

**NATIONAL NETWORK OF LIBRARIES OF
MEDICINE**

MidContinental Region

Outreach Narrative

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OUTREACH TO HEALTH PROFESSIONALS

NN/LM MidContinental Region (MCR) outreach to health professionals will concentrate on public health and inner city/minority populations. The public health focus will be on achieving objectives identified in the NN/LM public health outreach evaluation plan, adding NLM resources to state public health sites, and working with leadership institutes and schools of public health to incorporate informatics into the curriculum. Inner city and minority outreach will focus on Native Americans, community health centers, working with community based organizations to obtain grant funding and with resource libraries to support minority student recruitment into health professions.

We will continue to provide state outreach to health professionals by exhibiting at professional meetings, visiting their facilities and communicating with them through electronic discussion lists and articles. In addition, we will carry out smaller projects with non-Network member hospitals and extend the development and distribution of the CD resource product for nurses implemented in Year 03.

State Outreach

Rationale

The RML would like all health providers to become familiar with the products of the National Library of Medicine and the services of the NN/LM. In addition to our public health and minority health projects, we will offer outreach to health professionals in other specialties and in other settings.

Methodology

We will continue to make visits to health care facilities and talk to staff about the health information resources that fit their information needs. The Wyoming Liaison will write articles for health care association newsletters that will be adapted by other state liaisons and submitted to their state association newsletters for publication. As appropriate, liaisons will work with state health association listservs to provide health information that would be useful to the health specialty. This is an outreach approach which has already proven successful for public health professionals and public librarians.

The NN/LM plans to exhibit and/or make presentations at the state health professional meetings represented on the chart below.

Conference	CO	KS	MO	NE	UT	WY
Hospital Association		***				
Long-term Care Association		***				
Medical Society/Association		***			***	***
Nurses Association		***		***	***	
School Nurses					***	
Public Health--Nursing						***
Public Health Association	***	***		***	***	
National Association of Local Boards of Health	***					
Community Health Centers					***	
Minority Health	***		***	***		***
Rural Health	***				***	***
Environment Protection Agency	***					

Evaluation

The RML will develop an evaluation card to be distributed in the exhibit booth at local meetings. The card will ask questions to determine whether or not information received in the booth has been useful. It will be distributed on a random basis to approximately 50% of the booth's visitors. We will expect an increase in phone calls or emails from the different health professional groups as a result of our outreach efforts through visits, listservs and articles.

Improving Information Access to Non-Network Member Hospitals

Rationale

One of the outcomes of RML outreach is that non-Network members have access to needed resources and services. We know that small hospitals cannot afford a professional librarian and a collection. On an ad hoc basis, RML staff has been working with institutions that lack professional assistance providing them with training or teaming them up with a medical library or consultant. Preliminary work will begin in year 04 and continue into the next year to address their needs in a systematic fashion.

Methodology

The Network Membership Liaison will use the *AHA Guide to the Health Care Field* and compare hospitals in the directory with DOCLINE to determine hospitals that do not have libraries. This comparison will be the basis of an outreach plan to those institutions for year 05. Institutions will be contacted and provided information on the NN/LM and health information resources.

Evaluation

All hospitals in the *AHA Guide to the Health Care Field* and not in DOCLINE will be identified. We will judge this effort successful if at least half of the institutions that are not Network member facilities are contacted and provided information during the year.

CD for Nurses

Rationale

Due to connectivity issues when using dial-up connections (both rural and urban), the MidContinental Regional Medical Library (MCRML) decided to explore additional delivery methods for providing instruction on the use of health information resources. The Education Liaison is creating an Internet and research skills instruction website, with a companion CD file. The first audience for this distributed learning product will be nurses at the University of Wyoming School of Nursing Distance Education Program, who will test the product during the spring 2004 semester. To date four of the ten proposed modules (*Research Question, Selecting Search Synonyms, Basic PubMed Search* and *MedlinePlus*) have been created using ScreenWatch as the demonstration software. This software allows for a demonstration of web resources that includes audio and animation.

Methodology

The Distance Learning Librarian at McGoogan is working on a similar product for the University of Nebraska's nursing school. The Education Liaison will be working in tandem with her to produce modules that both projects can use.

Based on the evaluation of the nursing CD at the end of year 03, changes will be made to the content of the CD and the product will be distributed to the incoming group of students of Wyoming's fall distance education session. During the year the CD training product will be reviewed for maintenance on a semiannual basis. If the Education Liaison determines that the CD product is useful, she will offer it to students at another school of nursing, to be identified.

Evaluation

Health professionals who make use of the product will be queried to determine whether they have successfully learned how to locate health information from the CD.

PUBLIC HEALTH OUTREACH

Access to and knowledge of NLM resources

Rationale

Today's public health workers face more challenges than ever before—challenges that quality health information can help them address. Recognizing the importance of current, quality health information, several significant public health agencies have networked to provide information for the Partners In Information Access for the Public Health Workforce web site. Presenters from the latest American Public Health Association (APHA) conference in San Francisco based their documentation on the current medical literature and scientific analysis. Mandates that accompany bioterrorism funding include education components for their work force.

In our region, a newly created Utah Public Education and Training Consortium has been formed by the Bioterrorism Project Director, Utah Department of Health, to explore education issues for public health workers. The Public Health Liaison serves on this committee. In Nebraska, the Education Liaison has served with the Nebraska Bioterrorism Preparedness and Education Consortium and was instrumental in persuading this group to hire a medical librarian. All these activities indicate that current, quality health information is recognized as vital by public health workers.

