital collections form an unrivalled intellectual resource. The Library is the de facto national collection in its field, and the finest history of medicine Library in Europe. Its collections have been recognised for their outstanding national and international importance and awarded ‘Designation’ status by the Museums, Libraries and Archives Council (MLA).

The collections are distinguished by their subject range, which gives the Wellcome Library a unique place among its national and international comparators. They currently contain some 2.5 million items, in many formats and languages, relating to the history of biomedical sciences, medical, surgical and pharmaceutical practice, alternative and unorthodox medicine, public health, dentistry, veterinary medicine, chemistry, botany. There are also important holdings relating to alchemy, witchcraft, occultism, cookery, travel, ethnography, as well as philosophy, history and sociology, science policy, research ethics, bio-science communication. Indeed any aspect of thought or practice that impacted on human or animal health is likely to be encountered.

The collections include:
• c. 150,000 pre-1851 printed books including 70 000 monographs and journals, of which c. 600 incunables (books printed before 1501) and c. 6,500 books from the 16th century
• c. 800,000 post-1850 books, journals, pamphlets, etc
• c. 30,000 items of printed medical ephemera
• 10,000 European manuscripts dating from antiquity to the present
• 12,000 Asian manuscripts
• 4,000 printed books in native languages of Asia and Africa
• 750 archive collections comprising papers of eminent and other figures in medical research, medical practice or health policy, as well as records of numerous and diverse organizations, mainly from the 20th century and largely created in the UK or parts of the former empire.
• c. 250,000 pictorial resources (drawings, prints, paintings, photographs and other media) ranging in date from the 14th century to the present
• 2,000 audio items
• 2,000 film items
• 3600 video items
• a range of electronic resources (the Library will increasingly acquire digital products such as web sites, databases and electronic journals and born-digital archives).
• some 220,000 digital images
The Library is and remains primarily a reference-only Library with an historical focus. It does not attempt to support current clinical or biomedical research. Latest clinical and scientific resources are acquired very selectively.

1.5 Library audiences
The Library’s collections are used by a varied international audience, with diverse research interests.

The Library’s key audiences come from the following sectors:

- **Educational** (academics, researchers, higher & secondary education students)
- **Professional** (medical, health, research professionals and writers)
- **Commercial** (broadcast media, journalists, publishers)
- **Cultural** (gallery browsers, tourists, local workers and residents)

In addition, the Library offers specific information services and resources to the Wellcome Trust employees.

Our audiences access the Library in two ways:

- In-person
- Remotely (online)

and the collections are developed with both in mind.

2. Collection Development
The Library is committed to the ongoing development of its collections and long-term provision of a high quality resource which will meet the varied and changing needs of its audiences. The Library is also conscious of the fact that it will increasingly need to provide an appropriate gateway to relevant resources held elsewhere, as well as physical access to the material.

2.1 The principles
Four principles underpin development of the Library collections:

- **Continuing relevance** We will develop the collections to preserve and enhance their relevance and usefulness to researchers
- **Global scope** The Library will continue to acquire materials from different cultures and describing different parts of the world
- **Collaboration** We will continue to seek appropriate collaborative and other opportunities to reduce overheads, rationalise holdings and otherwise maximise the unique impact we are able to achieve
- **Technological advance** The Library embraces technological developments and new formats. It acquires and creates digital resources and provides access to them, and also ensures retention and preservation where appropriate

2.2 The wider landscape
The Library operates within a national and international network of libraries and archives repositories and in the fast changing landscape of information technology
and information provision. A particular trend and expectation for research libraries in recent years has been for wider public engagement, to expose special collections and their custodians to a broader lay audience. Development of the Library’s collections continues with regard to those factors, as well as to collecting in peer libraries and archives repositories, trends in publishing and record creation, research trends and researchers’ requirements and expectations. The development and management of its collections is therefore influenced not only by internal drivers but also by a broader outlook and the need to maintain the relevance of its collections and services for present and future research needs.

