

Quarterly Report

National Network of Libraries of Medicine - MidContinental Region Region 4

August 1, 2007 - October 31, 2007

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University of Utah

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Executive Summary

Administration

Personnel

Wayne Peay, Director of the RML, formally retired from his position at the end of September 2007. Claire Hamasu, Associate Director, prepared a one page document describing the RML program to be included in the packet going to director candidates.

Mary Henning, Wyoming Liaison, resigned from her position on August 15, 2007 to develop library services for the Laramie County Community College - Albany County Campus. Ms. Hamasu talked with Lori Phillips, Associate Dean - University of Wyoming Libraries, about carrying out commitments planned for September, including staffing the state library association exhibit and suggesting participants for the public library focus group.

Although an agreement has yet to be signed between UCLA and the University of Utah, the Technology Coordinator sharing between MCR and PSR 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 established 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. UCLA is now writing the subcontract for the pilot. The implementation is going well; Sharon Dennis, Technology Coordinator, has already offered classes to the Network members in the Pacific Southwest Region.

Year 3 Initiatives

At the beginning of the year, staff decided it would be helpful to add more focus to our activities. We decided that whenever possible, our activities should apply to three initiatives-- health information literacy, advocacy, and/or emergency planning. We defined these initiatives as they applied to the RML.

Health Information Literacy:

For health information providers and end users, health information literacy advances the identification of and access to health information resources; the ability to evaluate, analyze, and understand the content; and uses the health information to make informed decisions. (Developing leaders for health information literacy)

Advocacy:

Advocacy is working collaboratively to do marketing, public relations, and promotion of the value of the library and librarian in the organization. (We used Pat Wagner's definitions - Marketing: Awareness (assessment) and response. Public Relations: Remember me fondly and often, the white noise of marketing. Promotion: A compelling reason to buy.)

Emergency Planning:

Emergency planning involves examination of kinds of emergencies and establishing procedures for health sciences libraries to provide continuous health information access.

Advocacy

The RML sponsored “Marketing as if Your Life Depended On It” taught by Pat Wagner of Pattern Research, Inc. The workshop was held in two sessions in Denver and Kansas City. In between the sessions participants conducted a marketing project that was identified during the first workshop. The MCR met more than our indicator of 15 participants for the Kansas City location; 36 attended. Denver had 12 participants, almost achieving the indicator.

Two classes, “Counting Your Chickens” and “Grantwriting for \$ucce\$\$,” proposed for the chapter meeting were cancelled due to lack of registrants.

The MCMLA Advocacy Task Force, assisted by the Assessment and Evaluation liaison, continued to work on defining parameters to be measured with the Return on Investment/Cost Benefit Analysis tool.

Community Outreach

The RML consulted with a number of groups inquiring about our Community Outreach Partnership Award. They included public libraries, a state AHEC, and community based organizations.

Proposals written for the TC4C Community Partnership awards were sent to Siobhan Champ-Blackwell, Community Outreach Liaison, to be reviewed. They came from all states except Colorado.

The liaisons for Nebraska and Missouri are members of the planning groups for BiNational Health Week in their states and are integrating health information into the activities.

Consumer Health

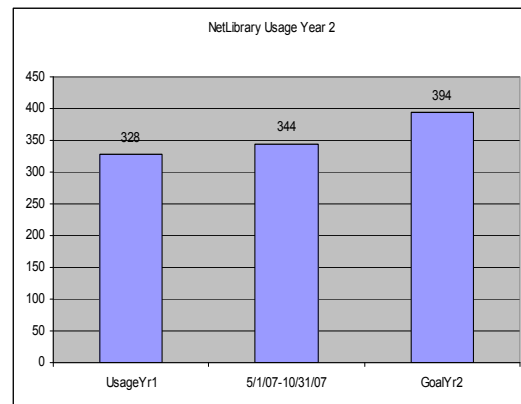
The latest version of “Health Hotlines” was mailed out to all Network members. A cover letter from the Associate Director alerted members that this popular resource was being sent to them because they were members of the NN/LM.

