Item:

Central Library / Westchester Library System Request for Proposal

Background:

Each New York State public library system is required to have a Central Library or Co-Central Libraries as defined by New York Regulation §90.4 Standards for central libraries. The Mount Vernon Public Library (MVPL) has been the WLS Central Library since the public library systems were created by legislative action in 1958.

The WLS Central Library Plan of Service was adopted by the WLS Board at the January 31st meeting. A primary role of the Central Library is to work with the system to move forward the goals outlined in the Central Library Plan of Service:

- Expansion of the system-wide digital collection in response to member libraries' needs;
- Expansion of member library staff training and professional development offerings in growing fields such as digital literacy, e-reading, mobile technologies and social media;
- Member libraries will have access to training and tools to assist with collection analysis;
- Member libraries will have access to adult non-fiction materials that supplement their local collections;
- Member libraries will have access to foreign language materials that supplement their local collections; and
- Member libraries will be aware of and know how to effectively use the services and resources provided by the Central Library of the Westchester Library System.

With rapidly changing technology and library services shifting to meet these needs, the concept of issuing a Request for Proposal (RFP) for Central Library services was developed to allow all eligible WLS member libraries the opportunity to reconsider how the Central Library engages with and supports the system and the other member libraries. Other options included the creation of a Digital Central Library as well as maintaining the status quo in terms of retaining MVPL as the Central Library.

Status:

At the March 16th PLDA Meeting, the library directors indicated a strong interest in the RFP approach to support the current Central Library Plan of Service that expires on December 31, 2021, with the understanding that WLS would work with the Division of Library Development (DLD) toward implementing a Digital Central Library with the next Central Library Plan of Service that would begin on January 1, 2022.

Recommended Action:

Staff recommends approval of initiating the Central Library / Westchester Library System Request for Proposal.

Central Library / Westschester Library System Request for Proposal

Background Information: The Westchester Library System (WLS) requests proposals from member libraries to serve as the Central Library for the period July 1, 2017 through December 31, 2021. The selected library will work with the E-Content/Central Library Coordinating Committee, WLS Executive Director and staff, the Public Library Directors Association (PLDA) and other member committees on an ongoing basis to recommend, develop, implement, evaluate and report on services and programs that are consistent with the approved 2017-2021 Central Library Plan of Service.

When New York State's public library systems were created through legislative action in 1958, these systems were designed to provide guidance, support and cost-efficiencies to the member libraries. This legislation also created Central Libraries within each public library system to insure that each system, and in turn each member library of the system, had access to comprehensive collections of printed library materials available for use onsite at the Central Library or through inter-library loan. (Note: The print format of library materials has been expanded to include multiple formats, including digital/electronic materials.)

Providing materials to benefit the public library system's member libraries is still a role of a Central Library. WLS is fortunate to have numerous libraries with large, comprehensive print and media collections that can and do supplement the collection needs of other member libraries throughout the system.

In addition, WLS has put in place a strong system-wide collection of electronic resources including downloadable/streaming e-books, audio books, music, video and databases that allow library patrons and staff with 24x7 access to a digital Central Library.

Funding for Central Library activities occurs through Central Book Aid (CBA) and Central Library Development Aid (CLDA) as provided for in Education Law § 273(1)(b). These funds are allocated to the public library system to support activities outlined in the Central Library Plan of Service.

This RFP provides an opportunity for member libraries to not only serve their local service area, but to provide comprehensive collection development support at a system-wide level.

Anticipated Selection Schedule

RFP issued: April 1, 2017

RFP information opportunity at the April 7, 2017 PLDA meeting

RFP responses due: May 19, 2017

Selection Committee completes review and recommendation processes by June 9, 2017

Recommendation approval by PLDA: June 15, 2017

Recommendation approval by WLS Board: June 27, 2017 All RFP respondents notified of final selection: June 28, 2017

Service Start date: July 1, 2017

Scope of Work

In consultation with the E-Content/Central Library Coordinating Committee and the WLS Executive Director, provide the WLS Board of Trustees with an annual summary report that describes actions taken to achieve the objectives of the Central Library Plan of Service and an analysis of the measured outcomes and/or impact.

Project Duration

The term of the project will be from July 1, 2017 through December 31, 2021.

Basis for Award of Contract

WLS seeks proposals from member libraries in full compliance with Commissioner's Regulation §90.2 (Standards for registration of public, free association and Indian libraries).

- (1) is governed by written bylaws which outline the responsibilities and procedures of the library board of trustees;
- (2) has a board-approved, written long-range plan of service;
- (3) presents an annual report to the community on the library's progress in meeting its goals and objectives;
- (4) has board-approved written policies for the operation of the library;
- (5) presents annually to appropriate funding agencies a written budget which would enable the library to meet or exceed these standards and to carry out its long-range plan of service;
- (6) periodically evaluates the effectiveness of the library's collection and services in meeting community needs;
- (7) is open the following scheduled hours:

Population	Minimum Weekly Hours Open
Up to 500	12
500-2,499	20
2,500-4,999	25
5,000-14,999	35
15,000-24,999	40
25,000-99,999	55
100,000 and above	60

- (8) maintains a facility to meet community needs, including adequate space, lighting, shelving, seating, and restroom;
- (9) provides equipment and connections to meet community needs including, but not limited to telephone, photocopier, telefacsimile capability, and microcomputer or

terminal with printer to provide access to other library catalogs and other electronic information;

- (10) distributes printed information listing the library's hours open, borrowing rules, services, location and phone number;
- (11) employs a paid director in accordance with the provisions of Section 90.8.

Population	Minimum Education Requirements
Below 2,500	No requirement
2,500 to 4,999	2 academic years of study at an approved college or university
5,000 to 7,499	A bachelor's degree from an approved college or university
7,500 or more	A public librarian's professional / provisional certificate or a certificate of qualification

Member libraries submitting proposals must also meet the following prerequisites for central library status as outlined in Commissioner's Regulation §90.4 (Standards for central libraries):

- Local expenditure for the support of the central library, from other than State and Federal
 funds and excluding capital expenditures, must not be less than three dollars per capita
 based upon the population of the central library's service area.
- The central library shall provide an annual average of not less than 55 hours per week of service to the public, and not less than the number of hours in each week required under §90.2.
- There shall be provision in the central library for at least two full-time professional positions, financed from other than Federal funds, excluding budgeted positions vacant for more than 24 months.

A failure to meet Maintenance of Effort requirements as outlined in Education Law § 272 (3)(j)(1) will result in forfeit of the Central Library role.

Member libraries submitting proposals must provide written acknowledgement from the library board verifying the library's willingness to assume the role of central library for the system.

Preference will be given to member libraries able to demonstrate:

- 1. Their past success in supplying other member libraries with materials, especially print adult nonfiction and foreign language titles;
- 2. Their ability to provide reference assistance to member library staff and patrons;
- 3. Their ability and commitment to support 60+ minimum weekly hours of operation.

Member libraries that submit proposals are encouraged to describe approaches that they would recommend and/or implement to meet the Success Factors listed below.

Proposal Response

Each proposal shall be submitted electronically via e-mail with attachments by the deadline to the RFP Contact Person listed below. All inquiries, written or verbal, shall be directed only to the RFP Contact Person. Violations of this provision by member libraries may result in rejection of the proposal.

Any, all or no member libraries submitting proposals may be required to appear before the Selection Committee to explain their understanding and approach to the project and/or respond to questions from the Selection Committee concerning the proposal. The Selection Committee may award a recommendation without conducting negotiations, based on the initial proposal. The Selection Committee reserves the right to request information from the member libraries submitting proposals as needed. If information is requested, the Selection Committee is not required to request the information of all parties that submitted proposals.

