



Community Assessment for Program Planning

Cathy Burroughs, NN/LM, Pacific Northwest Region

Editor's note: This is the second article in a series about planning and evaluating outreach programs.

Like any quality service or product on the market, library outreach programs should be closely tuned to the needs and wants of the "customers." Reaching that goal requires some level of investigation throughout a program's cycle, beginning with a community assessment.

Planning a Community and Medical Library

*Chris Williams
Akron General Medical Center, Ohio*

The community and medical libraries of Akron General Medical Center opened their doors in April 1999 after more than six years of planning. The goal of this article is to share the steps we went through, what we learned along the way and practical tips for others who may attempt a similar project.

One of the first things we did was to survey our patients and visitors. Using zip codes as a guide, surveys were also sent to the homes of potential clients. Survey responses indicated that:

- 88% wanted more health care

A community assessment is typically conducted in the planning stages of a new program or service, but it is also useful if you want to reassess ongoing services.

This article discusses community assessment for library outreach programs. The same ideas are useful for planning any library service or program. In fact, Chris Williams' article on this page, "Planning a community and medical library" is an excellent example of the community assessment process for launching a whole new library service.

information.

- 46% believed health care information is somewhat difficult or very difficult to find.

- 67% said they would use a consumer health library if they were already at the hospital.

- 41% indicated they were likely or somewhat likely to use a library if it required a special trip to the hospital.

These figures were presented to the medical staff, the Women's Board, the Development Foundation Board and the hospital's board of directors. Once it was determined that there was a need and administrative support, the Development Foundation began to

PLANNING, continued on 6

Understanding needs

The purpose of community assessment is to understand the need and priorities for a program or service, such as who will be targeted, what problems will be addressed and what results or outcomes are intended. But first, what is meant by the word "community"?

Its meaning can be loosely described as a group of individuals who share location, culture, occupation or a common interest. You may be setting up a library to serve the local community, or your outreach pro-

ASSESSMENT, continued on 7

Inside

Assisting NLM in Developing MEDLINEplus: The Indiana Experience	2
Using Volunteer Staff in the Medical Library	3
Pointers for Using Volunteers Effectively	3
MLA Honors Outstanding Achievements in Health Sciences Information	4
GMR Members Who Contributed Papers and Exhibited Posters at MLA 2000	4
Important Dates	8

3 SOURCES

Managing Editor: Jean Sayre
Editor: Stephanie Weldon

GMR Staff

Director

Susan Jacobson
 sjake@uic.edu

Associate Director

Jean Sayre
 jwsayre@uic.edu

Communications Coordinator

Stephanie Weldon
 weldon@uic.edu

Consumer Health Coordinator

gmr@uic.edu

Network Coordinator

Charniel McDaniels
 mcdaniel@uic.edu

Outreach Coordinator

Kathy J. Davies
 kjdavies@uic.edu

Technology Coordinator

Chris Shaffer
 shaffer@uic.edu

Budget Analyst

Rosa Marjalaasko
 marjalaa@uic.edu

Information Services Supervisor

Deneen Wynn
 deneenw@uic.edu

3 Sources

NN/LM Greater Midwest Region
 University of Illinois at Chicago
 Library of the Health Sciences
 (m/c) 763
 1750 West Polk Street
 Chicago, IL 60612
 (312) 996-2464

Contact the GMR office at:

Phone: (800) 338-7657

Fax: (312) 996-2226

Email: gmr@uic.edu

Internet: www.nnlm.nlm.nih.gov/gmr

3 Sources is produced under National
 Library of Medicine contract NO1-LM-6-
 3523.

Tech Notes



Assisting NLM in Developing MEDLINEplus: The Indiana Experience

Peggy Richwine

Ruth Lilly Medical Library

Indiana University School of Medicine

In December 1998, The National Library of Medicine distributed a request for proposal asking for proposals to assist in developing MEDLINEplus. With the holidays and the short time frame, preparing a response and getting it through the university grants process seemed impossible.

However, with insistence and assistance from Lorna Springston, who was then a librarian at Memorial Hospital in Jasper, Ind., I assembled a group of highly skilled Indiana health science librarians willing to work part-time on the project.

Proposals are accepted

The Indiana proposal was submitted in late January 1999. About a month later, Indiana was notified of the acceptance. The University of Cincinnati proposal was also accepted. In late March 1999, six librarians from Indiana and two from Cincinnati went to NLM for training as MEDLINEplus content selectors.