Liaisons in Colorado, Nebraska, and Missouri began recruiting participants for focus groups to be held in conjunction with their state library association meetings. There were problems with communicating the event to public librarians and finding a no-conflict time for the session. Only the Nebraska focus group was held. The RML needs to re-examine how we communicate with public librarians.

The Associate Director reviewed and submitted questions to NLM on the proposal from the University of Utah’s Biomedical Informatics Department to run an evaluation study on Genetics Home Reference Information Rx. This project will be funded by NLM through the RML.

Education

Looking at usage statistics to date, the RML predicts that we will reach our indicator for NetLibrary by the end of the year.



Marty Magee, Nebraska/Education Liaison, arranged for the National Training Center and Clearinghouse (NTCC) staff to teach their classes in conjunction with the joint chapter meeting in Omaha. Registrants for the meeting had the opportunity to attend the NLM Gateway & ClinicalTrials.gov and the PubMed workshops.

Ms. Hamasu and Heidi Sandstrom, Associate Director for the NN/LM PSR, emailed the other RML Associate Directors about developing a site with a calendar and course information for training going on in all regions using the registration program developed for the NTCC. Staff from the RMLs had concerns about customizing the program for the region. The NTCC staff reported that this would be possible. The MCR will test the program by entering class data.

Network Membership

The workgroup for the Reference Continuity Service Project was organized with representation from hospitals in all states except Missouri. We could not get a volunteer from Missouri to assist in planning how this service would work. The academic health sciences libraries have one representative. A web page was established to explain the project. (<http://nmlm.gov/mcr/rsdd/continuity/index.html>)

John Bramble, Utah/Network Membership Liaison, worked with Charniel McDaniels, GMR Network Coordinator, to promote EFTS at the joint MLA chapter meeting in October. They ordered promotional items to distribute from the NN/LM booth and arranged for a room during the informal meeting time to answer questions and introduce EFTS to interested librarians. Two librarians attended.

The MCR and GMR worked together to plan “Emergency Planning with the RMLs” to initiate thinking about continuity of service should an emergency occur. Angela Ruffin, Head of the National Network Office, presented the work being done by NLM and the RMLs to assure that resources and services would be maintained should a disaster occur. The Café to Go process was used to engage 70 participants to come up with ideas and steps for their libraries. (See Attachment 3 for their ideas.)

The RML and Bibliographic Center for Research established an agreement that outlines the responsibilities of each in offering regional licensing for electronic resources. BCR is the negotiating and billing agent for the Regional Licensing Consortium. The agreement allows for other regions to join the NN/LM MCR in the consortium. Members from two other regions had contacted the MCR about participating. In October, MCR met with PNR and PSR to describe the regional licensing process and answer questions. Both regions will be following up with their membership before deciding to coordinate this service.

State Outreach

The Missouri and Colorado liaisons enlisted the assistance of local librarians to staff the exhibit booth at the Missouri Library Association meeting and the Home Care and Hospice national conference.

Technology

A technology request for proposals was issued in July. No one submitted a proposal by the September 5, 2007 deadline. The RML will investigate the reasons for this disinterest and revise its technology award program.

Network Infrastructure

Table 1: Quarterly Infrastructure Data

	Current quarter	Previous quarter
Network members – full	153	167
Network members – affiliate	262	262
Libraries providing services to unaffiliated health professionals	106(69%)	108 (65%)
Libraries providing services to public users	118(77%)	118 (71%)
Average fill rate for resource libraries	79%	78%

New Affiliate Members: Gilpin County Public Library, Colorado; Missouri Southern State University, Missouri; Northeast Kansas Library System, Kansas; St. Joseph Public Library, Missouri

Regional Advisory Board Activities

The membership for the Regional Advisory Board was finalized for the year with six new members adding representation for the consumer health, Network membership, community outreach, technology, and assessment & evaluation project areas. Ms. Hamasu and Joan Stoddart, Interim Director, updated and presented the board member orientation in two sessions on September 25 and 27, 2007 covering the NN/LM, the MCR's special project areas, and communication methods. Those who weren't able to attend were sent URLs of the recordings. Five new members attended each session.