Member libraries selected to participate in negotiations may be given an opportunity to submit a revised proposal to the Selection Committee, subject to a specified cut-off time for submittal of revisions. All information received prior to the cut-off time will be considered part of the library's revised offer. No additional revisions shall be made after the specified cut-off time unless requested by the Selection Committee.

The cost of developing and submitting the proposal is entirely the responsibility of the member library.

Evaluation of Proposals

Proposals will be evaluated by a Selection Committee comprised of the WLS Executive Director and Chief Financial Officer, a WLS Trustee and two member library representatives.

Award shall be made in the best interest of the Westchester Library System member libraries, as determined by the Selection Committee. Although no weighted value is assigned, consideration may focus toward but is not limited to:

- Adequacy and completeness of proposal
- Methodology to accomplish tasks
- Member library's ability to provide the services required
- Experience in providing similar services

The Committee reserves the right to accept or reject any or all proposals or part of a proposal; waive any informalities or technicalities; clarify any ambiguities in submitted proposals; modify any criteria in this Request; and unless otherwise specified, accept or reject any item in a proposal.

Terms and Conditions

The member library with the successful proposal will be required to enter into a written contract with WLS. All responses and statements made by the selected member library in response to the RFP will be incorporated into the resulting contract between WLS and the selected library.

Should the selected member library and WLS fail to reach agreement, WLS reserves the right to negotiate with one of the other member libraries submitting a proposal or to re-issue the RFP.

In the event of a conflict in terms of language among the documents, the following order of precedence shall govern:

- written modifications to the executed contract;
- written contract signed by the parties;
- this RFP including any and all addenda;
- Contractor's written proposal submitted in response to this RFP as finalized.

<u>Notices</u>: All notices, demands, requests, approvals, reports, instructions, consents or other communications (collectively "notices") which may be required or desired to be given by either party to the other shall be in writing and addressed to the designated contact for each party specified in the Notices section of the contract.

No proposals shall be disclosed until after a contract award has been issued. The Committee reserves the right to destroy all proposals if the RFP is withdrawn, a contract award is withdrawn, or in accordance with New York State law.

At the time of closing, only the names of those member libraries who submitted proposals shall be made public information. All libraries submitting proposals will be notified via e-mail of the selected party no later than June 28, 2017. Bid results will not be given to individuals over the telephone. Results may be obtained after contract finalization by obtaining a bid tabulation summary.

For additional information or clarification, contact the RFP Contact Person:

Terry L. Kirchner, PhD
Executive Director
Westchester Library System
570 Taxter Road, Suite 400
Elmsford, NY 10523

Email: tkirchner@wlsmail.org

Application for WLS Central Library:

Library name:	

The library is in full compliance with Commissioner's Regulation §90.2 (Standards for registration of public, free association and Indian libraries):

Standard:	Response: Y or N
(1) is governed by written bylaws which outline the responsibilities and	
procedures of the library board of trustees	
(2) has a board-approved, written long-range plan of service	
(3) presents an annual report to the community on the library's progress in	
meeting its goals and objectives	
(4) has board-approved written policies for the operation of the library	
(5) presents annually to appropriate funding agencies a written budget	
which would enable the library to meet or exceed these standards and to	
carry out its long-range plan of service	
(6) periodically evaluates the effectiveness of the library's collection and	
services in meeting community needs	
(7) is open the minimum weekly hours required for its chartered service	
population	
(8) maintains a facility to meet community needs, including adequate	
space, lighting, shelving, seating, and restroom	
(9) provides equipment and connections to meet community needs	
including, but not limited to telephone, photocopier, telefacsimile	
capability, and microcomputer or terminal with printer to provide access to	
other library catalogs and other electronic information	
(10) distributes printed information listing the library's hours open,	
borrowing rules, services, location and phone number	
(11) employs a paid director in accordance with the provisions of Section	
90.8	

The library meets the following prerequisites for central library status as outlined in Commissioner's Regulation §90.4 (Standards for central libraries):

Prerequisite:	Respond Y or N
Local expenditure for the support of the central library, from other than	
State and Federal funds and excluding capital expenditures, must not be	
less than three dollars per capita based upon the population of the central	
library's service area.	
The central library shall provide an annual average of not less than 55	
hours per week of service to the public, and not less than the number of	
hours in each week required under §90.2.	
There shall be provision in the central library for at least two full-time	
professional positions, financed from other than Federal funds, excluding	
budgeted positions vacant for more than 24 months.	

Describe the library's past success in the ability to supply other member libraries with materials, especially print adult nonfiction and foreign language titles:

Describe the library's ability to provide reference assistance to member library staff and patrons based on the digital and physical resources available through the library:

To what extent has/or could the library support 60+ minimum weekly hours of operation?

By signing below, the library verifies that it is in full compliance with Commissioner's Regulation §90.2 (Standards for registration of public, free association and Indian libraries) and meets the following prerequisites for central library status as outlined in Commissioner's Regulation §90.4 (Standards for central libraries)

Board President Name:	
Signature:	
Date:	

Item:

Acceptance of the WLS System Annual Report to New York State

Background:

Annually all public libraries and library systems that receive funding from the State of New York are responsible for submitting an annual report of operational and financial activities. This year, there was a major change to the Report which we were not notified about until January. A new section was added for ELECTRONIC USE, and a new question was added called "Successful Retrieval of Electronic Information" that basically has to do with the usage of databases (known as Electronic Collections for this Report).

Status:

The chart on the following page shows some of the highlights from the 2016 report, and the accomplishments noted for 2016 are included with the Department Reports. Just a reminder, in preparation for our move in 2016, there were no training sessions held for approximately 3 months.

Recommended

Action:

Staff recommends acceptance of the 2016 WLS Annual Report and submission to the Division of Library Development of the State Education Department.

March 28, 2017

HIGHLIGHTS OF 2016 WLS SYSTEM ANNUAL REPORT

Item	2016	2015
Total Physical Item Circulation	37,558	12,345
This number does not reflect member library circulation.		
System Holdings:		
Cataloged Book Holdings	65	67
Electronic Holdings [down due to change of definition]	16,981	23,666
All Other Holdings (databases)	20	17
Number of titles in ILS bibliographic database	969,930	972,927
Number of new titles added by the system	41,956	40,189
Number of holdings in the WLS Union Catalog	3,834,397	3,912,287
Number of holdings added to WLS Union Catalog	251,959	251,507
Total ILL activity	21,165	21,901
Total continuing education/staff development sessions	211	200
Total continuing education/staff development participants	2,130	2,355
Total consulting & technical assistance services contacts	5,363	8,393
Other Special Client Services:	,	,
Westchester Seniors Out Speaking (WSOS)		
Trained volunteers	85	79
Presentations given / Participants	338 / 13,514	351 / 14,162
Senior Benefit Information Centers	5-45	
Hours Hosted at 10 library sites	1,200	1,200
SBIC counseling interactions held (including Helpline)	1,365	1,459
HSE Connect!		
Orientations/Information Sessions given / Participants	44 / 142	na
Walk-in sites Hours Hosted at 2 library sites	588	1,092
[program changed in 2016 down to 2 sites from 6]		1,072
Tutoring sessions held	335	1,704
WEBS . I I. I.		,
WEBS individual/group counseling sessions participants and workshop participants	2,195	2,142
Total items transported by delivery system-wide	2,288,955	2,312,694
Total visits to system website	1,813,040	1,968,172

