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For nearly two decades the National Library of Medicine’s (NLM) long range planning activities have established programmatic priorities and directions for the library. This last year, NLM launched a new 10-year plan which can be reviewed at:

The plan is the result of a year long effort by NLM’s Strategic Visions Working Group which established four planning panels:

- Resources and Infrastructure: Dr. Edward Shortliffe and Ms. Gail Yokote
- Health Information for Underserved and Diverse Populations: Dr. Louis Sullivan and Ms. Eugenie Prime
- Support for Clinical and Public Health Systems: Dr. Reed Gardner
- Support for Genomic Science: Dr. Daphne Preuss

The MidContinental Region was represented on two of the panels – Resources with Roz Dudden and Health Information with Wayne Peay. The following are their brief reports on the process and experience.

Resources and Infrastructure

It was a great honor to be asked to serve on the NLM Planning Panel I, Resources and Infrastructure. The panel was run with the same time schedule and agenda as Wayne describes below. While the other panels were more outward looking, this one was looking at the operations of NLM and what is needed for the next 10 years.

We came up with four goals which were integrated into the final plan:

1. Reshape the systems that communicate biomedical information
2. Improve the information resources and tools needed to translate scientific discovery into improvements in health and individual decision-making
3. Develop an expanded workforce of well-trained biomedical librarians and informaticians
4. Enhance and extend NLM’s contributions to emergency and disaster response

As we all know, communication in biomedicine is being transformed everyday. One panel member pointed out that a journal article is actually an abstract of hundreds of pages of conclusions a scientist could write, and behind those hundred pages is the data that can now be technologically stored and reviewed by others. Even as we were working, it was announced that NLM will be in charge of making the Framingham study de-identified patient data available for analysis. Another discussion was on ‘persistent’ access to digital...
Collaboration Tools

Where do you begin when thinking about ways to collaborate with someone in your institution or in your community to create an effective health information outreach project? There are several resources to use as a starting point. Each focuses on specific components of collaborative outreach. Take a look at the following resources for ideas and solutions to your collaborative efforts. Remember that your liaisons are here to assist you in any outreach efforts you are involved in, and at any step along the way.

Bringing Health Information to the Community Blog (BHIC)

Blog postings include summaries of grants, abstracts of articles on health disparities and public health concerns, web sites and tools related to minority health and consumer health issues, and more. You can subscribe to receive a daily digest of the postings by emailing siobhan@creighton.edu or sign up online to receive an email each time a posting is made. You can also subscribe to the RSS feed. (http://library.med.utah.edu/blogs/BHIC/)

Booklets for Project Planning

The NN/LM Outreach Evaluation Resource Center (OERC) has developed a series of three booklets to supplement the 2000 publication “Measuring the Difference.” The three booklets present step-by-step planning and evaluation methods, and each booklet includes worksheets and a case study:

• Booklet One: Getting Started With Community-Based Outreach
• Booklet Two: Including Evaluation In Outreach Project Planning
• Booklet Three: Collecting and Analyzing Evaluation Data

The booklets are available in PDF format online at (http://nnlm.gov/evaluation/). You can also contact your RML liaison for a hard copy of any of the booklets. They are useful for starting project planning, creating successful partnerships, building in evaluation, and more.

Effective Practices Collection

The Corporation for National & Community Service is the independent federal agency that manages Senior Corps, AmeriCorps and Learn and Serve America. Their Resource Center is a “one-stop shop for online tools and training resources to strengthen your volunteer or service program.” One of the tools they provide is the Effective Practices Collection. (http://nationalserviceresources.org/epicenter/index.php) “a collection of good ideas, widely replicable practices, and findings from evidence-based studies that have helped solve common problems facing national service programs or the communities they serve.” When looking for ideas on what has worked in various health outreach projects, search this collection. The Tribal Connections Four Corners project, a collaboration of four medical libraries and three Regional Medical Libraries has begun to use this collection to share their effective practices; you can start adding yours also. Just ask us to help you with your entry.

THRIVE: The Tool For Health and Resilience in Vulnerable Environments

This online tool assists users in understanding and prioritizing community health and safety issues. It assists in building community capacity and addresses ways to reduce health gaps by identifying community strengths. (http://www.preventioninstitute.org/thrive/index.php)

-S. Champ-Blackwell

Looking for Money for your Institution?

Grant Writing for $ucce$$ Workshop

Look for upcoming announcements on sessions to be held in March 2007

Contributers Wanted

Would you like to share your ideas, successes, projects etc. with the region? Why not submit an article to the Plains to Peaks Post?

