

Final Report Outline for NN/LM Pacific NW Region Subcontracts and Outreach Awards

Please save as a Word document and submit as an email attachment to the appropriate NN/LM PNR staff contact.

COVER SHEET

Title of the Project:	Web Tools Training for Rural Oregon Health and Social Services Professionals
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Time Period Covered:	10/15/07 – 11/15/08
Date Submitted:	11/15/08

NARRATIVE DESCRIPTION

1. Executive Summary: Summarize the project's major accomplishments.

In collaboration with the Oregon Child Development Coalition Head Start program; health and social service professionals in rural areas throughout the state who work primarily with low income, migrant and Hispanic families, had the opportunity to learn about the Oregon SafeNet helpline and the four websites that were selected for this project. 9 trainings were provided reaching approximately 150 professionals and parents. Each training demonstrated how to use the sites, what each site provides, how easy the sites switch between English and Spanish and how reliable and beneficial they can be for patients/clients. Materials were created for Oregon SafeNet and on the various websites which were distributed to each participant. Post test surveys were completed immediately after each training giving some baseline information about current knowledge and use of the websites as well as future expected use of the information. A follow up survey was sent out 2 -3 months after completion of the training to get further data on the actual impact on usage. Overall feedback was overwhelmingly positive. Participants were excited to have easy access to reliable health and social service resources for families. A number of participants stated that they would train other staff thus passing the information along to broader audiences. Overall this funding provided a wonderful opportunity to reach the types of professionals who can benefit so much from Oregon SafeNet, MedlinePlus, Oregon Helps and the Beehive.

2. Geographic region/number of counties: List the geographic regions or all the counties that were impacted by the project.

I visited 9 counties – Hood River, Jackson, Jefferson, Klamath, Malheur, Marion, Multnomah, Polk and Washington Counties in Oregon. There were also participants who work in the following counties: Clackamas and Yamhill in Oregon; Skamania, Clark and Klickitat in Washington; and Payette, Idaho.

3. Collaborations/Partnerships: Include names and types of organizations with which there was collaboration at any time during the project. Provide the current status of the partnerships, challenges encountered, and lessons learned.

This project was dependent on a partnership with the Oregon Child Development Coalition. OCDC operates Migrant Head Start programs in 10 different regions in Oregon and the contiguous states. Head Start provides a variety of wrap around services for the children and their families. Each region has a Health Manager who is required to organize two Health Service Advisory Committee meetings each year to share information about local health resources and to have one or more presentations on relevant topics. I found that the greatest challenge was being reliant on the Health Managers individual schedules for the meetings. I had to spend a fair amount of time following up and making sure that I was told of the meeting dates/times and that I was on their agenda. This resulted in some meetings that occurred at the very end of this funding period and one that was never scheduled. I was also reliant on their ability to get people to come to a meeting. A number of the meetings had low attendance. However, on a positive note, I could not have reached the types of professionals that did attend these meetings without the collaboration with OCDC.

4. Training: *NOTE: If you haven't already done so, please complete a record of

Training/Demonstration Sessions using the form at <http://nnlm.gov/evaluation/datacollection/ActivityInfo.pdf> and fax to your PNR staff contact at (206)543-2469. In this final report, provide a summary of the training events and participants:

Total # of sessions for the Project:	9
Total # of sessions in which half or more of participants were from minority populations:	1
Total # of participants for the Project:	107*

*This number is based on those that "signed in". The actual number of participants is closer to 150.

Breakdown of the count of participants by:

Health care or service provider, with a subtotal for public health personnel	103 (17)
Health sciences library staff member	0
Public/other library staff member	0
Member of the general public	4

5. Training sites: Provide a brief description of training sites.

All training sites were at the actual Head Start schools with the exception of Hood River which was held in a hotel. All sites had ample space, laptops, overhead projectors and internet access except for Gresham and Malheur. Gresham did not have internet access and the Malheur meeting was cut short due to a full agenda. In both cases I was able to complete the training but relied on the handouts and my ability to talk about each of the websites without the aid of internet access.

6. Exhibits: List all the exhibits connected with the projects (if applicable). Include the meeting name, dates, location, estimated number of contacts made, demonstrations given and general impressions of success. *NOTE: If you haven't already done so for all exhibits, please complete an exhibit report found at <http://nnlm.gov/pnr/funding/ExhibitReportOutline09-12-02.doc> and submit with this report.

No exhibits were part of this project.

