

Final Report
Central Washington REACH (Resources and Education for Achieving
Community Health)
Washington State University Health Sciences Library
Pullman, WA

Submitted by:
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1. Summary/Introduction:

Summarize your accomplishments on the project.

The overall goal of the Central Washington REACH project was to improve access to health information for health care providers in central and eastern Washington, especially those who serve the migrant and seasonal worker community. This goal was met, but not on the scale originally envisioned by the primary investigator. The five objectives to accomplish this goal resulted in varying degrees of success. These objectives included conducting a community needs assessment, providing training on NLM databases, collecting use data, conducting follow-up surveys of health care providers, and developing a project web site.

Additional accomplishments of this project may have more lasting benefits to the community of practice and to the library profession, but were not explicitly planned for in advance. Training sessions were not attended exclusively by health care providers. There was significant participation by pesticide education and enforcement staff of the Washington State Department of Agriculture, as well as employment counselors from the WorkSource offices. While these groups are not audiences traditionally seen as “targets” for medical and health information, these participants are in constant contact with vulnerable populations. Another outcome of this project was the recruitment of a bilingual/bicultural library school student. The research assistant formerly employed by the grant has been admitted to the University of Washington Information School, and credits some of her experiences on the project with helping her choose her career path.

2. Geographic region/number of counties:

List the geographic regions or all the counties that were impacted by the project.

Training sessions were held in various locations in Chelan, and Yakima counties. Direct mail was sent to Chelan, Douglas, Kittitas, and Yakima counties. Participants indicated residence in Benton, Chelan, Douglas, and Yakima counties. A conference presentation and poster session occurred in King County.

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.

Partnering and collaborating organizations:

- Wenatchee WorkSource Office, state employment agency
- Yakima WorkSource Office, state employment agency
- Wenatchee Valley College, community college
- Northwest Regional Primary Care Association/ Western Migrant Stream Forum, association/conference for providers who serve migrant/seasonal workers
- Columbia Valley Community Health, community/migrant health clinic
- Yakima Valley Memorial Hospital
- Central Washington Hospital

All partnerships have moved to informal status—the primary goals of the project have been achieved, and formal collaboration has ended. There were a variety of challenges encountered and lessons learned. Facilities and space concerns were a constant source of frustration. Because there was no budget for facility rental, and due to scheduling pressures at the WorkSource offices, some classes had to be cancelled or rescheduled. Changes in personnel at the Yakima Valley Farmworkers Clinic disrupted potential collaboration and partnering. The cultural differences were not what the primary investigator and research assistant had expected—the Anglo/Latino/a differences were less relevant than the differences between academics and clinicians. And finally, it takes time, persistence, and patience to build a good relationship with this community of practice.

4. Training:

19 training sessions were conducted as part of the Central Washington REACH project. Of these, 10 sessions had half or more than half of participants from minority populations. Overall, 60 participants attended training sessions. Of these, 57 were health care or service providers, zero were health sciences library staff members, 2 were other library staff members (community college librarians), and 1 was a member of the general public (a sales representative for a drug company).

5. Training sites:

Provide a brief description of training sites.

The Yakima Valley WorkSource Office training room contained 15 late model PCs facing the front of the room, in addition to a teaching machine connected to a multimedia projector. Teaching in this room was somewhat awkward, as the teaching machine was located in the back of the room and the instructor had to sit during the sessions. Participants in sessions held in this classroom all had the option of hands-on practice.

The Wenatchee WorkSource Office contained 12 PCs in addition to a teaching machine (at the front of the room) connected to a multimedia projector. Participants in sessions held in this classroom had the option of hands-on practice, but machines were arranged in rows along the sides of the room, facing the walls instead of the front. In addition, many machines were older, slower models. Because of this, several participants in the sessions for WorkSource staff opted to watch the instruction rather than type along with the searching or attempt their own searches.

The Wenatchee Valley College Library was the best equipped training site, with at least 20 late model machines facing the front of the room, where a “stand up” teaching machine and multimedia projector were located. Participants in this session did opt for hands on practice.

The Western Migrant Stream Forum session was held in a hotel conference room, using a laptop and multimedia projector. Participants were not able to do hands-on searching.

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.

In my opinion, the poster session (and presentation) at the 13th Annual Western Migrant Stream Forum was the most successful outreach activity of the grant. The meeting was held in Seattle, WA, January 30 -- February 1, 2004. During the poster session, 34 people stopped to have significant discussions about the poster and the project. Many of these people had heard positive comments about our presentation earlier in the meeting and wanted to learn more about REACH and NLM resources. Zinthia Briceño-Rosales, the research assistant for the project, conducted many of these discussions in Spanish, and was an integral part of the success of this event.