The role of selectors is to evaluate web sites using the criteria established by NLM and to add a record of the web site to the MEDLINEplus database for display under the health topics that were pre-selected by NLM. The topics were selected by NLM from logs of search topics input by the public on NLM search engines.

The fundamental goal of MED-

LINEplus is not necessarily to be exhaustive, but to be comprehensive on a topic. That is, we are not trying to capture everything on the Web on a particular topic. We'd rather give a comprehensive picture of the topic by careful selection of web links.

Variety of sites are selected

Using the primary selection criteria of currency, authoritative sites and consumer information, sites are selected from NIH web sites, other federal government sites, professional organizations and other appropriate sources.

Because this is a government-funded project, commercial sites are generally avoided and academic medical center sites are used sparingly.

Major frustrations in this process include changing URLs, more than one URL for the same site and URLs that totally disappeared. We have also encountered newly mounted sites that have an abundance of consumer directed information that can be used to enhance already released topics.

The MEDLINEplus database is an Oracle database with a Cold Fusion web interface. Upon the selection of a web site, the URL is copied and pasted into a new record form. Elements of the form to be completed include the topic for the selected site, the organization producing the site, subcategories and reasons not to display. The record goes into a pending file for review.

Most of the time, the selected site

TECH NOTES, continued on 5

Using Volunteer Staff in the Medical Library

*Sandra Wicker, Librarian
The Parker Medical Library
Grady Memorial Hospital
Delaware, OH*

Are you a solo librarian? Do you have little or no budget for hiring extra help? Then consider using volunteers. Volunteers can do much more than just answer the phone, open the mail and run errands for you.

If you are a hospital librarian, you should have a director of volunteer services available to you. This person can recruit and schedule volunteers for you, but training them in library procedures will be up to you.

The ideal situation would be to interview prospective volunteers before they are placed with you. If this isn't possible, then make sure the director knows you need someone who is: physically able to lift heavy books for photocopying, curious—(searches can lead to unexpected sources) and willing to learn new things.

With proper training, volunteers can become capable library assistants who are able to function independently with great success. Don't hesitate

to teach them how to answer reference questions, place ILL orders, circulate materials and perform technical service duties. You should provide instruction manuals for them, but also be available in person to reinforce the steps whenever needed. After all, could you remember everything if you only worked 3-4 hours per week, and every week was different?

Find out what the volunteers' strengths are. They are usually people who have been actively involved in a career and/or their community, so use those skills and experiences to your advantage.

If someone is a computer whiz, why not let them develop a newsletter for you, or design charts for your reports?

Use former business people to help you with your budget. They won't be able to purchase items, but they can point out areas of cost overruns and make suggestions.

Everyone should have input into any forms or manuals that they use. Sometimes it will look good on paper, but be hard to implement on a daily basis! Make volunteers feel that they are part of a team effort, and then

it will become **their** library, too.

Provide a way for them to communicate with each other. I have 10 volunteers, a different one each morning and each afternoon. I see all of them, but they don't see each other. That's why we use a "daily log" to leave notes for the next shift. We also use two letter trays for our "mail room." Volunteers can leave mail or notes for me in my tray, and I can leave notes and instructions for them in their tray. We have two general staff meetings per year, one in the summer and a Christmas party in December. These meetings allow new volunteers to meet the more experienced ones.

If you take time, use patience, reward strengths and bolster weaknesses, you will produce a staff that will function reliably, accurately and consistently. Not only that, you will have made some new and very interesting friends! The service your library provides will be consistent and the hospital staff and community will know they can depend on the information they receive from you. This will help you justify requests for more operating money at budget time.

Pointers for Using Volunteers Effectively

*Barbara Boruff
Director of Volunteer Services and
Library Supervisor Porter-Starke
Counseling Centers, Valparaiso, IN
bboruff@porterstarke.org*

Volunteers are great resources when used effectively. Here are a few pointers to keep the library operating smoothly.

Don't make assumptions. Remember that volunteers come from a wide variety of backgrounds. Don't take for granted that they know the rules for alphabetizing or the correct procedure for answering the phone.

Create a handbook that lists the correct procedure for each task that a volunteer will perform in your library. These written guidelines will serve as training material for new volunteers, while providing you with a written standard you can refer to when things go wrong.