Westchester Library System Annual Report for Library Systems - 2016 (Public Library Systems 2016)

1. General System Information

1. Gen	eral System Information	
1.1	SEDCODE	660409700029
1.2	System Name	Westchester Library System
1.3	Beginning Reporting Year	1/1/2016
1.4	Ending Reporting Year	12/31/2016
1.5	Street Address	570 Taxter Road - Ste 400
1.6	City	Elmsford
1.7	Zip Code	10523
1.8	Four-Digit Zip Code Extension (enter N/A if unknown)	2337
1.9	Mailing Address	570 Taxter Road - Ste 400
1.10	City	Elmsford
1.11	Zip Code	10523
1.12	Four-Digit Zip Code Extension (enter N/A if unknown)	2337
1.13	Library System Telephone Number (enter 10 digits only and hit the Tab key)	(914) 674-3600
1.14	Fax Number (enter 10 digits only)	(914) 674-4185
1.15	System Home Page URL	www.westchesterlibraries.org
1.16	URL of the system's complete Plan of Service	http://www.westchesterlibraries.org/wp-content/files/pdfs/about-wls/WLS_Free_Direc
1.17	Population Chartered to Serve (2010 Census)	949,113
1.18	Area Chartered to Serve (square miles)	431
1.19	Federal Employer Identification Number	131882114
1.20	County	Westchester
1.21	County (Counties) Served	Westchester
1.22	School District	Elmsford Union Free School District
1.23	Title of System Director: (drop-down): Mr., Mrs., Ms., Miss, Dr.	Dr.
1.24	First Name of System Director	Terry L
1.25	Last Name of System Director	Kirchner
1.26	NYS Public Librarian Certification Number of the Director of Public Library System, and Reference and Research Library Resources System.	24140

1.31	Telephone Number of the System Director, including area code and extension (enter digits only, field will automatically format with extension)	(914) 231-3223
1.32	E-Mail Address of the System Director	tkirchner@wlsmail.org
1.33	Fax Number of the System Director (enter 10 digits only and hit the Tab key)	(914) 674-4185
1.34	Name of Outreach Coordinator	Elena Falcone
1.47	Is the library system a member of the New York State and Local Retirement System?	Y
1.48	Does the reporting system have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one repeating group for each contract. If no, enter N/A on questions 1 through 5 of one repeating group.	N
1.	Name of Contracting Municipality or District	N/A
2.	Is this a written contract? (Enter Y for Yes, N for No)	N/A
3.	Population of the geographic area served by this contract	N/A
4.	Dollar amount of contract	N/A
5.	Indicate "Full" or "Partial" range of services provided by this contract (Select one)	N/A
1.49	For the reporting year, has the system experienced any unusual circumstance(s) that affected the statistics and/or information reported (e.g. natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? Indicate Y for Yes, N for No. If Yes, please annotate using the State note.	Y
TILDOD.	OTTEGETONIC ADD DOD NING	DIIDIIGIIDD ADAZ GAZ

THESE QUESTIONS ARE FOR NYC PUBLIC LIBRARY SYSTEMS ONLY. PLEASE PROCEED TO THE NEXT QUEST

President/CEO Name. If there 1.50 is no President/CEO please enter "N/A"

1.51	President/CEO Phone Number	
1.52	President/CEO Email	
2. Pers	onnel Information	
2.1	FTE (Full-Time Equivalent Calculation) The number of hours per work week used to compute FTE for all budgeted positions.	35
BUDGE	TED POSITIONS IN FULL-	TIME EQUIVALENTS
	two decimal places; enter decir	-
2.4	Public Library System Director per CR 90.3(f) - Filled Position FTE	1
2.5	Public Library System Director per CR 90.3(f) - Vacant Position FTE	0
2.10	Librarians - Filled Position(s) FTE	7.52
2.11	Librarians - Vacant Position(s) FTE	0
2.12	Outreach Coordinator (certified) per CR 90.3 (1)(2)(iii) - Filled Position FTE	1
2.13	Outreach Coordinator (certified) per CR 90.3 (1)(2)(iii) - Vacant Position FTE	0
2.14	Total Certified Librarians - Filled Position(s) FTE (total questions 2.4 + 2.6 + 2.8 + 2.10 + 2.12)	9.52
2.15	Total Certified Librarians - Vacant Position(s) FTE (total questions 2.5 + 2.7 + 2.9 + 2.11 + 2.13)	0.00
2.16	Total Other Professional Staff - Filled Position(s) FTE	5.3
2.17	Total Other Professional Staff - Vacant Position(s) FTE	0
2.18	Total Other Staff - Filled Position(s) FTE	14.01
2.19	Total Other Staff - Vacant Position(s) FTE	0
2.20	Total Paid Staff - Filled Position(s) FTE (total questions 2.14 + 2.16 + 2.18)	28.83
2.21	Total Paid Staff - Vacant Position(s) FTE (total questions 2.15 + 2.17 + 2.19)	0.00

SALARY INFORMATION

2.22	Entry-Level Librarian (certified) FTE	N/A
2.23	Entry-Level Librarian (certified) Current Annual Salary	N/A
2.24	System Director FTE	1
2.25	System Director Current Annual Salary	\$179,631

3. System Membership, Outlets and Governance

PUBLIC SERVICE OUTLETS

3.9	Number of member libraries	38
3.15	Main Library/System Headquarters	1
3.16	Branches	0
3.17	Bookmobiles	0
3.18	Reading Centers	0
3.19	Other Outlets	0
3.20	Total Public Service Outlets (total questions 3.15 through 3.19)	1
3.21	Name of Central Library/Co-Central Libraries	Mount Vernon Public Library
BOARD	/COUNCIL MEETINGS	
3.22	Total number of public library system/3Rs board	0

3.22 Total number of public library system/3Rs board meetings or school library system council meetings held during reporting year

3.24 Current number of voting positions on system positions on system board/council

3.25 Term length for system 5

board/council members 5

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Otl please see individual instructions for these questions for any further requirements.

3.26 Board/Council Selection Enter Board/Council
Selection Code (select one;
drop-down). If O is selected, E
please use the State note to
explain how members were
named to the Board/Council.

SYSTEM BOARD/COUNCIL

Public Library Systems - enter information for the period January 1, 2017, through December 31, 2017.

School Library Systems and 3Rs Systems - enter information for the period July 1, 2017, through June 30, 2018

President/Council Chair

3.27	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
3.28	First Name	Catherine
3.29	Last Name	Draper
3.30	Institutional Affiliation	NYS Assembly, Amy Paulin, 88th District
3.31	Professional Title	Legislative Aide, part-time
3.32	Mailing Address	125 Pelhamdale Avenue
3.33	City	Pelham
3.34	Zip Code (enter five digits only)	10803
3.35	Telephone for the Board President (enter 10 digits only and hit the Tab key)	(914) 738-2528
3.36	E-mail Address	wlssdistrict08@wlsmail.org
3.37	Term Begins - Month	January
3.38	Term Begins - Year (yyyy)	2013
3.39	Term Expires - Month or N/A	December
3.40	Term Expires - Year (YYYY) or N/A	2017
3.41	Is this trustee serving a full term? If No, add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
3.42	The date the board president took the Oath of Office (mm/dd/yyyy)	01/29/2013
3.43	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/15/2013
3.44		

Board/Council Member - complete one record for each Board/Council Member. For each vacant position, select "Vacant" in questions 2-16 of the repeating group. The number of Council members must be 5 to 11 (no less than five and no more than