### 2.2.1 Major international comparator collections

The nearest overseas comparator to the Wellcome Library is the US National Library of Medicine (Historical Division), with which it has several parallels. Other smaller overseas collections supporting significant research activity in the history of medicine include the New York Academy of Medicine Library, the Osler Library of McGill University, Montreal, and the Bibliothèque Interuniversitaire de Médicine, Paris. All however are more narrowly focused on conventional history of medicine than the Wellcome’s collections, which uniquely are founded on an all-encompassing vision of the place of health in the global history of mankind.

### 2.2.2 Complementary collections in the UK

In the UK important complementary collections are held by the British Library, the other national libraries, the National Archives, national museum libraries, university libraries, local record offices, the libraries of the medical royal colleges, the Royal Society of Medicine Library, the British Film Institute and others.

### 2.2.3 Collaborative collection development

The Library will continue to act with regard to other libraries and relevant collections, in the national and international context, and to work on existing and new collaborative initiatives. We will seek new partnerships/continue to work with key institutions and professional bodies (RLUK, RIN, OCLC, NLM, BRA, HARG etc.) and participate in collaborative schemes (SUNCAT, UKWAC etc).

As the de facto national collection in its field, the Wellcome Library currently has no significant weaknesses in its overage of primary medical works published before the last third of the twentieth century. Coverage is more comprehensive than in any UK peer institution, and there is evidence that many titles are unique to the Wellcome Library outside the copyright libraries. The range of primary published holdings is without parallel in any specialist medical historical library. The secondary collections in the history of medicine are unequalled in the UK. We intend to maintain and enhance the Library’s status and leading role in its specialist field. However we will make use of formal and informal mechanisms to avoid unnecessary duplication of stock or to rebalance the collections to better support the needs of our users.

In respect of unique materials consideration will be paid especially to avoiding undesirable competition for acquisitions with peer institutions and to ensuring that collections and artefacts in our specialist field of long-term historical value are placed in the most appropriate publicly-accessible repository. Notwithstanding the Library’s status as the de facto national collection in its field, however, we will not accept unique materials into the collections merely because they are at risk. The library is not
a recognised place of deposit for public records and does not acquire materials that are subject to the Public Records Act (eg NHS hospital records).

2.2.4 Trends in publishing and record creation

The volume of published material is growing year on year and it is impossible for any library or organisation to collect comprehensively. No library can rely solely on its own holdings to meet the needs of its users. Growth has been highest in science, technology and medicine, especially for journals, and slower in arts and humanities.

Another trend is the shift from print-based to digital publishing. This is particularly the case with journals, while print is still favoured for long scholarly works. The proportion of journals published digitally, in USA and UK, is over 96% for STM and 87% for arts and humanities.

These trends inevitably affect the way in which libraries develop their collections, and the challenge is to maintain the balance and coherence of the collections while having to prioritise what is collected, and retained, and provide in both print and digital media. Titles which are published in high quality digital format will no longer be acquired additionally in hard copy, where that alternative exists, except in exceptional cases (eg BMJ). Print titles that become available on-line as historical back files will be liable to relegation or disposal on a case by case basis.

In the archives field more and more records of potential long-term value are being created in digital format (Web pages, word-processed documents, spreadsheets, emails etc). Far from reducing the costs of ingest, storage, preservation and delivery, this development loads additional resource demands, at least in the short to medium term, onto established archives processes. These additional demands will affect the way the archives holdings develop in ways that are still evolving.

2.2.5 The changing needs of researchers

Increased availability of easily accessible online resources is transforming the way research is conducted and disseminated. Researchers expect freely available and easily searchable information, all-time and all-location access, and digital delivery of content. In many disciplines, tools and information sources are increasingly becoming part of the researchers’ desktop or research environment, reducing or removing the need to visit libraries. At the same time digital content is now accepted in most academic circles as of equal status to analogue content in underpinning scholarly research.