Look at it from the volunteer's perspective. Library operations, or even the events of the hospital as a whole, may seem confusing or illogical to a volunteer who works for three hours once a week. Learning new skills may take much longer than for an employee who works daily.

Changes in routine may seem overwhelming. Educate your volunteers, not just on the tasks in the library, but also on the mission and philosophy of the hospital, as well as the locations and services offered by departments. Prepare volunteers for changes by sharing memos, announcements and company newsletters, and by inviting them to company events. Even a quick phone call the day before a volunteer comes in, advising him or her of a change or new situation, can go a long way towards ensuring an easy transition.

VOLUNTEERS, continued on 5

MLA Honors Outstanding Achievements in Health Sciences Information

For additional information see <http://www.nlm.nih.gov/gmr/hiiwire/mlahonors.html>.

Murray Gottlieb Prize: The recipient of this year's prize is **Maggie Yax** for her paper, "War as Laboratory: Albert B. Sabin's Military Service and Its Influence on His Poliomyelitis Research and Development of the Oral Poliovirus Vaccine." Yax is an archivist at the Hauck Center for the Sabin Ar-

chives of the Cincinnati Medical Heritage Center.

ISI/Frank Bradway Rogers Information Advancement Award: For their contributions to the Prospero Electronic Delivery Project, **Eric N. Hamrick, Ruey L. Rodman, Eric H. Schnell, and Judy T. Willis** of the John A. Prior Health Sciences Library, Ohio State University, Columbus, are this year's recipients of the award.

MLA Research, Development, and Demonstration Project Grant: This grant was awarded to **Jolene Miller**, Education and Reference Librarian at the Medical College of Ohio, Raymon H. Mulford Health Science Library.

MLA Continuing Education Grant: This grant was awarded to **Barbara Benisch**, Librarian at the Department of Surgery Library, University of Wisconsin Madison.

GMR Members Who:

Contributed Papers at MLA 2000

For additional information see <http://www.nlm.nih.gov/gmr/hiiwire/mlapapers.html>.

Illinois: Susan Marshall, Elizabeth Figa, Jerod Loeb

Iowa: Edwin Holtum

Ohio: David Boilard, Suzanne Gale, Carrie Lepow, Linda Bunyan, Margaret Moutseous, Eric Schnell

Michigan: Gang Wu, Keir Reavie, Sandra Martin, Ellen Marks, P. F. Anderson, Doreen Bradley, Patricia Martin, Gurpreet Rana, Robert Schumacher

Minnesota: Karla Block, Julia Ann Kelly, Kathryn Robbins

North Dakota: Judith Reike

Wisconsin: Ruth Holst

Exhibited Posters at MLA 2000

For more information see <http://www.nlm.nih.gov/gmr/hiiwire/mlaposters.html>.

Illinois

Joy Kennedy, Richard Klein, Dalia Kleinmutz, Ann Markham, Patricia Pinksowski, Steven Hunt, Daniel Barkey, Brian Lauer, Celia Berdes, Linda Walton, James Shedlock, James Webster, Alice Kuller, Heather Midkiff, Susan Bolda Marshall, Teresa Westphal, Ramune Kubilius, Barbara Nadler, Mitsuko Williams, Christine Frank, Judith Dzierba, William Fleming, Toby Gibson, William Karnoscak Elizabeth Lorbeer, Mary Gillaspay, Sandra Gaynor

Indiana

Carole Francq, Lorna Springston

Kentucky

Neal Nixon, Nancy Utterback, Mary Vaughn



Michigan

Leslie Behm, John Coffey

Minnesota

Sunny Lynn Worel, Scott Marsalis, Vicki Glasgow, Cynthia Robinson, Pamela Barnard, James Bulger

Ohio

Gretchen Hallerberg, Christine Williams

Wisconsin

Ann M. Combs, Denis Dassenko, Tammy Mays, Maria Fracchia, Andrea Bail

VOLUNTEERS, continued from page 3

Design a training program! Offer a venue for volunteers to grow in proficiency and expertise. The training program in my library features a monthly meeting that offers a variety of learning opportunities, including a "postmortem" session. Throughout the month, volunteers are encouraged to look for errors that can be presented to the group. In a relaxed setting with coffee and donuts, volunteers review mistakes without placing blame. Often, peer-teaching experiences such as this provide more effective and lasting learning than lectures from the librarian. Several times each year, volunteers participate in continuing education mini-workshops on basic library skills, customer service, basic computer training and, because we are a men-

tal health library, mental health topics.