Contact Suzanne Sawyer ssawyer@rml4.utah.edu with your submissions
NLM has had a commitment to training since its last long range plan. The issues of training the next generation of biomedical librarians and informaticians as well as learning opportunities for the present professionals are articulated in Goal 4 of the final document. A strong and diverse workforce for biomedical informatics, research, systems development, and innovative service delivery. Having opportunities for practicing librarians and informaticians to learn about the new technologies was seen as a high priority. NLM’s contributions to emergency and disaster response were discussed on all levels with toxicologists and communications experts giving their advice.

One major infrastructure problem is trying to operate these programs in inadequate space. Many NLM employees work off the NIH campus which makes communication between programs difficult. A new building was planned in 2003 and there is space to build it. It will take a congressional appropriation to finance the construction.

**Health Information for Underserved and Diverse Populations**

The invitation to participate on the panel arrived a year ago September and was a pleasant surprise. It turned out that there were 15 members of the panel, not including NLM leadership participants. The membership represented a broad range of interests, including computer science, educators, librarians and health professionals who are working in both the U.S. and foreign settings. Three different RMLs were represented on the panel. Two meetings were held with the first convened in November, followed by a meeting in February.

The first meeting involved two days of very broad ranging discussion, identifying issues, challenges and opportunities. The topics that emerged were extensive – literacy, international services, digital divide, research, and emergency response. Working groups were organized to address major topics and develop recommendations. The reports of the working groups were the focus of the second meeting, which refined and prioritized the recommendations. Not surprisingly, all of the recommendations were not included in the final report, since the list was so extensive. However, the priorities that are in the plan – Health Literacy, Underserved Populations, International Services, Promote NLM Resources and Services, and Infrastructure and Research – are a very ambitious agenda. It was particularly gratifying to hear in the discussions the frequent references to the NN/LM and how important its contributions are to the challenges that are ahead.

Reading the 77 page report (The actual plan is 30 pages) will give you a glimpse of the future with all its challenges and opportunities. The landscape in which medical librarians will work in 2016 certainly will be different.

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**Library Needs Assessment Performed with an NN/LM Award**

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TMC Lakewood as part of the Truman Medical Center system is a small suburban hospital with an attached long term care facility and family & community medicine ambulatory clinics. As a primary teaching hospital for the University of Missouri–Kansas City Medical School, the Medical-Dental Library serves 36 family medicine residents, 3 geriatric fellows, 45 physician faculty members, medical students on rotation, a wide variety of allied health professions and over 300 licensed nursing staff. The library also serves dental faculty and dental residents. The library staff consists of one full time clinical medical librarian and a part-time volunteer.

The purpose of this award was to support a needs assessment survey that would evaluate current library services and explore options for meeting the future needs of our clients. Assessment results will be used to improve and update library services, technology and resources.

The funds obtained by this award were used to purchase a laptop computer and digital camera used to carry out the activities outlined in the proposal. These activities included visits to local medical libraries to collect information on medical library services offered in our region and a survey of TMC Lakewood library users to assess current library usage, gather recommendations for expanding services, and explore opportunities for funding to make improvements identified by the assessment.

I visited a selection of medical libraries in the Greater Kansas City area. The five local area medical libraries selected for interviews and photographs were chosen because of features that might be similar in nature to our library and/or our customers. Some were solo hospital librarian facilities, some served resident programs, and one was an academic dental library.

Another part of the assessment was the development of a survey of current users of the library using the information I learned in my visits. The survey included questions concerning the demographics of the respondents, the use of current services, interests in possible future services, free text comment areas, and a place to volunteer for a personal interview. The link to the survey, developed on SurveyMonkey, was emailed to family medicine residents, dental residents, medical and dental faculty, as well as nursing and allied health professionals. Personal interviews of volunteers consisted of an in depth discussion of their survey answers.

I learned that for our small size, the Medical-Dental Library already does a big job that is comparable to other medical libraries in our area. There are still a few areas that can be improved, of course. The most important thing I learned was that some of the current
How Do We Provide Distance Education for Thee?

Do you know about some of the different ways your NN/LM MidContinental Region provides distance education resources? Like the old love poem, your response could be “Let me count the ways!”

Let’s first take a look at what we mean by Distance Education. Some may refer to this as “E-Learning.” You may wish to refer to an excellent free study put out by Web Junction, called Trends in E-learning for Library Staff: A Summary of Research Findings (http://www.webjunction.org/do/DisplayContent?id=14077). This survey indicates a growing interest in e-learning in the library field, “with 70% of respondents indicating that their organizations have plans to pursue e-learning in the next three years.”