However, libraries still recognise the continuing high demand for physical access to original materials. Only a small fraction of the totality of content is likely to be digitised and freely available in the foreseeable future. Besides, for many researchers in the humanities and social sciences access to original materials provides the element of “serendipity” that is still valued. Lastly, there are some types of research that will continue to depend on access to original artefacts, from codicological examination of early manuscripts to comparative study of printing techniques. No digital surrogate can perfectly mimic the experience of using a physical book, document or collection, either as single items or in combination.
2.2.6 **Trends in research**

Links with users and the research community are important for maintaining awareness of new research trends and interests and for ensuring that the Library’s collections can support them. The Library actively tracks and reflects in its collecting the research topics pursued at the various Wellcome Trust Centres, and in the wider historical research and medical humanities fields.

At the same time we intend to try to shape and influence research trends and interests, partly by developing our collections in line with the major research challenges identified in the Wellcome Trust’s Strategic Plan 2010-2020.

2.3 **Ongoing and future collection development**

As an integral part of the Wellcome Trust, the Library will strengthen its links with Trust departments and funded programmes in the coming years, in order to develop its contemporary biomedical archival collections and ensure the long-term preservation of and access to the documentary record of important developments in the field. In the first instance we intend to work with other departments of the Trust to identify and preserve records of long-term archival value generated by researchers working at the Sanger Institute. We will also explore opportunities for developing the collections provided by new Trust-funded initiatives such as UKCMRI.

At the same time the Library will seek to exploit the networks and activities of the Public Programmes department to enrich its contemporary visual collections.

However, collecting has to be selective in the context of limited budget, space and staff resources. Our priority will therefore be to continue to build on our strengths, fill gaps in the collections and develop holdings of materials that reflect major trends in biomedical research, lay interaction with bioscience, and emerging disciplinary and interdisciplinary fields in the medical humanities. We expect most of these holdings to be generated by activities supported by the Wellcome Trust. At the same time we will reduce collecting in the areas that are regarded as lower priority and dispose of material that has been assessed as outside our remit and surplus to requirements (see section 4.1 below).

We will strive to keep duplication with peer libraries and within our collections to the minimum necessary to serve our diverse audiences. We will endeavour to replace duplicate print copies of works in the student loan collection with digital copies where available. Ultimately we will review the long-term viability of this collection.

The Library will continue to develop its collections actively in all formats. In addition to traditional formats, a growing number of digital resources, free and commercially available, will be added to the collections. An increasing proportion of acquisitions will be born-digital. Appropriate provision will be made for long term accessibility of both born-digital and digitised holdings.

As an important part of the Library’s strategic digitisation plans we intend to ingest a substantial quantity of digitised content from archival and other collections held in peer libraries and archive repositories. This will be integrated into the Wellcome Digital collections and will be preserved and managed with equivalent care.
The Library will continue to acquire selected journals and databases for Wellcome Trust staff, on a business need basis. There will be a presumption against long-term retention of these acquisitions.

3. Selection and Acquisition
Selection and acquisition are guided by the knowledge of the collections’ strengths and a set of agreed selection criteria as outlined in this document. Stock selection is transparent and accountable. Monthly RSS feeds detailing new acquisitions are available on the Library’s website http://catalogue.wellcome.ac.uk/feeds. Archives and manuscripts accessions are notified annually to the National Archives http://www.nationalarchives.gov.uk/accessions.

3.1 Main selection criteria
Materials selected for acquisition must meet the following main criteria:

Subject/content: acquisitions must contain significant subject matter or content of relevance to the Library’s broad collecting remit in the history of health. This provides wide subject scope but does not mean that the pre-existence of a subject in the collections is of itself sufficient justification for acquisition. The several collections that make up the Library’s holdings have varying subject and chronological profiles, which will continue to influence their future development. It is expected however that those collections that acquire post-war or contemporary materials will focus such activity on the five challenge areas of the Wellcome Trust’s ten year strategic plan. These challenge areas are less applicable to the intellectual and cultural framework of earlier periods.