Volunteers don't work for free. On the contrary, everyone gets paid in some way, and there are other forms of currency than money. Take the time to find out why each person volunteers: To build confidence? To pass time? To meet new friends? To give something back to the community? Make sure your volunteer is getting the correct psychological paycheck. If the person is trying to gain skills for a future job, offer learning and networking opportunities. Don't assign a lonely volunteer to a solitary corner. Strive to create win-win situations so that volunteers are happy, motivated and eager to come to work.

Set standards. Gently confront

volunteers about mistakes. If you don't, you send volunteers the message that the quality of their work does not matter. You may even wish to devise a checklist of minimum competencies for working in the library.

Recognize. You don't have to spend money for gifts or plaques. Informal recognition can include a photo of a "volunteer of the month" at work on the bulletin board, a card on the volunteer's birthday, or an occasional one-on-one chat over a cup of coffee.

Need more help? Check out the web for more information on volunteer management. Visit www.energizeinc.com, www.merrillassoc.com or www.Cybervpm.com.

TECH NOTES, continued from page 2

will be displayed, but for reasons such as lack of information about the authoritative origins of the site, redundancy with other selected sites, broken links, or the information not being at the consumer level, it may be decided that the site should not be included.

When the selector arrives at the conclusion that the search on a topic for links meeting the NLM criteria is no longer productive, the review for page release begins.

As the selection process takes place, it sometimes becomes clear that: there is not enough on the topic for it to stand alone, the topic may need to be divided into two or more topics, the topic needs to be combined with another or the topic may need to be renamed.

Project is a team effort

The consideration of what topics are to be included is ongoing. Each of the selectors is working on the

project part-time.

All the work is done on the web and communication with NLM and the rest of the team is primarily by email, although there are occasions when email will not substitute for a phone conversation. Conference calls are held regularly to communicate developments and issues.

Although a fast Internet connection is vital, most of us find working at home acceptable. The work itself is an interesting combination of librarian skills that includes searching, collection development, cataloging, indexing and publishing.

MEDLINEplus had 379 topics as of June 2000. MEDLINEplus has links to more than 7,000 consumer health information pages and receives more than 1 million page hits a month. Currently there are more than 400 Spanish URLs in the database.

The *Indianapolis Star* wrote a story about the Indiana MEDLINEplus development team, which appeared

Team Members

The Indiana MEDLINEplus team consists of:

- ◆ Peggy Richwine
- ◆ Lorna Springston
- ◆ Carol Davis, MLS, consultant
- ◆ Deborah Kellenburger, RN, MIS, consultant
- ◆ Lydia Chaung, MLS, Wishard Hospital in Indianapolis
- ◆ Elaine Skopelja, MLS, Indiana Hand Center in Indianapolis

June 15, 1999. It is available on the web at <http://birch.palni.edu/~ihsla/news.html>.

PLANNING, from page 1

raise money. A dream house was auctioned off, funds were solicited from employees, the medical staff vowed to match the \$250,000 donated by the Woman's Board, and we even sold pizza! In the end, the Development Foundation staff worked their magic and raised \$1 million for the project.

Ultimately, we received 8,000 sq. ft. of prime real estate directly off the main lobby. The design incorporates a central staff/work area, which is common to both libraries with circulation/reference areas facing each library. The staff is free to cover both libraries from these central areas, but clients must enter from either the Community Health Library or the Medical Library.

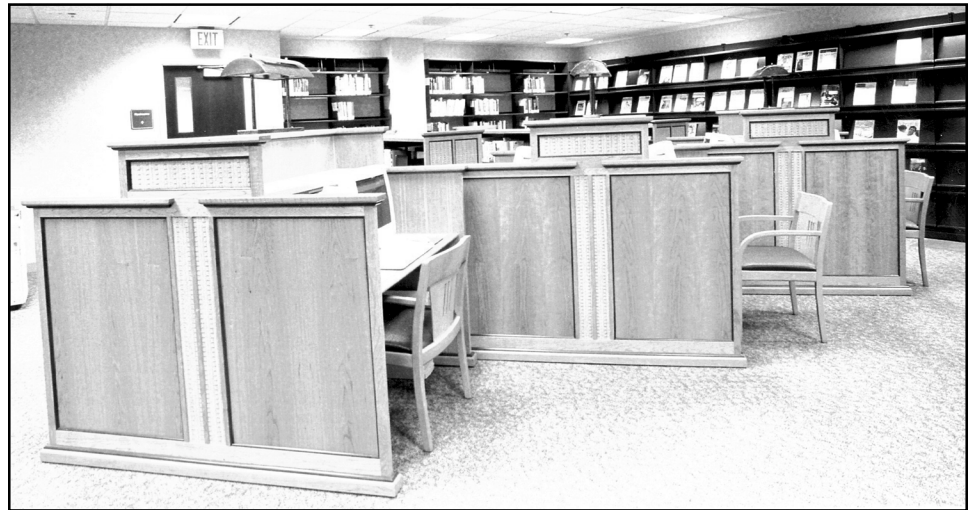
The Community Health Library is 2,000 sq. ft., with six patron computer stations with full Internet access. The Medical Library is 6,000 sq. ft., and houses a 13-station computer lab, four additional stations outside the lab, two private study rooms and a conference room.