Whether we call it Distance Education or E-Learning it can be broken into three basic categories: Synchronous Education, Self-Paced Education, and Facilitator Led Asynchronous Education.

**Synchronous Education**

1- Many of you may already be taking advantage of this if you’ve participated in a ‘Breezin’ Along with the RML’ session. These are held approximately once a month on the third Wednesday.

Or perhaps you’ve been able to tune in to a couple of special educational offerings also using Breeze (video conferencing software) ‘Education Quick Hits’ or ‘RSS Feeds, Blogs and Wikis’.

I suspect, too, that many of you now take advantage of instant messaging and conference calls.

**Self-Paced Education**

2- At the National Library of Medicine web site (http://www.nlm.nih.gov/bsd/dist_edu.html), take a look at this long list of tutorials available to you on several topics:

- PubMed
- Gateway
- Health Services Research and Health Care Technology
- LinkOut for Libraries
- Locator Plus
- MedlinePlus
- MeSH
- National Center for Biotechnology Information Entrez System
- NLM Catalog
- NLM Classification
- NLM Training Manuals
- Toxicology Tutorials

3- What about regional resources you say? Check out the NN/LM MidContinental Region web site (http://nnlm.gov/mcr) – Training and Educational Opportunities – Online education.

   Topics there include:
   - Community Health and Outreach
   - Evaluation
   - Hospital Libraries
   - Medical Informatics
   - Mental Health Resources
   - NLM Resources
   - Professional Development
   - Public Health Resources
   - RML Updates
   - Searching Skills
   - Topics of Interest to Health Professionals

This includes web pages, PowerPoint presentations, presentations in streaming media, as well as recordings of MCR “Breeze” sessions in which the liaisons bring you up to speed on current topics.

4- What about books? What a timely question. We also provide access to more than 60 e-books (books you can read online) on technology and library management topics. These just might be the ticket to get you ‘kick-started’. Access is free through the NN/LM MCR portal at: http://nnlm.gov/mcr/education/netlibrary.html

Take a look at some of these:

- 101 Great Ideas for Managing People: From America’s Most Innovative Small Companies
- 30 Minutes to Write a Marketing Plan
- 301 Ways to Have Fun at Work
- 500 Tips for Developing a Learning Organization

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5- What if you don’t have access to high speed Internet? We’ve thought of that too. Ask for your copy of “Search Strategies,” a CD that covers the basics of searching PubMed, MedlinePlus, Internet sources and evaluation of web sites. There are several different modules – each about 3 minutes long for a total of 27 minutes. It’s a fast way to learn!

6- Take a look at our new Distance Education Brochure! Find a printable version on our web site under Searching Skills – Distance Education Brochure at: http://nnlm.gov/mcr/education/online.html#. Great for your library patrons.

7- Lest we overlook the obvious, we’re always sending information on to you on offerings in our region! There are satellite broadcasts, for example, from the College of DuPage.

8- We have a lending library of materials (http://nnlm.gov/mcr/education/ill/index.html) that includes CDs of Medical Library Association convention presentations, as well as videos and books on other topics.

9- Check out links to our NN/LM National Training Center and Clearinghouse Educational Database (http://nnlm.gov/ntcc/clearinghouse) where you’ll find information on even more presentations, brochures, and handouts. all created by the National Network Libraries of Medicine members across the United States.

Facilitator Led Asynchronous Education

10- Soon there will be more. In February 2007, the Medical Library Association will be offering several distance education classes, several of which have been developed by NN/LM liaisons. These classes will be free and will be offered twice a year. Most will be using a course management software package called Moodle (open access software). If you’re already familiar with Blackboard or WebCT, being a part of one of these classes would be a cinch!

Now there are ten ways we have tried to reach you, to provide for education across the miles. The next step is up to you—take a few minutes to explore the options.

Have we forgotten anything? If we have – you can always receive “distance education” through use of our 800 number: 800-338-7657.

–M. Magee

Library Advocacy Update

A formal Library Advocacy program is new to the NN/LM with the 2006-2011 contract. While all of the regions are concerned with the value and role of health science libraries, the MidContinental Region has taken the first step of creating a formal Library Advocacy special project.

Creating a new program leads to a certain amount of questioning and exploration. The word “advocate” is derived from the Latin word ‘advocatus’ meaning counselor or from ‘advocare’ meaning to call. The English meaning of ‘advocate’ is one who pleads the cause of another; one who is an upholder or defender; or to plead in favor of. Translating this into the health science and library realm is a fascinating and challenging call in a time when the information environment and the healthcare environment are changing so rapidly.