Research value: the Library acquires materials to facilitate historical and other research. It follows that acquisitions must have the potential to be of significant use to researchers, now or in the foreseeable future. Items of primarily bibliophilic or aesthetic value are not acquired, although these qualities may incidentally attach to them.

Physical Condition: we are aware that up-front costs such as purchase prices are normally only a fraction of the long-term costs of preserving and processing acquisitions. Items in poor physical condition or archive collections in disorder impose an additional processing burden on the Library. We will not therefore acquire materials where we deem such long-term costs disproportionate to the research value of materials. Books must normally be in a reasonable state of completeness and in good condition. Potential acquisitions of any sort must not pose a significant health and safety risk or serious conservation threat to other items in the collection.

Sustainability: we will not normally acquire physical items or digital content that cannot be stored, preserved and made accessible long-term through existing Library systems and structures; this applies for example to objects for which we do not have suitable storage facilities and digital content that cannot be stored, migrated or accessed satisfactorily within existing Library resources.
3.2 Other factors
A number of other factors are taken into consideration in the process of selection and acquisition:

**Duplication:** the Library will normally acquire an original, single copy of relevant books, for reference only use. Multiple copies may be acquired only occasionally, e.g. in case of some heavily used titles.

**Availability elsewhere:** the Library will not normally acquire very expensive published items which are available and easily accessible to our users in other libraries (e.g. at the British Library) unless they fill very obvious gaps in the Library’s coverage of seminal texts in the history of medicine.

**Life-cycle collection management:** the Library will consider its capabilities to undertake all life-cycle collection management tasks (e.g. appraisal, sorting, cataloguing, storage, preservation).

**Format:** the Library makes acquisitions in all analogue and digital formats. We will not normally acquire three-dimensional objects, such as sculpture or instruments.

**Ownership:** the Library will exercise due diligence when considering an acquisition. We will not accept materials unless satisfied that the transferor has proper authority or title to transfer them. In particular, due diligence will be exercised about any items that might have been imported illegally into the United Kingdom, following the guidelines outlined in *Combating Illicit Trade: Due diligence guidelines for museums, libraries and archives on collecting and borrowing cultural material* (DCMS, October 2005).

**Demand:** the Library will take into account potential level of use for very expensive published materials as well as their availability elsewhere.

**Surrogates:** the Library acquires facsimiles or digital or other surrogates selectively and only of important unique items not held by the Library (e.g. facsimile of *Theatrum sanitatis* manuscript held by Biblioteca Casanatense, Rome), or as substitutes in order to preserve the originals held by the Library.

**Variant editions:** the Library acquires variant editions of seminal works when they are deemed to have sufficient new content or significant variation to warrant purchase.

Other factors such as author, scarcity, complementarity with the existing collections, accessibility, and suitability for exhibition, generally and in Wellcome Collection, are also taken into consideration when selecting material for acquisition. Also, when acquiring new materials effort should be made to resolve any copyright issues that may be obstacle to future exploitation.
3.3 Sources of acquisition
The Library acquires material for the collections through purchase, donation, bequest and deposit on loan.

**Purchase:** Library staff are responsible for the selection from catalogues and other sources of the vast majority of the items acquired. There are also mechanisms in place to encourage users to suggest materials for purchase for the collections.

**Donation and bequest:** The Library actively seeks suitable donations, particularly for the Medical Collection and Archives and Manuscripts, and these donations contribute significantly to the continuous and balanced development of these resources. The Library accepts donations and bequests of single and/or multiple items, including archive collections, from individuals and organisations. They are evaluated for appropriateness under the current policy and accepted selectively. Potential donors are made aware at the outset that gifts become part of the Library’s collections.

