

# Annual Report

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## National Network of Libraries of Medicine - MidContinental Region

May 1, 2007 - April 30, 2008

Contract No. N01-LM-1-3514

Spencer S. Eccles Health Sciences Library  
University of Utah

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## Executive Summary

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### Personnel

Wayne Peay, Director of the RML, stepped down from his position effective July 1, 2007. He was on reduced time until the end of September 2007, when he formally retired. A search continued throughout the rest of the year to fill the position of the RML Director.

Mary Henning, Wyoming Liaison, resigned from her position on August 15, 2007 to develop library services for Laramie County Community College - Albany County Campus. James Honour was hired as the Wyoming Liaison starting April 30, 2008.

Claire Hamasu, Associate Director; Sharon Dennis, Technology Coordinator; and Heidi Sandstrom, Associate Director of the NN/LM Pacific Southwest Region; wrote a proposal with supporting documents that was sent to NLM at the end of July 2007 to approve a shared technology coordinator position. Although an agreement had yet to be signed between UCLA and the University of Utah, the technology coordinator sharing pilot began July 2, 2007. Holding up the process was miscommunication on the documents necessary to gain NLM approval for the pilot. On October 3rd, NLM's contracts office ruled that the project start date could not be earlier than August 14, 2007. An amendment to the proposal was sent to UCLA with this new start date and a revised budget. By the end of the year the two universities had signed the subcontract.

The shared position pilot progressed very well, although adjustment was required by staff of both RMLs. The MCR hired Susan Roberts in the position of Technology Associate to help accomplish the activities stipulated in the technology portion of the logic model and to assume some of the day to day responsibilities that were being carried out by the Technology Coordinator and Technology Liaison. These included managing the listserv and web site, and teaching. A mid-point report was presented at the RML Directors meeting on January 16, 2008 and a paper "High Tech High Touch: Sharing Staff at a Distance" is being presented at the 2008 MLA annual meeting. The final report for the project is being written.

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### Advocacy

Bringing in extramural funding for library projects is a way for libraries to contribute to their institution. The RML was pleased to include subcontracts in its budget funding for year 02 for technology, hospital library, outreach, and express outreach RFPs.

Although we promoted the RFPs using all of our communication tools and consulted with a number of members, very few followed through and submitted a proposal.

The RML was involved in a number of activities this year to advocate for hospital libraries/librarians. Dana Abbey, Colorado/Consumer Health Liaison, is a member of the Colorado Medical Society CME Committee and the Colorado Council

of Medical Librarians Advocacy committee. Barbara Jones, Missouri/Advocacy Liaison continues to chair the MCMLA Library Advocacy Task Force and started conducting the interview portion of the study they designed on the status of hospital librarians. She continued to work with staff at the J. Otto Lottes Health Sciences Library at the University of Missouri - Columbia to develop the study of user's assessment of the value of the library. Ms. Jones and Betsy Kelly, Assessment and Evaluation Liaison, developed retail value and return on investment (ROI) calculators for health sciences librarians based on the Maine State Library calculator. Ms. Hamasu sent a letter protesting the proposed revisions of the JCAHO standards on information dissemination.

The RML sponsored Pat Wagner's "Marketing as if Your Library Depended on It." This course consisted of two sessions, the first was to learn the basics of marketing and the second session was to report back on the marketing projects carried out by each of the participants. We were very pleased with the results of the projects and the attendance of members from multi-type libraries. This course was brought to the region to assist libraries in assessing user needs and promoting their services and resources.

**Outcome:** Increased number of proposals from the region funded by NLM, NN/LM, and other sources.

Indicator: The number of proposals funded by NLM, NN/LM, and other sources will increase by five each year.

*Indicator Not Met. Only two members applied for the express outreach award. They will be funded in year 03. If proposals had been submitted for all of the RFPs we would have met the indicator for this year.*

**Outcome:** Administrators and health care professionals are more aware of NLM resources and the access to medical information provided by the hospital library.

Indicator: Librarians report that RML efforts enhanced their visibility in their institutions and increased their ability to contribute to hospital programs.

*Indicator Not Met. The Colorado/Consumer Health Liaison is a member of the Colorado Medical Society CME Committee. The Advocacy Liaison has been working on resources but neither of these efforts has yet resulted in members' recognition of the RML resources as enhancing member visibility within their own institution.*

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

Indicator: Hospital librarians and adjunct librarians report that materials provided by MCR are valuable for advocating to hospital administrators.

*Indicator Partially Met. State liaisons contacted two or three hospital librarians in Missouri, Kansas, Nebraska, and Utah to get feedback on the advocacy materials provided on the MCR web site. Feedback was evenly divided between materials being valuable and not valuable. The ROI calculator was released at the end of the year; there was not enough time for members to determine its value.*

**Outcome:** Librarians' abilities to contribute to hospital programs and priorities are enhanced.

Indicator: At least fifteen librarians will attend each class on marketing at two locations in the region.

*Indicator Partially Met. Twenty-two librarians attended the sessions in Kansas City; thirteen librarians attended the sessions in Denver.*

**Indicator:** At least half of the participants will be successful with the implementation of their marketing plan.

*Indicator Met. Twenty-one of the 35 participants completed and reported back on their marketing plan. Projects will be featured in the Plains to Peaks Post.*

**Indicator:** Fifteen librarians will attend an assessment and evaluation class.

*Indicator Met. "Measuring Your Impact" was taught twice in the region (Salt Lake City, UT and Omaha, NE) with a total of 29 attendees.*

**Outcome:** Members of the MCR will have documented evidence of the value of information to health science institutions in the six state region.

**Indicator:** Institutions participating in the study begin collecting data.

*Indicator Not Met. The pilot study has been run at the University of Missouri and the first off-site library, Boone Hospital (MO), has been recruited.*

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## Assessment and Evaluation

The RML carried out formal and informal assessments. The primary assessment activity was holding focus groups of public librarians in the region. In addition, members were asked to provide us with feedback on the impact of sharing a technology position with the Pacific Southwest Region, on issues around applying for funding, and on the usefulness of the MCR web site. Regional Advisory Board members were used to pilot many of the assessment instruments and provided valuable feedback.

Five staff members attended the "Marketing as if Your Library Depended on It" workshops and as part of the "homework" three assessments were carried out: expectations of RML staff of the Education Liaison, the perceived benefits of being a Resource Library in the NN/LM, and the best way to communicate technology information in Kansas.

Refinement of the Activity Reporting System continued. This year the logic model was moved to a planning database that greatly facilitated developing the logic model for year 03.

**Outcome:** Network members are more proficient in project planning and evaluation.

**Indicator:** 75% of class attendees indicate the class objectives were met.

*Indicator Met. All participants of "Measuring Your Impact" and "Thinking Like an MBA" classes indicated in the post-class evaluation that the class objectives were met.*

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

*Indicator Met.*

**Indicator:** Each liaison will have at least four contacts with their assigned board member in addition to the annual meeting.

*Indicator Partially Met. Not all liaisons established a relationship and maintained communication with their board member during the year.*

**Indicator:** Each 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.

*Indicator met by a majority of the members. All board members who attended the annual meeting contributed to the discussion and fulfilled this responsibility. There were one or two who were not able to attend, with whom staff did not follow up.*

**Indicator:** Advisory board members recognize the name and the major purpose of primary NLM resources.

*Indicator Not Met. Advisory board members were introduced to the primary NLM resources at the annual advisory board meeting, but there was no follow up to determine whether they retained any of the information.*

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

**Outcome:** Regional programs are evaluated.

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

*Indicator met. Outcomes and indicators that related to access were identified. Analysis of the data shows that the RML contributed to improved access through emergency planning, regional licensing, Tribal Connections 4 Corners, document delivery, library, advocacy, NetLibrary, public health outreach, consumer health partnership, new technology adoption, and reference continuity activities.*

**Indicator:** Analysis is done on collected data and results are shared with NLM, NN/LM, and Network members and used to inform future RML programming in the region.

*Indicator Met. Each quarter liaisons analyze the RML's accomplishment against the logic model in order to determine progress and whether there needs to be changes in strategy. The Associate Director writes the quarterly and annual reports based on their review. These reports are sent to NLM and notices are sent to the Network members and other RMLs about their availability from the web.*

**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:** Data from meetings and informal visits and other liaison experiences are sent to NLM and shared with appropriate RML staff; MCR provides data to NLM about products used in the region and needs articulated.

*Indicator was partially met. Most of this information is provided in the region's quarterly report to NLM. Additional information about RML experiences and NLM resources has not been gathered in reports this year. Data about the use of NLM products in the region is scheduled to be collected in year 03.*

**Outcome:** The needs of health sciences libraries are acknowledged/understood, for them to support programs to improve the transfer of health care and biomedical institutions.

**Indicator:** Health sciences librarians in all states indicate that they provided feedback to the RML about their needs.

*Indicator Not Met. Although health sciences librarians communicated with the RML about their needs as members of the Regional Advisory Board, work groups, through brief questionnaires, and through comments during "Breezing Along with the RML" sessions; no formal assessment was made this year to determine whether this indicator was met.*

**Outcome:** The RML will understand users' information preferences, needs, and how they use health information.

**Indicator:** Public librarians in each state participate in RML focus groups.

*This indicator was almost met. Focus groups were held for each state except Wyoming.*

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## Community Outreach

CBOs in the region learn about the NN/LM MCR through many outreach activities. The BHIC (Bringing Health Information to the Community) blog is a daily source of outreach to CBO staff and is read widely across the U.S. This year it was incorporated in the WebJunction Spanish Language Outreach Page. Liaisons promote the NN/LM MCR at health fairs, work on committees of local and statewide organizations promoting health information

access, and attend forums and conferences where they have an opportunity to promote the Network.

The RML continues to focus on outreach to American Indian communities. Siobhan Champ-Blackwell, Community Outreach Liaison, worked with the Winnebago Tribal Library (NE) to produce a poster to use at community events. Participation in the Tribal Four Corners and Outreach Connections: Native Health Information collaborations has contributed to CBO/library partnerships in the Four Corners region and the development of a portal for sharing descriptions of health information access projects.

**Outcome:** A symposium planning group will form.

**Indicator:** Investigate needs for an additional symposium.

*Indicator met. RML staff decided that the CBO symposium will be postponed until year 04 and that the RML would focus on library advocacy in year 03.*

**Outcome:** Information on minority health issues provided by the MCR is published in CBO newsletters, posted on their discussion lists, and distributed at exhibits and through presentations.

**Indicator:** One article a year will be submitted to a CBO publication in each state.

*Indicator Partially Met. The Community Outreach Liaison wrote the article "The Most Shocking of All" for Minority Health Month. It was submitted to eight CBOs in all states except Missouri and Wyoming. Four organizations included it in their publication or on their web site.*

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

Indicator: Exhibit at two minority health conferences per year, so that over the five years we will have exhibited in each state.

*Indicator Met. The RML exhibited at thirteen health conferences for providers who work with minority populations or at health fairs attended by minority populations in each of the six states.*

**Outcome:** Staff at CBOs will be trained in accessing biomedical information.

Indicator: Six train-the-trainer sessions will be offered at CBOs in the region.

*Indicator Not Met. Liaisons were unsuccessful in scheduling sessions at any CBOs in the region.*

**Outcome:** Increased number of proposals from the region funded by NLM, NN/LM, and other sources.

Indicator: One library/CBO partnership is funded each year.

*Indicator Partially Met. Two proposals were reviewed and approved that involved library/CBO partnerships, but funding will be in year 03.*

Indicator: Ten consultations happen each year regarding library/CBO partnerships.

*Indicator Met. RML staff consulted with the following organizations about library/CBO partnerships:*

1. *Alegent Health Faith Community Nursing Network, Nebraska*
2. *Creighton University Health Sciences Library, Nebraska*
3. *Denver Medical Library, Colorado*
4. *Gilpin County Library, Colorado*
5. *Nebraska AHEC*
6. *Nebraska AIDS Project*
7. *Northern Nebraska AHEC*

8. *Omaha Public Library, Nebraska*
9. *TMC Lakewood Medical Dental Library, Missouri*
10. *University of Missouri - Columbia Sinclair School of Nursing*
11. *University of Nebraska Medical Center*
12. *University of Nebraska Medical Center - Center for Health Disparities*

**Outcome:** Increased access to biomedical information by unaffiliated inner-city institutions.

Indicator: Information about health information needs of inner city and rural health care providers is obtained through Café To Go sessions.

*Indicator Partially Met. Sessions were planned for Colorado and Wyoming. A successful session was held in Denver. The Wyoming liaison position was vacant, so no one with contacts to the appropriate participants was available. The Wyoming session was postponed for year 03 or 04.*

Indicator: One inner city clinic staff member will be considered for the Regional Advisory Board each year.

*Indicator Met. Ira Combs, from the University of Nebraska Medical Center Minority Health Education Research Office and Omahealth, Inc. is a member of the Regional Advisory Board.*

**Outcome:** Institutions who train minority health professionals will have promoted health information access to their community.

Indicator: Tribal Librarians who are Affiliate members will each use a personalized kit to exhibit at two events per year.

*Indicator Not Met. The exhibit kit poster was delivered to the Winnebago Public Library in April 2008 and has not yet been used.*



**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: The partnerships are sustained.

*Indicator Not Met. This applies to the work of the TC4C collaboration. The partnerships between TC4C health sciences libraries and native communities are progressing much slower than anticipated. Partnerships have been established, projects have been proposed, and funding approved. However, the partner projects will not begin until they have been approved by the Navajo Human Review Board.*

Indicator: TC4C community based partnerships are created.

*Indicator Met. Three community organizations; Hardrock Council on Substance Abuse (AZ); Gallup Indian Medical Center (NM); and Utah Navajo Health System, Inc.; have written proposals partnering with their state academic health sciences libraries to carry out health information projects.*

Indicator: Effective practices from each TC4C workgroup will be added to the Effective Practices Collection.

*Indicator Not Met. It is too soon in the implementation phase to identify effective practices that are appropriate for the Effective Practices Collection.*

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

Indicator: Effective collaboration practices are developed.

*Indicator Not Met. The Community Assessment Working Group has been formed with individuals in the region involved in collaborative outreach to produce this information.*

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## Consumer Health

All but two states in the MCR (Colorado and Missouri) have Go Local programs in development or in release. The Kansas State Library was awarded funding for a statewide project. The Missouri Go Local project, the first Go Local in the region, lost its funding and is currently in limbo. A possible partnership with Missouri 211 is being pursued by Deborah Ward, Director of the J. Otto Lottes Health Sciences Library, and Ms. Jones.