It was determined that both libraries would be built at the same time, so I developed a strategic plan. The library planning committee was instrumental to the success of the project. Departments and groups that were particularly important in the planning process were:

- Marketing offered great ideas on how to promote services including radio spots, how to design brochures and library cards, phone book listing and a catchy phone number (ours is 344-book).

- Patient education: The library was there to enhance and support this department's services, not to compete with them. Ultimately, we were asked to join the patient education committee!

- Medical education was helpful for obvious reasons; however, we also wanted to encourage them to use



Here's a view of the Community Health Library at Akron General Medical Center.

the library as a retention and recruitment tool.

- Public librarian and school librarians: The science and technology librarian at our local public library has been an invaluable resource in terms of collection and policy development.

- Information services made valuable contributions during the planning process for home page and Intranet design, as well as hardware selection.

Publicity and promotion of this new service was vital to its success. This included:

- Letters and brochures were sent to all public libraries, school libraries and United Way agencies letting them know we were available as a health information resource.

- The Community Health Library was included on internal hospital signs.

- Table tents were put in the cafeteria, snack shop, lobby and surgery waiting rooms.

- Brochures were sent to doctors' offices for display in their waiting rooms.

- An open house was announced via radio spots on a local station.

- Opportunities to speak at meetings, display at health fairs and com-

munity service events are continuously taken. Library card registration forms are passed out at these events.

- People are encouraged to call or e-mail for information if they are unable to come in.

- A bimonthly newsletter is sent to everyone with a library card. The newsletter focuses on two or three health related topics. Supportive web sites, books, videos and journals in our collection are listed. The newsletter is a big hit and helps to keep us in the foreground when people are thinking about health related information.

Some tips which we discovered the hard way or were brought to our attention include:

- Youth registration forms for children under 16, which parents or guardians must sign. Also, an adult must accompany children under 16, as Internet content filters are not installed on our computers.

- A direct line to the security department is needed on the Consumer Health Library phone.

- Library staff must know how to call a "stat."

- Disclaimers are included on *everything*.

- *Library Journal* publishes a con-

PLANNING, continued on 8

ASSESSMENT, continued from page 1

gram may be responding to a specific need among certain groups, such as teens, Native Americans, AIDS patients or health providers in a particular locale or type of practice (for instance, women's health clinics).

Choosing the group(s) for your program or service to target means looking at the population your library or parent organization serves and identifying communities with information access problems or needs. For example, perhaps your hospital is under contract with the county public health department and has responsibility for the health education needs of a wide area.

Find out about the public health professionals in the county clinics. Do they have adequate awareness, skills and resources to access current information resources? If not, can you effectively work with them in an outreach program? Some of these answers will depend on the assessment you conduct.

Check library literature

To conduct an assessment, the library literature should be checked first as it includes studies about information needs and behaviors. Then gather direct user input to better understand the community's needs and problems with information access. You may not need to conduct extensive research, because user interviews with major stakeholders are frequently the simplest, most efficient way to gather information.

Stakeholders are those with a vested interest in the availability of health information resources, such as health providers, health care administrators, a hospital board, continuing education officers, public or rural health officials and consumers.

Local medical societies, public health associations and other associations or collegial networks can help

identify the leadership or major stakeholders with whom you will want to talk. If planning outreach to American Indian communities, it is especially important to contact tribal elders who provide leadership for the entire tribe.

Feedback is important

Feedback from key contacts and leadership will help establish facts, mutual agreement and support for the program or service you want to conduct. Ask what they think are the biggest problems with health information access. Who might benefit most from an outreach program and why? Who do the key contacts think are the opinion leaders who might help promote the importance of health information access?