III quest	ions 2 10 of the repeating group	. I IIO IIu
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Vacant
2.	First Name	N/A
3.	Last Name	N/A
4.	Institutional Affiliation	N/A
5.	Professional Title	N/A
6.	Mailing Address	N/A
7.	City	N/A
8.	Zip Code (enter five digits	N/A

only)

9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	N/A
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	N/A
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	N/A
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	N/A
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
16. 1.	Is this a brand new trustee? Title (drop-down): Mr., Mrs.,	
1,	Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Karen
3.	Last Name	Zevin
4.	Institutional Affiliation	N/A
5.	Professional Title	Market Researcher & Analyst
6.	Mailing Address	176 Cleveland Drive
7.	City	Croton-on-Hudson
8.	Zip Code (enter five digits only)	10520
8.9.	Zip Code (enter five digits	10520 January
	Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	January 2017
9.	Zip Code (enter five digits only) Term Begins - Month	January 2017
9. 10. 11. 12.	Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A	January 2017
9. 10. 11.	Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	January 2017 December
9. 10. 11. 12.	Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy)	January 2017 December 2021
9. 10. 11. 12.	Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the	January 2017 December 2021 Yes 01/31/2017

1.	Title (drop-down): Mr., Mrs.,	
	Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Dr.
2	First Name	Norman
3.	Last Name	Jacknis
4.	Institutional Affiliation	Intelligent Community Forum
5.	Professional Title	Senior Fellow
6.	Mailing Address	39 Mountainside Trail
7.	City	Cortlandt Manor
8.	Zip Code (enter five digits only)	10567
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2013
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	2017
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/29/2013
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/15/2013
16.	Is this a brand new trustee?	N
1,	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Barbara
3.	Last Name	Hickernell
4.	Institutional Affiliation	Engineering Conferences International
5.	Professional Title	Executive Director
6.	Mailing Address	12 Terrich Court
7.	City	Ossining
8.	Zip Code (enter five digits only)	10562
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2013
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	2017

	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was	
	appointed to complete the remainder of a term of a trustee who resigned their	Yes
	position).	
	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/29/2013
	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/15/2013
16.	Is this a brand new trustee?	N
	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The	
	Honorable, The Reverend, Other (specify using the State	Mr.
	note), Vacant	
	First Name	Sean
	Last Name	Ryan
	Institutional Affiliation	N/A
	Professional Title	Retired
	Mailing Address	18 Bayberry Road
	City	Armonk
8.	Zip Code (enter five digits only)	10502
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2016
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	2020
	Is this trustee serving a full term? If No, add a State Note	
	(for example, this trustee was appointed to complete the	Yes
	remainder of a term of a	
	trustee who resigned their position).	
	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/26/2016
	The date the Oath of Office was filed with town or county	01/27/2016
	clerk (mm/dd/yyyy)	
		N
	Title (drop-down): Mr., Mrs.,	
	Ms., Miss, Dr., The Honorable, The Reverend,	Dr.
	Other (specify using the State note), Vacant	
2.	First Name	LaRuth
3.	Last Name	Gray
4.	Institutional Affiliation	Metropolitan Center of Urban Education, School of Education, New York University
5.	Professional Title	Scholar in Residence

6. 7.	Mailing Address City	300 Pelham Road New Rochelle
8.	Zip Code (enter five digits	10805
9. 10. 11. 12.	only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A	January 2014 December 2018
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/28/2014
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	03/12/2014
16.	Is this a brand new trustee?	N
1,	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
	,,	
2.	First Name	Sue
2. 3.	First Name Last Name	
3.	Last Name	Neale
3. 4.	Last Name Institutional Affiliation	Neale N/A
3. 4. 5.	Last Name Institutional Affiliation Professional Title	Neale N/A Retired
3. 4. 5. 6.	Last Name Institutional Affiliation Professional Title Mailing Address	Neale N/A Retired 23 Barry Road
3. 4. 5.	Last Name Institutional Affiliation Professional Title	Neale N/A Retired
3.4.5.6.7.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits	Neale N/A Retired 23 Barry Road Scarsdale
3. 4. 5. 6. 7. 8.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only)	Neale N/A Retired 23 Barry Road Scarsdale 10583
3. 4. 5. 6. 7. 8.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month	Neale N/A Retired 23 Barry Road Scarsdale 10583 January
3. 4. 5. 6. 7. 8.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	Neale N/A Retired 23 Barry Road Scarsdale 10583 January 2014
3. 4. 5. 6. 7. 8. 9. 10.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	Neale N/A Retired 23 Barry Road Scarsdale 10583 January 2014 December
3. 4. 5. 6. 7. 8. 9. 10. 11.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	Neale N/A Retired 23 Barry Road Scarsdale 10583 January 2014 December 2018
3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the	Neale N/A Retired 23 Barry Road Scarsdale 10583 January 2014 December 2018

1:	Title (drop-down): Mr., Mrs.,	
	Ms., Miss, Dr., The	Ms.
	Honorable, The Reverend, Other (specify using the State	1715.
	note), Vacant	
2.	First Name	Edris
3.	Last Name	Scherer
4.	Institutional Affiliation	Scherer TV & AC
5.	Professional Title	Vice President & CFO
6.	Mailing Address	7 Great Oaks Lane
7.	City	North Salem
8.	Zip Code (enter five digits	10760
0.	only)	10560
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2014
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY)	2018
	or N/A	
13.	Is this trustee serving a full term? If No, add a State Note	
	(for example, this trustee was	
	appointed to complete the	Yes
	remainder of a term of a	
	trustee who resigned their	
1.4	position).	
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/28/2014
15.	The date the Oath of Office	
	was filed with town or county	01/31/2014
	clerk (mm/dd/yyyy)	
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs.,	
	Ms., Miss, Dr., The Honorable, The Reverend,	Ms.
	Other (specify using the State	1415.
	note), Vacant	
2.	First Name	Mary
3.	Last Name	Amato
4.	Institutional Affiliation	N/A
5.	Professional Title	Administrator
6.	Mailing Address	359 Westchester Avenue
7.	City	Tuckahoe
8.	Zip Code (enter five digits	10707
	only)	10707
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2015
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY)	2019
	or N/A	

13.		
	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	Yes
	position).	
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	03/31/2015
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	03/31/2015
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Hope
3.	Last Name	Furth
4.	Institutional Affiliation	N/A
		Retired
5.	Professional Title	
6.	Mailing Address	35 Platt Place
7.	City	White Plains
8.	Zip Code (enter five digits only)	10605
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2015
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	2019
13.	Is this trustee serving a full	
	term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	Yes 03/31/2015
14. 15.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the	03/31/2015
	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county	03/31/2015
15.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	03/31/2015 03/31/2015
15. 16.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee? Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State	03/31/2015 03/31/2015 N
15. 16. 1.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee? Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	03/31/2015 03/31/2015 N Mr.
15. 16. 1.	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee? Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant First Name	03/31/2015 03/31/2015 N Mr.
15, 16. 1,	(for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee? Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant First Name Last Name	03/31/2015 03/31/2015 N Mr. Dave Donelson