7. Resource materials: Provide a brief description of any materials that were developed for training or for promotion/marketing (include newspaper announcements, brochures, etc.). Include copies of materials developed. If web-based resources were developed, please provide the URL for the site where the materials are located. URLs for all web-based training materials should also be sent the National Training Center and Clearinghouse (NTCC) for inclusion in the Educational Clearinghouse (<http://nnlm.gov/train/>). Provide verification that this has been done or provide a date by which it is expected that URLs of web-based training materials will be sent to the NTCC's Educational Clearinghouse.

SafeNet brochures, cards and posters were created for this project and were given out at the trainings. In addition, each participant got a folder that included a one page description of each website that could be reproduced and given out along with flyers and brochures from each of the organizations that manage the sites. These materials were submitted with the interim report.

8. Web sites: Detail the current status of web sites created as part of the project. Include URL,

plans for future maintenance, and impact.

This project did not include the creation of a website but the timing worked perfectly with the completion of the SafeNet website – OregonSafeNet.org - at the start of this project.

9. Document delivery and reference services: If document delivery services and reference services were provided, please provide appropriate statistics.

N/A

10. Approaches and interventions used: Describe the specific steps or activities used in the following areas: identifying and scheduling sessions; promotion/marketing; training; personnel/staffing; web site development.

The following steps or activities were used in preparation for the trainings:

- Developed brochures, cards, stickers and posters with a graphic designer. Used internal staff to translate into Spanish.
- Presented project at statewide meeting of all Health Managers
- SafeNet Program Manager and Resource Specialist were trained on MedlinePlus at OHSU Library of Medicine by Todd Hanon, Reference and Instruction Librarian
- SafeNet Program Manager and Resource Specialist created training taking into consideration the fact that rural areas have limited resources and local professionals may be aware of what is available in the area.
- Developed handouts and a post survey, and gathered brochures and other materials from the various organizations who manage the websites.
- SafeNet Program Manager contacted all Health Managers and had 7 meetings scheduled by 3/19/08.
- SafeNet Program Manager prepared for each trip by becoming familiar with the local services.

The following were the steps or activities during the trainings:

- 9 trainings were provided starting on 4/15/08 and ending on 11/12/08. Three visits included making overnight arrangements. Scheduling became challenging at times as Health Managers had other agendas to attend to and conflicts that required re-scheduling. Washington County was without a Health Manager until just about one month ago. One meeting was never scheduled.
- All but two of the training sites had internet access and the necessary equipment to fully demonstrate the websites. Materials were distributed to all participants.
- One additional benefit was the opportunity to visit with agencies while in the area. Brochures and posters were delivered to DHS Offices, Planned Parenthood, etc.
- Created follow up survey using Survey Monkey. Distributed it approximately 2-3 months after completion of the training.

11. Evaluation: How was the project evaluated? What results were achieved based on the objectives of the project?

A post survey was given out at the end of each training (Appendix 1). There was a follow up survey done 2-3 months later (Appendix 2). In addition, call volume and SafeNet website activity was reviewed (Appendix 3).

12. Problems or barriers encountered: Provide details on problems encountered in the areas of promotion/marketing; training; equipment/telecommunications; personnel/staffing; and web site development.

As mentioned previously, since scheduling was the responsibility of the OCDC Health Managers, this project was reliant on them following through in a timely manner. Oftentimes, based on the school's schedule and the Health Manager's other responsibilities, these meetings were scheduled with fairly short notice and sometimes they needed to be rescheduled. One meeting never did take place. The other challenge was the fact that the meetings were not based on my agenda. Luckily I did have ample time in most cases to complete the full presentation. The final major barrier was the fact that it was very difficult getting participants to complete the follow up survey. I did what I could to encourage completion of the survey but I had a fairly low rate of return. I was not able to send out the survey for the last two presentations because they were held so recently.

13. Continuation plans: Report on how you plan to continue the project. Will all or some of the project's activities continue? Who will provide the funding and staffing to do so?

At this time there are no plans to continue with this project except for the completion of the final training. This will need to be completed next spring.

14. Impact: Include information on the perceived and actual impact of the project on the library, institution, or consortium. This can include the effect of the project on the library's image, increased utilization of the library, etc.

I feel that the trainings were very well received based on comments from the post survey. The fact that someone took the time to travel to these various rural areas and who provided a well prepared training seemed to have a very positive impact on our agency and services.

FOLLOW-UP QUESTIONS

If answers to the follow-up questions are contained elsewhere in your report, indicate where they are located.