To bolster interest and support in Colorado, Ms. Abbey presented a poster on the benefits of Go Local at the Colorado State Library Association conference; promoted the service to the public health department; and promoted the project to participants at a health information workshop, five of whom were interested in further exploration of supporting Go Local in Colorado.

National Library of Medicine consumer health resources were promoted at twenty-six events in the MCR. Participants in these events included community health fair visitors and health symposiums participants; medical, public, academic and special librarians; public health workforce, church-goers, journalists, students, teachers, media specialists, and health administrators.

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

Indicator: All six states will be participating in Go Local.

*Indicator Partially Met. All states except Colorado and Missouri are participating in Go Local.*

Indicator: Mobile units will be utilized in four sessions when online teaching would otherwise not be possible or would increase the number of participants utilizing hands-on training.

*Indicator Not Met. The mobile unit was used only once when computers were not available for hands-on training. For all other hands-on training in the region, computers were available.*

Indicator: Sixty more orders of InformationRx materials.

*Indicator Met. NLM reported that 66 orders were placed from sites within the region.*

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

*Indicator Met. The MCR had a presence with three national organizations. The Community Outreach Liaison served as a REFORMA (National Association to Promote Library and Information Services to Latinos and the Spanish) representative. She also worked on the American Library Association (ALA) initiative "Wellness in the Workplace." In this capacity, she coordinated the ALA Conference Health Fair, reviewed and promoted the initiative web site, and co-authored an article on the ALA initiative.*

*The Colorado/Consumer Health Liaison edited monthly patient handouts published in the Family Physicians Inquiries Network Evidence-Based newsletter, adding MedlinePlus resources. These patient handouts are linked from MedlinePlus.*

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

Indicator: One submission per state will be made each year to the Effective Practices Collection.

*Indicator Not Met.*

Indicator: The number of MedlinePlus links added to public library web sites will increase by six.

*Indicator Not Met. At the beginning of the year, public library sites in Utah were reviewed. Of the 38 that have web presence, all link to MedlinePlus either directly or via a bridge service. Assessments of public library sites in other states were not carried out.*

Indicator: Each liaison will submit a proposal and exhibit at a state library association conference each year.

*Indicator Partially Met. Proposals were submitted and the RML had an exhibit for all states except Missouri and Wyoming. The RML was successful in getting on the programs for the Colorado and Nebraska conferences.*

Indicator: Working group members help implement one logic model activity per year.

*Indicator Not Met. A working group for consumer health was not organized in time to carry out an activity.*

Indicator: At least six partnerships between public libraries and community organizations, per contract, will be formed, one in each state.

*Indicator Not Met.*

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## Education

RML staff offered 74 training sessions across the region during the year. The challenges in the education are sharing materials developed by RML staff with other RMLs, through the NTCC Clearinghouse, and with Network members, by promoting their availability using multiple communication tools and providing them in multiple formats. More complete input from staff about the trainings they hold would also improve our knowledge of success in our training sessions.

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

**Indicator:** Items of note appear in a minimum of two communication tools, per year.

*Indicator Not Met. Reporting was not consistent among staff and so it is not possible to know whether this indicator was met.*

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

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

*Indicator Not Met.*

**Outcome:** Network members and librarians in MCR will have access to electronic books focusing on technology and library administration.

**Indicator:** Usage of NetLibrary will increase 20%.

*Indicator Met. Promotion of the NetLibrary collection increased usage by 50% over last year. By the end of the year we had 475 users of NetLibrary.*

**Outcome:** Network members, health professionals, and organizations providing health information to the public have utilized electronic and face-to-face opportunities to learn how to evaluate health information resources.

**Indicator:** 75% of class attendees indicate the class objectives were met.

*Indicator Not Met. Not all staff included evaluation of health information resources as an objective in their training sessions and not all staff evaluated their training sessions.*

**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:** NTCC does three trainings per year in MCR.

*Indicator Met. Training was held in Kansas City, St. Louis, and Salt Lake City for NLM Gateway and ClinicalTrials.gov; PubMed; TOXNET; and Introduction to Molecular Biology Information.*

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

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

*Indicator Met. The Nebraska/Education Liaison met with the appropriate librarians at St. Louis University and the University of Utah to discuss inclusion of public health informatics materials in their orientation sessions with new students.*

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## Network Membership

Last year, a successful membership renewal campaign for full Network members was conducted. This year, efforts were concentrated on Affiliate members. Although the RML pursued membership of public libraries and information resource centers by making follow up calls, 164 Affiliate members decided not to renew their membership in the Network.

The RML regularly employs a variety of communication mediums to inform members of news in the world of health information, health sciences librarianship, the RML, the NN/LM, and NLM.

- *Plains to Peaks Post* (quarterly newsletter)
- Messages to the mcmla-l
- RML News (weekly news compilation sent out on the mcmla-l)
- MidContinental RML News blog
- Bringing Health Information to the Community blog (BHIC blog)
- Breezing Along with the RML (monthly videoconferencing session, also available in recorded version)

**Outcome:** Unaffiliated health professionals have access to information resources and services.

**Indicator:** 5% increase in the number Network members providing services to unaffiliated health care professionals.

*Indicator Not Met. The RML suspects that having members update their institutional records may result in an increase in the number of members who serve unaffiliated health care professionals since this number is taken from DOCLINE.*

**Outcome:** Network members are aware of activities, projects, updates, news, announcements, etc. of other Network members, NN/LM, and NLM services and programs.

**Indicator:** 75% of Network Data Inventory (NDI) respondents indicate increased knowledge due to *Plains to Peaks Post* articles.

*Indicator Not Met. The NDI is scheduled for year 03.*

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

**Indicator:** 87% of Network members are actively involved in the NN/LM infrastructure, outreach programs, and assessment of services.

*Indicator Met. The RML estimates that 344 Network librarians from 306 member institutions participated in our infrastructure (advisory groups, work groups, assessment efforts, testing, contributing to the RML newsletter) or outreach (co-instructor, exhibit booth staff).*

**Outcome:** Member libraries' institutional records and serial holdings are up to date.

**Indicator:** 90% of Network member records are current.

*Indicator Not Met. This indicator was almost met for current institutional records and less than half met for serial holdings. Eighty percent of member institutional records have been updated in the last year. Forty percent of member serial holdings have been updated.*

**Outcome:** Growth in full and Affiliate memberships.

**Indicator:** 80% of Affiliate members renew their membership in the NN/LM.

*Indicator Not Met. Forty percent of the Affiliate members renewed their membership.*

**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: NLM DOCLINE team responds that communications sent to them from MCR are helpful.

*Indicator Met.*

Indicator: NLM reports that feedback from RML Liaisons contributes to improvements in services features.

*Indicator Not Met. The RML did not solicit an assessment from NLM on our input.*

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

Indicator: NLM reports that the fill rate for MCR is 93% or better.

*Indicator Almost Met. The fill rate for the region was 91%.*

Indicator: Less than 5% of MCR Members are represented on NLM's "Bad Library Reports."

*Indicator Not Met. Five reports were reviewed:*

- Fewer than 25 serial holdings
- Institutional records not updated in 1 year
- Serial holdings not updated in 1 year
- Level 2 holdings
- Inactive libraries making requests

*The percentage of members appearing on these reports ranged from a low of 3% (Inactive libraries making requests) to a high of 57% (Serial holdings not updated in 1 year).*

**Outcome:** Health professionals and unaffiliated health professionals will have access to health sciences information through electronic document delivery.

Indicator: 18% annual increase in the number of unaffiliated health care professionals registering with Loansome Doc.

*Indicator Almost Met. There was a 15% (438) increase in new Loansome Doc users among unaffiliated health care professionals.*

**Outcome:** Increased number of members provide desktop document delivery.

Indicator: 10% reduction per year of members who are DOCLINE libraries listed in the report called "No Desktop Delivery."

*Indicator Met. The region had an 85% reduction. This reduction was realized by contacting the libraries and having them update their DOCLINE record. At the end of the year only five members were listed as not providing desktop delivery service.*

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## State Outreach

Liaisons traveled out to the rural areas of their states to assess the needs of Network members and ensure that librarians and health care providers learned how to use NLM resources.

The 5<sup>th</sup> Annual Wyoming Symposium drew participants from Wyoming, Colorado, and Nebraska to learn "practical solutions and technologies for information transfer."

The MCR staff regularly proposes program ideas to organizers of local meetings. This year we were successful in getting on the program for five state meetings:

- Utah Library Association/Mountain Plains Library Association conference

- Cambio de Colores (MO)
- Kansas Department for Health Disparities conference
- Colorado Association of Libraries conference

**Outcome:** NLM funded projects serve as a model when designing regional projects/activities.

Indicator: One NLM funded project serves as a model when designing projects in the region.

*Indicator Not Met. There are three NLM funded projects being implemented in the region, two in Utah and one in Missouri. RML staff assisted with two projects and monitored the progress of the third. At the conclusion of the projects, staff will determine what aspects can serve as models.*

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

Indicator: One training session per state per year.

*Indicator Met. Training took place primarily at public health meetings.*

Indicator: Two trainings and/or visits per state, per year, to Network members, health care professionals, public health professionals, and the public in rural areas.

*Indicator Partially Met. Activities to improve health information access in rural areas of the state took place in all states except Utah and Kansas.*

**Outcome:** Network members will be aware of health information resources.

Indicator: 75% of Network Data Inventory (NDI) respondents report that the MCR web site increases their awareness of health information resources.

*Indicator Not Met. The NDI is scheduled for year 03.*

**Outcome:** Network members will be made more aware of NLM products and services as well as NN/LM exhibit procedures.

Indicator: The NN/LM MCR will provide Network members the opportunity to exhibit at one local or national exhibit (within our borders) per state, per year.

*Indicator Partially Met. Network members helped staff exhibit booths in Colorado, Kansas, Missouri, and Utah.*

**Outcome:** NLM and NN/LM programs and services are presented as part of the program at NLM assigned conferences and state meetings.

Indicator: MCR will be on the program of at least one national meeting each year.

*Indicator Met. The MCR made a presentation at the International Parish Nurses Westberg Symposium, "Making the Most of Web Resources to Enhance Health Disparities," on September 29, 2007.*

**Note:** The following outcomes and indicators pertaining to outreach projects were dependent on the RML funding regional outreach subcontracts. Network members did not respond to the first RFP, so outcomes were not addressed and indicators were not met.

**Outcome:** Information on collaborations will be shared.

Indicator: Five new entries will be made to the Effective Practices Database regarding projects funded by NLM or NN/LM.

*Indicator Not Met.*

**Outcome:** Outputs of NLM and RML projects are shared.

Indicator: A wiki is used by project leaders to share experiences.

*Indicator Not Met.*

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## Technology

PIGs (Personal Interface Grids) were installed and successfully tested at three Resource Libraries: Creighton University Health Sciences Library, McGoogan Library of Medicine, and Dykes Health Sciences Library. Installation at the Otto J. Lottes Health Sciences Library is delayed until it is determined where the unit will be located. The Bernard Becker Library has recently received the equipment.

The “Grant Writing for \$ucce\$\$” workshop was conducted over the Access Grid on June 7 and 8, 2007. Audio and PowerPoint control difficulties occurred on the first day that interrupted the session, making it frustrating for both students and instructors. With input from all participants an action plan was developed to overcome the difficulties.

The MCR continued to promote the use of technology via “Breezing Along with the RML” sessions, articles in the *Plains to Peaks Post*, and items in the RML News. Technology staff offered more technology related workshops than were offered in the past. (See *Courses developed/updated by RML staff* for a listing our technology classes.)

With the support of the National Training Center and Clearinghouse, Ms. Hamasu, Ms. Dennis, and Heidi Sandstrom, Associate Director for the NN/LM PSR, proposed the development of a national web site with a calendar, course information, and registration for training going on in all regions. A plan was developed for implementation with the Associate Directors committing their regions to participation as long as the system allows tailoring to regional preferences.

Ms. Dennis and Rebecca Brown, Kansas/Technology Liaison, investigated the following communication services without finding one that met our needs: free, supports multiple webcam images, easy to use, handles 10-12 people, and multiple audio/talk capabilities:

- webhuddle.com
- oofoo
- Vidspeak
- MegaMeeting
- VRVS
- TokBox
- ineen
- iVisit Plus
- Be-Intouch
- VSee
- dimdim

**Outcome:** Members adopt new technologies to increase access to biomedical information.

**Indicator:** Each resource library with a PIG is a participating site for at least one event using the PIG.

*Indicator Not Met. Two Resource Libraries participated in “Grant Writing for \$ucce\$\$” workshop.*

**Indicator:** 75% of technology class participants indicate increased knowledge about technologies.

*Indicator Met.*

**Note:** The following indicators were dependent on the RML funding regional technology subcontracts. Network members did not respond to the RFP, so outcomes were not addressed and indicators were not met.

**Indicator:** At least one on-demand video provided by those trained or who have received a subcontract.

*Indicator Not Met.*

**Indicator:** 75% of class participants indicate increased knowledge about technologies.

*Indicator Not Met.*

---

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

Indicator: 75% of members responding to periodic web questionnaires indicate increased knowledge due to reading the web site.

*Indicator Met. In November 2007, Network members were asked about their MCR web site usage and its value. Results from the survey indicate that of the 48 respondents, 81% had increased their knowledge due to using the MCR web site.*

Indicator: 75% of members surveyed on Network Data Inventory (NDI) indicate increased knowledge due to *Plains to Peaks Post* articles, RML news, and other listserv postings.

*Indicator Not Met. The NDI is scheduled for year 03.*

Indicator: Each liaison uses alternative forms of technology to communicate with members at least once per quarter.

*Indicator Partially Met. Two liaisons created wikis for their work groups and two liaisons used an echo cancellation microphone to enable librarians, not able to attend a meeting, to participate via Skype.*

Indicator: One new technology adopted by MCR staff per year.

*Indicator Met. Two liaisons adopted the wiki for their work groups.*

Indicator: At least three video on demand events per are year provided by the RML.

*Indicator Not Met. The RML released one podcast. It featured Ira Combs, Regional Advisory Board member and coordinator for the Minority Health Education Research Office in Omaha.*

**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 Network members questioned indicated that have adopted at least one new showcased technology per year.

*Indicator Not Met. Network members were not formally asked if they had adopted a new technology. However, informal feedback was received throughout the year. Our members are:*

- *Learning from RML online technology sessions.*
- *Working with their IT departments to install freely available software that the RML recommends.*
- *Using Web 2.0 and other tools that the RML recommends such as: RSS, Blogs, Wikis, Social Bookmarking, survey tools, and the MCR Google gadget.*

**Outcome:** Working groups contribute to the technology project activities.

Indicator: At least one new idea generated by the working group is integrated into the program each year.