**Deposit on loan:** Archive collections may also be acquired on loan in exceptional circumstances; in the event of acquisition of an archive by loan, or by gift, a clear written record of any terms and conditions attaching to the transfer will be agreed with the owner or donor.

**Other:** Digital material may be acquired directly from sources such as the Internet through the use of automated tools.

4. Retention, deselection and disposal
The vast majority of materials in the Library collections were and are acquired with a view to retention in perpetuity.

4.1 Deselection and disposal
In the case of unique materials there is a strong presumption against the disposal, by any means, of items accepted into the Library’s collections, unless

(a) it is found that they belong more properly in another repository, in which case they may be transferred there with the consent of the owner and the knowledge of both governing bodies, subject to any relevant statutory provisions being observed

or

(b) the Library becomes unable, either temporarily or permanently, to provide proper care for them, in which case they should be transferred, on such terms as may then be agreed in writing with the consent of the owner and of both governing bodies, to another appropriate repository with similar overall objectives

or
(c) the owner requests their return. In these circumstances arrangements for return will be governed by the terms and conditions of transfer (see under Deposit on loan in section 3.3 above).

However, the Library cannot guarantee to keep gifts of published materials in perpetuity and reserves the right to dispose of unwanted material which forms part of a donation or bequest. Published materials which meet one or more of the criteria below will normally be removed from the collections:

**Duplication:** duplicate items, unless they are of particular monetary value or significant provenance, or if they fall into the category of heavily-used material or items where multiple copies are specifically required

**Availability in surrogate form:** published works, especially journals, which become available in digital format, unless they are iconic titles in the history of medical publishing or the quality of surrogate access is deemed insufficiently flexible or trustworthy

**Superseded editions:** some reference works and items in the Medicine and Society collection when superseded by new editions

**Relevance:** items which the Library now regards as falling outside its collecting remit and which would be more appropriately held in another collection in the public domain

**Time limitation:** items such as journals or databases acquired for Wellcome Trust business purposes that are not suitable for long-term preservation

**Physical deterioration or technical obsolescence:** items deteriorated beyond economic repair, over-restored items, or items deemed to be beyond technical capability to preserve or make accessible

**Health risk:** items which are infested, contaminated or hazardous, and which put people or other items at risk.

We will not retain uncatalogued books in off-site storage long-term. A robust methodology will be devised for their systematic appraisal, prior to either cataloguing and integration into the on-site collections, or in appropriate cases disposal.

### 4.1.1 Method of disposal of deselected published materials

Where material is identified for disposal, an agreed disposal procedure will be followed and the method of disposal will be fully recorded. In recognition of the fact that the materials in our collections exist for the public benefit, the Library will make every effort to ensure that important relegated materials are offered to appropriate institutions and remain in the public domain.

### 4.2 Restitution and repatriation

The Trust’s policy on restitution, repatriation and human tissue covers all sensitive and controlled objects – ranging from human tissues to objects containing no human
remains which the Trust may wish to collect or dispose of, or which may be the subject of restitution (non-human) or repatriation (human remains) claims.

The Library will comply with the licence requirements as set out in the Human Tissue Act (2004) for all holdings of human tissues and human remains. Government guidelines on the retention of indigenous materials, and requests for restitution or repatriation will act as the catalyst for considering whether the disputed items should remain in the collections.

The Library will in addition treat sympathetically claims for restitution made in accordance with the Declaration of Principles agreed at the Washington Conference on Holocaust-era Assets in 1998.

If, on investigation, the item turns out to have been illegally gained, as defined by the 1970 UNESCO Convention on the Prevention of the Illicit Import, Export and Transfer of Ownership of Cultural Property (as complemented by the Dealing in Cultural Objects (Offences) Act 2003), the Trust will return the object to its rightful owner. If not, the Library will then consider how the contested object best fits with the acquisition and disposal guidelines.