1. Were your original project goals and objectives met? If not, why not?

I do feel that the original goals and objectives were met. Professionals who attended the presentations are now more knowledgeable about health and social services resources. The numbers show by the post survey that they plan on using these resources for their patients/clients. Oregon SafeNet website usage and call volume have both gone up over this time period. Had more participants completed the final survey there may have been clearer evidence that participants were following through on their plans to use the sites.

2. What significant lessons were learned which would be of interest or use to others conducting outreach projects? Which strategies were the most effective in implementing the project?

What made my trainings most effective was keeping my style informal and allowing for questions and conversation. I also made a point of understanding that I am stepping into someone else's community and did not want to present myself as the most knowledgeable about their area. I felt that the most effective approach was to explain that these resources can augment what is currently being used. I always tried to ask participants what they use to locate information and what types of needs were most often requested by clients and patients. In terms of SafeNet, I gave examples such as how our information could be useful for migrant families who are on the move and how we are a safe, anonymous phone call, etc. I explained that all the various websites can help support the work that they are doing on behalf of families.

3. If you were to start all over again, what, if anything, would you change about your goals, project plans, etc.?

The one thing I would have done differently was to send out the follow up survey only a month after the training rather than 2-3 months later. I also would have spent more time encouraging people to complete the final survey.

4. What advice or recommendations would you give to anyone considering a similar outreach effort?

Become familiar with the community, understand who your audience is and make sure that you explain how this can be useful.

Please describe plans for disseminating lessons learned and other information about the project, such as through a conference presentation or publication. In accordance with the NIH Public Access Policy (<http://publicaccess.nih.gov>), project directors are asked to submit voluntarily to the NIH manuscript submission (NIHMS) system (<http://www.nihms.nih.gov>) at PubMed Central (PMC) final manuscripts upon acceptance for publication. I would be willing to submit to the NIH manuscript system.

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Appendix 1 – Post Survey Results

A post test was included in packets that were given to every participant. A total of 78 post tests were completed and turned in immediately after the completion of the presentation.

Surveys Returned by Location

Ashland	8	Madras	8
Cornelius	19	Ontario	12
Gresham	10	Polk	7
Hood River	18	Woodburn	8
Klamath	7	Total	97

The results of the post test gave good information about who was in attendance, their knowledge of these websites prior to the presentation and what they use websites for in their work. It also gave some indication as to whether the presentation was useful and whether it made an impact in terms of future usage of any of these websites which was one of the objectives of this project.

The following are the answers to the Post Test questions:

1) What type of work do you do? *These answers, mentioned one or more times, indicate that the audience was made up of professionals who work in public health, medical, education, mental health, dental, nutrition and social services.*

Consulting Dietitian
Public Health Professional
Nurse
Homemaker/Parent
Nutrition Counselor
Dietitian for WIC
Social Services/Social Work
Health Coordinator for Head Start
School Nurse
Early Childhood Educator
Healthy Start Manager
Dental Dir, Community Health Clinic
Community Outreach, Local Hospital
Disabilities Coordinator Head Start

Psychologist/MH Consultant
Health Outreach and Education
Dental Hygienist
Reading Tutor/Teacher
Dir of Operations, Community Clinic
Family Service Worker, Head Start
Dental Office Manager
Pediatric Therapist PT
Speech Pathologist
Dentist
Dental Hygiene Student
Medical Assistant
Family Advocate

2) Do you use websites to find resource information for your work?
Yes 85 (88%) No 12 (12%)

If so, for what purpose?

The following are topics that were listed one or more times:

- Information on special health problems
- Nutritional handouts
- Current medical information/resources in English/Spanish
- Recipes and activities for children
- Health information
- Resources for low income families
- Nutrition information
- Educational tools for children 0-3 years
- Housing
- Information for parents concerning their child's disability
- Best practices, services
- Oral hygiene/dental treatment
- Medicaid
- Literacy
- Immunization information
- Child development
- Mental health
- Finding doctors/dentists
- Parenting classes
- Resources for children with special needs
- Low cost dental services

3) Were you already familiar with any of these sites prior to today? *Note that no more than 37% of respondents were familiar with any one site.*

SafeNet	32
MedlinePlus	36
Oregon Helps	17
The Beehive	10

Do you expect to use any of these sites to assist individuals or families for your work?

SafeNet	62
MedlinePlus	67
Oregon Helps	58
The Beehive	60

4) What in particular will be most useful to you?

