**SERVICE POLICY OF THE DIXIE REGIONAL LIBRARY SYSTEM**

The Dixie Regional Library System's mission is to give to all citizens of Pontotoc, Calhoun, and Chickasaw Counties the best library service possible by providing them with educational and recreational materials. The mission will be accomplished by making the most efficient use of print materials, non-print materials such as video, audio discs, digital downloads, electronic databases, e-Books, computer software, equipment, and personnel.

In accordance with MS Code (39-3-1),

*“Public library” shall mean a library which provides customary services, without charge, to all the residents of a county, city or region and is supported whole or in part by public funds.  Reasonable reimbursements may be collected for special services provided these are determined in advance and in writing by the administrative board of trustees.”*

**General Services and Borrowing Privileges**

Books, reading materials, and general public library services shall be made available, free of charge to those in our service area: people who live, work, or attend school in Calhoun, Chickasaw and Pontotoc Counties. All materials of the Dixie Regional Library System shall be available to residents of the three counties through any service outlet of the system. The service outlets are located in Bruce, Calhoun City, Houlka, Houston, Okolona, Pontotoc, Vardaman, and Sherman.

Library hours shall be set for service outlets by the Director with input from the local advisory board in accordance with the needs of the community and the availability of local funding.

For a deposit of $20, a library card will be issued to anyone who is in our area temporarily but does not permanently live, work, or attend school in our service area. The card will allow the transient patron to check out two items at a time. The deposit will be fully refunded when the card and all checked out items are returned, and any fines paid.

Books and other materials shall be selected for values of interest, information, enlightenment, and literary quality. The collection will be constantly evaluated and weeded, according to the Collection Development Policy.

When answers or materials requested by users are not available at the local library, requests shall be transferred to headquarters; if they are not available in the regional system, efforts shall be made to secure them from the Mississippi Library Commission or others or by interlibrary loan.

The staff shall encourage patron contact by phone or email for more prompt and convenient service for book inquiries, renewal requests, and spot reference questions.

The places furnished by the Dixie Regional Library System for reading and study shall be made as attractive and comfortable as possible. All persons using library facilities are expected to cooperate in maintaining them with consideration of others and reasonable quiet such as courtesy demands.

Administrative activities, technical processes, and interlibrary loan for the entire system shall be carried on in the Headquarters building in Pontotoc.

**Special Services**DRLS will collect reasonable reimbursements for the following special services:

- For toner, paper, equipment leasing, and wear on DRLS owned equipment:

* Fax - $1.00 per page to send; $.15 per page to receive
* Copier - $.15 per page b&w, (each side if double-sided); $.50 per page color
* Printer
	+ Paper – same as copier
	+ Shipping Label - $.30 up to 8.5 x 11 sheet

- Portable media storage devices: flash drives, CDs – market value

- Meeting room use – local option up to $100

- Laminating - $1.00 for 8.5x11 or larger; .50 card size

**Complaints**

While we strive to provide the highest levels of satisfaction and service to patrons, we recognize that occasionally a patron may wish to make a complaint.

A Library patron may start by making his or her complaint on an informal, oral basis to the Library’s staff. The staff member should listen carefully and calmly to the objection. The library’s policy should be clearly explained and a written copy, if available, should be given to the patron whenever the situation warrants it.

If the complaint does not lend itself to informal resolution, the patron may request, complete and return a Patron Complaint Form. The Branch Manager and/or Director will review the completed and signed Complaint Form, and where appropriate, attempt to resolve the complaint directly.

If the patron is not satisfied with the response provided, and/or if the Director decides that the situation warrants the input of the Board of Trustees, either or both parties may bring the written complaint to the attention of the Board. [See DRLS Board Bylaws; Article VI, Section 5]

The Board will review a complaint presented to it. A complaint involving staff performance will be referred back to the Director for final resolution. For all other complaints, the Board will provide an oral and/or a written response to the complainant, and take any further remedial action warranted by the particular circumstances. The decision of the Board of Trustees with respect to a complaint will be final.

Replaces: 8309-C; 9808-A

Revised: DRLS Board, 1-12-10

Revised: DRLS Board, 9-12-13

Revised: DRLS Board, 2-16-16

Revised: DRLS Board, 5-07-19

Revised: DRLS Board, 8-10-21

**PUBLIC LIBRARY PATRON COMPLAINT FORM**

*We understand that from time to time patrons have concerns or criticisms they would like to share with us. If for some reason your visit to our library or your interaction with our staff has been unsatisfactory in any way, we would like to hear from you. We take seriously your concerns and will review them thoroughly. In order for us to respond to your concerns, we do ask that you submit your contact information so we can reach you to clarify any further questions we may have and/or to present you with a follow-up to your concerns.*

 **Type or print clearly.**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL and/or PHONE #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE & TIME OF OCCURANCE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LOCATION OF OCCURRENCE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FACTS YOU WISH TO REPORT: (Please describe the facts or conditions that you wish to report, giving as much description of the offending individual and/ or event as possible)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you contacted a staff member to make an informal complaint? If yes, whom have you contacted?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you think the staff member has made a fair attempt to explain policy/procedure (if applicable) and/or work with you to come to a fair resolution of the complaint?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 What course of action would you like the Manager/Director to take in this matter?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We cannot address your complaints unless the above form is completed in its entirety and signed. A written response will be sent to you within thirty days of receipt of this complaint form. You will be informed of the actions that have been taken as a result of your complaint and the next steps, if any.**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**FOR LIBRARY USE ONLY**

Received by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Reviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_