Of special note, many public health workers, notably those involved with emergency preparedness, use Health Alert Networks (HANs) to assist them with rapidly accessing current, quality health information. The national Health Alert Network is being developed as part of the CDC's Public Health Emergency Preparedness and Response Program. Each state has access to a HAN as well as 89 percent of U.S. counties. Some state HANs have included components for the general public to provide them with timely health information in case of emergency situations.

The development of this type of network provides opportunities to form a permanent link from this public health communication system to NLM products and services. Utah is discussing the ability to link the Utah Notification and Information System (HAN) to the Utah Department of Health's Learning Management System. These two systems would then share the same database of contact people allowing a training opportunity or a distance education course or broadcast to be publicized to all individuals on the existing HAN network. Training announcements for classes involving NLM products and services could easily be marketed to public health workers in a particular geographic area, increasing public health workers' access to quality health information.

In order to provide public health workers with knowledge of and access to current medical information, the NN/LM MidContinental Region will be supporting various actions in year 04. These activities will promote NLM services and resources to the public health work force, satisfying their documented needs for current and reliable health information.

Methodology

The MCRML will support standardized classes or modifiable demonstrations for various groups of public health workers. Classes of two hours or more will be based on the Training Manual created by the NLM Public Health Working Group and will involve hands-on exercises if possible. Existing computer labs within state public health departments or teaching classrooms from rural local community colleges will serve as possible sites for online instruction. When offering training opportunities in rural areas, other interested individuals, such as public librarians, will be encouraged to attend the training. Classes, although similar in basic content, will be modified by the liaisons according to the particular focus area of the public health workers. Team teaching with Network members will be encouraged. Working with the Assessment and Evaluation Liaison, an evaluation component will be created for the classes. Each state liaison will provide a class regarding NLM products and services to two different groups of public health workers (for instance, epidemiologists, nutritionists, or emergency preparedness coordinators) in their state.

Exhibiting at state public health association conferences will provide another opportunity to introduce NLM products and services to public health workers. Each state liaison will either exhibit at their state's public health annual conference, provide an NLM session at the conference, or both. Liaisons will be encouraged to include Network members from their local area when exhibiting and presenting to the public health workers.

Another method of increasing awareness for public health workers to NLM resources is through their state public health department's web site. Public health departments are varied and extensive in what they include in their web sites, often including links for the general public as well as the public health worker. Few Region 4 public health departments (Utah, Wyoming) have visible links to NLM resources from their web sites. In year 04, each state liaison will contact the web masters of their state public health departments in order to provide them information so that appropriate links to NLM resources can be established. Linking to the Partners in Information Access for the Public Health Workforce web site will be of primary importance. These links when publicized by the departments of health and/or promoted in training sessions will encourage public health workers to become familiar with NLM products and services.

Linking NLM products and services from a HAN web site can also help to increase access to needed information resources. We will first determine the existence of a HAN in each of our states. Contact information will be gathered focusing on individuals responsible for the HAN web site, if one exists. These HAN coordinators will be contacted by their state liaisons and provided with information about NLM products and services. Information concerning future developments of each state HAN will be gathered. This information may include collaborations with other state public health agencies, collaborations with community agencies, or future plans for new technologies to be used. The state liaisons will then encourage state HAN coordinators to link to NLM products and services from HAN web sites. Contact information of state HAN coordinators will be added to the public health contact database.

Evaluation

Success of the public health classes will be measured by incorporating an evaluation post test, to be developed in conjunction with the Assessment and Evaluation Liaison and the Education Liaison. An indication of seventy-five percent of public health workers demonstrating increased knowledge of NLM resources and services on the post test following the class will indicate successful transmission of class information.

Exhibiting at state public health association meetings is a method to “get the word out” to public health workers. A simple evaluation card will be developed and presented to individuals visiting the exhibit booth or attending a presentation at the conference. If seventy-five percent of the returned evaluation cards indicate that the booth visit or the conference presentation provided useful information to the public health workers, then this will be stronger evidence of the benefit of NN/LM presence at state public health association meetings.

The linking to NLM resources from six state public health department web sites and from two state HAN web sites will be an indication of a high success rate for this activity.

Online Public Health Library (OPHL) Project

Rationale

The public health body of knowledge, distinct from medicine, is fairly new and is growing. As the public health body of knowledge grows, there arises a need to organize this information for storage and easy access. A model for one possible effort to organize and provide access to these public health documents is the Online Public Library project (OPHL).

Working with the Utah Department of Health (UDOH), the NN/LM MCR and the Spencer S. Eccles Health Sciences Library formed a Public Health Working Group to investigate providing online access to electronic public health documents generated by the Utah Department of Health. The group met to create a process where UDOH electronic documents were identified and then added to the Eccles library online catalog. A link from the Eccles catalog takes the searcher back to the UDOH web site containing the electronic document. This provides more access to these documents for public health workers, local health officers, health professionals, students, members of the legislature, and the media. To date, about seventy public health documents have been linked through the Eccles Online Catalog, Horizon. The hope is to further streamline this process and then adapt this model to be used in another state within the region.

Methodology

The Public Health Liaison, along with members of the Spencer S. Eccles Health Sciences Library staff, will continue to meet regularly with the public health officials comprising the Utah Public Health Working Group. The Group will:

- continue to discuss methods for streamlining the process of submitting UDOH electronic public health documents for cataloging,
- identify current problems with the process,
- determine the role of the Utah State Library,
- continue to identify UDOH public health officers and departments that contribute to the process,
- explore ways to market the benefits of access to electronic documents to other UDOH public health workers and departments who may generate electronic public health documents in the future.

This process for developing collaboration between state public health departments, state libraries, and the health sciences libraries who serve them, as well as the resulting product of library access to electronic public health documents, will be recorded and documented in a format that can then be used by other libraries who wish to implement a similar project. This model will be shared with other NN/LM coordinators who can then form working groups of their own with health sciences libraries, state libraries, and state public health officials who wish to implement this process.

Evaluation

Two outcomes will determine the success of the OPHL project: the inclusion of links in the Eccles online catalog to seventy-five percent of the electronic documents generated by UDOH individuals and departments, and one other Region 4 state beginning the planning process for a similar program.

Public Health Leadership Institutes

Rationale

In 1991, the Public Health Program Practice Office (PHPPO) of the Centers for Disease Control and Prevention (CDC), recognizing the need for strong public health leaders, began providing technical assistance and support for state and regional public health leadership programs. In 1994, the PHPPO sponsored, through a cooperative agreement with the Association of Schools of Public Health, the establishment of a Public Health Leadership Development Network managed by the Saint Louis University School of Public Health. Today there are 25 state, regional, national and international leadership institutes providing public health workers an opportunity to learn skills that will enhance their community's public health infrastructure. Candidates in these leadership institutes also learn to collaborate with leaders from other organizations to solve health problems in their communities. Interactions with these public health leadership institutes may allow health sciences librarians to be viewed by public health officers as important leaders in their own right and may lead to creative partnerships between libraries and public health departments, with the goal of providing quality health care to communities.

In Region 4, contacts have been made with key individuals in two public health leadership institutes. The Great Basin Public Health Leadership Institute, joint venture

between Utah and Nevada; and the new Kansas Public Health Leadership Institute. Continued work with these two institutes is planned for year 04.

Methodology

Information about the public health leadership training programs operating in our region will be gathered by each of the state liaisons, including contact information for the executive director, contact information for key program presenters, information on course content, and the scheduling of the programs. Each leadership institute will be queried to determine if a formal informatics component exists within the program. The executive director and key presenters for the institutes will be approached in order to share information about NLM services and products and in order to determine their personal information needs as they teach public health workers.

A desired outcome of this contact is to establish a health informatics component within individual sessions for these institutes. It is hoped that introduction of NLM products and services during the public health leadership institutes will provide public health leaders new skills that they can use in their communities and share with other public health workers. Key public health leaders will be included in the public health contacts database.

Evaluation

The implementation of a plan to incorporate informatics in sessions of two public health leadership institutes associated with Region 4 will be considered a successful milestone for this project.

Public Health Graduate Programs

Rationale

One method to positively impact the information gathering skills of public health professionals is to incorporate knowledge skills into the curriculum of new public health graduates. As organizations such as APHA and various Schools of Public Health gear up to increase the numbers of public health graduates, it creates a strong opportunity for health sciences libraries to push for inclusion of an informatics component into their curriculums. A new list of core public health competencies developed by the Council on Linkages Between Academia and Public Health Practice and the list of Ten Essential Public Health Services adhered to by public health workers highlight the need for information seeking skills. This, in effect, opens the door for health sciences librarians to partner with School of Public Health faculty to create a curriculum incorporating knowledge-based skills. By the end of year 03, the Public Health Liaison will have followed up on contacts made with the University of Utah School of Public Health to investigate the current use of informatics in the public health curriculum.

Methodology

Currently the Dean of the School of Public Health at the University of Utah is aware of the NN/LM program but further contacts need to be made to determine where we can have an impact on curriculum development. A list of contact names of faculty responsible for program development is needed. The Public Health Liaison will meet with other appropriate liaisons (Education, Assessment and Evaluation, Technology), as well as library staff from the Spencer S. Eccles Health Sciences Library, to determine an agenda of possible issues that can be used to open dialog with these public health faculty.

With the assistance of the Dean of the School of Public Health, an MCRML consultant, a working group will be formed to further explore the possibilities of incorporating knowledge skills into University of Utah public health programs. Interaction with the working group will help to formulate a process that can be documented and shared with other state liaisons and NN/LM coordinators who wish to have an impact on their state's public health programs. The NN/LM MCR public health advisory board member will also be consulted on these processes and the output of these processes.

The Public Health Liaison will work with other Region 4 state liaisons to determine the existence of informatics components within their state public health graduate programs. Information such as course content, audiences served, and contact information for faculty who are program developers will be collected. Information about the progress of the working group and significant highlights will be reported on the NN/LM MCR public health web page.

Evaluation

The development of a working group consisting of University of Utah public health faculty, the Public Health Liaison, and other interested individuals will be a significant step forward for this project. The formulation of a plan to include informatics in U of U public health graduate programs will indicate a success for this part of the goal to institutionalize the integration of knowledge skills into public health programs.

Communication

Rationale

As with all other health professions, public health has a variety of methods to communicate information in a timely and efficient manner to its work force. By tapping into established public health communication frameworks, the NN/LM MCR can positively impact the knowledge of public health workers as they seek current, quality health information. By using the communication avenues open to public health workers and by providing information to them in a format that is useful and familiar to them, health sciences librarians will be viewed as knowledgeable and informed partners by the public health work force.

The Internet continues to be our most robust communication tool. In Utah, the NN/LM MCR has regularly used the listserv of the Utah Public Health Association (UPHA) to inform its members of news items and informational pieces that may have significance to them but that they would not normally see. A public health web page on the NN/LM MCR web site serves as a place for quick, useful information for public health officials and librarians who are interested in public health issues. As previously mentioned, in year 04, the NN/LM MCR will also strive to link NLM products and services from state public health web sites. The NN/LM MCR state liaisons will continue to explore opportunities to exhibit and give presentations at state public health association meetings.

Communicating and sharing our expertise with the public health work force is an important contribution that the NN/LM MCR can make to the arena of public health. But communication is a two-way street. The knowledge and feedback we gain from public health workers can also be used to augment knowledge gained by the state liaisons and to help us communicate this knowledge with our Network members. The NN/LM MCR plans to create a contact database of public health individuals who have indicated an interest in collaborating with health sciences librarians and the NN/LM MCR. This database will keep track of useful interactions that NN/LM MCR state liaisons have made when working with their state public health workers.

NN/LM MCR Network members are an integral part of communicating services to public health workers in a community. All state health departments are served by the Resource Library at their state university. To expand our service area to local public health officials in our region, it is necessary to determine which Network members are currently providing library services to the public health work force.

Methodology

The Public Health Liaison will continue to regularly send a compilation of NLM/NN/LM informational items to the Utah Public Health Association listserv and to the state liaisons for purposes of dissemination to identified groups within their own states. The Public Health Liaison, with input from the advisory board and the state liaisons, will continue to update the NN/LM MCR public health web page with information of importance to public health workers and librarians interested in public health issues. As previously mentioned, the state liaisons will continue contacts with state public health web masters to include visible links to NLM products from the state public health web sites. The Public Health Liaison will work with the Education Liaison, Technology Liaison, and the Assessment and Evaluation Liaison to develop a basic public health demonstration that can be modified for presentations at public health association meetings.

The public health contact database will use software available from NLM. As liaisons have useful interactions with public health workers, they will populate the database with this contact information making it available to all liaisons. Each liaison will check once a year to make sure the contact information in the database is accurate.

The Public Health Liaison will begin work with the Network Membership Liaison to add to an overall assessment of Network members to determine whether or not members are now providing library services to public health workers in their community and the extent of these services. Information gathered from these questions on a Network assessment in year 05 will allow the NN/LM MCR to determine gaps in library service for state and local public health workers. Data on absence or insufficiency of service will be used for planning future outreach.

Evaluation

Feedback from public health workers that have benefited from messages sent out over the public health will be noted in the monthly liaison reports. Special note will be made of any requests, activities, or collaborations, generated by these messages. Similarly, comments received about the NN/LM MCR public health web page will be noted and reported. The public health web page will be reviewed once in year 04 by the public health advisory board member for comments. Exhibiting, acceptance as a speaker at the conference or presenter of a poster session will be viewed as part of a successful completion of this activity. As noted, evaluation cards will be distributed to presentation attendees with the goal of seventy-five percent of attendees confirming that the presentation provided useful information to them.

Creating the public health contact database and the instruction of the state liaisons on how to use the database will be an indicator of success. Assessment information from Network members will be analyzed and the results reported to the NN/LM MCR administration. The NN/LM MCR administration will work to make certain that at least one Network member in each state responding to the survey will positively affirm that they provide quality library services to public health agencies in their community.

INNER CITY OUTREACH

National Association Of Community Health Centers

Rationale

The mission of the National Association of Community Health Centers (NACHC) is “To promote the provision of high quality, comprehensive health care that is accessible, coordinated, culturally and linguistically competent, and community directed for all underserved populations.” (<http://www.nachc.org/about/mission.asp>) Their programs serve over 11 million people at 3,000 clinics.

The NACHC approached the National Network Office in the fall of 2003 requesting assistance with training in accessing online health information resources. Because outreach to health care providers for inner city and minority populations has always been a concern of Region 4, we have made outreach to the NACHC clinics a priority for year 04, beginning January 2005. This is in accordance with NACHC’s timeline.

In order to implement this outreach, the Inner City liaison is relying on lessons learned from year 03's outreach efforts to Computer Technology Centers (CTC). GMR liaison Beth Carlin joined Ms. Champ-Blackwell in providing training to a CTC center in East St. Louis, IL. They received valuable feedback from CTC staff in Illinois, which Ms. Champ-Blackwell will incorporate into developing presentations and curriculum for the staff at NACHC clinics.

Steps to promote outreach to the clinics have already begun and include identification of the main NACHC sites and the clinics that report to them. Outreach has already been provided to some of the NACHC clinics in the course of providing outreach over the last several years.

Clinics that have received contact and/or training:

State	Clinic Name	Contact	Training
NE	One World Community Center	X	
NE	Charles Drew Health Center	X	
UT	South West Utah Community Health Center	X	X
UT	Utah Navajo Health Systems	X	X
CO	Denver North High School	X	X

The Utah Liaison also exhibited at the Association of Utah Community Health Centers Conference in 2003.

Methodology

Several activities are planned in year 04 to assess the needs of the clinics and to develop resources and curriculum to address those needs. The NACHC office has already determined that its clinics require training in accessing health information. Once the NACHC office identifies and shares more specifically what the training needs are of these clinics, the Education Liaison and the Inner City liaison will develop a curriculum that will be used by the state liaisons in providing training at the clinics.

After the Fall 2004 NACHC conference, a mailer will be sent to all the main clinics announcing the contact name of the state liaison where the clinic is located, contact information for the Inner City and Minority Services Liaison, as well as brochures on consumer health resources focusing on minority populations. This mailer will serve as a formal introduction to clinic administrators. The Inner City liaison, along with the state liaisons, will identify at least one clinic in each state that will receive training in the spring of 2005. The Inner City liaison will assist state liaisons by developing modules that will be used to provide training. Those clinics that receive training will also receive

handouts to provide their clients such as NLM bookmarks, Prescription (Rx) for Information pads, and brochures on consumer health resources.

Liaisons will attend regional meetings of the NACHC, depending on the time and location of these meetings. The Utah Liaison will be exhibiting the 2004 Association of Utah Community Health Centers Conference.

Evaluation

The training provided to the NACHC clinics will include pre- and post-tests that will determine if the participants are increasing their knowledge of health information resources relevant to their work. Also, a three-month follow-up will take place at each of the six clinics that received training to learn if the staff is making use of the resources presented to them at the initial MCRML session.

Community Based Outreach Symposium

The MidContinental Region, in collaboration with the New York Academy of Medicine, will be hosting a Community Based Outreach Symposium in December 2004. The goal of the proposed symposium is to explore the new models of outreach that are emerging as technology is dramatically changing the abilities of libraries to provide resources and services beyond traditional institutional boundaries.

Evaluation

The symposium will produce recommendations for NLM's health disparity's plan and next NN/LM RFP. The success of the symposium will be determined by the influence of these recommendations on the health disparity plan and the RFP.

Recruitment of Minority Students

Rationale

The recruitment of minority students into health careers is one method recommended by the Institute of Medicine to eliminate health disparities faced by minorities in the United States. Last year, several liaisons held classes for middle and high school students to encourage them to attend college and pursue health careers. They also assisted minority students already in college by providing training classes in PubMed and MedlinePlus. The liaisons will continue to build upon this type of outreach in year 04, and expand it in a more focused way. One of the items that came out of the Regional Advisory Board meeting was the need for libraries to be seen as more relevant to their institutions. If librarians at academic institutions become involved in providing resources to the recruitment departments at their institutions, they can add value to the work they are already doing.

Methodology

The MCRML will implement a pilot project that will provide the Resource Libraries with information on grants, scholarships, and minority recruitment programs available to academic institutions. The information will be posted on the Inner City Liaison's NN/LM blog and/or will be emailed to the liaisons at each Resource Library. Examples of resources include blog postings of scholarships and grants that assist minority students in accessing the financial and educational resources they need to compete in a health career educational environment, and a handout of more formal educational programs such as the Health Careers Opportunity Program and the Health Professions Partnership Initiative. Each liaison will then work with her Library Director to determine how best to use/share this information. A baseline assessment of Resource Library support of minority recruitment efforts has already been made.

Evaluation

At the end of year 4, the liaisons will report to the Inner City Liaison how useful the Resource Library Directors found this type of information to be in their roles as information providers to their institution. The liaisons will also report on any increased support their libraries now offer, compared to the baseline established in year 03. If it seems to have been effective in promoting the value of the library and assisting in the recruitment of minority students, then in year 05, liaisons will expand the information sharing to other Network and Affiliate libraries in their state.

Methodology

The Inner City liaison will also continue to work with Creighton University Health Sciences Multicultural and Community Affairs (MACA) Office to develop a "College 101" workshop. Two staff members in the MACA office, along with the Inner City liaison, offered the class to high school students at an inner city church in Omaha. The MACA staff and the Inner City Liaison are fine-tuning the class and plan to take it to inner city churches across the state. While the focus of the class is not to pursue health careers per se, the involvement of two individuals who work to recruit minority students in health careers at Creighton University means that the examples used in classes focus on health professions and that MedlinePlus is used as a source for locating information.

Evaluation

The success of this workshop will be evaluated. The Inner City Liaison will keep track of how many classes the MACA office at Creighton University offers in year 04, and how many students attend those classes. She will ask the MACA staff to provide her with feedback on the efficacy of the classes. If it is deemed a valuable program, the Inner City Liaison will provide train-the-trainer workshops across the region to CBOs and faith-based organizations that are interested in offering it to the youth in their programs.

NATIVE AMERICAN OUTREACH

Tribal Connections Four Corners

Rationale

The purpose of Tribal Connections (TC) Four Corners is to capture the lessons learned by the partners in their collaboration to improve health information access to the Native Americans in the Four Corners area of the United States. The process includes an assets inventory and mapping of the participants, a selection of pilot projects to be evaluated, and the a best practices website populated with information from the pilot projects.

Partners in Tribal Connections Four Corners are:

- NN/LM MidContinental Region
- NN/LM South Central Region
- NN/LM Pacific Southwest Region
- Arizona Health Sciences Library, University of Arizona
- Denison Memorial Library, University of Colorado
- Health Sciences Library and Informatics Center, University of New Mexico
- Spencer S. Eccles Health Sciences Library, University of Utah

The MidContinental Region (MCR) has multiple roles for this project: as the RML funding the project and as an active partner in the collaboration. MCRML was part of the planning group that developed the assets inventory that identified the strengths and resources of the TC Four Corners partners and contributed to the decision making process that finalized the selection of pilot projects. There are several subgroups that have been formed to carry out the objectives of TC Four Corners. Stephanie Weldon, the Colorado Liaison, and Siobhan Champ-Blackwell, the Inner City Liaison (IC), are members of the Web Committee. They assisted with the redesign of the Tribal Connections website <http://www.tribalconnections.org/> and help maintain it. Ms. Champ-Blackwell and Claire Hamasu, the Associate Director, are members of the committee evaluating the Effective Practices Database, a National Services Resource Center product. Ms. Weldon is working with the needs assessment group that will develop a plan to assess the health information needs of the Indian Health Service and tribal health departments in the Four Corners area. She is also a member of the “Go Local” committee that is developing a Four Corners resource for MedlinePlus.