*Indicator Not Met.*

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

Indicator: Technology liaisons' efforts will contribute to an increase in connectivity of at least one institution per state over the contract period.

*Indicator Not Met. The RML was looking for a hospital library to work with and could not find one that met criteria of having just a technology issue.*



## Network Infrastructure

Table 1: Annual Infrastructure Data

	Current year	Previous year
Network members – full	168	166
Network members – affiliate	146	259
Libraries providing services to unaffiliated health professionals	105 (63%)	109(66%)
Libraries providing services to public users	115 (69%)	119 (72%)
Average fill rate for resource libraries	78%	78%

### Regional Emergency Preparedness Planning

The MCR staff drafted a communication and action plan for emergencies affecting the Regional Medical Library or the Resource Libraries, addressing the core requirements of the inter-regional emergency plan. This involved determining back ups for the listserv, blog, and web site. Emergency contact information was added to the staff wiki on nnlm.gov. Links to emergency preparedness organizations were added to the MCR web site state pages.

In October 2007, the MCR collaborated with the Greater Midwest Region in holding a Café to Go session at the joint MCMLA and Midwest Chapter meeting. At this session members started identifying the initial actions each needed to take to develop an emergency plan.

The Reference Continuity Project was originally conceived as a way for solo

librarians to receive back up when taking professional development, vacation, or sick time. It also works well for emergency preparedness in backup for services. A work group of Network members under the leadership of John Bramble, Utah/Network Membership Liaison, developed the structure for recruiting and establishing relationships.

**Outcome:** A National and Regional Emergency Preparedness plan will be in place to provide guidance for the NN/LM MCR in case of emergency.

**Indicator:** Understandable, consistent among the regions, core set of statements and useful materials will be created.

*Indicator Met. As planned, the Associate Directors developed a core set of components to be addressed in an inter-regional emergency preparedness plan. The Associate Director participated in the meetings of the Core Group and the Associate Directors to determine the goals and logic model for the emergency preparedness plan and the NN/LM National Emergency Preparedness & Response Plan.*

**Outcome:** Network members have a plan for reference services continuity.

**Indicator:** At least two libraries participate in the plan.

*Indicator Not Met. Development of the reference services continuity project took longer than expected. The web page and description were completed in April 2008. Recruitment will begin in year 03.*

---

## Identifying Unique and Historical Collections

The MCR had no activity in this area and is waiting for more direction from NLM.

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

**Indicator:** There will be an increase in resources identified and added to the NLM Directory of History of Medicine Collections or another publicly accessible database.

*Indicator Not Met.*

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## E-licensing

Mr. Bramble continued to work with the MCR Regional Licensing Advisory Group, Bibliographic Center for Research (BCR), and vendors to offer electronic resources for Network members. The consortia made ACP Pier, EBSCO Host products, and Elsevier products available to the region. Members only signed up for ACP Pier.

The Pacific Southwest Region (PSR) and Pacific Northwest Region (PNR) were interested in participating in the regional licensing consortium. PSR assessed their Network members to determine whether they should participate. Individual members of PSR have contacted this RML about participating in the licensing consortia. They are referred to BCR where they can get the rate negotiated for the regional licensing consortia but must pay the BCR fee. The MLA chapter in the Pacific Northwest Region sponsors a consortium and is willing to continue to do so. PNR decided not to offer another consortium to its members.

**Outcome:** Members from multi-regions will have e-license agreements through a multi-regional licensing consortium.

**Indicator:** Libraries from MCR and at least one other region will license e-resources through a multi-regional buying consortium.

*Indicator Not Met. PNR has decided not to participate; PSR is evaluating data from their Network members about whether to participate.*

**Indicator:** 10% cost savings for members.

*Indicator Met.*

**Outcome:** Network members use resources provided by the RML to negotiate e-license agreements that support equitable access to health information.

**Indicator:** 75% of class attendees indicate the class objectives were met.

*Indicator Not Met. A class on negotiating e-license agreements was not offered in the region.*

**Indicator:** Resources on effectively negotiating e-licenses are available from the MCR web site.

*Indicator Not Met.*

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## EFTS

The DOCLINE librarians from the MidContinental and Greater Midwest Regions held promotional activities for EFTS at the MCMLA-Midwest Joint Chapter meeting. They organized a morning seminar to answer questions and EFTS promotional items were distributed from the booth.

Mr. Bramble began investigating barriers to EFTS participation. Liaisons relayed reasons that Network members have mentioned about non-participation. This information will be the basis of a questionnaire sent out to non-EFTS members.

**Outcome:** Increased participation in EFTS.

Indicator: The number of libraries participating in EFTS will increase by 23 per year.

*Indicator Not Met. Participation in the region started with 65 and ended with 71; an increase of six.*

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

Indicator: 20% of non-EFTS members respond to questionnaire.

*Indicator Not Met. A questionnaire investigating why members do not participate in EFTS was planned but not developed.*

## Outreach

- Major ( $\geq$  \$15,000) projects funded in contract year: 1
- National exhibits conducted by RML: 9
- National exhibits conducted by subcontractors: 0
- Regional/state/local exhibits conducted by RML: 39
- Regional/state/local exhibits conducted by subcontractors: 0
- Courses developed/updated by RML staff
  - Introduction to Blogs and Wikis - Ms. Dennis
  - Tools of the Trade: Web 2.0, Social Software, VOIP, & More... - Ms. Magee
  - Social Bookmarking - Ms. Brown
  - Getting Started with Information Outreach in Minority Communities (updated) - Ms. Champ-Blackwell

**Table 2: Site Visits**

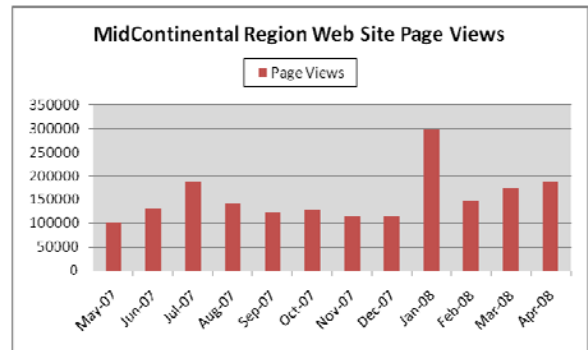
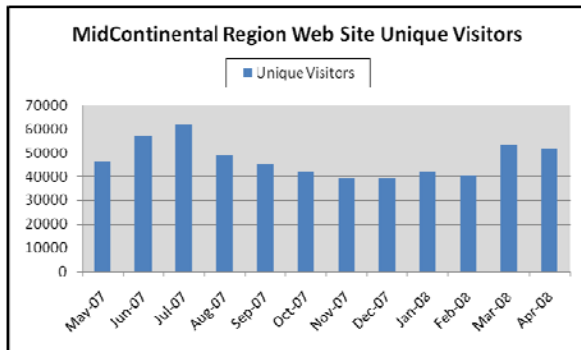
<b>Date</b>	<b>Last name of RML staff responsible</b>	<b>Institution</b>	<b>Location (city, state)</b>	<b>Topics addressed</b>
5/2007	Jones	St. Louis County Library – Weber Road Branch	St. Louis, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Tesson Ferry Branch	St. Louis, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Oak Bend Branch	St. Louis, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Thornhill Branch	St. Louis, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>

5/2007	Jones	St. Louis County Library – Florissant Valley Branch	Florissant, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Natural Bridge Branch	St. Louis, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Bridgeton Trails Branch	Bridgeton, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/2007	Jones	St. Louis County Library – Daniel Boone Branch	Ellisville, MO	<ul style="list-style-type: none"> <li>– Caring for the Mind</li> <li>– NN/LM health information trainings and collaboration opportunities</li> </ul>
5/30/2007	Abbey	Rose Hospital	Denver, CO	<ul style="list-style-type: none"> <li>– Discussed library staff downsizing</li> </ul>
6/6/2007	Magee	Immanuel Medical Center	Omaha, NE	<ul style="list-style-type: none"> <li>– DOCLINE updates</li> <li>– Moving library to a temporary location</li> </ul>
7/1/2007	Magee	Memorial Community Hospital and Health System	Blair, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/16/2007	Champ-Blackwell	Little Priest Community College	Winnebago, NE	<ul style="list-style-type: none"> <li>– Online resources</li> <li>– Met with librarian from Nebraska Indian Community College</li> </ul>
7/17/2007	Magee	Antelope Memorial Hospital	Neleigh, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/13/2007	Jones	Fulton State Hospital	Fulton, MO	<ul style="list-style-type: none"> <li>– Promoted NN/LM and Affiliate membership to librarians from various Missouri Department of Mental Health facilities</li> </ul>
7/17/2007	Magee	St. Francis Memorial Hospital	West Point, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	Faith Regional Hospital	Norfolk, NE	<ul style="list-style-type: none"> <li>– NLM and MCR resources</li> <li>– Toured new library facility</li> </ul>
7/17/2007	Magee	St. Anthony's Hospital	O'Neill, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	West Holt Memorial Hospital	Atkinson, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	Cherry County Hospital	Valentine, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	Chadron State College	Chadron, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	Chadron Community Hospital	Chadron, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	College of St. Mary	Omaha, NE	<ul style="list-style-type: none"> <li>– Affiliate membership</li> <li>– NLM and MCR resources</li> </ul>
7/17/2007	Magee	Omaha Veterans Affairs Hospital	Omaha, NE	<ul style="list-style-type: none"> <li>– Reviewed MCR and NLM resources</li> <li>– Discussed OPAC and collection development</li> </ul>

7/22/2007	Henning	Arapahoe Clinic	Arapahoe, WY	<ul style="list-style-type: none"> <li>- MedlinePlus updates</li> <li>- Toxtown</li> <li>- Wisser</li> <li>- Wyoming GoLocal</li> <li>- NIH Native American Resources page</li> </ul>
7/22/2007	Henning	Ft. Washakie School/Community Library	Ft. Washakie, WY	<ul style="list-style-type: none"> <li>- MedlinePlus resources</li> <li>- Toxtown</li> <li>- Household Products Database</li> <li>- Wisser</li> <li>- Wyoming GoLocal</li> <li>- NIH Native American Resources page</li> </ul>
7/22/2007	Henning	Wind River Tribal College Library	Ethete, WY	<ul style="list-style-type: none"> <li>- Overview of MedlinePlus updates</li> <li>- Left NLM literature including requested copies of the Native American resources information</li> </ul>
7/23/2007	Henning	Fremont County Library	Lander, WY	<ul style="list-style-type: none"> <li>- Discussed new library building</li> <li>- Training opportunities for the library staff</li> </ul>
7/27/2007	Henning	Park County Library	Cody, WY	<ul style="list-style-type: none"> <li>- Affiliate membership</li> <li>- Discussed library partnership with West Park Hospital Planetree program</li> </ul>
10/2/2007	Magee	Children's Hospital	Omaha, NE	<ul style="list-style-type: none"> <li>- Introduced to NLM resources to new librarian</li> </ul>
10/24/2007	Magee	Wellness Works	Grand Island, NE	<ul style="list-style-type: none"> <li>- Affiliate membership</li> <li>- NLM and MCR resources</li> </ul>
10/24/2007	Magee	St. Francis Medical Center	Grand Island, NE	<ul style="list-style-type: none"> <li>- NLM and MCR resources</li> </ul>
11/16/2007	Brown	Johnson County Library	Overland Park, KS	<ul style="list-style-type: none"> <li>- Met with consumer health librarian to prepare for upcoming class</li> </ul>
12/3/2007	Jones	Boone County Hospital	Columbia, MO	<ul style="list-style-type: none"> <li>- Initial contact and member visit</li> </ul>
1/9/2008	Champ-Blackwell, Magee	Omaha Urban AHEC	Omaha, NE	<ul style="list-style-type: none"> <li>- Introduced NLM resources to new director</li> <li>- Affiliate membership</li> </ul>
1/22/2008	Magee	Bryan-LGH Nursing School	Lincoln, NE	<ul style="list-style-type: none"> <li>- Distance Education</li> <li>- PubMed</li> </ul>
1/22/2008	Magee	St. Elizabeth Hospital	Lincoln, NE	<ul style="list-style-type: none"> <li>- Distance Education</li> <li>- NLM Resources</li> </ul>
1/28/2008	Jones	Boone County Hospital	Columbia, MO	<ul style="list-style-type: none"> <li>- Recruit as pilot participant in value of information study</li> </ul>
2/6/2008	Jones	Cardinal Glennon Hospital	St. Louis, MO	<ul style="list-style-type: none"> <li>- Review of the libraries programs</li> <li>- Introduced to several health care professionals</li> </ul>
3/18/2008	Magee	Center for Biopreparedness Education	Omaha, NE	<ul style="list-style-type: none"> <li>- NLM and MCR resources</li> <li>- Exchanged information on emergency planning</li> </ul>
4/18/2008	Magee	Gothenburg Public Library	Gothenburg, NE	<ul style="list-style-type: none"> <li>- Affiliate membership</li> <li>- NLM and MCR resources</li> </ul>
4/19/08	Magee	Gothenburg Memorial Hospital	Gothenburg, NE	<ul style="list-style-type: none"> <li>- Left MedlinePlus and other resource information, followed up with phone call</li> </ul>

## Web Site Use

Month	Unique Visitors	Page Views
May 2007	46,421	102,154
Jun 2007	57,302	131,786
Jul 2007	62,105	186,715
Aug 2007	49,399	142,959
Sep 2007	45,235	123,637
Oct 2007	42,584	127,826
Nov 2007	39,594	115,480
Dec 2007	39,155	115,899
Jan 2008	42,182	297,606
Feb 2008	40,300	147,400
Mar 2008	53,399	173,436
Apr 2008	51,926	185,613



## Attachments



# Attachment 1

## Tabular report of OARF activity data for contract year: RML staff activities

### Outreach Activities Conducted by MCR RML Staff

RML Contract Year (May 1 - Apr 30) , 2007-2008

Generated: Friday, August 08, 2008

74 Total Outreach Activities

*The following information is based on outreach reports of training activities.*

#### Activities Summary

Total number of estimated participants:	1437 participants
Average number of participants:	19.42 per activity
Average length:	2.44 hours
Under 1 hour:	3 activities (4.05%)
Between 1 and 2 hours:	59 activities (79.73%)
Over 2 hours:	12 activities (16.22%)
Hands-on practice:	39 activities (52.70%)
Conducted remotely:	16 activities (21.62%)
Offering continuing education:	14 activities (18.92%)
Significant number of minorities:	7 activities (9.46%)

#### Type(s) of Organization(s) Involved in Activities

Health sciences library:	74 activities (100.00%)
Public library:	7 activities (9.46%)
Government agency:	15 activities (20.27%)
Hospital:	16 activities (21.62%)
Clinical/Health care:	9 activities (12.16%)
Academic Institution:	74 activities (100.00%)
Community-Based:	2 activities (2.70%)
Faith-Based:	6 activities (8.11%)
Public Health Agency:	12 activities (16.22%)
Other:	9 activities (12.16%)