- Finding available resources
- Health and safety information on children
- Oregon Helps to determine what services might be available to clients
- MedlinePlus – English/Spanish conversion
- MedlinePlus to look up health conditions
- Information on health and basic needs
- Dental clinic information
- Immigration, legal services
- Food Stamp information
- Information on child development, parenting, behavior, disabilities
- This is great because most of our families are Hispanic
- All of them!
- Sites to go to that are most beneficial and people can comprehend
- Information to share with professional and paraprofessional home visitors
- Not sure which one but I'm excited to have new resources.
- Basic life skills information
- Local information
- Resources to give to parents
- Servicios medico (parent representatives were present at several of the presentations with a staff member interpreting)
- Dental health education
- Mortgage counseling
- Referrals for patients, especially Spanish speaking
- Food resources

5) Do you have any suggestions regarding this presentation?

The great majority of the comments were very positive. Most said that it was very informative, great presentation, great resources, etc. The only other comments were as follows:

- ✓ Ask early what the biggest need/interest is so you can address while sharing general information. (*This was mentioned at the first training so I incorporated it into all the others.*)
- ✓ Include Oregon Law Help.org.
- ✓ Great to have a full packet of information. I will research the sites and use them.
- ✓ Opportunity to try website.
- ✓ Visually seeing the websites was very useful.

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Appendix 2 – Three Month Follow Up Survey

The 3 month follow up surveys were administered electronically using Survey Monkey. The survey was sent to all attendees of the first 7 trainings (approximately 128 participants) either to their direct email or through the Health Manager. Only 18 (14%) responded. The survey has not been sent to the Klamath or Cornelius participants because they were held so recently.

Conclusions are difficult to draw from such a small number of respondents. However, the survey revealed that there has been some activity on each of the sites and a number of the respondents have either shared this information with others or used it for a patient or client.

Those who responded were from the following counties: Hood River/Wasco (2), Jackson (4), Jefferson (5), Malheur (1) Marion (2), and Multnomah (4). The professionals reflect the diversity of the responses from the first survey – mental health counselor, dental hygienist, early childhood assessment, special education services, Migrant Head Start Health and Family Services, Social Services, Health Assistant, Nutrition Coordinator, Health Manager and Disabilities Coordinator.

Survey Questions

Since the training, have you used any of the websites that were presented?

Oregon SafeNet	10 (55%)
Medline Plus	4 (22%)
Oregon Helps	3 (16%)
The Beehive	6 (33%)

What information were you looking for?

Health information – 6
Food Stamps – 2
WIC – 1
Medical Clinics – 3
Social Services – 6
Women’s Health – 4
Benefits Estimator – 0
Other – AA Information, Food Pantry, Childhood diseases

Which of the following websites have you shared with others?

Oregon SafeNet - 11
MedlinePlus – 5
Oregon Helps – 4
The Beehive – 7

Have you used any of the websites on behalf of a client or patient?

Yes – 7

No – 8

Have you taught others to use any of the websites?

- I brought the website information to the Job Council in Medford
- No
- I have given the information to staff that I supervise since they work directly with families.
- No. I have been very busy so that I have not had a chance.
- Yes, we had parents asking for information on health. We assisted the families in researching the website on health issues.
- Only informed them of web addresses, basic information
- Yes, at work and with family
- No.

Since the presentation have you referred clients or patients to the Oregon SafeNet phoneline for information and referral assistance?

Yes – 8

No - 8

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Appendix 3 – Call Volume and Website Statistics

Caller and website statistics also help measure the impact of the Express Outreach trainings. The following statistics are gathered for March, 2008 and October, 2008 by geographic area. The counties are listed in order of the presentations.

SafeNet Website Usage by Area

The website was launched in February, 2008 with little promotion outside of the Portland metro area except for electronic announcements. The Express Outreach funding was the first opportunity to demonstrate the new website. The following numbers show what geographic areas were used to search for information in our online resource directory.

County	March, 2008	October, 2008
Hood River	5	4
Multnomah	1898	2770
Malheur	11	6
Marion	38	69
Jefferson	0	8
Jackson	12	21
Polk	13	49
Klamath	1	14
Total	1978	2941

SafeNet Call Volume

Call volume on the SafeNet line has gone up over this time period throughout Oregon so it is difficult to attribute these increases specifically to the presentations. Here are the numbers for these specific areas.

County	March, 2008	October, 2008
Hood River	1	5
Multnomah	739	1124
Malheur	3	6
Marion	74	103
Jefferson	0	2
Jackson	38	77
Polk	14	26
Klamath	7	15
Total	876	1358