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.

Three one-page guides were developed for use in training sessions. The Household Products Database Guide and the Haz-Map Database Guide describe basic search techniques in each of these databases. The TOXNET: Toxicology Data Network handout gives a brief description of the different databases available through the TOXNET web site.

Promotional flyers were developed for sessions as well. The first set of flyers (Wenatchee_07_03.doc and Yakima_07_03.doc) were distributed to area contacts via email. The second set of flyers (Consumer Health Resources FlyerWen.doc, Consumer Health Resources FlyerYak.doc, PubMed FlyerWen.doc, PubMedflyerYak.doc) were sent via direct mail to pharmacies, hospitals, clinics, mental health providers, physical therapists, school nurses, nursing homes and extended care facilities, health departments, and related agencies located within 50 miles of either Wenatchee or Yakima.

No web-based training materials were created.

8. Web sites:

Detail the current status of web sites created as part of the project. Include URL, plans for future maintenance, and impact.

The project web site is located at <http://www.wsulibs.wsu.edu/reach>. Because of the comparatively low use of the site over the life of the project, current plans are to maintain the site and review use patterns periodically to determine what parts of the site, if any, should be further developed.

9. Document delivery and reference services:

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

No document delivery services were provided, although one health care professional received information about LoansomeDoc. Over the course of the project, the primary investigator received 9 reference questions, most often by email (but only after a previous in-person contact) and usually regarding either chemical/agricultural information or consumer health topics.

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.

- identifying and scheduling sessions;

Session content was determined in a variety of ways. CME sessions used prepared scripts, but other sessions were developed based on basic Boolean search techniques, feedback from previous Western Migrant Stream Forum Meetings, and current participants' interests. Training sessions were scheduled based on the availability of teaching space at WorkSource offices.

- promotion/marketing;

Promotion and publicity about the project and the training sessions were disseminated via email, direct mail, word of mouth, registration information on the project web site, and publicity at the Western Migrant Stream Forum.

- training;

With the exception of the conference presentation, all database training sessions were hands-on classroom sessions with computers available to participants. Session participants received paper copies of search guides and participated in a variety of classroom exercises, including brainstorming a Boolean search using a clinical question or as a starting point.

- personnel/staffing;

At the beginning of the project, a bilingual/bicultural research assistant was hired to assist in all aspects of the project, especially the development of the web site and the project's Spanish language resources.

- web site development

The structure of the web site was designed on paper before any coding began. Usability testing of both the Spanish and English versions of the site were conducted using WSU Health Sciences Library circulation desk students before the site was formally launched. Updates to the site, including an online registration form for classes, were added throughout the life of the project.

11. Evaluation:

How was the project evaluated? What results were achieved based on the objectives of the project?

The project was evaluated using database pretest/posttest forms, standard in-class CME evaluations, web site statistics, and anecdotal comments at class locations and the Western Migrant Stream Forum meeting.

All in-class evaluations were positive, with participants indicating that the session was valuable for either personal and/or professional development. Database pretest/posttest forms clearly indicated that participants took away new information from the sessions. Web site statistics from the server logs indicated a low level of use of the site outside of formal classroom sessions. Comments and evaluations from the Western Migrant Stream Forum were positive.

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.

- promotion/marketing;

Email and direct mail publicity were not very effective. Email was significantly more cost effective, with 21 attendees after email flyers were sent to clinic contacts in the summer of 2003. More than 500 pieces of direct mail resulted in 4 attendees at the February 2004 sessions.

- training;

In Central Washington, it is common practice for clinicians to be required to use vacation time to attend CE events occurring during the day. Because the WorkSource classrooms were not available in the evening or on weekends, this resulted in a significant barrier to participation.

- equipment/telecommunications;

There were no major equipment problems, other than the arrangement of some of the classrooms.

- personnel/staffing;

Internal difficulties with salary accrual distribution and wage guidelines for Temporary Employees resulted in a progressive wage cut for the REACH research assistant in the last half of the project.

- web site development.

The web site was not used as frequently as I had hoped it would be.

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?

Some project activities will continue, including librarian presence in the community of practice, and additional instruction sessions scheduled whenever feasible. Web site use statistics will also be reviewed periodically to determine whether the REACH

site should continue to be developed. Because, in terms of attendance, the most successful instructional session was at a conference, mini-outreach grants to fund appropriate exhibits and conference attendance will be solicited from the RML.

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.

The project had a number of perceived and actual effects on the WSU Health Sciences Library. Staffing was sometimes challenging during the project-related absences of the librarian PI. The faculty librarian primary investigator found that faculty from other campus colleges and departments regarded her work as more significant due to the fact that the library received an NIH/NNLM grant. Participants in training sessions made positive comments about the work of librarians, and for some it was the first experience they had had with a librarian outside of a public library setting.