#### Session Content

PubMed:	18 activities (24.32%)
MedlinePlus:	44 activities (59.46%)
ClinicalTrials.gov:	15 activities (20.27%)
NCBI:	0 activities (0.00%)
NLM Gateway:	2 activities (2.70%)
TOXNET:	3 activities (4.05%)
Other technology content:	39 activities (52.70%)
Other, non-technology content:	16 activities (21.62%)

#### Significant Minority Population Present

(>=50% of participants)

African American:	4 activities (5.41%)
Alaska Native:	0 activities (0.00%)
Asian and Pacific Islander:	2 activities (2.70%)
Hispanic:	7 activities (9.46%)
Native American:	0 activities (0.00%)

924 Participants Completed Participant Information Sheets

*The following information is based on Participant Information (PI) sheets collected during training activities.*

#### Participants Summary

Activities at which PI sheet collected:	83.8%
Health care or service providers:	225 participants (24.35%)
Health science library staff members:	316 participants (34.20%)
Public Health worker:	118 participants (12.77%)
Public/Other library staff members:	118 participants (12.77%)
Members of general public:	147 participants (15.91%)



# Attachment 2

## Tabular report of OARF activity data for contract year: Subcontractor activities

### Outreach Activities Report Resource Library: Bernard Becker Medical Library 2006-2011 Project

RML Contract Year (May 1 - Apr 30) , 2007-2008

Generated: Friday, August 08, 2008

#### 1 Total Outreach Activities

*The following information is based on outreach reports of training activities.*

##### Activities Summary

Total number of estimated participants:	4 participants	
Average number of participants:	4 per activity	
Average length:	0.75 hours	
Under 1 hour:	1 activity	(100.00%)
Between 1 and 2 hours:	0 activities	
Over 2 hours:	0 activities	
Hands-on practice:	1 activity	(100.00%)
Conducted remotely:	0 activities	
Offering continuing education:	0 activities	
Significant number of minorities:	0 activities	

##### Type(s) of Organization(s) Involved in Activities

Health sciences library:	1 activity	(100.00%)
Public library:	0 activities	
Government agency:	0 activities	
Hospital:	0 activities	
Clinical/Health care:	0 activities	
Academic Institution:	1 activity	(100.00%)
Community-Based:	0 activities	
Faith-Based:	0 activities	
Public Health Agency:	0 activities	
Other:	0 activities	

##### Session Content

PubMed:	1 activity	(100.00%)
MedlinePlus:	1 activity	(100.00%)
ClinicalTrials.gov:	0 activities	(0.00%)
NCBI:	0 activities	(0.00%)
NLM Gateway:	0 activities	(0.00%)
TOXNET:	0 activities	(0.00%)
Other technology content:	0 activities	(0.00%)
Other, non-technology content:	0 activities	(0.00%)

##### Significant Minority Population Present

(>=50% of participants)

African American:	0 activities	(0.00%)
Alaska Native:	0 activities	(0.00%)
Asian and Pacific Islander:	0 activities	(0.00%)
Hispanic:	0 activities	(0.00%)
Native American:	0 activities	(0.00%)

#### 4 Participants Completed Participant Information Sheets

*The following information is based on Participant Information (PI) sheets collected during training activities.*

##### Participants Summary

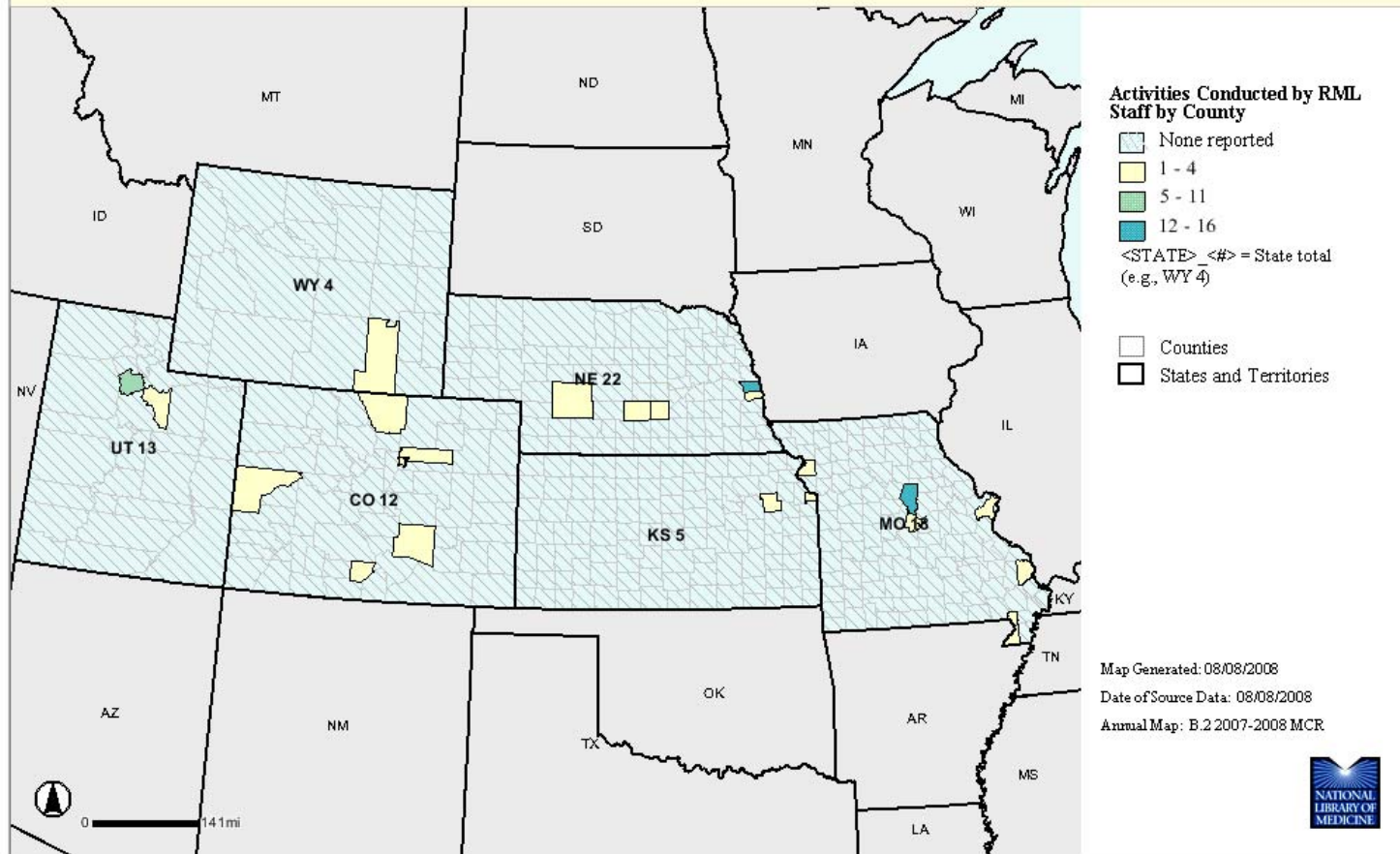
Activities at which PI sheet collected:	100.0%
Health care or service providers:	0 participants
Health science library staff members:	0 participants
Public Health worker:	0 participants
Public/Other library staff members:	0 participants
Members of general public:	4 participants (100.00%)



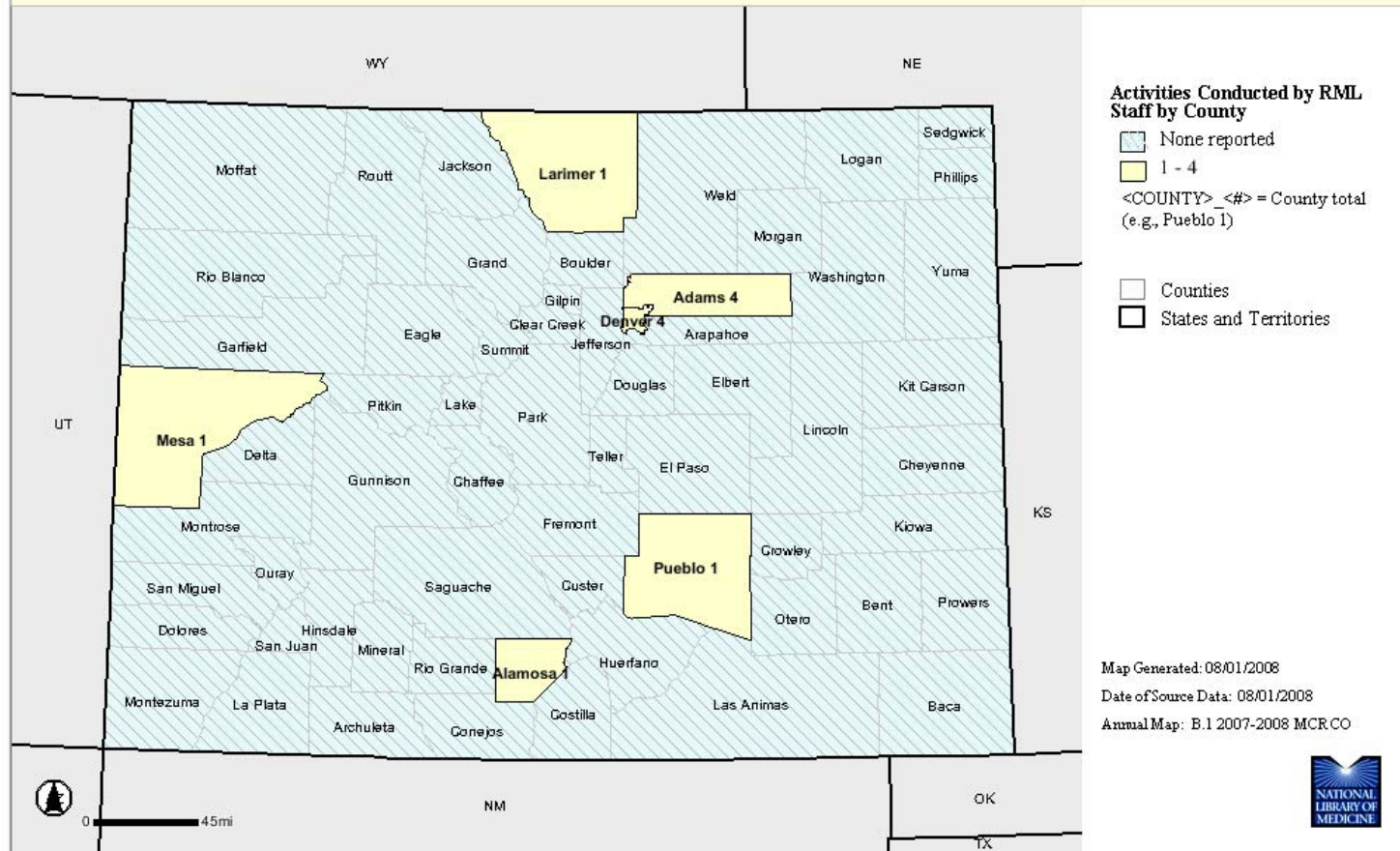
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Attachment 3  
Region Maps:  
RML Staff Outreach Activities