6.	Mailing Address	44 Park Lane
7.	City	West Harrison
8.	Zip Code (enter five digits only)	10604
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2015
11	Term Expires - Month or N/A	
12.	Term Expires - Year (YYYY) or N/A	2019
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	02/24/2015
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	02/24/2015
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State	Mr.
	note), Vacant	
2.	note), Vacant First Name	Alex
2. 3.		Alex Payan
	First Name	
3.	First Name Last Name	Payan
3. 4.	First Name Last Name Institutional Affiliation	Payan Family Services of Westchester
3. 4. 5.	First Name Last Name Institutional Affiliation Professional Title	Payan Family Services of Westchester Director, Port Chester Cares
3. 4. 5. 6.	First Name Last Name Institutional Affiliation Professional Title Mailing Address	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street
3. 4. 5. 6. 7.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester
3. 4. 5. 6. 7. 8.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only)	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573
3. 4. 5. 6. 7. 8.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573 January 2016
3. 4. 5. 6. 7. 8.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573 January 2016
3. 4. 5. 6. 7. 8. 9. 10.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573 January 2016 December
3. 4. 5. 6. 7. 8. 9. 10. 11.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573 January 2016 December 2020
3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	First Name Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the	Payan Family Services of Westchester Director, Port Chester Cares 434 West William Street Port Chester 10573 January 2016 December 2020 Yes

1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The	
	Honorable, The Reverend,	Ms.
	Other (specify using the State	
2.	note), Vacant First Name	Susan
3.	Last Name	Morduch
4.	Institutional Affiliation	CHE Senior Psychological Services
5.	Professional Title	Pyschologist Pyschologist
6.	Mailing Address	11 Riverview Avenue
7.	City	Ardsley
8.	Zip Code (enter five digits	•
	only)	10502
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2017
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY) or N/A	2021
13.	Is this trustee serving a full	
	term? If No, add a State Note	
	(for example, this trustee was appointed to complete the	Yes
	remainder of a term of a	
	trustee who resigned their	
4.4	position).	
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	01/31/2017
15.	The date the Oath of Office	02/09/2017
	was filed with town or county clerk (mm/dd/yyyy)	02/08/2017
16.	Is this a brand new trustee?	Y
1.	Title (drop-down): Mr., Mrs.,	
	Ms., Miss, Dr., The	
	Honorable, The Reverend,	Ms.
	Other (specify using the State note), Vacant	
2.	First Name	Julie
3.	Last Name	Mills-Worthey
4.	Institutional Affiliation	N/A
5.	Professional Title	Attorney
6.	Mailing Address	151 Prospect Avenue
7.	City	Mount Vernon
8.	Zip Code (enter five digits	10550
	only)	10550
9.	Term Begins - Month	January
10.	Term Begins - Year (yyyy)	2016
11.	Term Expires - Month or N/A	December
12.	Term Expires - Year (YYYY)	2020
	or N/A	

- 13. Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the Yes remainder of a term of a trustee who resigned their position).
- 14. The date the trustee took the Oath of Office (mm/dd/yyyy) 01/26/2016
- 15. The date the Oath of Office was filed with town or county 01/27/2016 clerk (mm/dd/yyyy)
- 16. Is this a brand new trustee? N

COORDINATED OUTREACH COUNCIL

3.45 Has the Coordinated Outreach
Council met at least two
times during the calendar year Y
per CR 90.3 (j)(2)(iv)? (Enter
Y for Yes, N for No).

Coordinated Outreach Council Members - complete one record for each Council Member for the period January 1, 2017, throu For each vacant position, select "Vacant" in question 1 and enter N/A in questions 2-5 of the repeating group. The number of c 5 to 11 (no less than five and no more than 11).

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Otl please see individual instructions for these questions for any further requirements.

1. Title (drop down): Mr., Mrs.,

Ms., Miss, Dr., The

Honorable, The Reverend, Ms. Other (specify using the State

note), Vacant

2. First Name Nory

3. Last Name Padilla

Institutional Affiliation Westchester County Dept. of Correction
 Professional Title Director of Programs and Staff Development

1. Title (drop down): Mr., Mrs.,

Ms., Miss, Dr., The

Honorable, The Reverend, Ms. Other (specify using the State

note), Vacant

2. First Name Isabel

Last Name Hershkowitz
 Institutional Affiliation Berger & Gaines

5. Professional Title Director of Marketing & Outreach

1. Title (drop down): Mr., Mrs.,

Ms., Miss, Dr., The

Honorable, The Reverend, Ms. Other (specify using the State

note), Vacant

First Name Janet
 Last Name Donat

4. Institutional Affiliation Family Services of Westchester

5. Professional Title Coordinator of Early Childhood & Parenting Programs

1	Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.		
2.	First Name	Cornelia		
3.	Last Name	Schimert		
4.	Institutional Affiliation	Visiting Nurse Association of Hudson Valley		
5.	Professional Title	Director, County Relations		
1.	Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Mr,		
2.	First Name	Steve		
3.	Last Name	Schurkman		
4.	Institutional Affiliation	Keane & Beane		
5.	Professional Title	Principal Member		
1.	Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.		
2.	First Name	Gina		
3.	Last Name	Bell		
4.	Institutional Affiliation	Yonkers Public Schools		
5.	Professional Title	Head of Library Services		
1.	Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.		
2.	First Name	Laura		
3.	Last Name	Eckley		
4.	Institutional Affiliation	Larchmont Public Library		
5.	Professional Title	Director		
4. Pub	4. Public Library System Transactions and Collections			
4.1	Number of registered system borrowers	94		
4.2	System Visits	482		
CIRCU	LATION			
4.3	Total Cataloged Book Circulation	32,623		
4.4	Total Circulation of Other Materials	4,935		
4.5	Physical Item Circulation (Total questions 4.3 & 4.4)	37,558		
4.6	Use of Electronic Material	9,998		
4.7	Successful Retrieval of	4,320		

Electronic Information

4.8	Electronic Content Use (Total Questions 4.6 & 4.7)	14,318
4.9	Total Circulation of Materials (Total Questions 4.5 & 4.6)	47,556
4.10	Total Collection Use (Total Questions 4.7 & 4.9)	51,876
GENE	RAL SYSTEM HOLDINGS	
4.11	Total Cataloged Book Holdings	65
4.12	Uncataloged Book Holdings	20
4.13	Total Print Serial Holdings	0
4.14	All Other Print Materials Holdings	0
4.15	Total Number of NOVELNY Databases	10
4.16	Total Electronic Holdings	16,981
4.17	Other Non-Electronic Materials	20
4.18	Grand Total Holdings (total questions 4.11 through 4.17)	17,096
ROTA	TING COLLECTIONS/BOOK	LOANS
4.19	Does the system have rotating collections/bulk loans? (Enter Y for Yes, N for No)	
4.20	Number of collections	0
4.21	Average number of items per collection	0
	em Services	
TECHN	NOLOGY AND RESOURCE	SHARING
INTEG	RATED LIBRARY SYSTEM	(ILS)
5.1	Does the system provide an	
	integrated library automation	
	system (ILS) for its member	Y
	libraries? (Enter Y for Yes, N for No)	
5.2 Indi	,	m's ILS have been implemented (check all that apply):
a.	Circulation	Yes
b.	Public Access Catalog	Yes
c.	Cataloging	Yes
d.	Acquisitions	Yes
e.	Inventory	Yes
f.	Serials Control	No
g.	Media Booking	No
h.	Community Information	Yes
i.	Electronic Resource Management	No
j.	Digital Collections Management	No

Sirsi Dynix

5.3

Identify ILS system vendor

5.4	How many member libraries fully participate in the ILS?	38
5.5	% of member libraries participating (calculated field)	100.00%
5.6	How many member libraries participate in some ILS modules?	38
5.7 Indi	cate features of the system's ILS	(check all that apply):
a.	ILS shared with other library systems	No
b.	ILS software permits patron-initiated ILL	Yes
c.	ILL feature implemented and used	Yes
5.8	Number of titles in the ILS bibliographic database	969,930
5.9	Number of new titles added by the system in the reporting year	0
5.10	Number of Central Library Aid titles added in the reporting year	2,520
5.11	Number of new titles added by the members in the reporting year	41,956
5.12	Total new titles (total questions 5.9 through 5.11)	44,476
LINION	CATALOC OF DESCRIBEE	C

UNION CATALOG OF RESOURCES

Print

a.