I believe the challenge of developing a library advocacy program operates on at least two levels: a local institutional level and a regional or national level. On the local level, each librarian operating within an institution must be able to articulate the accomplishments and worth of the library within that institution. On the regional or national level, the need is for a program to set standards and support the activities and efforts of the individual librarian. Many things are happening within the MidContinental Region to strengthen library programming on both levels.

On the regional level, MCMLA has appointed a Library Advocacy Task Force with representatives from each state in MCMLA. This task force has surveyed health sciences libraries in the region on advocacy needs and will be following up with individual libraries requesting additional support. The task force will use the information gathered from the survey to develop additional programs for members. Thanks to all of you who participated in the survey, and watch for results to be published in the MCMLA Express.

Results from the library advocacy survey will also be used to help select libraries to participate in a regional value of information study which will begin in July 2007. The study is being structured to

See “Advocacy” on page 6.
simultaneously study the value of library provided information in a clinical library program and in a community hospital setting. This study will run for two years, with results scheduled to be published in 2011.

Other regional activities include a letter from NN/LM MCR Director, Wayne Peay to hospital administrators of regional member libraries introducing the NN/LM MCR and speaking to the value of libraries within the institution. This is a new letter, and we are hopeful that it will reinforce the position of libraries within their institutions. The letter that has been sent during National Medical Librarian’s Month will continue as an opportunity to advocate for the region’s hospital libraries. Additional plans include a regional Library Advocacy Toolkit to supplement the MLA Toolkit, and the creation of a Wisdom Bank of experts available for consultation within the region.

Exciting work is being done to support librarians on the local level as well. Many valuable and informative classes are being developed and offered in the region to help librarians learn business and marketing skills as well as the more traditional searching, database and technology skills. Examples of these classes include Marty Magee’s “Thinking Like an MBA,” Betsy Kelly’s class on assessment and evaluation, and the “Romancing Your Customer” class from the Wyoming Symposium last July. By MCMLA 2007. I'm sure there will be other offerings that will strengthen and fine-tune those skills we all need to operate in a business environment. In 2007, the MCR will be offering a 2-day marketing class taught by Pat Wagner, which I'm confident will be valuable to many librarians in the region. This class will be offered in two locations: one in the East side of the region and one in the West side. Watch in the RML News and the MCMLA list for further announcements for this class. Reading MCMLA and MCR publications is another good way to learn what others are doing to advocate and strengthen their libraries. Recent issues of Plains to Peaks Post have featured several articles about how member libraries have worked to improve their library programs.

No mention of library advocacy in the MCR would be complete without mention of the work of the local library networks. The Colorado Council of Medical Librarians (CCML) continues to support its members and this year, all hospital librarians with the development of the ‘Myths and Truths About Library Services’ which has been approved by MLA and is available on the MLA web site (http://www.mlanet.org/resources/vital/index.html). The Health Science Library Network of Kansas City is another local group that provides strong programming and support for its members.

Library advocacy is an issue that pertains to and concerns all of us. I encourage you to participate in programs offered that fit your needs. I also encourage you to seek out members of your community and work together to strengthen the role of libraries in the hospital world. Above all, I urge you to communicate with me and/or your state liaison about your needs for library advocacy. Please contact me with any ideas, needs or comments you may have.

–B. Jones


Information Training for Nurse Interns

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Background

In November 2003, a new campus of the Dixie Regional Medical Center was opened in St George, Utah. A 900 square foot space was designated for a library. An MLS-qualified librarian was hired (the first ever) to establish a functioning medical library. To optimize use of library resources, the librarian designed and implemented a user-training campaign. This coincided with the hospital's need to hire new nurses to get up to full staffing. Most of these new nurses were inexperienced new graduates. The education department was tasked with orienting and training these new grads before 'turning them loose' on the units. The librarian agreed to participate in this process, using funds obtained through an award from the NN/LM MidContinental Region.

Getting started

The librarian met with education department members and nursing managers to analyze the most pressing needs and get a feel for the learning styles of the future interns. It was determined that special attention should be paid to finding specific information about drugs and patient education materials. As we wanted to have as much of the training online as possible, a web designer was consulted early on to determine possibilities and limitations.