**Midcontinental Region**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 74**

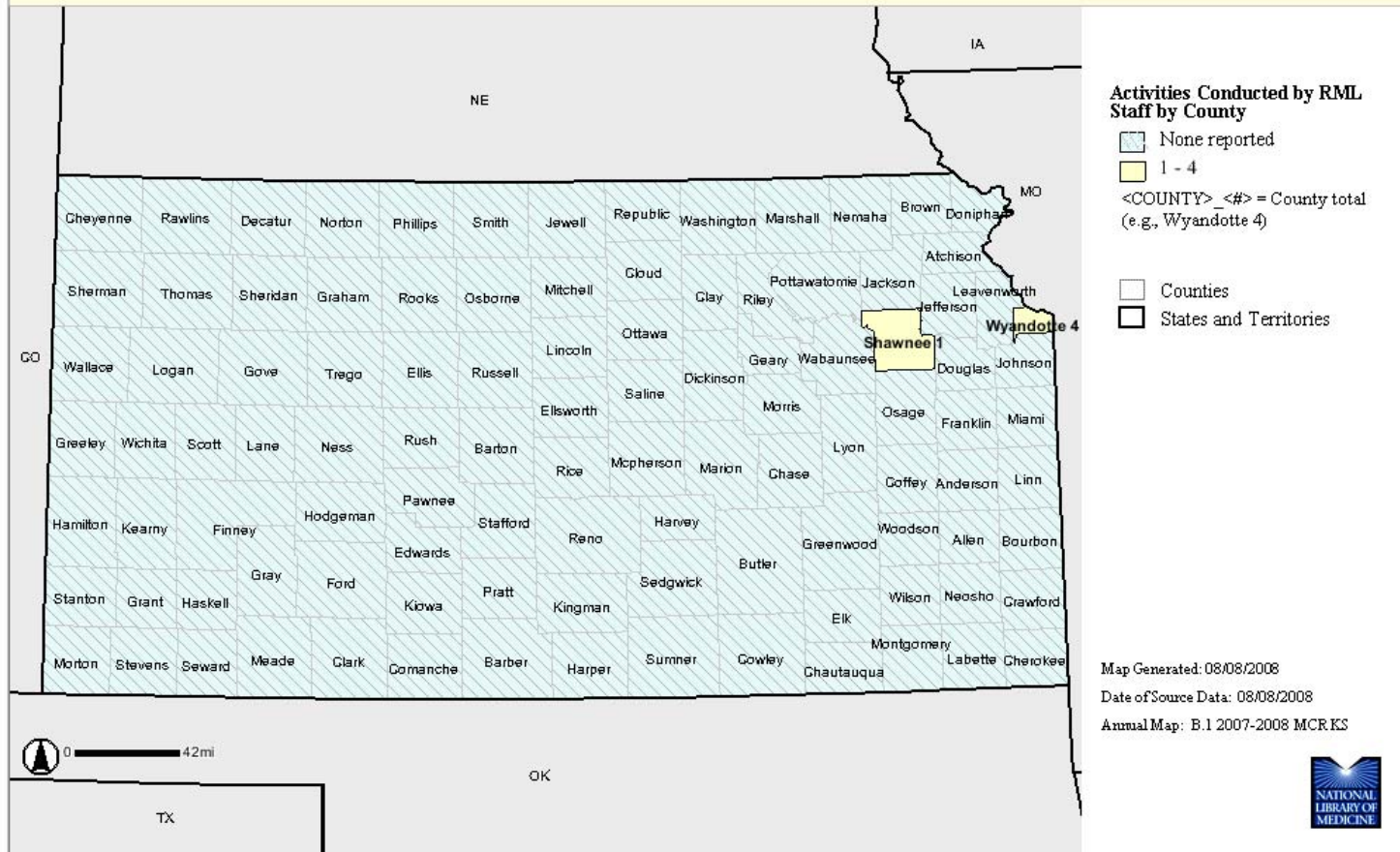


**Colorado**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 12**

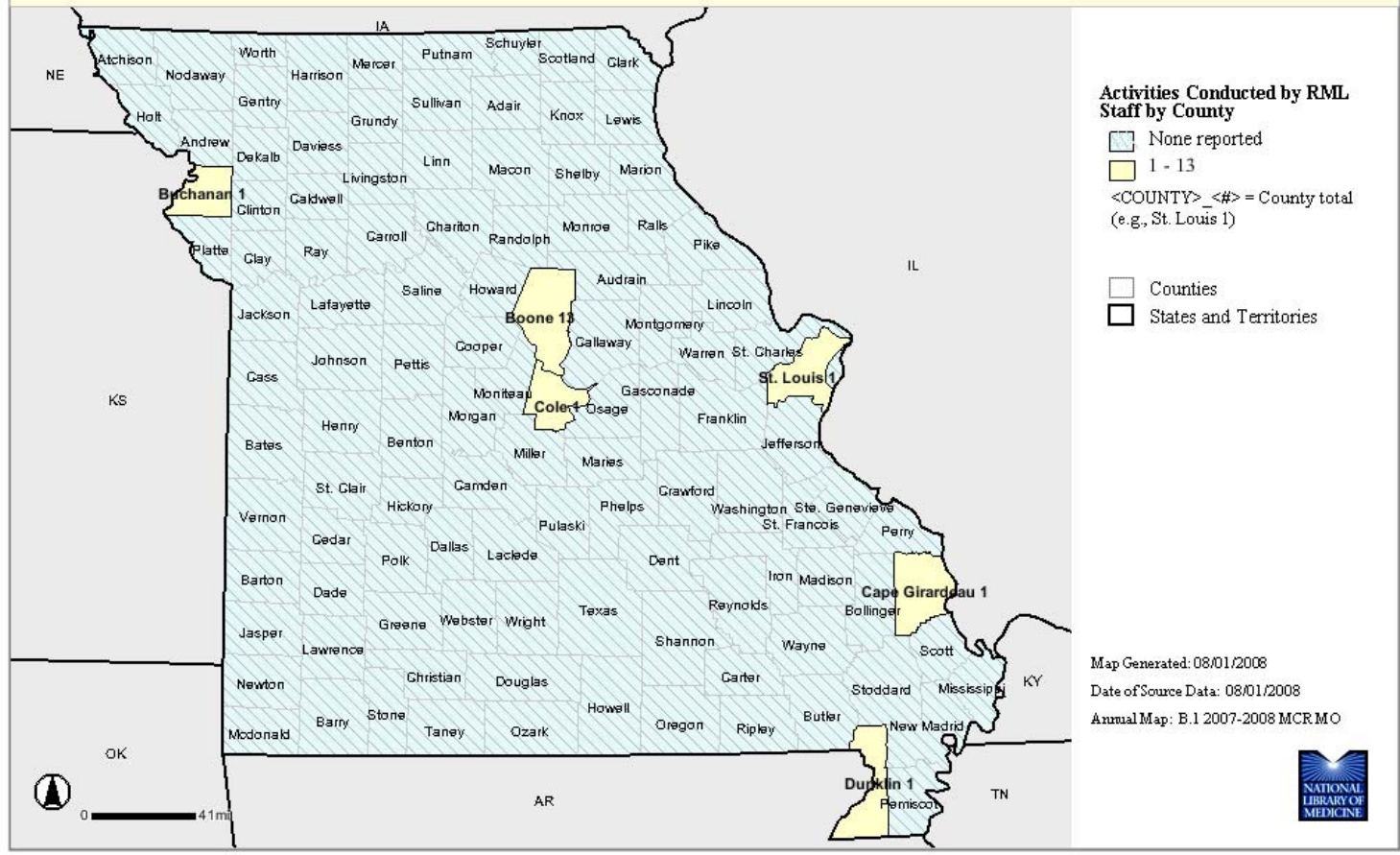




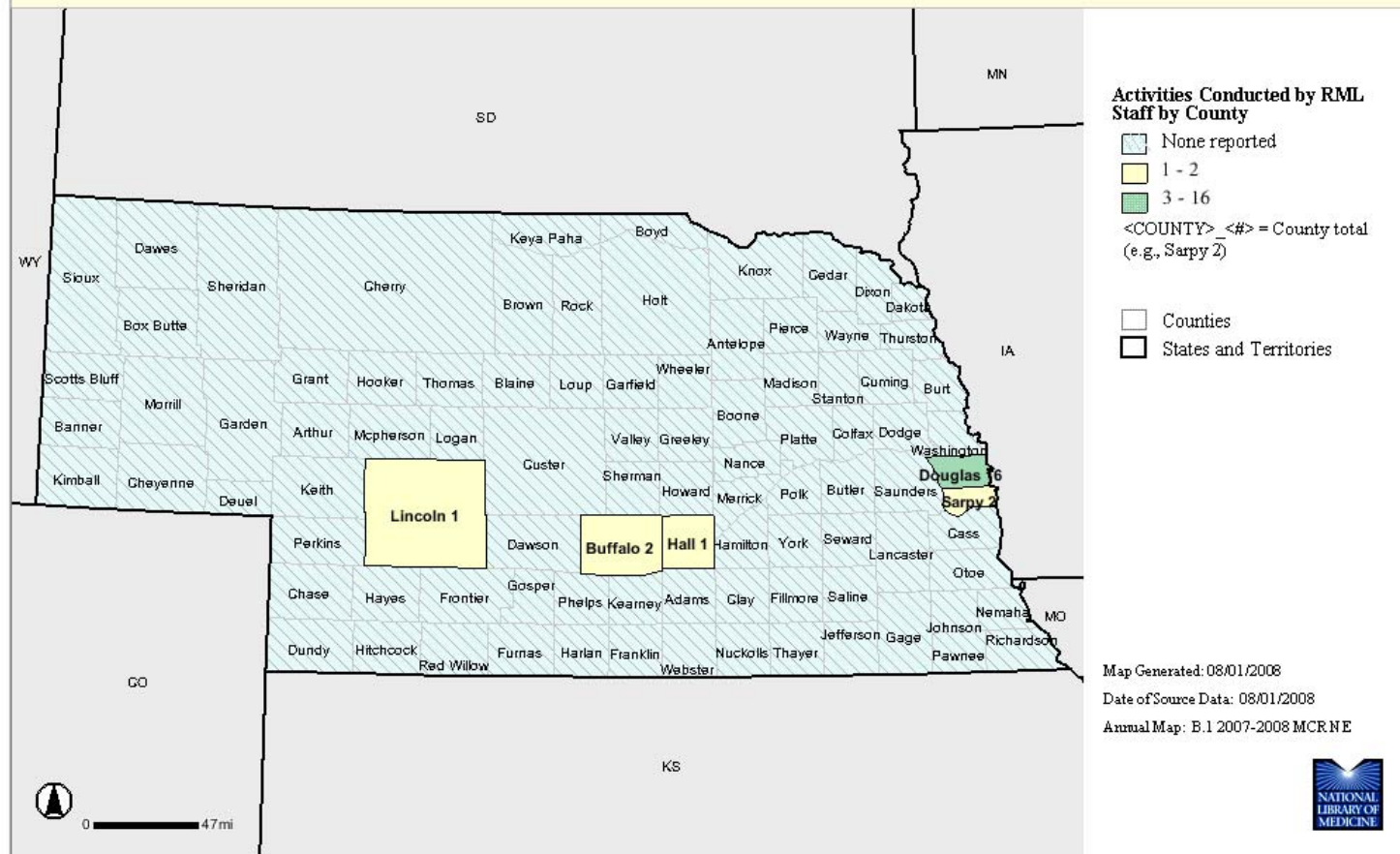
**Kansas**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 5**



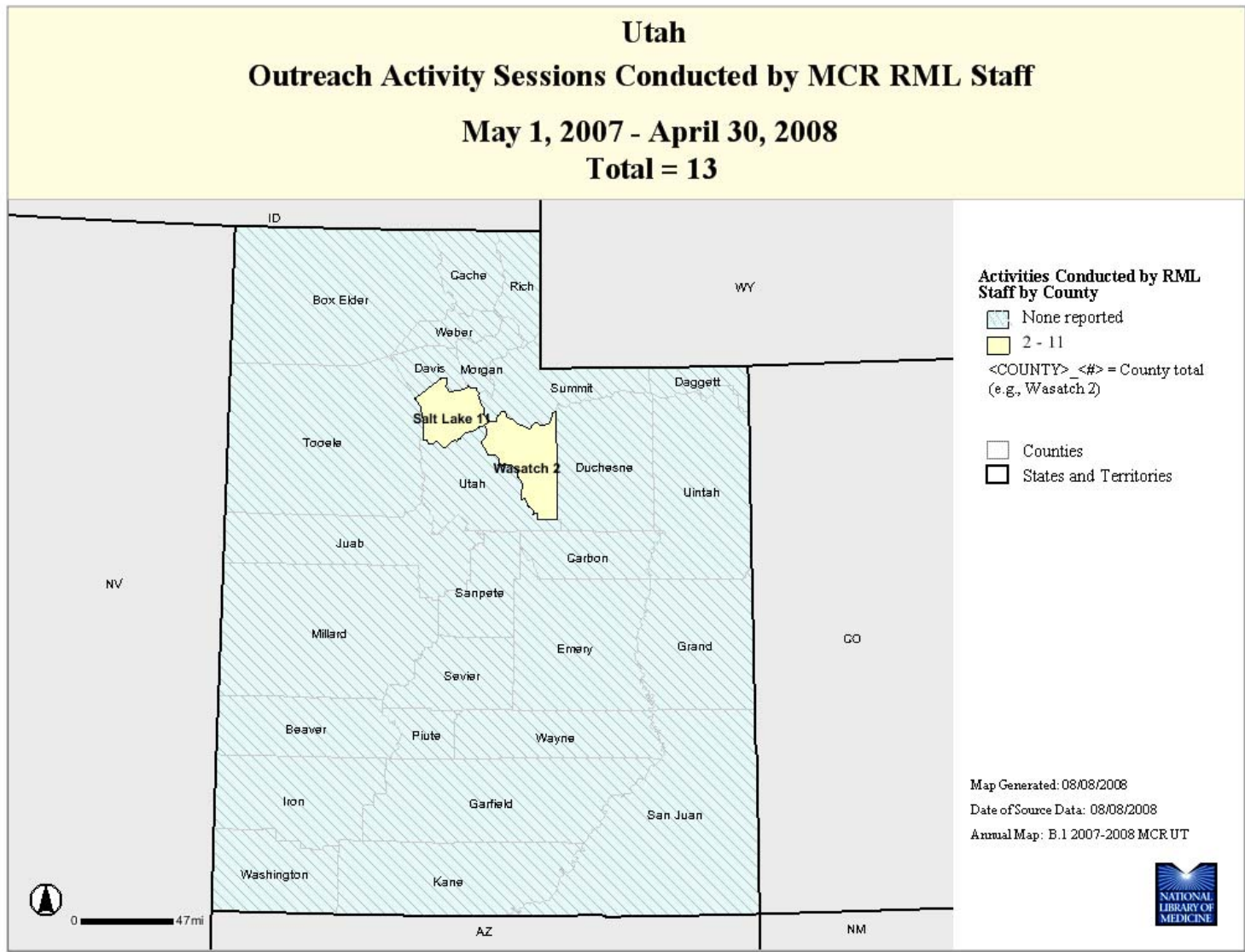
**Missouri**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 18**



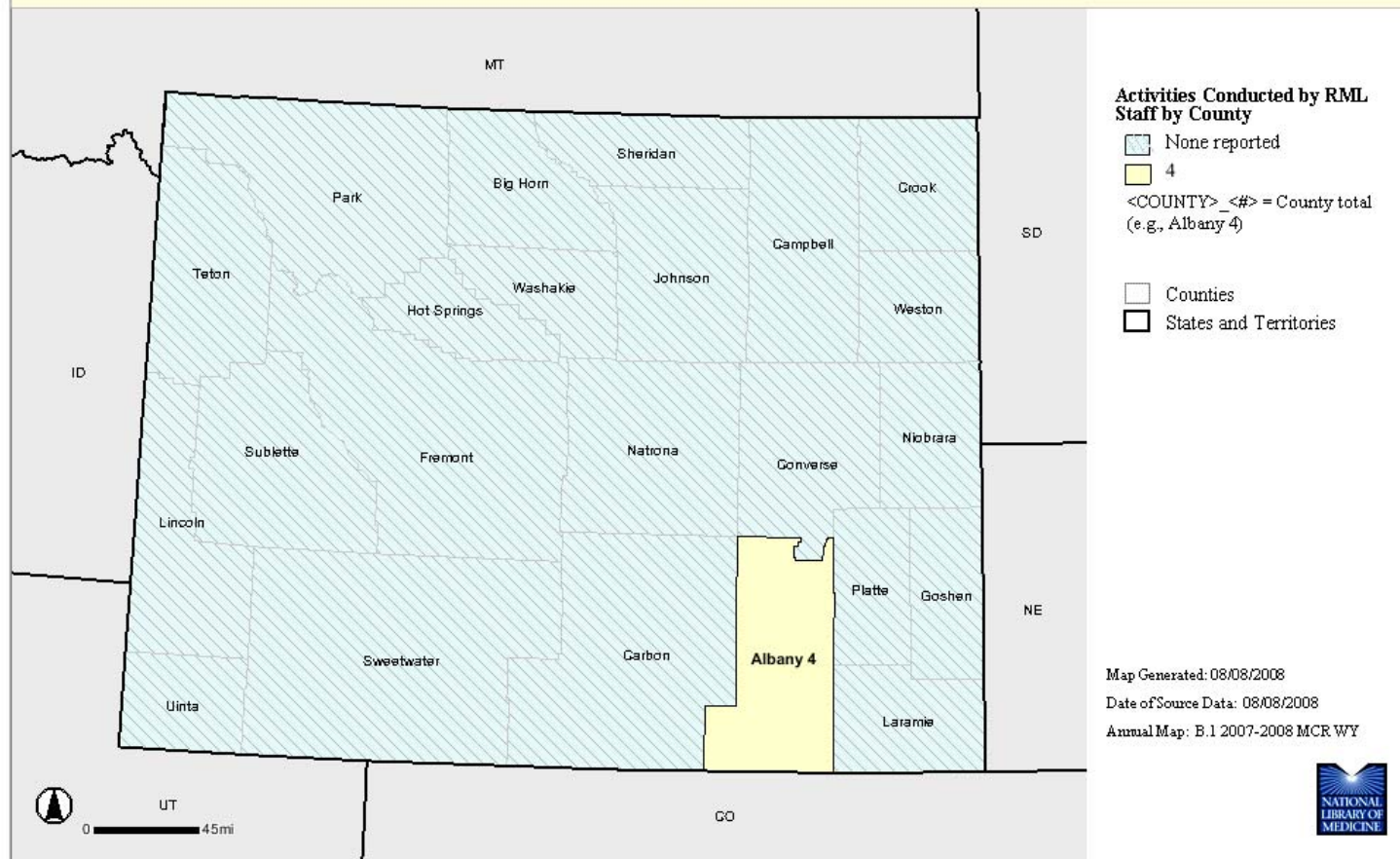
**Nebraska**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 22**







