

Library Data Sharing Permission Statement

The Institution signing this statement agrees to allow the “Analyzing Interlibrary Loan/Document Delivery (ILL/DD) during the pandemic” research team to share the data elements detailed below for the purposes of a research project investigating how institutional ILL/DD behaviors may have been impacted by the COVID-19 pandemic. No individual personal data or individual article/book chapter title or citation data is requested. We will study only aggregated usage data by source title and year of publication.

This agreement sets forth the terms and conditions pursuant to which the Institution will share ILL/DD data elements from March to August in 2019 and 2020 with the research team:

- Journal/Book/Conference Proceeding title (publication source title)
- Article/Book/Proceeding publication year
- Times requested and number filled
- ISSN or ISBN, if available
- Total numbers of filled & unfilled requests for borrowing, lending and document delivery

The Institution grants the “Analyzing Interlibrary Loan/Document Delivery (ILL/DD) during the pandemic” research group permission to make use of these data elements in the manner consistent with the purpose of the research, including publishing the aggregation of this data with data from other institutions. The name of institutions providing data would not be disclosed in the publication or in any data sharing required by the journal publisher. The research group agrees to not use or disclose the data for any purpose other than as described for the Research Project as submitted for a request for determination by the Institutional Review Board of Oregon Health & Science University (OHSU) or as required by law.

The research group agrees to use appropriate safeguards to prevent use or disclosure of the data other than as provided for by this Agreement. The data will be maintained in OHSU’s secure implementation of cloud storage until the research is published, at which point the institutionally-identified files will be deleted. The individuals who would be permitted to access and use the data elements for the purposes of the research project include the following: Kris Alpi, Jeannine Creazzo, Jenny Pierce, Holly Thompson, and Phill Jo.

By signing this form, the Institution agrees to the terms and conditions described. The individual representative signing this form confirms that they have the authority to share the aforementioned data elements with the research group on behalf of their Institution.

Institution Name: _____

Institutional Representative Name: _____

Signature: _____

Date: _____

Survey for Characteristics of Participating Institutions

1. What is type of your library? Please select the best choice (**optional**).

- Academic Health Sciences Center / Academic Medical Center
- Academic (supporting health programs, but not at a health sciences or medical center)
- Association, health or Medical-related
- Hospital / Health System (including government systems, e.g., Veterans Administration)
- Special (e.g. law, corporate, etc.)
- Other: Please specify _____

2. Please provide how many library staff FTE; please include paid part-time/student employees (**optional**).

3. Did your library have a print **journal** collection from March to August 2020?

- Yes
- No

4. Did your library have a print **book** collection from March to August 2020?

- Yes
- No

5. If you had a print collection of either journals or books, please indicate the dates/time period during which it was NOT accessible for providing either ILL or DD services from March to August in 2020 or enter "none" if you were able to access it the whole time.

Dates/time period NOT accessible: _____

6. Did your library have a print **journal** collection from March to August 2019?

- Yes
- No

7. Did your library have a print **book** collection from March to August 2019?

- Yes
- No

8. If there is any other information you think is relevant, you may share it here:

