Annual Report

National Network of Libraries of Medicine - MidContinental Region

May 1, 2009 - April 30, 2010

Contract No. N01-LM-1-3514

Spencer S. Eccles Health Sciences Library
University of Utah

Submitted December 22, 2010
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Executive Summary

Personnel

The Spencer S. Eccles Health Sciences Library was closed for asbestos removal; network wiring; and sprinkler and lighting fixture installation. The RML staff based in Salt Lake City relocated to temporary offices in November 2009, where they will remain through the summer of 2010.

Betsy Kelly, Assessment and Evaluation Liaison, and Barb Jones, Missouri/Library Advocacy Liaison, were awarded the Bernice M. Hetzner Award for Excellence in Academic Health Science Librarianship by the Midcontinental Chapter of the Medical Library Association for developing, promoting, and training librarians to use the online calculators for cost-benefit analysis and return on investment for health sciences libraries.

Advocacy

Ms. Jones focused on two areas through the Library Advocacy Project: developing resources for health sciences librarians to use to improve their business practices and supporting the Value of Libraries research project led by the J. Otto Lottes Health Sciences Library.

The Hospital Libraries’ Power Toolkit Work Group continued its work and added to the collection on the MCR web site. The Hospital Librarian’s Power Toolkit now provides resources and tips to:

- Market and promote the library;
- Determine the library’s financial values (return on investment, cost-benefit analysis and retail value);
- Effectively collect and present library statistics; and
- Network with colleagues and coworkers.

Ms. Jones and Marty Magee, Nebraska/Education Liaison, developed and presented a new class “Behind Closed Doors - Politics and the Library.”

“Measuring Your Impact” and “Thinking Like an MBA” continued to be taught. Ms. Jones and Ms. Kelly presented calculator sessions for the South Central, Greater Midwest, and Middle Atlantic Regions using Adobe Connect.

The Value of Libraries research project completed data collection and analysis for its initial hospitals from Missouri and Colorado and the Health Sciences Library at the University of Colorado Denver. At the end of the year, member institutions throughout the region were offered the opportunity to participate in the extended study that includes surveying professional staff at the hospital. The following institutions will be part of the next phase:

- Cox Health (MO)
- University of Missouri, Kansas City (MO)
- Kansas City VA Medical Center (MO)
- St. Mary’s Healthcare (MO)
- Presbyterian/St. Luke’s (MO)
- National Jewish Health (CO)
- Intermountain Health System (UT)
**Outcome:** Increased numbers of proposals from the region are submitted to NLM, NN/LM, and other sources.

**Indicator:** 3 liaisons will each report at least one consultation with Network members on project proposals.

**Indicator Met.** Eight liaisons reported consultations with Network members assisting them on proposals for the Continuity of Health Information Award.

**Outcome:** NLM funded projects are used when designing regional projects and activities.

**Indicator:** Lessons learned from 2 extramurally funded projects are promoted to the region.

**Indicator Not Met.** The MCR identified the school nursing project awarded to the University of Missouri-Columbia as a project that health sciences librarians could learn from, but did not promote it to the region. A second project was not identified.

**Outcome:** Hospital librarians will have materials available to use in advocating for the library within the institution.

**Indicator:** 100 Health Sciences Librarians from at least 30 states submit data to the database of library Cost Benefit Analysis (CBA) values.

**Indicator Met.** Health sciences librarians from 112 institutions in thirty-five states submitted data to the database of library CBA values.

**Indicator:** In response to a questionnaire, at least 75% of 50 librarians responding that they used advocacy materials indicate that the materials were useful or very useful in their advocacy work.

**Indicator Met.** We changed the wording on the questionnaire to "recommend to your colleagues" instead of "useful or very useful" as stated in the indicator. Eighty-three librarians responded to our spring questionnaire. Of those who have used our advocacy materials, 88% would recommend them to their colleagues. Included in the list of advocacy materials are the calculators and the Hospital Librarians Power Toolkit.

**Indicator:** The intervention was effective.

**Indicator Met.** The MCR worked on interventions with two institutions in the region. The library director at Children’s Mercy Hospital in Kansas City, Missouri requested contact information for library consultants at the suggestion of her new manager who was interested in making changes in library services. The Associate Director and the Missouri/Library Advocacy Liaison discussed the situation with the library director. The new manager was asking more services of the library but not providing additional support. The MCR staff gave the library director suggestions for documentation and strategy. As a result of the work of the library director a new librarian was added to the library staff.

The Missouri Institute of Mental Health (MIMH) announced in Spring 2010 that the library at the Institute was to be closed due to a 50% state budget cut. Realizing that saving the library was not possible, the Missouri/Library Advocacy Liaison gathered support to keep the library’s unique collection within the NN/LM. She contacted the MMLA Executive Committee, President of the Missouri Library Association, the St. Louis Medical Librarians group and worked with the Director of the J. Otto Lottes Health Science Library to propose transferring the collection to that library. The Director of MIMH expressed appreciation for the concern offered by the library community. Although the collection will not go to the J. Otto Lottes Health Science Library, MIMH is looking for an academic institution to house the collection for continued access to its unique materials.
Outcome: Members of the MCR will have documented evidence of the value of information to health science institutions in the six state region.

Indicator: Data collected from participating institutions in Year 3 is analyzed and reports are completed.

Indicator Partially Met. The J. Otto Lottes Health Sciences Library research team supported the administration of a questionnaire assessing the value of hospital libraries in Colorado and Missouri. The data was collected and analyzed. Final reports are in process. The following institutions participated in the research study:
- Poudre Valley Hospital (CO)
- Exempla St. Joseph Hospital (CO)
- Missouri Baptist Hospital (MO)
- St. John’s Health Center (MO)
- University of Colorado Denver Health Sciences Library (CO)

Assessment and Evaluation

Each year the MCR conducts a key assessment of the region. Our key assessment this year was focus groups with Network members asking them to look at the next five years and identify issues that would affect their libraries and their institutions.

Reports were completed and submitted to NLM based on evaluation data collected last year:
- On barriers to EFTS participation
- On barriers to participation in the Regional Licensing Consortium

Other activities included follow-up on previous assessments. We discussed the final report of the focus groups on health information training for public librarians. As a result, all liaisons offered one training session for public librarians and we promoted all appropriate MCR events to public librarians.

We received the final report from the Network Member Questionnaire. (The complete report is appended to our Quarter 3 report.) Based on the data and conclusions of the report, we decided to focus more attention on promoting our services and web resources. Implications for MCR programming, services, and practices fall into the following categories:

- **Communication**: Make better use of our communication outlets
- **Emergency Preparedness**: Facilitate and encourage training for members
- **Leadership**: Promote successful methods used by Network members to the region
- **Evaluation**: Use evaluation to strengthen what is working and inform what we should stop doing
- **NLM Resources**: Training and promotion of resources that have not been used by the membership needs to continue

In addition to our key assessment, smaller assessments were administered this year on:

- Access Grid viability
- Usefulness of the Bringing Health Information to the Community (BHIC) blog
- The MCR website and resources provided through our Library Advocacy and Technology project areas
- The confidence of members using DOCLINE

As a member of the Outreach Connections PR-Evaluation Subcommittee, Claire Hamasu, Associate Director, helped to analyze the data resulting from focused discussions on the collaboration of the Outreach Connections Steering Committee. Results were presented at the chapter meetings in the MidContinental and Pacific Southwest Regions.
Outcome: The Regional Advisory Board represents the diversity of the region and contributes to RML planning, policy, and procedures and program development, review, and evaluation.

Indicator: Each Regional Advisory Board member will either make at least one suggestion, or provide advice once a year to the RML, or will facilitate RML contact with their constituent group as recorded in minutes or ARS.

Indicator Met. All Regional Advisory Board members actively participated in the annual meeting looking at future trends in the world of health care and information delivery. They all contributed to scenarios identifying roles that librarians and library organizations could take. In addition, Advisory Board members assisted in reviewing proposals, participated in our workgroups, and offered feedback on sections of the 2011-2016 contract proposal.

Indicator: Each liaison will have at least 4 contacts (email, visit, phone call, videoconference), concerning RML work per year recorded in the ARS with board member in addition to the annual meeting.

Indicator Partially Met. Five liaisons successfully incorporated the board into their project activities and made the minimum of number of contacts. Four liaisons still are not taking advantage of having constituent representatives available to provide an outsider’s perspective on RML programming.

Indicator: The Board includes a representative from: each state in the region, each special project area, a CBO, a pool of Resource Library directors, and MCMLA.

Indicator Met. The Regional Advisory Board includes a representative from each state, two Resource Library directors and the incoming-incoming chair of MCMLA. Each project liaison has at least one board member assigned to their project area. We lost contact with our CBO representative when she left her job. It was far enough along in the year that we decided to bring on a new CBO representative in 2010.

Outcome: The evaluation plan for the RML gathers data on how the RML contributes to improved access to health information by health professionals and the public.

Indicator: Increases in proxies for access such as DOCLINE, Loansome Doc, knowledge of/or additions to historical collections, awareness due to communications instruments, connectivity, new members, and members providing services to unaffiliated health care professionals.

Indicator Partially Met. Listed below are the proxies we used this year to determine improved access. In almost all cases the proxies increased. The fill rate standard and the proxy associated with historical collections were the only ones that registered no increase.

In the analysis, the first number reflects where we were at the beginning of the year; the second number reflects where we were at the end of the year.

- Total membership increased – 315:335
- Percentage of Full members meeting minimum 25 current subscriptions increased - 97%:98%
- Percentage of Full members meeting 75% fill rate requirement decreased - 69%:59%
- LINKOUT participants increased – 86:90
- Unaffiliated Loansome Doc participants increased – 280:337
- Members serving the unaffiliated increased – 101:108
- Knowledge of, or additions to, historical collections: no increase due to no data

The analysis of our communication instruments covered our listservs and visitors to news pages on our web site. The usage of all our communication instruments increased except for the visits* to the MCR web site and to the RML News blog. Web data came from Google Analytics.

- MCMLA-l subscribers increased – 396:399
- BHIC subscribers increased – 432:532
- Web site visits decreased - 51,508:50,236
- RML News Visits decreased – 6,062:5,758
- BHIC Visits increased - 14,924:15,164

*Visits=number of individual sessions initiated by visitors to the site.

Indicator: Reports based on data from the ARS describe activities that contribute to improved access.

Indicator Met. From our Activity Reporting System reports, the following activities contributed to improved access to health information in the region.
- The NN/LM MCR is able to transfer communication conduits within MCR from affected location(s) to non-affected location(s) during an emergency
- Six libraries participate in the Reference Continuity Service Partnership project
- In response to a questionnaire, at least 75% of 50 librarians responding that they used advocacy materials indicate that the materials were useful or very useful in their advocacy work
- The advocacy intervention on behalf of the library was effective
- Net library usage increases by 5%
- 5% annual increase in Network members becoming LINKOUT libraries
- 5% annual increase in the number of unaffiliated health professionals registering to use Loansome Doc services
- Six clinical sites [or physicians] in the region will participate in the Information Rx program

Outcome: NLM is aware of needs articulated within the Region and receives feedback about its products and services as collected and reported by the RML.

Indicator: Member input obtained during MCR assessment activities is shared with National Network Office.

Indicator Met. The results of the EFTS, the Network Member, and the Spring questionnaires were submitted with quarterly reports to the National Network Office. The EFTS questionnaire explored barriers to EFTS participation. The Network Member Questionnaire explored services, staffing, and responsibilities of health sciences libraries and their attitudes toward the resources and services provided by the NN/LM and the NLM. The Spring Questionnaire identified attitudes toward technology, advocacy, and Network resources.

Outcome: The needs of health sciences libraries are acknowledged/understood for them to support programs to improve the transfer of health care and biomedical information within Network members’ institutions and through their participation in the Network.

Indicator: 80% of Network members participating in each of 6 focus groups articulate how the MCR does and could assist them in support of programs to improve the transfer of health information in their institutions.

Indicator Met. When we wrote the indicator, we had planned to hold in-person focus groups in each state. Thus the six focus groups. When we decided to hold focus groups using video-conferencing, we determined that five sessions would be sufficient. The focus groups asked participants to project themselves into the future and identify changes that would be happening in their organizations and their libraries. Our final question asked, "What can the RML do to support you in dealing with these changes?" The RML will have the answer to this question when it receives the final focus group report in the beginning of Year 5.

Unsolicited comments in the focus groups identified ways that the MCR currently assists members improve the transfer of health information in their institutions. The moderator for the focus groups reported that approximately 90% of the participants articulated how the MCR does and could assist them to improve the transfer of health information within their institutions.
Community Outreach

Siobhan Champ-Blackwell, Community Outreach Liaison, partnered with the state liaisons in Missouri and Wyoming and facilitated Café to Go sessions in their states. Fifteen people from public libraries, hospitals, the university, public health department, and community organizations attended the session in Columbia, Missouri. As part of the Wyoming Symposium, fifteen people attended the session in Wyoming, seven librarians and eight CBO staff. The sessions were held to foster collaborative projects between Network members and community organizations.

The MCR Collaboration Working Group unveiled their series “Navigating Collaboration” this year. These four online sessions presented between October 2009 and February 2010 complement the web site with the same title. (https://nnlm.gov/mcr/resources/community/collaboration.html)

Topics covered were:

- Keys for Partnership
- Strategies for Overcoming Barriers
- Funding
- Lessons Learned

The resources were created to help members develop and maintain collaborative relationships with community organizations.

In Year 3, the NN/LM MCR added to its subcontracts the requirement that outreach projects add lessons learned to the Effective Practices Collection. Due to funding cuts, the Effective Practices Collection stopped accepting contributions in 2009. Library Success: A Best Practices Wiki is the replacement repository the RML selected for its effective outreach practices. The MCR added a “Services for Health Information Consumers” category to the wiki to collect effective practices related to health information outreach. (http://www.libsuccess.org/index.php?title=Services_for_Health_Information_Consumers/)

Outcome: More CBOs in the region recognize the NN/LM-MCR as a network of providers of health information.

Indicator: 10% of the BHIC (Bringing Health Information to the Community) blog direct subscribers indicate they use the materials posted in their work.

Indicator Met. The RML distributed a questionnaire in June to 432 direct subscribers of the BHIC blog. Seventy-five (17%) responded that they used materials posted to the blog in their work. The complete report is appended to our Quarter 1 report.

Indicator: Each state liaison is a member of the infrastructure of at least one community based organization.

Indicator Met. State liaisons have become members of the following organizations:
- Colorado: Colorado Public Health Association
- Kansas: Maternal and Child Health Coalition
- Missouri: Health Literacy Missouri and The Missouri Institute for Community Health
- Nebraska: Nebraska AHEC
- Utah: Utah Multicultural Health Network
- Wyoming: Wyoming Comprehensive Cancer Control Consortium

In addition the Community Outreach Liaison is a member of HELP Adult Services (Nebraska).

Outcome: Increased numbers of proposals from the region are submitted to NLM, NN/LM, and other sources.

Indicator: 10 consultations happen each year regarding CBO-library partnerships.

Indicator Met. RML staff provided twenty-two consultations for CBO-library partnerships. Most were to assist members with their proposals for the Continuity of Health Information Award funded by the RML.
**Outcome:** CBOs, public libraries, public health departments, and other organizations serving minorities, senior citizens, and low income populations receiving training and information about health information resources implement health information programs for their service populations.

**Indicator:** A model for incorporating health information into community emergency preparedness planning is developed in Nebraska.

**Indicator Partially Met.** The Community Outreach Liaison attended committee meetings of the Lincoln Metropolitan Medical Response System in order to identify a model for incorporating health information into community emergency preparedness planning. A draft has been written and is undergoing review.

**Outcome:** Resource Libraries will develop partnerships with CBOs that increase access to health information to under-served populations in the community.

**Indicator:** On follow-up assessment to the participants of the Navigation Collaboration webinars, 10% of Network members queried will have used at least one feature of the tools.

**Indicator Met.** The RML followed up with the sixty-six participants of the Navigation Collaboration webinars. Twelve percent (8) of the participants used at least one feature of the tools that were presented.

**Consumer Health**

The MCR initiated the Outstanding Public Library/Public Health Award to identify public library/public health partnerships that can be used as models to be promoted to other public libraries and public health departments. Dana Abbey, Colorado/Consumer Health Liaison, developed the criteria and review process. Three reviewers evaluated the five nominations for the public library/public health partnership award and approved four awards.
During the year, Ms. Abbey chaired the TC4C Go Local work group to maintain the database. When NLM decided to terminate the project she contacted each of the regional projects asking them about plans for their statewide projects and offering assistance. The RML published an article in Plains to Peaks Post to insure that members understood the reason for NLM’s decision.

**Outcome:** Partnerships exist that enhance access to electronic health information.

**Indicator:** 6 article submissions will be published per year, 1 per state.

**Indicator Partially Met.** The Colorado/Consumer Health Liaison wrote four articles that were distributed to liaisons for publication in local newsletters. Twenty-five out of twenty-seven submissions resulted in publication. State library associations were very receptive to receiving these articles. We were successful in having an article published in all states but Missouri.

**Indicator:** At least 4 awards (one per state) for a public library/public health project will be given in the region.

**Indicator Partially Met.** Five projects were nominated for their public library/public health partnerships. Four projects were awarded in three states:

- Kansas: Lawrence Public Library and Lawrence-Douglas County Health Department
- Kansas: Topeka and Shawnee County Public Library and Washburn Mobile Health Clinic
- Wyoming: Laramie County Library System and Wyoming Department of Health
- Utah: Salt Lake County Library and South Main Clinic Group

**Indicator:** Potential collaboration between a public health department and a library is identified.

**Indicator Met.** The Public Library/Public Health Partnership Award resulted in five nominations identifying five public library/public health collaborations.

**Indicator:** The NN/LM MCR will have a presence with 2 national organizations.

**Indicator Met.** The NN/LM MCR was involved in REFORMA, Diversity Rx and FPIN. The Community Outreach Liaison was REFORMA secretary for this year. She worked to facilitate a partnership between Readers to Eaters and REFORMA to include health information in Spanish as part of the project. She was also a member of the Your Voice Advisory Board for Diversity Rx. She offered feedback on the redesign of the web site, the criteria for the Peer Learning Communities, and webinars on cross cultural health care topics. Until October 2009, the Colorado/Consumer Health Liaison submitted edited patient education articles for the Family Physicians Inquiries Network (FPIN). Due to budget cuts, the Evidence Based Practice Journal ceased publishing these articles.

**Outcome:** Populations in each state will be better served by local service information and by MedlinePlus.

**Indicator:** 8 appropriate contacts to encourage institutional commitment to Go Local in Colorado and Missouri are made.

**Indicator Not Met and Not Applicable.** By March, when NLM decided to stop supporting Go Local, we had made only two contacts, one with the Central Colorado AHEC and the other with the Colorado Health Foundation. However, since NLM decided to end Go Local, this indicator is no longer relevant.

**Indicator:** 6 clinical sites or physicians in the region will participate in the Information Rx program.

**Indicator Met.** Thirty clinics signed up for the Information Rx program from all of our states except Wyoming. This year we instituted a new strategy to increase participation, by placing orders for prescription pads from the exhibit booth for the health care provider.
Education

The MCR had an active training schedule this year. In addition to providing training for librarians and health care providers in the region, liaisons shared their expertise in other regions.

The MCR DOCLINE sessions became extremely popular when we started offering MLA CE credit in January. Attendance rarely fell below forty. The geographic location, including international, was noted for participants who completed the MLA CE evaluation. Four hundred twenty of the approximately 513 attendees completed evaluations.

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<tr>
<th>NN/LM Region</th>
<th>Participants</th>
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<tr>
<td>Greater Midwest</td>
<td>65</td>
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<tr>
<td>Canada</td>
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<td>Middle Atlantic</td>
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<td>Pacific Northwest</td>
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<tr>
<td>Pacific Southwest</td>
<td>45</td>
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“Thinking Like an MBA” one of the first distance CE classes using Moodle, continues to attract participation from around the country. Ms. Kelly and Ms. Jones were invited presenters for four events outside of the region to train librarians to use the library calculators.

Liaisons started teaching a new series of online sessions called “Spotlight! on NLM Resources.” This series resulted from the responses to the Network Member Questionnaire indicating that members had never used certain NLM resources or were unaware of the newer resources developed by NLM. Each session lasts for an hour and includes hands-on experience for the participants.

We have two indicators for each of our classes. One is the number of number of classes that will be taught and the other is that 75% of participants will agree that class objectives were met. When participants evaluate the class they give it high marks and most agree that class objectives were met. However, not all participants submit an evaluation. We found that when we did not meet this indicator for the class it was for the above stated reason. In the upcoming year we are changing the indicator to count only those who submit a post-class evaluation.

Outcome: Increased number of proposals from the region is submitted to NLM, NN/LM, and other sources.

Indicator: Hold 1 grant class.

Indicator: 75% of students indicate that the class met learning objectives.

Indicators Not Met. The RML decided to hold technical sessions instead of a grant writing class, in order to assist more people in writing successful proposals. Nine technical sessions attended by twenty-one members were held from July to December 2009.

Outcome: Increased collaborations and access to biomedical information via effective communication mechanisms.

Indicator: 20 members complete "13 Things self-discovery Learning 2.0."

Indicator Not Met. Although twenty members registered for the class only eight members completed it. The primary reason for not completing the class continues to be lack of time.

Indicator: 50% of the Learning 2.0 participants who complete the class adopt a new technology.

Indicator Not Met. Eight members from the MCR completed the class. Three said they had adopted one of the technologies. Five said they had not, but were planning to.
**Indicator:** Hold 12 information technology classes.

**Indicator Met.** The MCR held twelve classes covering web 2.0 technologies, podcasting, and new search engines.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Partially Met.** In six of the twelve classes 75% of the students indicated that the class met the learning objectives.

**Indicator:** Liaisons exhibit at assigned national and state conferences including state library conference, public health conference, and minority health conference.

**Indicator Partially Met.** The MCR exhibited at all assigned national conferences:
- American Dietetic Association
- American School Health Association

Liaisons exhibited at all the priority state conferences in Colorado, Kansas, Nebraska, and Utah. Liaisons were also required to exhibit at state physicians assistants meetings in support of the initiative started by the NN/LM Pacific Northwest Region.

**Indicator:** Liaisons will present at 50% of state library conference, public health conferences, and minority health conferences.

**Indicator Partially Met.** At the beginning of the year, the MCR projected it would present at 12 of the 24 conferences; we presented at nine.

**Outcome:** Librarians are able to employ sound library management skills.

**Indicator:** Net library usage reaches 400 readers.

**Indicator Met.** NetLibrary was used by 411 readers.

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**Indicator:** Hold fifteen document delivery system classes.

**Indicator Partially Met.** Thirteen DOCLINE classes covering DOCLINE borrowing and lending, serial holdings, routing tables, and Linkout were held online. Once MLA CE credits were offered, the numbers of attendees from all over the country dramatically increased. At least 617 DOCLINE users attended the twelve classes. Some of the sites had more than one person in attendance.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Partially Met.** Six of the thirteen classes met this indicator. We have difficulty getting 75% of the participants to evaluate the class even though we assure them that the evaluation is anonymous.

**Indicator:** Hold 4 classes for evaluation and advocacy.

**Indicator Met.** Twelve classes were held promoting evaluation and advocacy by understanding the use of calculators, the politics of an organization, and business practices in the library.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Not Met.** Only five of the twelve classes met this indicator.

**Outcome:** Librarians, health professionals, and consumers are trained to be capable of using NLM resources and emerging technologies.

**Indicator:** Hold 12 consumer health classes.

**Indicator Met.** Thirty-eight consumer health classes were held in the region.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Partially Met.** 58% of the classes met this indicator.
**Indicator:** One training for a CBO is held in each state.

**Indicator Not Met.** Training was held in Kansas for the Mother/Child Health Coalition and Nebraska for AHEC teachers. Liaisons in other states were not successful in arranging hands-on training for a CBO.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Met.** For the two classes that were held, 100% of the participants indicated that learning objectives were met.

**Indicator:** 5 new training items will be posted to NTCC per year.

**Indicator Not Met.** Only one item, a DOCLINE session, was contributed to the NTCC.

**Indicator:** Present 3 Adobe Connect emergency preparedness sessions for public librarians.

**Indicator Met.** The Colorado/Consumer Health Liaison presented “Emergency and Disaster Resources for Public Libraries” webinar three times in October. A total of eighty public librarians learned about how they could participate in the emergency planning for their communities.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Not Met.** The highest percentage for these sessions was 63% of the participants in a class agreed that the class objectives had been met.

**Outcome:** Network members, health professionals, and others have facilities in the region where they can be trained to access health information from NLM resources.

**Indicator:** All classes scheduled by NTCC for the MCR are held.

**Indicator Partially Met.** NTCC classes were scheduled in two locales, St. Louis and the MCMLA annual meeting in Breckenridge, Colorado. Only the St. Louis session was held. Registration was down for the chapter meeting and there were not enough registrants for NTCC classes, so they were cancelled.

**Outcome:** Network members, public health professionals, and the public will have improved access to public health information.

**Indicator:** Efforts to incorporate public health information resources are initiated with 2 additional public health programs.

**Indicator Met.** The Nebraska/Education Liaison added the University of Colorado Denver and Creighton University public health programs to her effort to promote informatics in the public health curricula of the region.

**Outcome:** Partnerships exist that enhance access to electronic health information.

**Indicator:** At least 1 effective practice is identified that can be used with school librarians, school system health coordinators, or state office of education health coordinators.

**Indicator Not Met.** Activities were carried out at the Dykes Library and the Health Sciences Library—University of Colorado Denver that partnered the health sciences and school programs. However, no analysis was done to identify an effective practice.
Network Membership

The NN/LM MCR approached member involvement in the RML’s infrastructure and outreach activities differently this year. We focused on the quality of the experience with the expectation that if the experience was favorable then more members would volunteer to be part of our infrastructure and outreach. If it was not favorable, then asking them about the experience would give us the opportunity to improve our involvement of members.

There was concerted effort this year to contact Full members who were not meeting DOCLINE standards established for the region. These two standards are:

1. Having a current subscription to a minimum of 25 health sciences titles listed in DOCLINE
2. Maintaining a 75% fill rate

We saw a reduction in either as an indicator that something may be happening at the institution (e.g., cut in staffing, hours, budget) that could require advocacy activity. State liaisons contacted members starting with those who were furthest from meeting the standard to discuss their situation and devise a plan to improve their practice.

We discovered that there were Affiliate members who were active DOCLINE users and members who did not know how to put their accounts on hold. Liaisons informed institutions about Loansome Doc as a document delivery alternative, promoted the online DOCLINE classes, encouraged updating of serial holdings, and offered tips on using DOCLINE (e.g., submitting a hold request).

Outcome: Growth in full and affiliate memberships.

Indicator: Full Network membership does not decrease in the region.

Indicator Not Met. This year our full member number dropped from 166 to 161. We had one new member join at the full level and two affiliate members who became full members. Unfortunately, eight members could no longer meet the criteria for full membership and became affiliate members.

Outcome: Network members will be actively involved in the NN/LM infrastructure and outreach programs.

Indicator: 75% of individuals from Network member institutions indicate they had a beneficial experience contributing to NN/LM MCR communication conduits.

Indicator Met. Five member librarians contributed to Plains to Peaks Post or to Library Success: A Best Practices Wiki. All (100%) indicated that these were beneficial experiences.

Indicator: 75% of individuals from Network member institutions indicate they had a beneficial experience and are satisfied with teaching or co-teaching as a representative of the NN/LM MCR.

Indicator Met. Seven member librarians co-taught with RML staff or were substitute instructors for RML staff. All (100%) expressed that this was a beneficial experience and were satisfied to be a representative of the NN/LM MCR. They helped us to increase the awareness and skills of physician assistants, public health educators, veterinary technicians and staff of community organizations.

Indicator: NN/LM MCR Liaisons from each state will certify at least one Network member as a certified exhibit staff.

Indicator Partially Met. Six librarians in three states were certified as exhibit staff.
**Indicator:** 75% of workgroup members from Network member institutions indicate they had a beneficial experience.

*Indicator Met.* All fourteen librarians from member institutions who participated in one of the RML’s workgroups indicated that it was a beneficial experience. The RML had the following workgroups:
- Advocacy
- MCR Collaboration
- Social Bookmarking
- Wyoming Symposium
- Consumer Health

**Indicator:** The work group produces a product or program that is used by the MCR.

*Indicator Partially Met.* The MCR workgroups were very productive this year.
- **MCR Collaboration Work Group:** gathered tools to inform members on how to develop and maintain outreach projects. These tools included a series of presentations entitled “Navigating Collaboration.” ([http://nnlm.gov/mcr/resources/community/collaboration.html](http://nnlm.gov/mcr/resources/community/collaboration.html))
- **Social Bookmarking Work Group:** tagged resources deemed relevant and useful to Network members. The cloud is available from the MCR web ([http://nnlm.gov/mcr/technology/](http://nnlm.gov/mcr/technology/))
- **Wyoming Symposium Work Group:** planned the Wyoming Symposium that was held July 15-17, 2009 in Laramie, Wyoming at the University of Wyoming Coe Library.
- **Consumer Health Work Group:** reviewed applications and determined who should receive the Outstanding Public Library/Public Health Partners hip Award. However, they were not involved in producing the program for the award.

**Outcome:** Overall document delivery practices for the region meet MCRML standards.

**Indicator:** Fewer than 10% of NN/LM MCR Network members appear on NN/LM MCR performance reports as poor performing Network members.

*Indicator Partially Met.* We selected current serial titles and fill rates as our performance categories. Only 2% (4) of our members have less than the 25 current titles required for their serial holdings. However, 59% of our members did not meet the fill rate of 75% or more, the standard we set for member fill rate.

**Outcome:** Programs are designed and carried out that meet the identified needs of health sciences libraries.

**Indicator:** A minimum of 50% of Network members responsible for their institution's document delivery services respond to the questionnaire, and of those 75% report they have a high confidence in using the features of DOCLINE.

*Indicator Partially Met.* Eighty-two members (50% of 164) needed to share with us their confidence level in using DOCLINE to meet the minimum response rate. We almost met the response rate; seventy-eight members responded to this question. Of those responding, 77% (60) felt very confident using DOCLINE. To meet the indicator as written, sixty-two members needed to have high confidence in using DOCLINE. We met the confidence rating set for this indicator.

**Indicator:** A minimum of 50% of Network members responsible for their institution's licensing of electronic services respond to a questionnaire and of those 75% indicate increased knowledge of licensing electronic resources.

*Indicator Not Met.* This indicator was not well thought out. We do not know who in our member institutions are responsible for licensing and could not direct our inquiry to them.
We used an instrument that went out to all of our members who subscribe to our listserv. Of the eighty-six respondents, thirty indicated that the RML had increased their knowledge on licensing electronic resources.

**Indicator:** 5% annual increase in Network members becoming LINKOUT libraries.

**Indicator Met.** We began the year with eighty-six Linkout libraries. During the year, four started providing the service, an increase of 5%.

**Indicator:** 5% annual increase in the number of unaffiliated health professionals registering to use Loansome Doc services.

**Indicator Met.** We began the year with 280 unaffiliated Loansome Doc users. During the year fifty-seven unaffiliated health professionals registered for Loansome Doc services at member libraries, an increase of 20%.

**Indicator:** 6 libraries participate in the Reference Continuity Service Partnership project

**Indicator Met.** All eight Resource Libraries agreed to make their services available in our Reference Continuity Service Partnership project. Their services and charges are available from the MCR web site. (http://nnlm.gov/mcr/rsdd/continuity/resourcelibraries/)

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**Technology**

The MidContinental and Pacific Southwest Regions persevered in developing a national registration system. Sharon Dennis, Technology Coordinator, continued to work with Karen Olson, programmer for the National Training Center and Clearinghouse. The MCR and PSR are successfully using the system. The South Central Region is implementing it for their members.

Ms. Dennis organized a meeting of alumni of the Woods Hole Bioinformatics class from both the MidContinental and Pacific Southwest regions. The group decided to do an assessment of the regions and then come up with a strategy to disseminate the information learned at Woods Hole to librarians in the two regions. Ms. Dennis analyzed the data from the Bioinformatics Training Needs Questionnaire distributed to MCR and PSR members in October. The group came up with the following action items:

- Produce a webinar series focusing on basic electronic and personal health record information and strategies for getting involved
- Develop a web page with resources to assist librarians who want participate in the implementation of electronic health record systems

The full report was appended to our Quarter 3 report.

John Bramble, Utah/Network Membership Liaison, chaired a task force that included Susan Roberts, RML Technology Associate, and Eccles Health Sciences Librarians to assess the use of the Access Grid. They identified how it has been used at the library, enumerated its problems and surveyed the experience of other institutions. A report was written recommending the Access Grid be retired unless increased resources were available support of its use.
Via Christi Regional Medical Center was selected as the pilot site to explore connectivity in a facility that is restricted by firewalls and system policies in their use and offering of web 2.0 applications. The RML will provide two laptops with 3G cards. We hope to use this pilot as a model for other hospital libraries to improve their access to Internet resources that are now prohibited.

**Outcome:** Increased collaborations and access to biomedical information via effective communication mechanisms.

**Indicator:** Conduct two successful events in Year 4 using the Access Grid.

**Indicator Not Met.** Due to continued systems support needed to trouble-shoot and assure acceptable Access Grid sessions, a task force led by Mr. Bramble investigated the feasibility of maintaining the Access Grid. The task force reported that additional resources would be needed in order to have successful Access Grid sessions. The library decided to dismantle the Access Grid. The RML is assessing other videoconferencing (not desk-top) systems that are available at institutions in the region to hold group to group events.

**Indicator:** 50% of at least 75 respondents from the MCMLA listserv membership report that the MCR web site is usable and easy to navigate.

**Indicator Met.** Eighty-three members responded to the question on our spring questionnaire about the usability of our web site. Sixty-two (75%) said that the web site is usable and easy to navigate.

**Indicator:** MCMLA listserv is never down longer than one business day.

**Indicator Met.** Our primary communication tool for the region has been online without interruption for the year.

**Indicator:** 6 new online communication tools are tested and evaluated.

**Indicator Met.** The RML tested eleven new tools this year:
- Adobe Buzzword
- GoToWebinar
- Google Wave
- CiteULike
- Connotea
- 2Collab
- LibX
- Alfresco
- HootSuite
- SharePoint
- Tandberg

**Outcome:** Network members are aware of health information resources.

**Indicator:** 75% of at least 40 respondents from the MCMLA listserv members report that the MCR web site increases their awareness of health information resources.

**Indicator Met.** Eighty-six members responded to the question on our spring questionnaire about the usefulness of our web site. Seventy-one (83%) said that the web site has increased their awareness of health information resources and regional activities.

**Outcome:** In conjunction with other RMLs, Network members, health professionals, and organizations providing health information to the public are able to learn about new technology developments that will help them to increase access to biomedical information.

**Indicator:** 50% of 30 hospital librarians queried indicate that the medical informatics information in the RML News has been helpful to them.

**Indicator Met.** Thirty-four hospital librarians responded to the question on our spring questionnaire about the usefulness of the medical informatics information that we publish. Fifteen (44%) said that the informatics information in the NN/LM MCR News has been helpful.
Outcome: Members adopt new technologies to increase access to biomedical information.

Indicator: 20 Network members report that they have adopted at least 1 new showcased technology per year.

Indicator Met. Eighty-three librarians responded to the question on our spring questionnaire about adopting a new technology. Forty-seven (57%) said that they had adopted one of the showcased technologies during the year. The technologies we promoted this year were:
- Blogs
- Wikis
- RSS
- Social bookmarking
- Twitter
- Facebook
- FLickr
- Podcasting
- Online Citation Managers
- LibX
- Screencasting

Indicator: 50% of 75 respondents surveyed indicate the social bookmarking resource is useful to them in their work.

Indicator Not Met. Eighty-four librarians responded to the question on our spring questionnaire about our social bookmarking resource. Only twenty (23%) agreed or strongly agreed that the social bookmarking resource is useful in their work.

Outcome: Under-connected Network members have increased access to biomedical information and to communication tools.

Indicator: The librarian in the pilot project to solve connectivity issues indicates that the solution was successful.

Indicator Not Met. The library that was selected to participate in this pilot study ran into purchasing restrictions that delayed getting the project off the ground. The project will be implemented in Year 5.
Network Infrastructure

Table 1: Annual Infrastructure Data

<table>
<thead>
<tr>
<th>Category</th>
<th>Current year</th>
<th>Previous year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Network members – full</td>
<td>161</td>
<td>166</td>
</tr>
<tr>
<td>Network members – affiliate</td>
<td>170</td>
<td>150</td>
</tr>
<tr>
<td>Libraries providing services to unaffiliated health professionals</td>
<td>108 (67%)</td>
<td>106 (63%)</td>
</tr>
<tr>
<td>Libraries providing services to public users</td>
<td>108 (67%)</td>
<td>108 (65%)</td>
</tr>
<tr>
<td>Average fill rate for resource libraries</td>
<td>79%</td>
<td>77%</td>
</tr>
</tbody>
</table>

Regional Emergency Preparedness Planning

Dan Wilson, Coordinator - NN/LM Emergency Preparedness and Response Plan, joined the RML staff at the Midcontinental Chapter of the Medical Library Association to present a workshop on emergency planning. Mr. Wilson presented an introduction and Step 1 of “A 10-Step Approach to Service Continuity” and each of the liaisons covered a following step. Attendees were divided into small groups and the liaisons discussed with each group steps 2 – 10.

An emergency drill tested the internal continuity plan for the RML and a table top drill with the NN/LM NER walked through the steps for the New England RML to assume responsibility for the MidContinental Region.

The Associate Director participated in teleconferences to review the buddy system and determine the process for RMLs to assist users of NLM’s customer services when it is unavailable due to an emergency. Staff at the Eccles Health Sciences Library and Dykes Library worked with disaster committees to develop continuity plans for their libraries.

**Outcome:** Librarians are able to employ sound library management skills.

**Indicator:** 30 Network members, with representation from each state in the MCR, attend training on the NN/LM's Emergency Planning Resources.

**Indicator Met.** “A 10-Step Approach to Service Continuity” was offered at the MCMLA annual meeting and attended by thirty-seven chapter members representing all six states in the region.

**Indicator:** 75% of students indicate that the class met learning objectives.

**Indicator Partially Met.** Three objectives for the workshop were to:
- Increase participant’s knowledge of how service continuity applies to libraries;
Identifying Unique and Historical Collections

**Outcome:** More historical and unique materials related to the health sciences will be identified and accessible to the public.

**Indicator:** One article will be published for Plains to Peaks Post on History of Medicine Collection.

**Indicator Met.** An article on NLM’s traveling and online exhibits was published in the October 2009 issue of Plains to Peaks Post.

E-licensing

Three online workshops, “Librarians are from Venus, Vendors are from Mars: Strategies for Developing Respectful Vendor Relationships and Strong Contracts” were offered this year. Eleven participants learned strategies to communicate in a language to make sure the librarian is being understood by vendors and learn the fundamentals of getting the best contract for the institution that also meets the needs of the vendor. To support the class and others in the region responsible for licensing resources, the MCR web site, “Licensing Electronic Resources and Licensing Classes” was kept current.

(http://nnlm.gov/mcr/rsdd/elicensing/index.html)

**Outcome:** Librarians are able to employ sound library management skills.

**Indicator:** Hold three Licensing Electronic Resources classes.

**Indicator Met.** The Utah/Network Membership Liaison held three “Librarians are from Venus, Vendors are from Mars: Strategies for Developing Respectful Vendor Relationships and Strong Contracts”
Indicator: 75% of students indicate that the class met learning objectives.

**Indicator Met.** All participants indicated the class met learning objectives.

**EFTS**

In Year 3, a questionnaire was sent to non-EFTS Full members to investigate the barriers to participating. Approximately 55% of the MCR’s Full members do not participate in EFTS. The data was analyzed this year and a report was written. The primary reasons for non-participation are:

- The library does not pay for loans because of reciprocal agreements or membership in Freeshare;
- Institutional policies prohibit participation; or
- EFTS requirements are barriers to establishing accounts.

The full report was appended to the Quarter 2 report and results shared during an EFTS advisory committee meeting. Based on this data the MCR decided not to require EFTS participation as criteria for Full membership. The report was also used to promote participation among members who did not know about EFTS or how to implement it.

At the beginning of the year the MCR had seventy-four EFTS participants. By the end of the year, participation increased to eighty-one. EFTS purchased a full page add in the MCMLA annual meeting program and a description of changes that make participation easier was sent out via the listserv.

**Outcome:** Programs are designed and carried out that meet the identified needs of health sciences libraries.

**Indicator:** 2.5% annual growth in Network members that are not EFTS participants becoming members of EFTS.

**Indicator Met.** We began the year with seventy-four EFTS participants and gained seven new users for a growth of 9%.

**Outcome:** MCR understands barriers to participation in EFTS by non-EFTS participating members.

**Indicator:** A decision will be made on whether or not membership with EFTS is mandatory for full Network membership with the NN/LM MCR.

**Indicator Met.** The RML decided that EFTS would not be a mandatory criterion for full Network membership. The RML queried 55% (88) of the full members who are not participating in EFTS to identify the barriers to their participation.

Approximately half of the seventy-six respondents found no benefit to participation because they do not charge or pay for document delivery. If EFTS was required, these libraries would be required to establish an account with EFTS and make a deposit that would remain idle. For this reason, the RML decided not to make EFTS participation mandatory for full member status.
Outreach

- Major (≥ $15,000) projects funded in contract year: 1
- National exhibits conducted by RML: 5
- National exhibits conducted by subcontractors: 0
- Regional/state/local exhibits conducted by RML: 25
- Regional/state/local exhibits conducted by subcontractors: 0
- Courses developed/updated by RML staff:
  - Behind Closed Doors: Politics and the Library – Ms. Jones and Ms. Magee
  - DOCLINE: Borrow and Lend – Mr. Bramble
  - EFTS: Everything you need to know – Mr. Bramble
  - Emergency and Disaster Resources for Public Libraries – Ms. Abbey
  - Getting Started with Information Outreach in Minority Communities (Updated) – Ms. Champ-Blackwell
  - Podcasting for Advocacy (updated and adapted from PNR class) – Ms. Dennis
  - Thinking Like an MBA (Updated) – Ms. Magee
  - Librarians are from Venus, Vendors are from Mars (Updated) – Mr. Bramble
  - Social Bookmarking – Ms. Brown
  - 13 Things Learning 2.0 (updated) – Ms. Dennis and Ms. Brown

Table 2: Site Visits

<table>
<thead>
<tr>
<th>Date</th>
<th>Who</th>
<th>Institution</th>
<th>City</th>
<th>Topics</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/13/2009</td>
<td>Bramble, Hamasu</td>
<td>Utah AIDS Foundation</td>
<td>Salt Lake City, UT</td>
<td>Consult on the NLM AIDS grant proposal</td>
</tr>
<tr>
<td>5/25/2009</td>
<td>Jones</td>
<td>St. Louis City Library System</td>
<td>St. Louis, MO</td>
<td>Taught Savvy Senior Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Discussed possible training</td>
</tr>
<tr>
<td>Date</td>
<td>Who</td>
<td>Institution</td>
<td>City</td>
<td>Topics</td>
</tr>
<tr>
<td>------------</td>
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<td>-----------------------------------------------</td>
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<td>----------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| 6/10/2009  | Magee       | BryanLGH Hospital Library                    | Lincoln, NE     | - Reviewed visit checklist  
- Advocacy suggestions  
- DOCLINE review |
| 6/10/2009  | Abbey       | Westminster Law Library                      | Denver, CO      | - Taught NLM resources  
- Promoted NN/LM membership |
| 6/24/2009  | Champ-Blackwell | HELP Adult Services                         | Omaha, NE       | - Consultation on Continuity of Health Information Awards          |
| 6/26/2009  | Magee       | Nebraska State Advisory Council on Libraries | Elmwood, NE     | - Promoted the NLM MLA "Theatre presentations"  
- Promoted Spotlight! sessions  
- Promoted Continuity of Health Information award  
- NetLibrary |
| 6/30/2009  | Abbey       | Colorado Health Foundation                  | Denver, CO      | - Promoted partnering with public libraries  
- Promoted Continuity of Health Information Awards          |
| 7/14/2009  | Magee       | Great Plains Regional Medical Center         | North Platte, NE | - Reviewed the visit checklist  
- Promotional Materials  
- Information RX  
- MedlinePlus magazine |
| 7/14/2009  | Magee       | Kimball Health Services                      | Kimball, NE     | - Reviewed the visit checklist  
- MedlinePlus, Information RX, MedlinePlus magazine  
- Promoted affiliate membership |
| 7/14/2009  | Magee       | Memorial Health Center                       | Sidney, NE      | - Reviewed the visit checklist  
- Promoted affiliate membership          |
| 7/14/2009  | Magee       | Ogallala Community Hospital                  | Ogallala, NE    | - Reviewed the visit checklist  
- Promoted Network membership          |
| 7/14/2009  | Magee       | Sidney Public Library                        | Sidney, NE      | - Reviewed the visit checklist          |
| 7/14/2009  | Magee       | St. Francis Hospital                         | Grand Island, NE| - Reviewed the visit checklist  
- Promotional Materials  
- Information RX  
- MedlinePlus magazine |
<table>
<thead>
<tr>
<th>Date</th>
<th>Who</th>
<th>Institution</th>
<th>City</th>
<th>Topics</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/21/2009</td>
<td>Magee</td>
<td>Nebraska Region 2 Behavioral Health</td>
<td>North Platte, NE</td>
<td>Provided a list of mental health resources</td>
</tr>
<tr>
<td>7/31/2009</td>
<td>Jones</td>
<td>Missouri Institute for Community Health</td>
<td>Jefferson City, MO</td>
<td>Discussed ways to provide training for public health departments across the state on NLM resources</td>
</tr>
<tr>
<td>8/10/2009</td>
<td>Magee</td>
<td>Southeast Community College</td>
<td>Lincoln, NE</td>
<td>LinkOut training and information</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MedlinePlus and PubMed</td>
</tr>
<tr>
<td>8/28/2009</td>
<td>Abbey</td>
<td>Rocky Ford Public Library</td>
<td>Rocky Ford, CO</td>
<td>Met with librarian</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Left consumer health brochures and pens</td>
</tr>
<tr>
<td>9/14-15/2009</td>
<td>Hamasu,Shipman</td>
<td>Becker Medical Library Washington University</td>
<td>St. Louis, MO</td>
<td>Health Literacy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Advocacy</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>Personnel participation</td>
</tr>
<tr>
<td>9/16/2009</td>
<td>Hamasu, Shipman</td>
<td>J. Otto Lottes Library University of Missouri - Columbia</td>
<td>Columbia, MO</td>
<td>Value of Libraries Study</td>
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<tr>
<td></td>
<td></td>
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<td></td>
<td>Missouri Health Literacy</td>
</tr>
<tr>
<td>9/18/2009</td>
<td>Champ-Blackwell, Magee</td>
<td>Metro Community College/Omaha Public Library South Branch</td>
<td>Omaha, NE</td>
<td>ICON Meeting</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Provided Spanish Medline Plus and PubMed brochures for public distribution</td>
</tr>
<tr>
<td>10/6/2009</td>
<td>Magee</td>
<td>Metro Omaha Medical Society</td>
<td>Omaha, NE</td>
<td>Discussed publishing opportunities in the Metro Omaha Medical Society publication</td>
</tr>
<tr>
<td>10/9/2009</td>
<td>Magee</td>
<td>Good Samaritan Health Services</td>
<td>Kearney, NE</td>
<td>Continuity of Health Information award</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Multiple consumer health resources and Information RX</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Library Thng for cataloging a small library</td>
</tr>
<tr>
<td>10/9/2009</td>
<td>Magee</td>
<td>BryanLGH Hospital</td>
<td>Lincoln, NE</td>
<td>Discussed growth of library requests and administrative reporting</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
<td>Electronic resources, Information Rx, and Go Local</td>
</tr>
<tr>
<td>Date</td>
<td>Who</td>
<td>Institution</td>
<td>City</td>
<td>Topics</td>
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</tr>
<tr>
<td>10/12/2009</td>
<td>Magee</td>
<td>Mary Lanning Hospital</td>
<td>Hastings, NE</td>
<td>Consultation on Continuity of Health Information award</td>
</tr>
<tr>
<td>10/29/2009</td>
<td>Kelly</td>
<td>St. Louis Children’s Hospital</td>
<td>St. Louis, MO</td>
<td>Developing ideas for submitting award proposals</td>
</tr>
<tr>
<td>11/5/2009</td>
<td>Abbey</td>
<td>Colorado Bright Beginnings</td>
<td>Denver, CO</td>
<td>Promoted Continuity of Health Information Awards</td>
</tr>
<tr>
<td>12/14/2009</td>
<td>Abbey</td>
<td>Rocky Visita University</td>
<td>Parker, CO</td>
<td>Promoted membership</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Taught three classes</td>
</tr>
<tr>
<td>1/11/2010</td>
<td>Champ-Blackwell</td>
<td>Little Priest Tribal College Library/Winnebago</td>
<td>Winnebago, NE</td>
<td>Brainstorming library participation with Creighton University activities on the reservation</td>
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<tr>
<td></td>
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<td>Public Library/Winnebago Public Library</td>
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</tr>
<tr>
<td>1/13/2010</td>
<td>Jones</td>
<td>Missouri Institute for Community Health</td>
<td>Jefferson City, MO</td>
<td>Public Health Practice Research Network</td>
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<td>Evidence-based training</td>
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<td>PubMed article for MICH newsletter</td>
</tr>
<tr>
<td>2/12/2010</td>
<td>Magee</td>
<td>BryanLGH Hospital</td>
<td>Lincoln, NE</td>
<td>Growth of library requests</td>
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<td>Go Local</td>
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<tr>
<td>2/15/2010</td>
<td>Magee</td>
<td>Bellevue University</td>
<td>Bellevue, NE</td>
<td>ILL</td>
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<td></td>
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<td>DOCLINE</td>
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<td>2/16/2010</td>
<td>Champ-Blackwell</td>
<td>HELP Adult Services</td>
<td>Omaha, NE</td>
<td>Planning training sessions for staff and volunteers</td>
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<tr>
<td>2/23/2010</td>
<td>Bramble, Jones</td>
<td>Primary Children’s Medical Center</td>
<td>Salt Lake City, UT</td>
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<td>2/23/2010</td>
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<td>3/1/2010</td>
<td>Champ-Blackwell, Magee</td>
<td>Omaha Public Library</td>
<td>Omaha, NE</td>
<td>Met with new director</td>
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<td></td>
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<td>Reviewed past collaborations and discussed future possibilities</td>
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<td>Library move later in 2010</td>
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<tr>
<td>Date</td>
<td>Who</td>
<td>Institution</td>
<td>City</td>
<td>Topics</td>
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<td>-----------</td>
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<td>3/17/2010</td>
<td>Magee</td>
<td>College of St. Mary</td>
<td>Omaha, NE</td>
<td>Visit checklist</td>
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<td>Brown, Jones</td>
<td>Irwin Army Community Hospital Library</td>
<td>Fort Riley, KS</td>
<td>Recruitment for the Value of Libraries study</td>
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<td>3/30/2010</td>
<td>Abbey</td>
<td>Denver School of Nursing Library</td>
<td>Denver, CO</td>
<td>New full Network member</td>
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<td>Toured the facility and talked with them about membership, routing</td>
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<tr>
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<td></td>
<td>tables, and library advocacy</td>
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<tr>
<td>4/1/2010</td>
<td>Jones</td>
<td>St. Mary's Health Center</td>
<td>St. Louis, MO</td>
<td>Recruitment for the Value of Libraries study</td>
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<tr>
<td>4/8/2010</td>
<td>Jones</td>
<td>Cox Health</td>
<td>Springfield, MO</td>
<td>Recruitment for the Value of Libraries study</td>
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<tr>
<td>4/14/2010</td>
<td>Magee</td>
<td>Central Community College</td>
<td>Grand Island, NE</td>
<td>Toured training space for June trainings</td>
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<tr>
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<td></td>
<td></td>
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<td>Current projects, purchasing databases</td>
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<td>4/14/2010</td>
<td>Magee</td>
<td>Good Samaritan Hospital</td>
<td>Kearney, NE</td>
<td>Consumer Health Library status – manned by volunteers</td>
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<td>Promoted June training in Grand Island</td>
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<td>4/14/2010</td>
<td>Magee</td>
<td>Grand Island Public Library</td>
<td>Grand Island, NE</td>
<td>Promoted June training in Grand Island</td>
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<tr>
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<td></td>
<td></td>
<td>Discussed Nebraska State Advisory Council</td>
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<tr>
<td>4/14/2010</td>
<td>Magee</td>
<td>Central Nebraska AHEC</td>
<td>Grand Island, NE</td>
<td>Promoted June training in Grand Island</td>
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<tr>
<td>4/14/2010</td>
<td>Magee</td>
<td>St. Francis Medical Center</td>
<td>Grand Island, NE</td>
<td>Toured library space</td>
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<td></td>
<td>Need for volunteers to man library</td>
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<tr>
<td></td>
<td></td>
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<td>Promoted June Grand Island classes</td>
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<tr>
<td>Date</td>
<td>Who</td>
<td>Institution</td>
<td>City</td>
<td>Topics</td>
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<tr>
<td>4/14/2010</td>
<td>Magee</td>
<td>Public Health Department</td>
<td>Grand Island, NE</td>
<td>Published June Grand Island classes</td>
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<td>4/14/2010</td>
<td>Magee</td>
<td>Meridian Library System</td>
<td>Kearney, NE</td>
<td>Discussed public libraries in the system</td>
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<tr>
<td></td>
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<td>Promoted June Grand Island classes</td>
</tr>
<tr>
<td>4/15/2010</td>
<td>Brown, Jones</td>
<td>University of Missouri Kansas City</td>
<td>Kansas City, MO</td>
<td>Recruitment for the Value of Libraries study</td>
</tr>
<tr>
<td>4/15/2010</td>
<td>Jones</td>
<td>VA Hospital</td>
<td>Kansas City, MO</td>
<td>Recruitment for the Value of Libraries study</td>
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<tr>
<td>4/23/2010</td>
<td>Champ-Blackwell</td>
<td>inCOMMON Community Development</td>
<td>Omaha, NE</td>
<td>Explored ways to infuse health information into the work the group is doing in inner city Omaha</td>
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<tr>
<td>4/26/2010</td>
<td>Bramble, Hamasu</td>
<td>Salt Lake County Public Library System</td>
<td>West Valley City, UT</td>
<td>Presented Public Library/Public Health Award</td>
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## Web Site Use

<table>
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<tr>
<th>Month</th>
<th>Unique Visitors</th>
<th>Total Visits</th>
<th>Page Views</th>
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<td>Aug 2009</td>
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<td>Dec 2009</td>
<td>12167</td>
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<td>10445</td>
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<td>Apr 2010</td>
<td>10422</td>
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![Unique Visitors Chart](chart1.png)

![Page Views Chart](chart2.png)

![Total Visits Chart](chart3.png)
## Attachments

<table>
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<th>Attachments</th>
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</thead>
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Region 4  
Annual Report  
May 1, 2009 – April 30, 2010  
Page 29
Attachment 1
Tabular report of OARF activity data for contract year: RML staff activities

Report: Outreach Activities Conducted by "RML" Staff in Region "4" ("01-MAY-09 - 30-APR-10")

Activities Summary
Total Outreach
Region 04 = 109
Total Number of Estimated Participants
Region 04 = 1,974
Average Number of Participants Per Activity
Region 04 = 0
Average Length in Hour(s)
Region 04 = 2
Under 1 Hour
Region 04 = 2
Between 1 and 2 Hours
Region 04 = 93
Over 2 Hours
Region 04 = 14
Hands-On Practice
Region 04 = 59
Conducted Remotely
Region 04 = 56
Offering Continuing Education
Region 04 = 25
Significant Number of Minorities
Region 04 = 16

Type(s) of Organization(s) Involved in Activities
Health Sciences Library
Region 04 = 106
Public Library
Region 04 = 3
Government Agency
Region 04 = 5
Hospital
Region 04 = 7
Clinical/Health Care
Region 04 = 1
Academic Institution
Region 04 = 106
Community-Based
Region 04 = 4
Faith-Based
Region 04 = 21
Public Health Agency
Region 04 = 6
Other
Region 04 = 14

Session Content
PubMed
Region 04 = 40
MedlinePlus
Region 04 = 55
ClinicalTrials.gov
Region 04 = 18
NCBI
NLM Gateway
Region 04 = 8
TOXNET
Region 04 = 14
Other Technology Content
Region 04 = 51
Other Non-Technology Content
Region 04 = 28

Significant Number of Minorities
African American
Region 04 = 11
Alaska Native
Asian and Pacific Islander
Region 04 = 4
Hispanic
Region 04 = 12
Native American
Region 04 = 1

Participants Summary
Completed Participant Information Sheets
Region 04 = 1,612
Health Care or Service Providers
Region 04 = 356
Health Science Library Staff Members
Region 04 = 575
Public Health Worker
Region 04 = 90
Public/Other Library Staff Members
Region 04 = 359
Members of General Public
Region 04 = 228
### Outreach Activities Conducted by "SUB" in Reg "4" ("01-MAY-09 - 30-APR-10") Activities Summary

<table>
<thead>
<tr>
<th><strong>Total Outreach</strong></th>
<th><strong>Session Content</strong></th>
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</thead>
<tbody>
<tr>
<td>Region 04 = 12</td>
<td>Region 04 = 1</td>
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<tr>
<td><strong>Total Number of Estimated Participants</strong></td>
<td><strong>MedlinePlus</strong></td>
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<tr>
<td>Region 04 = 197</td>
<td>Region 04 = 9</td>
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<tr>
<td><strong>Average Number of Participants Per Activity</strong></td>
<td><strong>ClinicalTrials.gov</strong></td>
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<tr>
<td>Region 04 = 16</td>
<td>Region 04 = 1</td>
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<tr>
<td><strong>Average Length in Hour(s)</strong></td>
<td><strong>NCBI</strong></td>
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<tr>
<td>Region 04 = 1</td>
<td>Region 04 = 1</td>
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<tr>
<td><strong>Under 1 Hour</strong></td>
<td><strong>NLM Gateway</strong></td>
</tr>
<tr>
<td>Region 04 = 2</td>
<td>Region 04 = 1</td>
</tr>
<tr>
<td><strong>Between 1 and 2 Hours</strong></td>
<td><strong>TOXNET</strong></td>
</tr>
<tr>
<td>Region 04 = 9</td>
<td>Region 04 = 8</td>
</tr>
<tr>
<td><strong>Over 2 Hours</strong></td>
<td><strong>Other Technology Content</strong></td>
</tr>
<tr>
<td>Region 04 = 1</td>
<td>Region 04 = 8</td>
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<tr>
<td><strong>Hands-On Practice</strong></td>
<td><strong>Other Non-Technology Content</strong></td>
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<td>Region 04 = 7</td>
<td>Region 04 = 3</td>
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<td><strong>Conducted Remotely</strong></td>
<td><strong>Significant Number of Minorities</strong></td>
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<tr>
<td>Region 04 = 1</td>
<td><strong>African American</strong></td>
</tr>
<tr>
<td><strong>Offering Continuing Education</strong></td>
<td><strong>Alaska Native</strong></td>
</tr>
<tr>
<td>Region 04 = 3</td>
<td><strong>Asian and Pacific Islander</strong></td>
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<tr>
<td><strong>Significant Number of Minorities</strong></td>
<td><strong>Hispanic</strong></td>
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<tr>
<td></td>
<td><strong>Native American</strong></td>
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<table>
<thead>
<tr>
<th><strong>Type(s) of Organization(s) Involved in Activities</strong></th>
<th><strong>Participants Summary</strong></th>
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<tbody>
<tr>
<td><strong>Health Sciences Library</strong></td>
<td><strong>Completed Participant Information Sheets</strong></td>
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<tr>
<td>Region 04 = 9</td>
<td>Region 04 = 118</td>
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<td><strong>Health Care or Service Providers</strong></td>
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<td><strong>Government Agency</strong></td>
<td><strong>Health Science Library Staff Members</strong></td>
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<td>Region 04 = 2</td>
<td>Region 04 = 1</td>
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<tr>
<td><strong>Hospital</strong></td>
<td><strong>Public Health Worker</strong></td>
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<tr>
<td>Region 04 = 2</td>
<td>Region 04 = 3</td>
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<tr>
<td><strong>Clinical/Health Care</strong></td>
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<td><strong>Academic Institution</strong></td>
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<td><strong>Public Health Agency</strong></td>
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<td><strong>Other</strong></td>
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<td>Region 04 = 6</td>
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Attachment 3
Region map:
RML staff outreach activities
Attachment 4
Region map:
Subcontracted outreach activities
Attachment 5
Region Map:
Outreach activities with significant number of minority participants (Combining RML and subcontractor activities)
Attachment 6
State map Colorado:
Network membership
Attachment 8
State map Missouri:
Network membership
State map Utah: Network membership