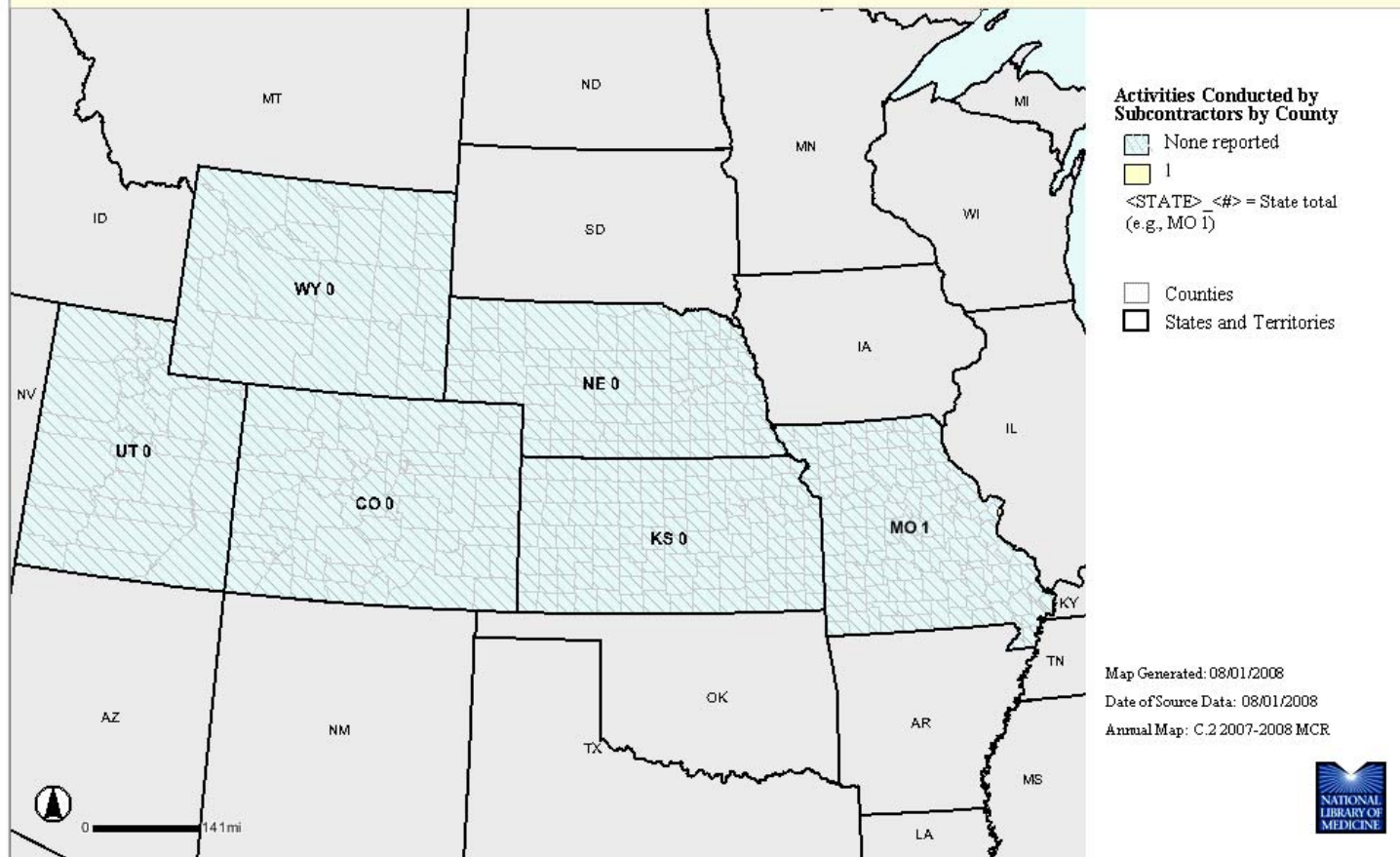
**Wyoming**  
**Outreach Activity Sessions Conducted by MCR RML Staff**  
**May 1, 2007 - April 30, 2008**  
**Total = 4**



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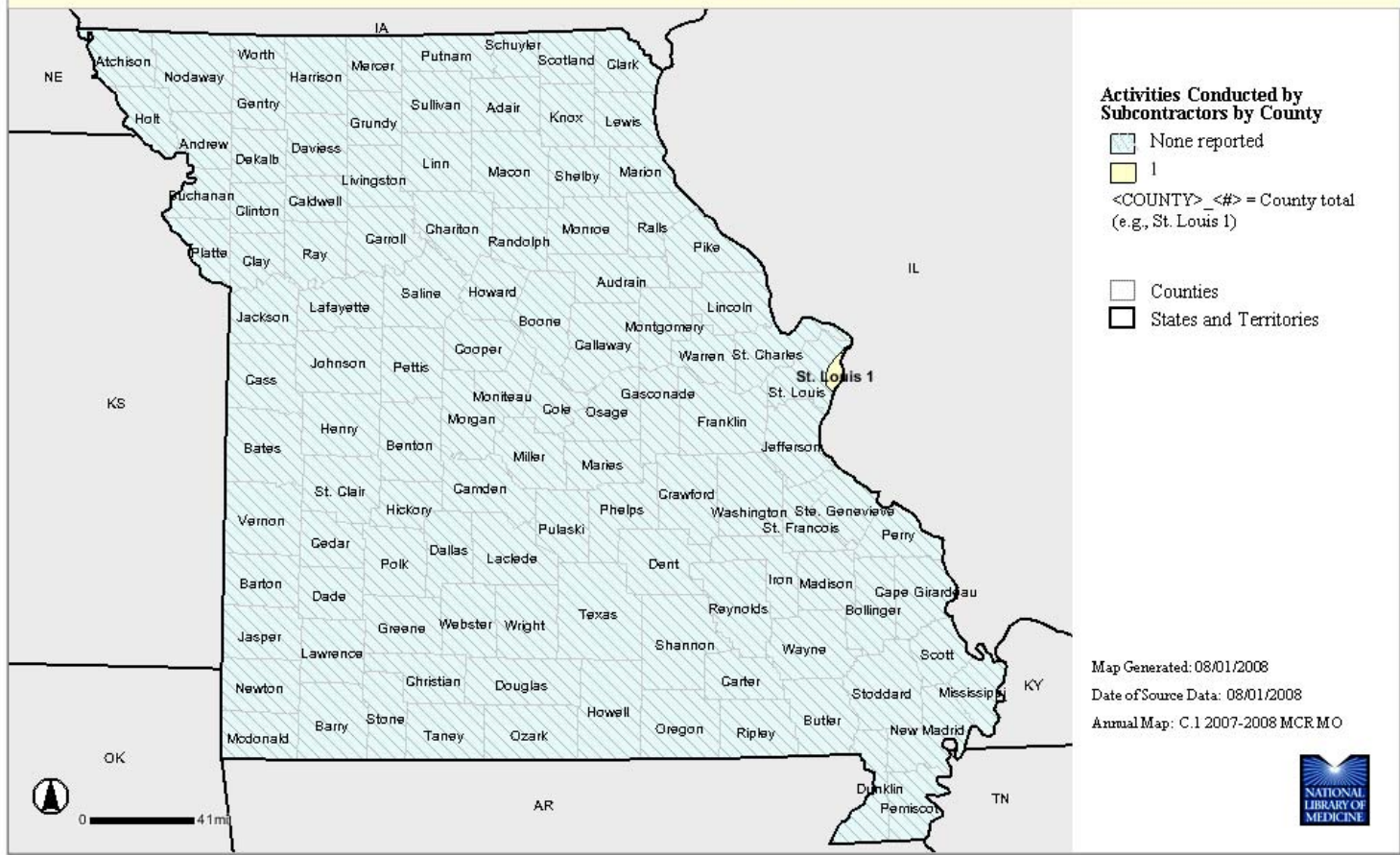
Attachment 4  
Region Maps:  
Subcontracted Outreach Activities

**Midcontinental Region**  
**Outreach Activity Sessions Conducted by MCR Subcontractors**  
**May 1, 2007 - April 30, 2008**  
**Total = 1**





**Missouri**  
**Outreach Activity Sessions Conducted by MCR Subcontractors**  
**May 1, 2007 - April 30, 2008**  
**Total = 1**

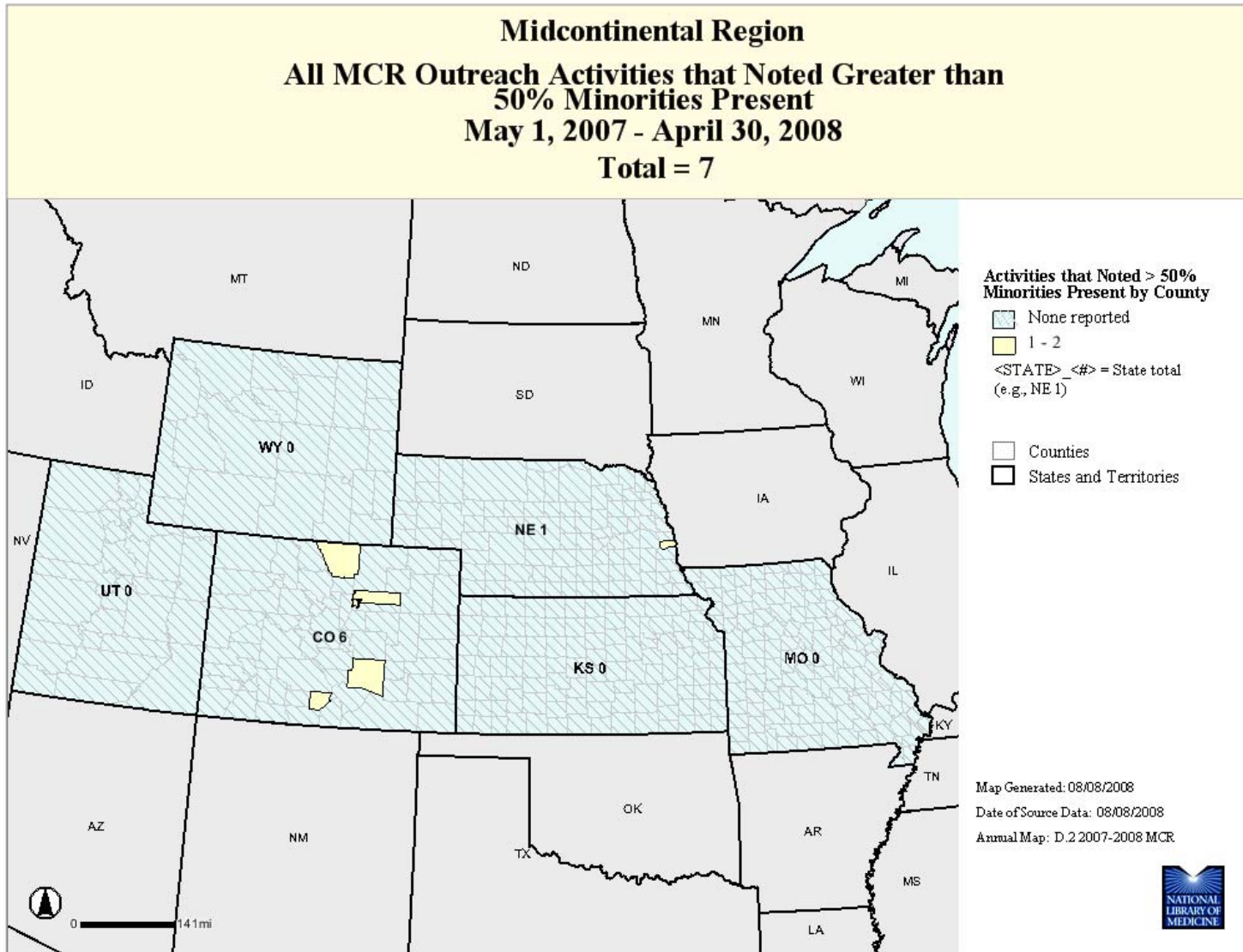


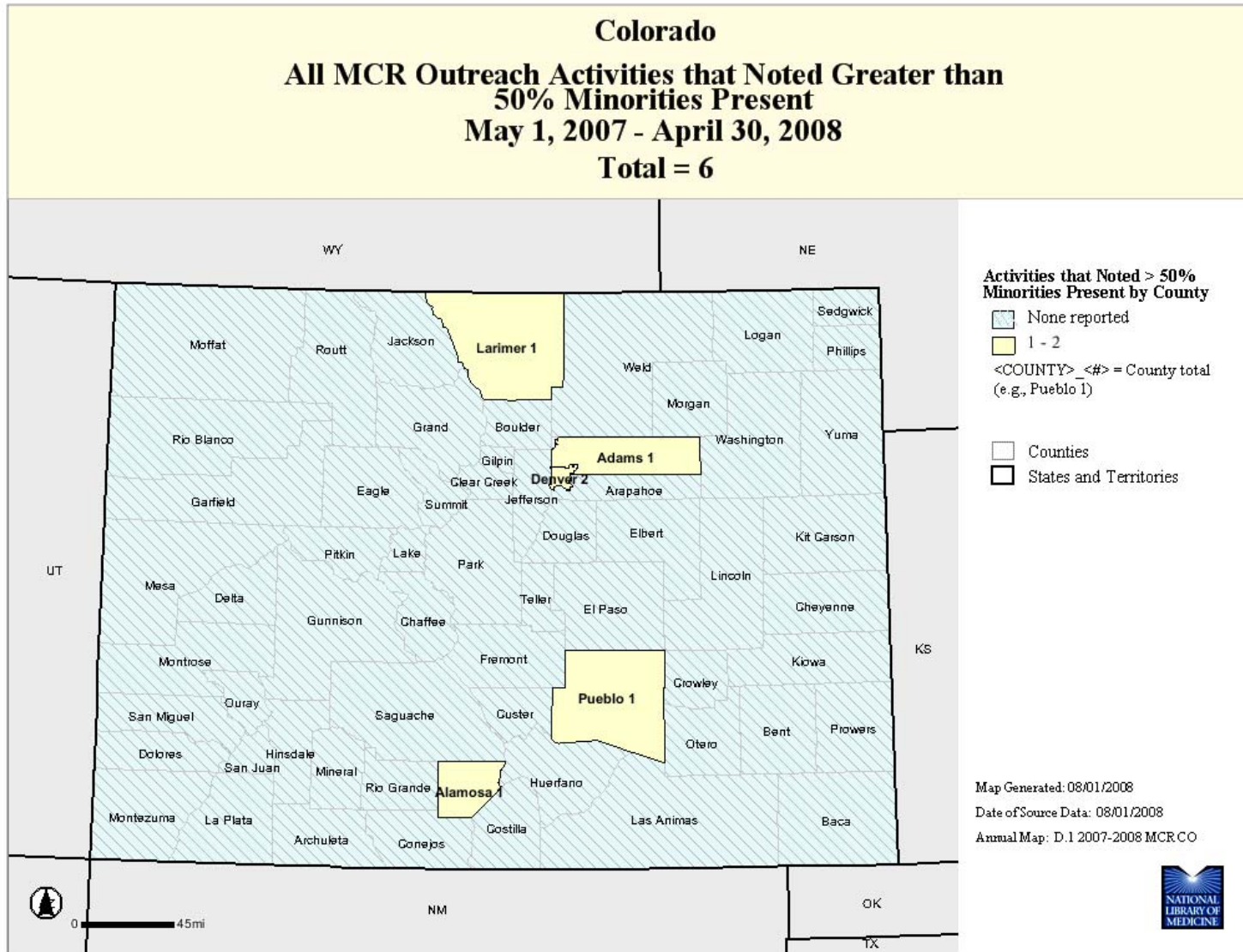
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Attachment 5