For this report, a union catalog is defined as a vehicle that can access member and / or non-member catalogs. It can be online (virtual) format.

5.13 In what format(s) is the union catalog available? (Check all that apply):

No

b.	Disc	No
c.	Online (virtual catalog)	Yes
5.14	How many libraries participate in (or submit records for) the union catalog?	38
5.15	Is the system's union catalog shared with any other library system(s)? (Enter Y for Yes, N for No)	N
5.16	Number of titles in the system's union catalog	969,930
5.17	Number of holdings in the system's union catalog	3,834,397
5.18	Number of new titles added in the last year	41,956
5.19	Number of holdings added in the last year	251,959

5.20 If	the union catalog is online (virt	ual catalog) Indicate the features of the system's virtual catalog (check all that apply):
a.	Non-member catalogs are included (if checked, please name non-member catalogs using the State note)	No
b.	Non-library catalogs are included (if checked, please name non-library catalogs using the State note)	No
c.	Patron-initiated ILL available and used through this catalog	Yes
UNION	LIST OF SERIALS	
5.21	Does the system have a union list of serials? (Enter Y for Yes, N for No. If No, enter zero (0) on question 5.22.)	Y
5.22	How many libraries participate in (or submit records for) the union list of serials?	38
COMB	INED SYSTEM UNION CAT	ALOG AND UNION LIST OF SERIALS
5.23	Does the system's union catalog contain both books and serials? (Enter Y for Yes, N for No, or N/A)	Y
VISITS	TO THE SYSTEM'S WEB S	ITE
5.24	Annual number of visits to the system's web site	1,813,040
SYSTE	M INTERLIBRARY LOAN A	ACTIVITY
5.25	Total items provided (loaned)	5,494
5.26	Total items received (borrowed)	6,398
5.27	Total requests provided (loaned) unfilled	8,657
5.28	Total requests received (borrowed) unfilled	616
5.29	Total interlibrary loan activity (total questions 5.25 through 5.28)	21,165
DELIV	ERY	
5.30 Ind	licate delivery methods used by	the system (check all that apply):
	or questions which include a choos for these questions for any	pice of "Other", please add a State Note of explanation when "Other" is chosen. Also partitle requirements.
a.	System courier (on the System's payroll)	No
b.	Other system's courier	No
d.	Contracted service (paid by System - not on payroll)	Yes
e.	U.S. Mail	Yes

f.

Commercial carrier (e.g.,

UPS, DHL, etc.)

No

g.	Other (specify using the State note)	No
5.31	Number of stops (pick-up and delivery sites per week)	264
CONTI	NUING EDUCATION/STAF	F DEVELOPMENT
Worksh	ops/Meetings/Training Sessio	ns
Resource	e sharing (ILL, collection dev	velopment, etc.)
5.32	Number of sessions	8
5.33	Number of participants	155
Technol	logy	
5.34	Number of sessions	54
5.35	Number of participants	195
Digitiza	tion	
5.36	Number of sessions	0
5.37	Number of participants	0
Leaders	ship	
5.38	Number of sessions	15
5.39	Number of participants	240
Manage	ement & Supervisory	
5.40	Number of sessions	6
5.41	Number of participants	54
Plannin	g and Evaluation	
5.42	Number of sessions	0
5.43	Number of participants	0
	ess and Advocacy	
5.44	Number of sessions	1
5.45	Number of participants	71
Trustee	/Council Training	
5.46	Number of sessions	0
5.47	Number of participants	0
	Client Populations	
5.48	Number of sessions	67
5.49	Number of participants	840
	n's Services/Birth to Kinderg	arten
5.50	Number of sessions	1
5.51	Number of participants	28
	n's Services/Elementary Grad	
5.52	Number of sessions	5
5.53	Number of participants	190
	Adult Services/Middle and Hi	
5.54	Number of sessions	5
5.55	Number of participants	150
	Adult Services	200
5.56	Number of sessions	39
5.57	Number of participants	110
۱ د.د		110
	Other:	

5.58	Does the system provide other Workshops/Meetings/Training Sessions not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1, 2 and 3 of one repeating group.	
1.	Topic	Annual Report Workshops
2.	Number of sessions	3
3.	Number of participants	15
1.	Topic	Construction Grant Workshop
2.	Number of sessions	2
3.	Number of participants	14
1.	Topic	Marketing Bootcamp
2.	Number of sessions	1
3.	Number of participants	18
1.	Topic	Using Data to Visualize your Story
2.	Number of sessions	1
3.	Number of participants	23
1.	Topic	Minigrant Workshops
2.	Number of sessions	2
3.	Number of participants	17
1.	Topic	Creative Aging Grant Workshop
2.	Number of sessions	1
3.	Number of participants	10
5.59	Grand Total Sessions (total questions 5.32, 5.34, 5.36, 5.38, 5.40, 5.42, 5.44, 5.46, 5.48, 5.50, 5.52, 5.54, 5.56 and total of question #2 of Repeating Group #5)	211
5.60	Grand Total Participants	
	(total questions 5.33, 5.35, 5.37, 5.39, 5.41, 5.43, 5.45, 5.47, 5.49, 5.51, 5.53, 5.55, 5.57 and total of question #3 of Repeating Group #5)	2,130
5.61	Do library system staff and/or trustees reach outside of the library system building to promote system programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library System?	Y
COOPT	NINATED SEDVICES	

COORDINATED SERVICES

5.62 Indicate which services the system provides (check all that apply):

Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also plinstructions for these questions for any further requirements.

	-	
a.	Coordinated purchase of print materials	Yes
b.	Coordinated purchase of non-print materials	Yes
c.	Negotiated pricing for licensed electronic collection purchases (not purchasing)	Yes
d.	Cataloging	Yes
e.	Materials processing	No
f.	Coordinated purchase of office supplies	No
g.	Coordinated computer services/purchases	Yes
h.	Virtual reference	No
i.	Other (describe using the State note)	No
j.	N/A	No
CONSU	LTING AND TECHNICAL A	ASSISTA

ANCE SERVICES

CONSU	LIMO AND TECHNICAL A	ADDID
5.63	Number of contacts - Consulting with member libraries on grants, and state and federal funding	246
5.64	Number of contacts - Consulting with member libraries on funding and governance	115
5.65	Number of contacts - Consulting with member libraries on charter and registration work	24
5.66	Number of contacts - Consulting with member libraries on automation and technology	3,532
5.67	Number of contacts - Consulting with member libraries on youth services	144
5.68	Number of contacts - Consulting with member libraries on adult services	392
5.69	Number of contacts - Consulting with member libraries on physical plant needs	0
5.70	Number of contacts - Consulting with member libraries on personnel and management issues	187