Methodology

The projects begun in Year 03 will be continued in Year 04. The work on the Tribal Connections website is ongoing, with the Inner City and Colorado Liaisons taking turns with other Web Committee members to evaluate new websites. Criteria have been developed to evaluate which websites can be added to the site, and a process to allow site visitors to suggest sites is under way. The Effective Practices Committee will develop a procedure to add TC Four Corners practices to the database and develop recommendations to the National Library of Medicine on the use of the database for all

NLM outreach projects. The Needs Assessment Group has been formed and has begun meeting by telephone to develop a strategy for assessing information needs in the Four Corners area. The “Go Local” Group is also in a planning stage, and has just begun to meet via teleconference to develop a strategy for the year.

In addition to the specific committees each liaison is directly involved with, they also have peripheral involvement with other projects. For example, one of the outcomes of TC Four Corners is the development of a contacts database. Liaisons will be involved in adding to that database, once it is in place.

Evaluation

Built into the project funding is an outside evaluator for each of the major objectives of TC Four Corners. The evaluation plans are being developed and MCRML will contribute to the evaluation of TC Four Corners project.

State Outreach

Rationale

The liaisons have made contacts through past work with tribes in Wyoming, Colorado, Nebraska and Utah. The Inner City Liaison has made contact with three of the four tribes that reside in Nebraska. She has visited the Omaha Reservation several times, and taught a class in PubMed searching. She maintains email and phone contact with several staff of the Omaha Nation’s IHS clinic. She has met with the tribal chair of the Ponca tribe and staff from the Ponca tribe office. She has communicated with members of the Winnebago tribe, and plans to work with Regional Advisory Board member Gretchen Forsell to increase contact with the tribe. In addition to this state outreach, the Inner City Liaison includes the Student Coordinator of Programs for the Association of American Indian Physicians (AAIP) in her email distribution list, and is likewise on the Coordinator’s distribution list, thus a sharing of information goes on between NN/LM and the AAIP.

The Colorado Liaison sits on the Education Committee of Denver Healthy People, as do several leaders from Native American community organizations. The Colorado Liaison believes that regular attendance at committee meetings will lead to presentation opportunities within the Native American community.

In Durango, Colorado, Fort Lewis University has an award from the MCRML to provide outreach to Native Americans in the Southwest corner of the state. This includes the two Ute tribes that reside within an hour of Fort Lewis University. The University will also work with the Public Library in Durango to ensure proper outreach to Native Americans. Ms. Weldon will be working with Fort Lewis University to implement this program and ensure that they have the necessary resources to provide outreach to the Native American population in southwest Colorado.

The Wyoming Liaison is in the contact phase of her outreach to the Wind River Reservation, where she is identifying the key people that she will work with. She has identified university faculty and staff that have worked with the tribe and has asked them for recommendations and advice on how to identify and approach the partners who can help her with health information outreach effort. In December 2002, Ms. Henning attended a workshop "Developing Tribal Relationships with the University of Wyoming, the Northern Arapaho Nation and the Eastern Shoshone Tribe". By the end of Year 03, she will have attended a powwow and written a letter to the Tribal Council on the Wind River Reservation to introduce herself to the tribe.

The Utah Liaison came to the MCRML from an outreach position at the Spencer S. Eccles Health Sciences Library. She is now building on previous outreach efforts with tribal communities. As the Utah Liaison she has made contacts with the Indian Walk In Center in Salt Lake City, presented a demonstration of MedlinePlus to the staff at the Monument Valley Health Center on the Navajo Reservation, and met with administrators and staff of the Utah Navajo Health Systems.

Methodology

The Inner City Liaison and the state liaisons will continue to include tribal communities in their ongoing outreach efforts. With a large Native American population in the region, a focus on providing outreach to this group will remain a priority.

Site visits, phone calls and emails on an ongoing basis build a strong foundation that demonstrates reliability. In addition, some liaisons are planning to start attending powwows as a way to learn more about the various tribes they work with. As the trust builds, so do the opportunities for sharing resources and information.

The Inner City Liaison plans to work with advisory board member Gretchen Forsell, who works with the Winnebago tribe through her position with the Northern Nebraska AHEC. She will present at the summer camp programs the AHEC offers to high school students to encourage them to pursue health careers. She will also teach PubMed and MedlinePlus classes at the clinic on the reservation.

The Inner City Liaison will develop relationships with the Santee Sioux tribe in Northern Nebraska. She will begin by determining who the tribal gatekeepers are and initiate contact with them by phone. She will visit the Santee tribe in Niobrara and set up a schedule of training in MedlinePlus for high school students, Head Start staff and other interested tribal staff. She will also determine where the Santee Sioux Tribal members go to receive health care as there is no IHS clinic that serves the tribe in Nebraska.

In addition, the Inner City Liaison will also make a site visit to the Omaha and Lincoln offices of the Ponca tribes, and set up a time to teach staff at the offices about MedlinePlus. Finally, the Inner City Liaison will begin attending powwows on the Winnebago and Omaha Reservations.