Region Maps:

Outreach activities with significant number of minority participants (Combining RML and subcontractor activities)





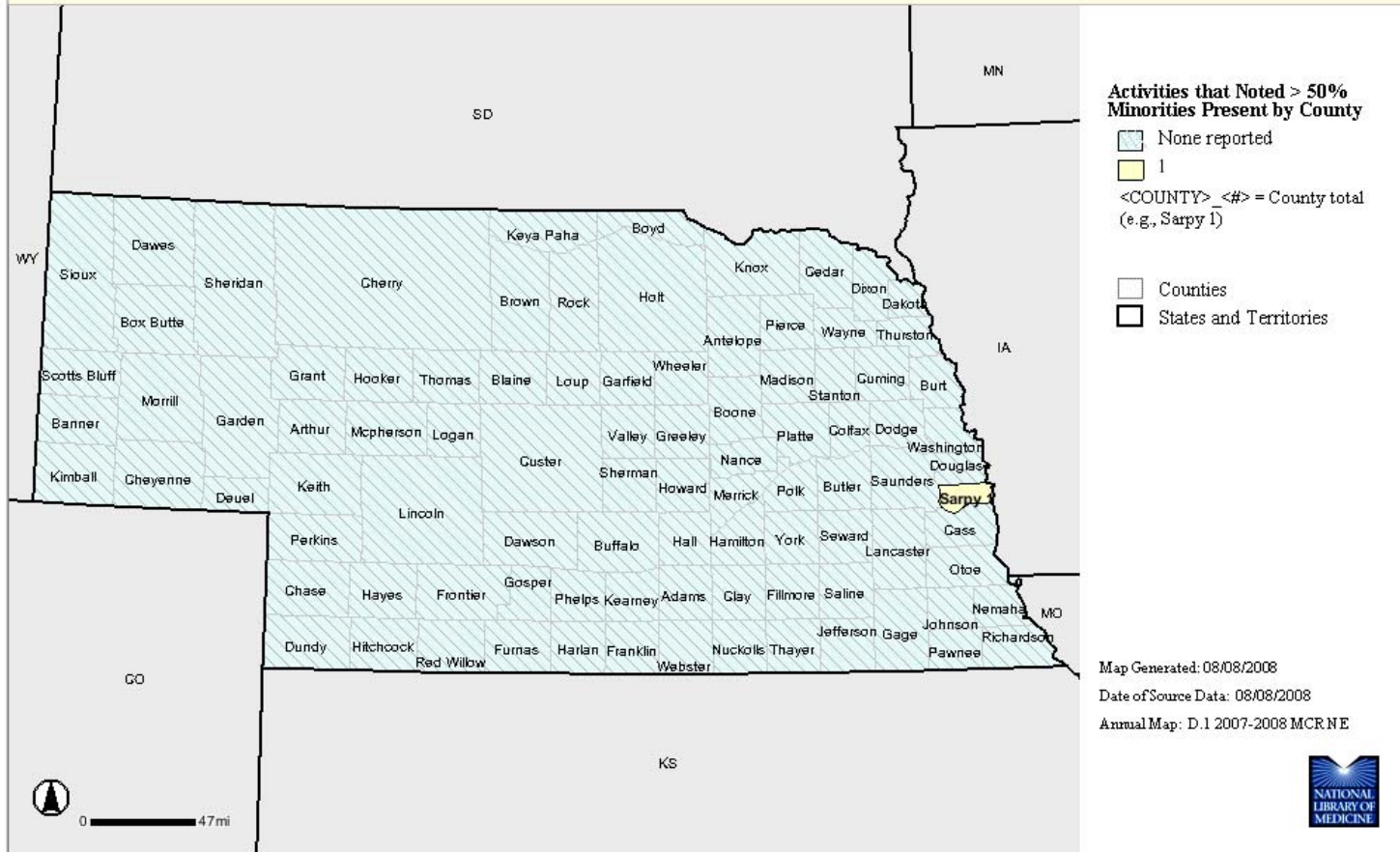


# Nebraska

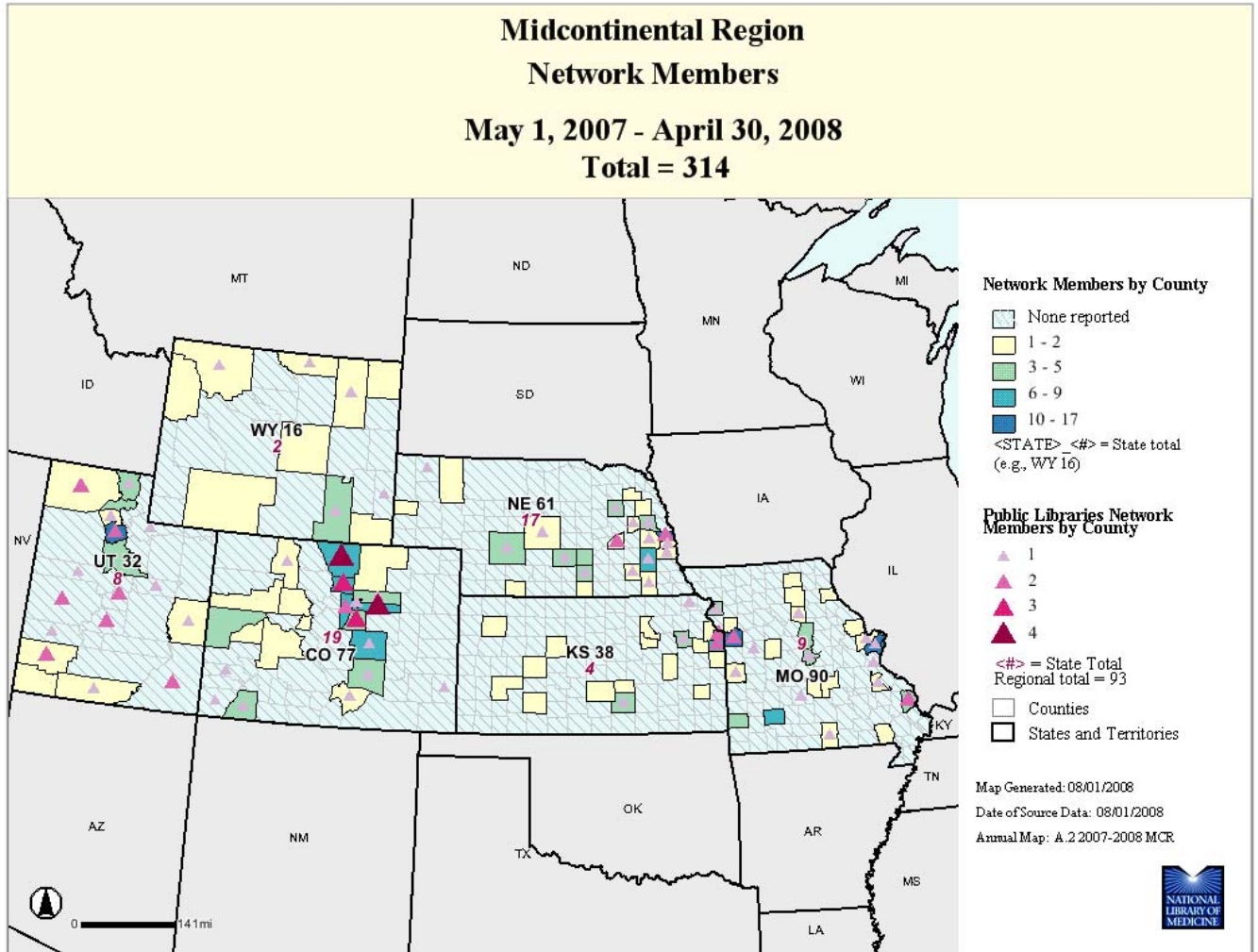
## All MCR Outreach Activities that Noted Greater than 50% Minorities Present

May 1, 2007 - April 30, 2008

Total = 1



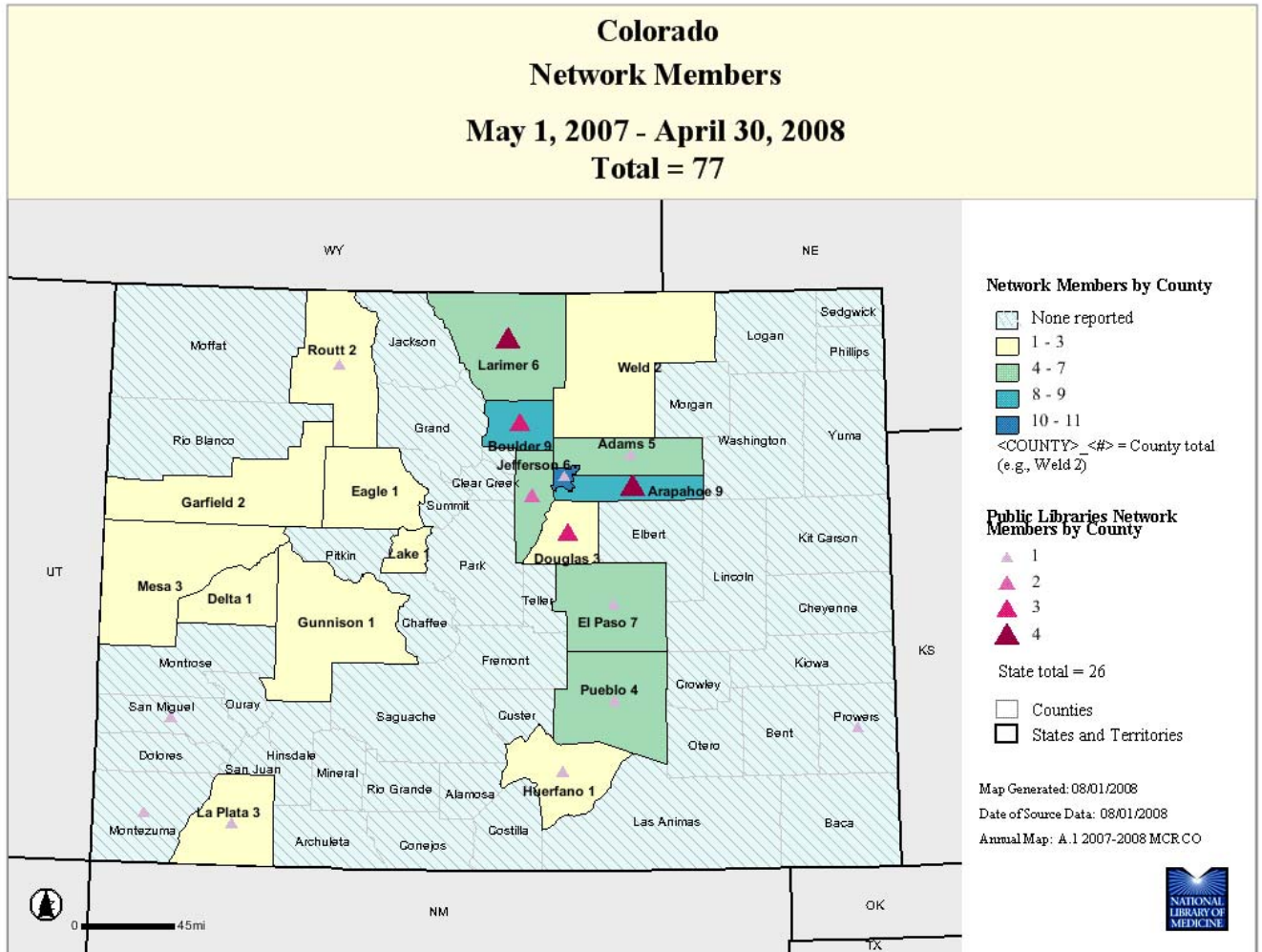
Attachment 6  
 Regional Map:  
 Network Membership



# Attachment 7

## State Map Colorado:

### Network Membership

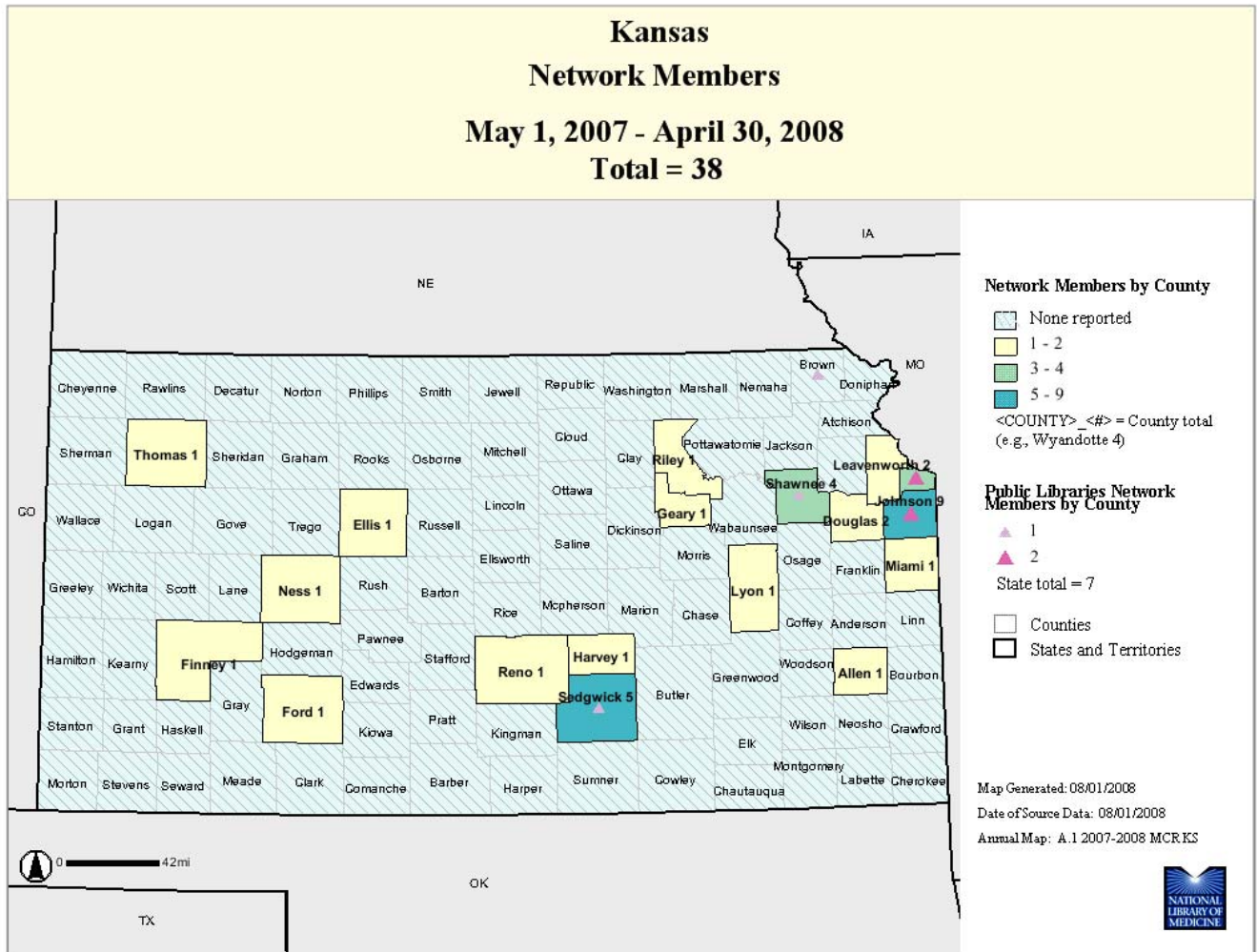




# Attachment 8

## State Map Kansas:

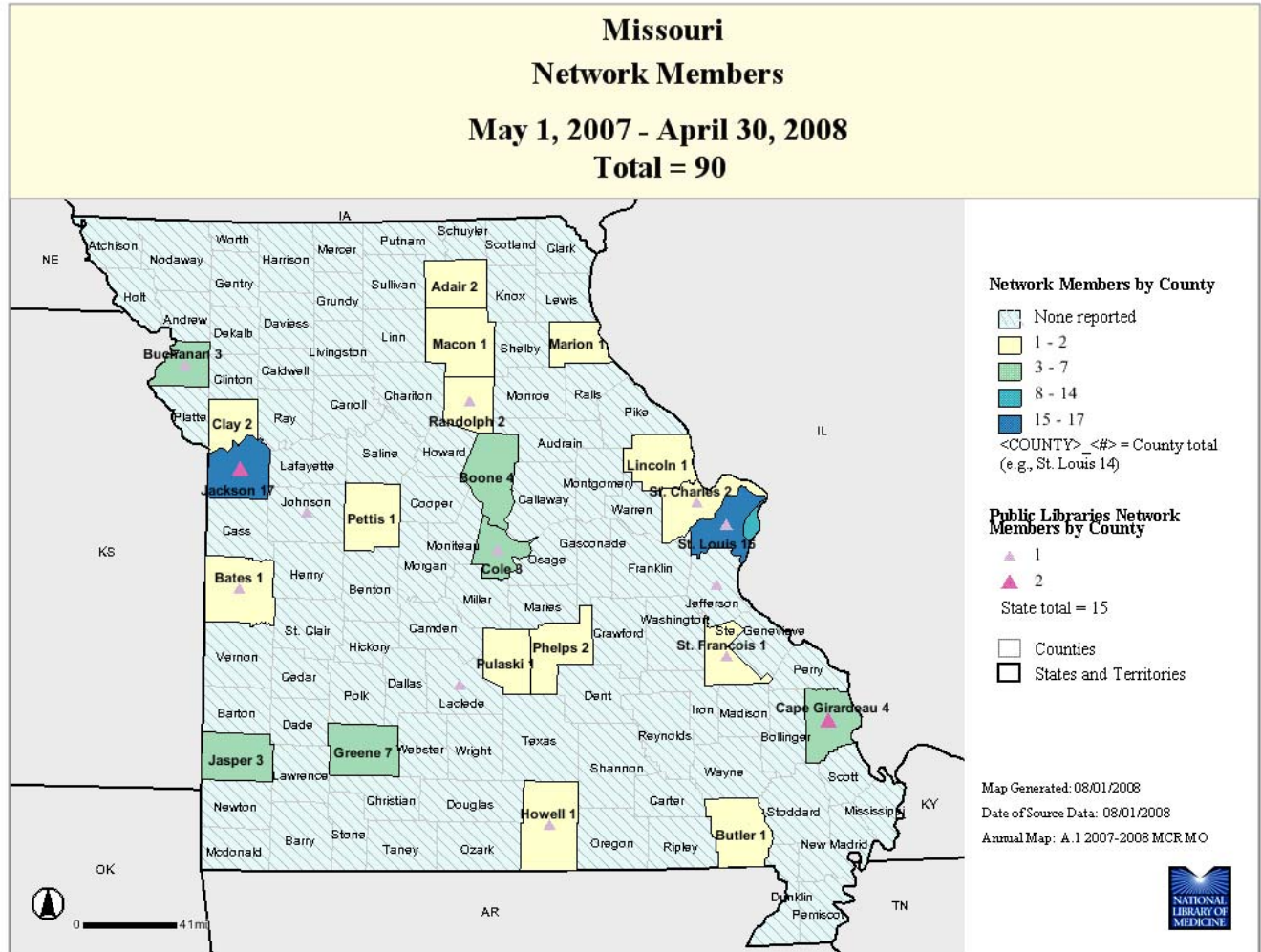
### Network Membership



# Attachment 9

## State Map Missouri:

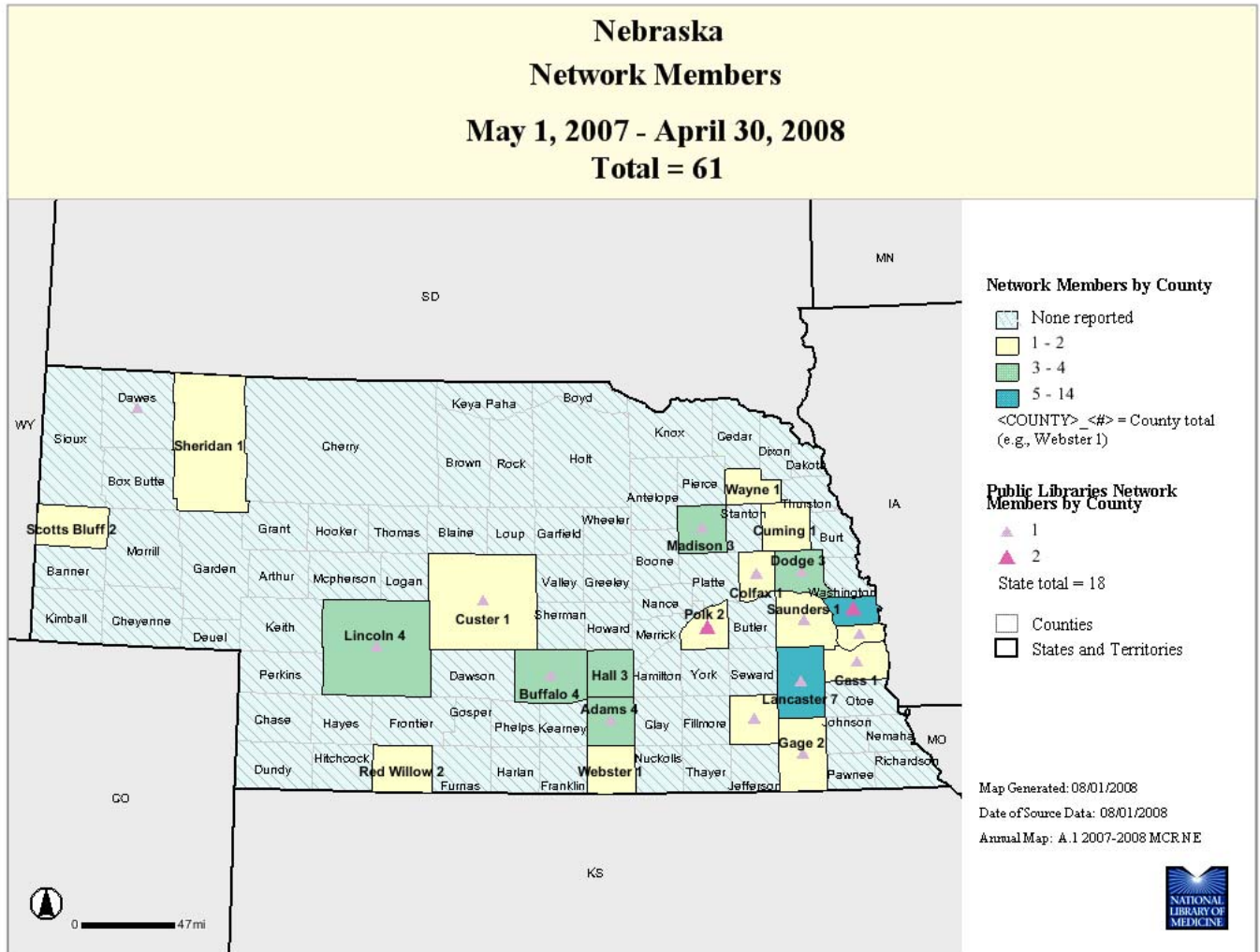
### Network Membership



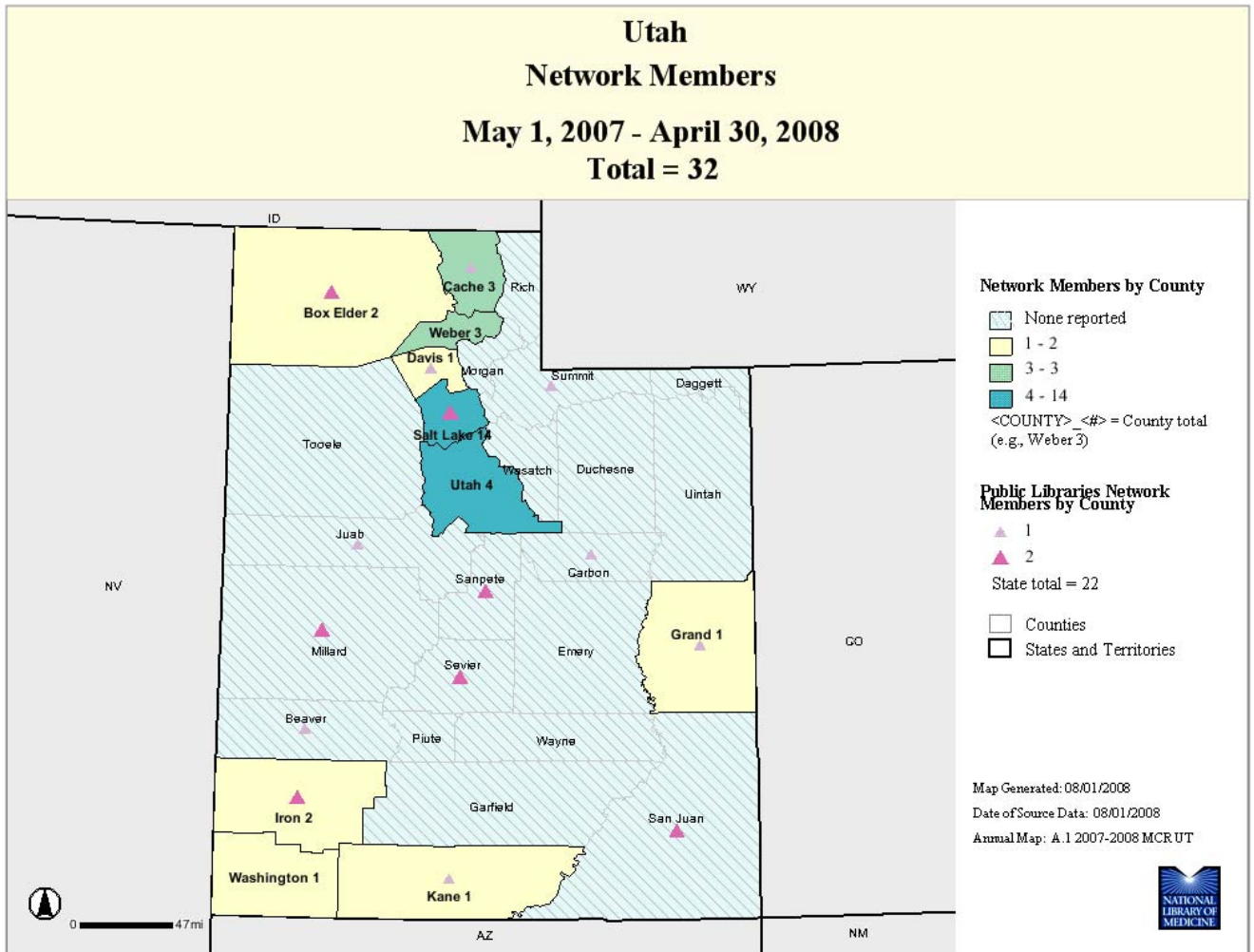
# Attachment 10

## State Map Nebraska:

### Network Membership



Attachment 11  
 State Map Utah:  
 Network Membership





# Attachment 12

## State Map Wyoming:

### Network Membership