:	5.71	Number of contacts - Consulting with state and county correctional facilities	72
	5.72	Number of contacts - Providing information to local, county, and state legislators and their staffs	13
:	5.73	Number of contacts - Providing system and member library information to the media	196
•	5.74	Number of contacts - Providing website development and maintenance for member libraries	0
•	5.75	Does the system provide other Consulting and Technical Assistance Services not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic. If No, enter N/A for questions 1 and 2 of one repeating group.	Y
	1.	Topic	NYS Annual Report
	2.	Number of contacts (all types)	264
	1.	Topic	Westchester-Putnam One Stop Employment Workforce Development
	2.	Number of contacts (all types)	178
;	5.76	Total other contacts (total of question #2 of Repeating Group #6)	442
	5.77	Total number of contacts (total of questions 5.63 through 5.74 and 5.76)	5,363
		ENCE SERVICES	
		Total Reference Transactions CES TO SPECIAL CLIENTS and Contractual)	78
	5.79 Indi	cate services the system provid	es to special clients (check all that apply):
i	a.	Services for patrons with disabilities	Yes
1	b.	Services for patrons who are educationally disadvantaged	Yes
,	c.	Services for patrons who are aged	Yes
	d.	Services for patrons who are geographically isolated	No
	e.	Services for patrons who are members of ethnic or minority groups in need of special library services	Yes
	f.	Services to patrons who are in institutions	Yes

~	Complete for an amendance decad	
g.	Services for unemployed and underemployed individuals	Yes
i.	N/A	No
5.80	Number of BOOKS BY MAIL loans	N/A
5.81	Number of member libraries with Job/Education Information Centers or collections	14
5.82	Number of State Correctional Facilities libraries served	3
5.83	Number of County Jails libraries served	0
5.84	Number of institutions served other than jails or correctional facilities	1
5.85	Does the system provide other special client services not listed above? If yes, complete one record for each service provided. If no, enter N/A in questions 1 and 2 of one repeating group.	Y
1.	Service provided	Westchester Seniors Out Speaking (WSOS)
2.	Number of facilities/institutions served	10
1.	Service provided	HSE Connect!
2.	Number of facilities/institutions served	2
1.	Service provided	WEBS Individual Career Counseling
2.	Number of facilities/institutions served	2
1.	Service provided	WEBS Career Seminars
2.	Number of facilities/institutions served	10
1.	Service provided	WEBS Career Workshops
2.	Number of facilities/institutions served	20
1.	Service provided	WEBS Distance Counseling
2.	Number of	1
	facilities/institutions served	
5.86	Does the system charge fees for any program or service? Enter Y for Yes; N for No. If yes, briefly describe using the text box below; if no, enter N/A in Question 5.87.	N
5.865.87	Does the system charge fees for any program or service? Enter Y for Yes; N for No. If yes, briefly describe using the text box below; if no, enter N/A in Question 5.87.	N Not Applicable

6. Operating Funds Receipts LOCAL PUBLIC FUNDS

Westchester Library System Annual Report for Library Systems - 2016 (Public Library Systems 2016)

State Notes Local Notes

1. General System Information

WLS Moved its Headquarters as of July 1, 2016, from Tarrytown 1.5 Street Address **State Note:** to Elmsford. WLS Moved its Headquarters as of July 1, 2016, from Tarrytown State Note: to Elmsford. 1.6 City WLS Moved its Headquarters as of July 1, 2016, from Tarrytown State Note: to Elmsford. 1.9 Mailing Address State Note: WLS Moved its Headquarters as of July 1, 2016, from Tarrytown to Elmsford. 1.10 City URL of the system's complete Plan State Note: Updated approved plan now on website. 1.16 of Service For the reporting year, has the system experienced any unusual circumstance(s) that affected the statistics and/or information reported WLS moved its Headquarters from Tarrytown to Elmsford in July 1.49 (e.g. natural disaster, fire, closed for **State Note:** 2016. This year's focus was on the preparation for this move, and renovations, massive weeding of space for continuing education and other events was limited. collection, etc.)? Indicate Y for Yes, N for No. If Yes, please annotate using the State note.

2. Personnel Information

No Notes

3. System Membership, Outlets and Governance

The date the board president took the Oath of Office (mm/dd/yyyy)

State Note: Please note that last year's entry was a typographical error.

Has the Coordinated Outreach

Council met at least two times

3.45 during the calendar year per CR 90.3 Local Note:,
(i)(2)(iv)? (Enter Y for Yes, N for

No).

4. Public Library System Transactions and Collections

No Notes

5. System Services

5.31	Number of stops (pick-up and delivery sites per week)	State Note:	Total of 2,288,955 items were routed systemwide in 2016.
5.46	Number of sessions	State Note:	None held in 2016 due to move of headquarters.
5.47	Number of participants	State Note:	None held in 2016 due to move of headquarters.
Repea	ting Group 1		

Westchester Seniors Out Speaking (WSOS) volunteers fuel an

active program of County-wide educational presentations on State Note: Medicare and related senior-directed benefits, which are available 1. Service provided to all 38 WLS member libraries. A total of 338 presentations were given with 13,514 participants in 2016. Repeating Group 2 HSE Connect! (a/k/a TASC Connect!) assist adults working towards their high school equivalency (HSE) diploma. Trained volunteers explain the 3 ways a degree can be obtained and review State Note: available, free study resources. Assistance is also provided for 1. Service provided those who require adult basic education to prepare themselves to pursue these options. A total of 44 orientations/information sessions were held in 2016 with 142 participants. Repeating Group 3 WEBS Career & Educational Counseling Service is a free State Note: program assisting adults to advance in their careers, change fields, 1. Service provided get re-employed, return to school & plan for later years. Repeating Group 1 Westchester Seniors Out Speaking (WSOS) also provide one-to-one counseling services offered at the following 10 libraries who host a Senior Benefit Information Center throughout the year via an email and telephone Helpline: Greenburgh, Mount Kisco, Number of facilities/institutions New Rochelle, Ossining, The Field library (Peekskill), Port 2. **State Note:** Chester-Rye Brook, John C. Hart Memorial Library (Shrub Oak), served The Warner Library (Tarrytown), Yonkers-Riverfront Library, Yonkers-Grinton I. Will Branch. A total of 1200 session hours were hosted at the library sites with 1,365 counseling interactions (including Helpline support) in 2016. Repeating Group 2 HSE Connect! Volunteers provide walk-in service at 2 library sites: Port Chester-Rye Brook Public Library and Yonkers Public Number of facilities/institutions 2. **State Note:** Library-Riverfront Library. A total of 588 hours were offered with served 335 tutoring sessions held in 2016. Repeating Group 3 WEBS Individual Career Counseling is available at the Mount Number of facilities/institutions 2. State Note: Vernon Public Library and Yonkers Public Library-Riverfront served Library. A total of 507 sessions were held in 2016. Repeating Group 4 WEBS Career Seminars are held at the following 10 libraries: Greenburgh Public Library (2x), New Rochelle Public Library, Number of facilities/institutions 2. State Note: Yonkers Public Library-Grinton I. Will Branch (2x), Chappaqua served Library (2x), Somers Library, Town of Pelham Public Library, John C. Hart Memorial Library (Shrub Oak) Repeating Group 5 WEBS offered 25 workshops in 2016 on a variety of career-related topics with 321 participants. These workshops were offered at the following library locations: Briarcliff Manor Public Library (2x), Chappaqua Library, Dobbs Ferry Public Library, Eastchester Public Library, Greenburgh Public Library, Harrison Public Library, Hastings-on-Hudson Public Library, Katonah Number of facilities/institutions State Note: Village Library, Lewisboro Library, Mamaroneck Public Library, 2. served Mount Kisco Public Library, Mount Pleasant Public Library,

Mount Vernon Public Library (2x), North Castle Public Library (Armonk), Town of Pelham Public Library, Port Chester-Rye Brook Public Library, Rye Free Reading Room, John C. Hart Memorial Library (Shrub Oak), The Warner Library (Tarrytown),

Repeating Group 6

2. Number of facilities/institutions

State Note: WEBS Distance counseling was offered from WLS.