In Wyoming, the Inner City Liaison will present a module at the Wyoming Symposium on providing health information to Native American and other minority populations in order to encourage Wyoming librarians to offer services to these special populations. The Wyoming Liaison will build on her research for appropriate contacts to the Wind River Reservation (WRR) and begin making site visits. Initially, she will inventory the facilities and connectivity that are available for training sessions. She plans to offer PubMed and MedlinePlus training to the staff at the IHS clinic on the Wind River Reservation, as well as the staff at the clinic in nearby Lander. She also plans to teach a class on MedlinePlus to the high school students at the tribal high school on Wind River Reservation.

The Utah Liaison will continue to work with the Utah Navajo Health Systems. This system is a National Association of Community Health Centers clinic. She will also work more closely with the Indian Walk In Center and provide training in PubMed and MedlinePlus to the staff. Much of this outreach activity and the work with Native Americans in Utah will be coordinated with or completed by the Spencer S. Eccles Health Sciences Library Outreach Librarian.

The Colorado Liaison will be in touch with Regional Advisory Board member Candace Fleming of the Ben Nighthorse Center, and Michele Sarche, Ph.D., to see how NLM resources can help their mission, and to elicit contacts from them in the geographic strip from Pueblo to Fort Collins. She will also continue working with Fort Lewis University as they fulfill the responsibilities of their MCRML award.

Evaluation

The Inner City Liaison will include an evaluation form as part of her presentation at the Wyoming Symposium. She will also include evaluations at the classes she holds throughout the year at tribal clinics. She will report anecdotally on the success of making contacts and building trust that come out of attending powwows at the Omaha and Winnebago reservations, with plans to expand that activity if she finds it effective.

The Wyoming Liaison will determine if her site visits to the Wind River Reservation (WRR) result in an increased use of document delivery by the WRR clinic staff. She also will report anecdotally on the effectiveness of attending powwows in the state.

The Colorado Liaison will consider two-way communication with Native American community health leaders in her state as a sign of success. She will also continue to monitor the outreach efforts of the Fort Lewis University project to assure that they achieve their goals.

The Utah Liaison will provide an evaluation form for attendees upon completion of formal classes taught at Native American clinics or organizations. Contact information of Native American individuals who are interested in further working with the NN/LM MCR or the Spencer S. Eccles Health Sciences Library will be collected and shared.

CONSUMER HEALTH OUTREACH

Rationale

In year 03 of the contract the liaisons worked on solidifying relationships between public and medical librarians in their respective states. The Colorado Consumer Health Information Librarians (CCHILL) group met regularly and relationships were forged between public and medical librarians. A preliminary meeting was held in Kansas to explore the possibility of creating a consumer health librarian group. The idea was met enthusiastically, and will be implemented in year 04 of the contract. Wyoming also showed success in the integration of public and medical librarians with the first annual Wyoming Symposium held in July of 2003, as medical and public librarians came together to learn and form connections. As a result of the symposium, the public and medical libraries are now communicating regularly through an electronic discussion list.

Each of the region's state library web sites links to MedlinePlus. In year 04 of the contract the state liaisons will work towards expanding the number of links to MedlinePlus.

The consumer health web site http://nnlm.gov/mcr/consumer_health/ has been updated regularly and has new additions which have proved extremely helpful in teaching classes and ensuring that rural health professionals and consumers have the best access to health information. "Free Full Text Health Resources," a link from the consumer health web site, ensures that access to health information is available. Also, links to new pages entitled, "Collection Development Resources" and "Pamphlets and Brochures" are used frequently by liaisons when giving consumer health classes. There is also a section on PowerPoints which librarians can download and modify in order to meet the needs of their library patrons. These modules have met with good response from librarians in Colorado. A few public librarians have contacted the Consumer Health Liaison in order to discuss using the PowerPoint classes. In 2004, the Consumer Health liaison will be creating more focused modules and will work with public librarians to ensure that the modules created meet their needs.

In year four of the contract the following outcomes will occur:

- Medical and public librarians will collaborate in providing consumer health information.
- Significant progress will be made in ensuring that services in the MidContinental Region will be available through Go Local. Missouri will Go Local in early 2004.
- Medical and public librarians will know about and use the MCR consumer health website as a resource.
- The public will be aware of and use NLM resources.

Methodology

Four states within the region will have partnerships between public and medical libraries. These partnerships will include regular communication whether through either an electronic discussion list or through regularly scheduled meetings. In order to ensure that there is ongoing collaboration between public and medical librarians, the following will occur:

- The 2nd annual Wyoming Librarian Symposium will have a large consumer health component with medical and public librarians attending and providing input.
- Kansas will begin to hold regular meetings of medical and public librarians. The groundwork has been laid and the consumer health librarians in the state are anxious for this endeavor to get off the ground. The Kansas Liaison and the Technology Liaison will work together to ensure that this occurs.
- The Colorado Liaison will continue to work with the CCHILL group. In year four, she will work to ensure that this becomes an organization that is self sustaining.
- The Utah and Public Health Liaison will explore with the leadership of the Utah Consumer Health Information Network (UCHIN) web site; the Utah Health Sciences Library Consortium; and HEART, a health information section of the Utah library Association; about the possibility of forming working relationships between medical and public librarians. Members from the public library sector will be recruited by Eccles library staff working on an LSTA public library grant. The outreach being done with the help of this grant ensures that Utah will have successful implementation of medical and public library partnerships.

By the end of year 05, a Go Local plan will be in place and active for each state in the region. In year 04, state liaisons will contact and develop relationships with organizations most likely to be responsible for implementing Go Local in each state. Resources will be identified for each state including web sites, community organizations, and health classes.