Community assessment provides a broad understanding of the barriers, opportunities or resources present for the audience you want to reach. For example, in a health provider community like a clinic, find out about the environmental or political barriers, such as policies or work practices that discourage using the Internet to find and exchange health information.

Even if Internet use is supported, what about acquiring professional help for difficult searches or for obtaining hard-to-get resources? Does the clinic recognize the value of on-site information services, such as a medical or consumer health library? Is there a strong information services department? Does the clinic have a web site? If not, what types of Internet resources do they use? What are the demographics and typical health needs of the populations cared for by the clinic? Do health providers have a way of directing patients or the public to relevant patient education and health promotion materials?

After doing the initial investigation about information access needs, problems and causes, sending out questionnaires might be appropriate if you want to confirm impressions already gained. Surveys meant to produce generalized results should be carefully constructed, and results should be gathered from a truly representative sample of the whole community.

You can gather a thoughtful and practical understanding of your audience by more informal methods, such as distributing questionnaires without worrying about statistical samples.

Results from a community assessment can draw from several data sources mentioned thus far, including secondary literature, user interviews, organizational web sites, and possibly informal or formal survey research. After gathering all this data, what will you do with the results? Hopefully, this process will fill in gaps to answer questions about the desired goals and objectives of the program or service.

Check with stakeholders

Input from stakeholders is important to bolster support as planning proceeds. Data from audience members indicates what is most needed and the types of changes that your program can facilitate. This information helps to shape a list of useful intended outcomes as you begin to evaluate your program and measure its impact.

The next article in this series will discuss developing goals and measurable objectives.

Additional resources and further detail on community assessment can be found in the *Guide to Planning, Evaluating, and Improving Health Information Outreach* on <http://www.nlm.nih.gov/pnr/eval/>.

Important Dates

National Online Training Center Class Dates

For additional NOTC classes, class descriptions, and online registration, check: www.nnlm.nlm.nih.gov/mar/online.

Greater Midwest Region Keeping Up with NLM's PubMed (1-day)

August 14, 2000 Chicago
September 25, 2000 Minneapolis
September 26, 2000 Minneapolis

Introduction to Web-Based Searching: Using PubMed; Internet Grateful Med to Search NLM's Databases (2-days)

August 15-16, 2000 Chicago

Midwest Chapter/MLA Annual Meeting

September 23-26, 2000
Cincinnati, Ohio
Contact: Barbarie Hill
Phone: 513 636-4300
Email: hillb1@chmcc.org

Michigan Health Sciences

Library Association

October 18-20, 2000
At the Park Place
Traverse City, Mich.
Contact: Doris Blauet
Phone: 810-606-5261

KLA/KSMA Joint Annual Conference

October 18-21, 2000
Galt House East
Louisville, Ky.
Contact: Judith Burdine
Phone: 606-679-8401
Email: jburdine@hyperaction.net

IHSLA 2001 Annual Conference

Sponsored by the Northeast Indiana
Health Science Libraries Consortium
April 18-20, 2001
Potawatomi Inn
Resort & Conference Center
Lake James
Angola, Ind.
Contact: Lauralee Aven
Phone: (219) 434-7691
Email: laven@sf.edu

PLANNING, from page 6

sumer health issue each May. This is great for collection development.

■ Amazon.com is a good source for popular books that may be unavailable from medical book suppliers.

■ Be sure to develop a "Recommendation of Library Materials" and a "Reconsideration of Library Materials" policy and form. There may be people or groups that take offense to materials in your collection.

To date, the Community Health Library has been a huge success. We are averaging well over 50 visitors a day and have more than 300 registered library card users. This project has been the most rewarding of my 20-something-year career. I am grateful for support from the medical staff, administration and the Development Foundation of Akron General Medical Center.

Copies of my strategic plan outline and the Community Health Library newsletter entitled *Between the Shelves* are available by e-mailing me at cwilliams@agmc.org or calling 330-344-6242.

3 SOURCES

NN/LM Greater Midwest Region
University of Illinois at Chicago
Library of the Health Sciences, (m/c) 763
1750 West Polk Street
Chicago, IL 60612

ADDRESS SERVICE REQUESTED

PRSR STD
U.S. POSTAGE
PAID
Mpls., MN
PERMIT NO. 26941