6. Operating Funds Receipts

Does the system receive state funding from other sources? Enter Y

6.42 for Yes, N for No. (Report Special Legislative Grants and Member Items on Q 6.36).

Local Note:,

State Note: ,

6.45 Library Services and Technology Act (LSTA)

Local Note:,

State Note: ,

Does the system receive any other Federal Aid (specify Act and Title) e.g., NEH, NEA, etc.? Enter Y for Yes, N for No.

Local Note:,

State Note: ,

6.49 Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No.

Local Note:,

State Note: ,

6.56 Does the system have other miscellaneous receipts in categories not listed in questions 6.51 through 6.55? Enter Y for Yes, N for No.

Local Note:,

State Note: ,

7. Operating Fund Disbursements

7.46 Does the system have other miscellaneous expenses in categories not listed in questions 7.36 through 7.45? Enter Y for Yes, N for No.

Local Note:,

State Note: ,

7.49 Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No.

Local Note:,

State Note: ,

7.84 Last audit performed (mm/dd/yyyy)

Local Note:,

State Note: ,

7.85 Time period covered by this audit (mm/dd/yyyy - mm/dd/yyyy)

Local Note:,

State Note: ,

7.86 Indicate type of audit (select one from drop-down):

Local Note:,

State Note: ,

Does the system have a Capital

Fund? Enter Y for Yes, N for No. If 7.88 yes, please complete the Capital

Fund Report. If no, stop here.

Local Note:,

State Note: ,

8. Capital Fund Receipts

Does the system receive any other aid and/or grants for capital projects.

Enter Y for Yes, N for No. If yes, 8.4 complete one record for each award. If no, enter N/A on questions 1 and 2 of one repeating group.

Local Note:,

State Note: ,

9. Capital Fund Disbursements

No Notes

12. Projected Annual Budget For Library Systems

No Notes

13. State Formula Aid Disbursements

Repeating Group 6

Expenditure Category

State Note: Publicity

Repeating Group 9

Expenditure Category

State Note: Insurance

Repeating Group 10

Expenditure Category

State Note: Office Watercooler

Repeating Group 11

Expenditure Category

Moving Expenses for preparation and set-up of copy machine and **State Note:**

paper cutter.

Repeating Group 13

1. **Expenditure Category** State Note: Rent

Repeating Group 14

Expenditure Category

State Note: Retiree Health Benefits

Repeating Group 1

Provider of Services

State Note: WEBS testing software

Repeating Group 2

Provider of Services

State Note: Presenter costs.

Repeating Group 3

Provider of Services

State Note: Professional Development expenses

Repeating Group 12

Provider of Services

State Note: For auditor, accountant, lawyer

Repeating Group 2

Expenditure Category

State Note: Furnishings under \$5,000 unit cost.

Repeating Group 1

Expenditure Category 1.

State Note: Expenses related to training.

Repeating Group 2

Expenditure Category

State Note: Expenses related to help with acquisition of materials.

Repeating Group 1

1. **Expenditure Category** State Note: Training expenses Repeating Group 2 1. **Expenditure Category** State Note: Training opportunity expenses Repeating Group 3 **Expenditure Category** 1. **State Note:** Training opportunity expenses Repeating Group 1 **Expenditure Category** 1. State Note: Postage Repeating Group 2 **Expenditure Category** State Note: Printing expenses for flyers, announcements, etc. Repeating Group 1 **Expenditure Category** 1. State Note: Expenses related to publication of Westchester Connections Repeating Group 2 **Expenditure Category** 1. State Note: Expenses related to publication of Westchester Connections 14. Summary of Library System Accomplishments Element 1: Resource Sharing -14.1 Local Note:, Results State Note: , Element 2: Special Client Groups -14.2 Local Note:, Results State Note: , Element 3: Professional 14.3 Development and Continuing Local Note:, Education - Results State Note: , Element 5: Consulting and 14.5 Local Note: , **Development Services - Results** State Note: , Element 6: Coordinated Services -14.6 Local Note: , Results State Note: , Element 7: Awareness and 14.7 Local Note:, Advocacy - Results State Note: , Element 8: Communication among 14.8 Member Libraries and/or Branch Local Note:, Libraries - Results State Note: , Element 9: Cooperative Efforts with 14.9 Local Note:, Other Library Systems - Results State Note: , 14.10 Element 10: Construction - Results Local Note:, State Note: , Element 11: Central Library -14.11 Local Note:, Results State Note: , 14.12 Element 12: Direct Access - Results Local Note:, State Note: ,

Local Note: ,
State Note: ,

14.13 Element 13: Other Goal(s) - Results

15. Current system URL's

15.1	System Home Page URL	Local Note:,
		State Note: ,
15.2	URL of Current List of Members	Local Note: ,
		State Note: ,
15.3	URL of Current Governing Bylaws	Local Note: ,
		State Note: ,
15.4	URL of Evaluation Form	Local Note: ,
		State Note: ,
15.5	URL of Evaluation Results	Local Note: ,
		State Note: ,
15.6	URL of Central Library Plan	Local Note: ,
		State Note: ,
15.7	URL of Direct Access Plan	Local Note:,
		State Note: ,

16. Assurance and Contact Information

16.1	Contact name (person completing report)	Local Note:,
	•	State Note: ,
16.2	Contact telephone number (enter 10 digits only and hit the Tab key)	Local Note: ,
		State Note: ,
16.3	Contact e-mail address	Local Note: ,
		State Note: ,
16.4	The Library System operated under its approved Plan of Service in accordance with the provisions of Education Law and the Regulations of the Commissioner, and assures that this "Annual Reportâ€□ and "Projected Annual Budget" were reviewed and accepted by the System Board/Council on (date - mm/dd/yyyy).	Local Note: , State Note: ,
		State Note:,

Suggested Improvements

No Notes

Item: Tor Browser / Tor Relay

Background: Westchester Library System (WLS) has long been an advocate for protecting patron privacy. This includes the way we save information, configure our

networks and deploy computers in member libraries.

One of the biggest threats to patron privacy on the Internet is traffic analysis. Traffic analysis is when companies use a person's online behavior to build profiles which can be used to identify them in the absence of other identifiers. Tor is a free software (Tor Browser) and an open network (Tor Relay) that helps individuals defend against traffic analysis and to protect their privacy.

Tor Browser is a web browser designed to protect an individual's anonymity when conducting web searches. It accomplishes this anonymity by masking a person's identity, allowing them to use the Internet with significant reductions in risks to their privacy. There is no additional cost associated with using the Tor Browser.

Tor Relays, also referred to as "routers" or "nodes," receive and re-route traffic on the Tor network. Through the process of moving a search request through the Tor Relays, an individual's identity remains anonymous. The more Tor Relays that are operational, the more robust the overall search and retrieval process will be for the end user. The Tor Relays are operated and maintained by volunteers and participating organizations who contribute bandwidth and staffing resources to support Tor's global privacy effort. Any hardware and staffing costs associated with operating and maintaining a Tor Relay is the responsibility of the volunteer and/or participating organization.

Status:

The **Tor Browser** is available to be used as a web browser option on every PC supported by WLS. Providing access to this browser would be an additional way to support patron privacy.

A **Tor Relay** could be accommodated within the existing hardware and staffing budgets without any additional increases.

Recommended Action:

Staff recommends the Board authorize the system-wide availability of the Tor Brower and the installation and maintenance of a Tor Relay on the WLS network.

March 28, 2017