- State liaisons will work with groups to share the Go Local plan that the NLM will implement across the country and find ways that the MCRML can work with these organizations in order to implement Go Local in their state.
- State liaisons will also assess existing Go Local resources to see what areas are of particular concern and what areas need to be expanded.
- The Colorado Liaison and the Utah Liaison will also contribute to Tribal Connections Go Local. The liaisons will work with Native American communities to ensure that there are appropriate resources for Tribal Connections Go Local.

In accordance with the wishes of the Regional Advisory Board for the MCRML, the Consumer Health Liaison decided that an invaluable resource for public librarians would be the development of educational modules for use by public librarians. The Consumer

Health Liaison will continue her work with the other NN/LM consumer health coordinators on the consumer health class for medical librarians. The liaisons in the region will also be able to teach the class created by Joann Benedetti for public librarians. All of the state liaisons have been listed as teachers for this MLA accredited class.

- The Education Liaison will work with the Consumer Health Liaison to develop educational modules for public librarians to use when teaching the public about health information. These will be in the form of PowerPoint presentations with accompanying lesson plans that the public librarians can use and modify to meet the needs of their patrons. These lesson plans will be emailed out via state public library listservs.

The Consumer Health Liaison will manage and promote the Consumer Health Resource Database <http://nnlm.gov/mcr/chid/> with the help of CAPHIS – the Consumer and Patient Health Information Section of the MLA. This database is a searchable compilation of the information that is shared on the CAPHIS listserv. This database will be a time saving and effective resource for consumer health librarians.

- Additional resources will be added to the database with the help of the Consumer and Patient Health Information Service web work group.

Public libraries will link to MedlinePlus on their web sites.

- All state liaisons will check four public library web sites per month to see if the library is linking to MedlinePlus. An email will be sent to the library to encourage them to link to MedlinePlus or to congratulate them on already linking. The liaisons will report their progress in monthly reports.

Public libraries will have an additional opportunity to learn of NLM resources. Public and medical librarians alike will also have an opportunity to participate in a journal club. The Consumer Health Liaison will look into MLA journal clubs which MCMLA supports and offer them to the region.

- Each state liaison will submit an article to their state library newsletter. This will help to get the word out about NLM resources and encourage contact with NN/LM liaisons.
- Each state liaison will submit their Affiliate member contact names for addition to the MCMLA listserv. This submission will ensure that public librarians whose institutions become affiliate members will be aware of health opportunities and resources shared on the MCMLA list.

Each liaison will document how public library systems want to handle Affiliate membership. Some county or main libraries will not wish their branch libraries to be Affiliate members.

- Each state liaison will report how public libraries would like to be reflected as Affiliate members.

In order to reach out to public librarians and the public at large, the liaisons will exhibit or present at the following conferences: Channel 9 Health Fair, Colorado Technology in Education Conference (TIE), Wyoming Symposium, the Colorado Association of Libraries, Nebraska Library Association, Nebraska Library Association Colleges Universities Section Meeting, Kansas Library Association, the Utah Library Association, the Missouri Library Association and the Wyoming Library Association Annual Conference.

Evaluation:

The Consumer Health Liaison will periodically send out reminder emails to the other liaisons reminding them of their responsibilities. She will also read their monthly reports to determine if goals are being met.

On a monthly basis, each liaison will report on four distinct public library web sites within their state noting if a link from the web site to MedlinePlus exists. Sixty public libraries throughout the region will be documented as having links to MedlinePlus on their web sites.

Halfway through the year, the Consumer Health Liaison will ask her fellow liaisons if they have been able to make progress finding out how their state prefers to have affiliate members listed as part of DOCLINE. Sixty affiliate members will be added to DOCLINE.

The Consumer Health Liaison will also check halfway through the year to see if progress has been made on submitting articles on NLM resources to state library newsletters. Six articles will be submitted in year 04 of the contract.

Halfway through the year, the Consumer Health Liaison will evaluate her progress on finishing the educational modules to be sent out to public librarians throughout the region. The Consumer Health Liaison will ask state liaisons to report whether public librarians are using the educational modules. The liaisons will request feedback via their state library listservs. The MCRML has set a goal that 45% will respond that having the modules available on the website contributes to making the MCR consumer health website outstanding.

MCRML liaisons will use the consumer health modules created by Joann Benedetti to train public librarians to provide health information services. 80% of librarians receiving training will show increased knowledge about NLM resources in pre/post testing.

As affiliate members are added to DOCLINE, the Consumer Health Liaison will verify that a contact person for each affiliate library has been added to the MCMLA listserv. The Consumer Health Liaison will examine all new affiliate members and ensure that a

name has been added to the MCMLA listserv. Ninety percent of NN/LM MCR Affiliate members will subscribe to the MCMLA listserv.

Periodically, the Consumer Health Liaison will examine progress being made with Go Local organizations throughout the region. She will enlist the aid of her fellow liaisons in making contact with Go Local organizations. If no progress has been made at the half year point, the Consumer Health Liaison will set aside time to focus on a particular state or organization. At the end of the year, a relationship will be in place in each state between state liaisons and potential Go Local organizations.

Four states within the region will have partnerships between public and medical libraries. These partnerships will include regular communication whether via a listserv or via regularly scheduled meetings. To monitor this goal, the Consumer Health Liaison will regularly read the monthly reports of the liaisons and will encourage them to set up meetings where partnerships are not active. Thirty percent of public librarians in the region will report that they have working relationships with medical librarians that enable them to provide current, accurate health information to the public.