Three hours of face-to-face time was assigned to the librarian with each batch of nurse interns. In this 3-hour block, nurse interns would be given a pre-test to benchmark attitudes and feelings (affective orientation) about libraries in general from their experience at their college program and self-reported skill and comfort levels using online library resources. Nurse interns would also be given a short tour of the physical library at the hospital followed by a ½-hour PowerPoint presentation by the librarian about online database resources. During the remaining time, interns would complete two assignments on drug information and patient education materials. As we wanted to have as much of the training online as possible, a web designer was consulted early on to determine possibilities and limitations.

After interns had been working for three months, a post-test would be given to determine how much they had used the online databases on the job and if they thought the training had been useful for them.

Nitty Gritty

A 17-question pre-test was developed. Although it would have been very easy to administer a paper version of this test, because we wanted to keep track of the data over several cycles of the program, we chose to design an online version.

The PowerPoint presentation was a re-do of the general library orientation presentation. However, special emphasis had to be paid to the areas of drug information and patient education materials.
services were underutilized due to lack of knowledge about the library. A marketing plan will be crucial to maintain support for the library and to increase its impact on the services offered by the hospital. The creation of a library page on the hospital intranet, promotional materials, and outreach projects are actions that can be implemented with very little funding. Other projects like the development of an AV center in the library may require outside funding sources.

The results of the visits and survey were presented to the quarterly meeting of Health Sciences Library Network and to the TMC Lakewood administration. The administration thought the project and the information garnered from the study was informative and recognized the opportunities for future growth of library services.

I have already obtained an AV center for the library, started working on the library intranet site, and instituted some of the changes suggested by the respondents to the survey.

I want to thank the librarians of Olathe Medical Center, North Kansas City Hospital, Research Medical Center, UMKC Dental School, and VA Medical Center of Kansas City for agreeing to participate in this project. Copies of my PowerPoint presentation and the survey questions may be obtained by request to my email.

Designing an exercise for practice use of the online drug databases was a challenge for the librarian (who had no special knowledge of pharmacy). Interns were given four questions (i.e. What is the mechanism of action of Zithromax?). Most of the drug questions required “digging” and were challenging. The other practice exercise required interns to examine all resources available (UpToDate, Micromedex Carenotes, MD Consult, MedlinePlus, etc.) and make a judgment as to which were the best for a particular query.

All in all

There have now been six cycles of nurse interns (about 120 total) who have received this training. Now that the online architecture is in place, it will be continued indefinitely. The final element of the program was to develop a web site highlighting the nurse internship program in general and provide links to the training.

This was a very rewarding and exciting program. The interns got a lot out of it and the nurse managers and administration saw the value of what a librarian can do for them. Technical aspects were challenging, but fortunately the web designer had patience and a sense of humor. This project has spawned other ideas such as an online journal club for nurses with possible CEUs. Interns continue to visit the physical library for clinical information needs as well as to keep in touch. I recommend other hospitals try a similar project for their training needs.

Public Library Role in Building a Health Sciences Information Infrastructure in the Four Corners

Through the efforts of staff from five public libraries located in the Four Corners area (see map) and the TC4C (Tribal Connections Four Corners) collaboration, finding quality and relevant health information became a little bit easier. In early 2006, each public library received funding from the National Network of Libraries of Medicine MidContinental Region to provide programming to specifically address the health information needs of Native Americans.

The ultimate goal for the project is to build a health sciences information infrastructure that serves the Native American communities in the Four Corners region in order to enhance the quality of healthcare and improve the quality of life and to demonstrate the role that public libraries can play in the health sciences information infrastructure.

The staff from the public libraries received hands-on training on finding and evaluating health information online that was provided by health sciences librarians from the Four Corner states academic health sciences libraries, the public library created and carried out excellent projects and proved that public libraries in the Four Corner states are ready to provide quality health information to the community they serve.

Examples of some of the programs were: invited speakers to discuss health issues affecting Native Americans; day-long health fairs with exhibits by local health departments, clinics and hospitals; and online health information resources treasure hunts.

The public libraries participating were Diné College Library, Tsaile AZ; Ignacio Community Library, Ignacio, CO; San Juan County Library System, Blanding Branch, Blanding, UT; Shiprock Branch Library, Farmington, NM; and Tuba City Public Library, Tuba City, AZ. The TC4C partners included Arizona Health Sciences Library at the University of Arizona; Denison Memorial Library at the University of Colorado at Denver and Health Sciences Center; Health Sciences Library and Information Center at the University of New Mexico; Spencer S. Eccles Health Sciences Library at the University of Utah; and National Network of Libraries of Medicine from the MidContinental, Pacific South West, and South Central Regions.

–J. Bramble