15. Recommendations for improvement:

Include suggestions for alternative methods, training materials, promotional materials, etc.

In the future, enlisting the assistance of Directors of Nursing instead of, or in addition to, Medical Directors might increase publicity for training sessions. Speaking or teaching as part of a conference or local professional organization might be more effective at reaching a larger number of health care providers. Teaming up with a "basics of computers" class (like those offered at the WorkSource offices) might be a way to help get health information directly to motivated members of the general public.

16. Responses to follow-up questions (attached):

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

FOLLOW-UP QUESTIONS

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

The overall goal of the Central Washington REACH project was to improve access to health information for health care providers in central and eastern Washington, especially those who serve the migrant and seasonal worker community. This goal was met, but not on the scale originally envisioned by the primary investigator. The five objectives to accomplish this goal resulted in varying degrees of success.

The first objective, conducting community needs assessments in the communities of practice, was only partially met by one meeting with the CEO and CMO of one clinic. Other interactions with a variety of community members, including staff at the Washington State WorkSource (employment) Offices and health care and other service providers at the Western Migrant Stream Forum, provided additional information and context.

The second objective, providing PubMed, MedlinePlus, and TOXNET training at WorkSource computer labs in Yakima and Chelan counties, was completed. A total of 17 classes were held at these locations. One additional class in Chelan county was held at the Wenatchee Valley College, and a training session was also held in Seattle as part of the Western Migrant Stream Forum.

Collection of log book and server data to monitor resource use, the third objective, was partially accomplished. Log books were not kept by clinic staff for a variety of reasons. One clinic was undergoing both JCAHO accreditation and recertification of eligibility to receive federal community health center/migrant health center funding. The other target clinic had a significant personnel change, gaining a new Chief Medical Officer between the time the grant was written and when funding was released. The new CMO was not enthusiastic about the project. Server data was collected, although analysis of use patterns was not available until September 30, 2004 due to limited availability of technical support staff. Use data revealed that REACH web site was accessed approximately 250 times (excluding classroom use, search engine robots, and referrals from all WSU, University of Idaho, NNLM, and NIH domains) over the life of the project.

The fourth objective, conducting follow-up surveys of providers to determine additional instructional needs, was also only partially accomplished. Participation by health care providers in classroom sessions was very low, and both anecdotal comments and more structured interviews indicated that the perceived need for access to information (such as full-text journals, summary resources like MD Consult and Cochrane, and patient education information) was much greater than the perceived need for instruction in how to use information resources, especially those that only provide citations. However, all attendees were very satisfied with the classroom sessions, and many expressed that the skills they gained would help them in their work. Many also had mentioned the sessions to colleagues and encouraged them to attend.

Developing a website for the project, the fifth objective, was accomplished. However, the website has not been heavily used over the life of the project. In particular, the Spanish language version, which seemed to be an important component initially, has received almost no use. Additional evaluation of server logs will take place periodically, to determine whether the website continues to be used after the funded part of the project has ended.

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?

Training sessions are better attended where people expect to participate in Continuing Education. Nothing, nothing, nothing substitutes for personal, face-to-face contact with members of the community you are trying to reach. After a personal meeting, phone contact and, sometimes, email, can keep you in touch with a person, but without the face time, not much will happen. I found that the people who knew me “in person” were the project’s biggest supporters and best advertisers. This was a significant difference for me, coming from the academy where it is possible to have meaningful collaboration on major projects with people I have only “met” electronically.

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

If I were to start over, I would aim for a significantly more modest goal, focusing on one city, one clinic, or one hospital, if possible located closer to Pullman. I would schedule sessions on the weekend or in the evening, and offer no more than two sessions per day, to minimize the number of decisions participants have to make when registering. I would involve my library administration at a much earlier stage so that expectations on all sides would be clearer. In addition, I would explicitly write in Temporary Employee funding, at a set wage, to cover a research assistant for the grant, instead of assuming that the recoup on my salary would be returned to my unit to spend to further the aims of the grant.

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

Specific commitments about partnering, collaboration, and administrative support should be made in writing, not just verbally. If you require the use of space/facilities at an institution that is not your own, make specific arrangements what you need as far in advance as you can. Flexibility is the key to success. There will be times when you need a plan D, not just A, B, and C, and being able to “go with the flow” sometimes will reduce your stress. Personnel changes often result in organizational changes, which is why commitments in writing are so valuable. Don’t be optimistic about “if you build it, they will come”, whether it’s a web site or a training session—even if you have made personal connections, everyone is increasingly busy due to budget cuts, funding pressures, and so on.