The annual Regional Advisory Board meeting was held in Omaha, Nebraska at Creighton University Health Sciences Library on October 11-12, 2007. (See Attachment 4 for Regional Advisory Board Meeting Minutes) RML staff, board members, and the Head of the NNO discussed community outreach, Network members, technology, and education in the region to narrow down the topics for the afternoon:

1. Portable, durable, and cheap information distribution & emergency preparedness
2. Changing the librarian model, getting health sciences librarians to become key players in their organizations
3. Culturally appropriate and culturally specific outreach
4. Retooling – preparing the librarian to advocate for a role in adding value to the clinical information system/EMR

In order to meet the indicator that Advisory Board members would recognize the name and major purpose of primary NLM resources, the RML created memorable commercials highlighting key resources and “played” them during the advisory board meeting.

Three Advisory Board members were recruited as reviewers for the Outreach award. However, no proposals were submitted so their services were not needed.

Needs Assessment and Evaluation Activities/Data

Public library focus group questions were developed and tested with Colorado librarians.

In August, the RML distributed an inquiry to Network members about their awareness and viewing of podcasts created by the RML. Of the 45 respondents, most (87%) had not listened to any of the MCR podcasts. More than half of the respondents indicated that they were unaware that we had produced the podcasts. Five respondents had listened to the podcasts and found the content to be interesting and useful. The RML will review its promotion of podcasts.

Three RML staff members who attended the “Marketing as if Your Life Depended On It” workshop carried out their marketing projects. Rebecca Brown, Kansas/Technology Liaison,

tested questions about preferences on keeping abreast of technology developments with Kansas members. Ms. Magee assessed the expectations of the staff for her education role. Ms. Hamasu queried Resource Library Directors about the value of the NN/LM. Their reports will be available next month.

Feedback

Feedback from an attendee at the Nebraska Association for Translators and Interpreters meeting in August expressed the value of MedlinePlus en espanol in his work at Fremont Area Medical Center.

The adoption of new technologies is dependent on many things and so may take time. Michlene Mankin, a hospital librarian from Wyoming who took the RSS seminar last year, reported:

“FINALLY! I got one of the IS people with administrator privileges to download a reader for me and I am going to begin to add sites. So even though it is well after the fact, chalk one up for success.”

Linda Frazier, Kansas Department of Health and the Environment, described the appreciation from the Kansas Center for Emergency Preparedness that was conveyed to her for information that the RML had distributed via the RML News on emergency preparedness. This ties in with our indicator that members will facilitate contact with their constituent groups.

Outreach

Table 2: Newly Funded Awards and Projects

Start/ end dates	Title of award/ project	PI institution	PI last name	Funding amount	Project type
	No new projects				

Update of Ongoing, Major Projects

No Activity

Table 3: Exhibits

Dates	Organization name	Meeting name	Location (city, state)
RML NATIONAL EXHIBITS			
9/16-19/2007	Disease Management Association of America	9 th Annual Disease Management Leadership Forum	Las Vegas, NV
9/28-30/2007	International Parish Nurses	Westberg Symposium	St. Louis, MO
10/2-5/2007	Association of State and Territorial Health Officers	Annual Meeting	St. Louis, MO
10/7-10/2007	National Association for Home Care and Hospice	Annual Conference	Denver, CO
10/17-19/2007	International Association of Forensic Nurses	Annual Conference	Salt Lake City, UT
10/25-28/2007	American Association of School Librarians	Annual Conference	Reno, NV

RML REGIONAL/STATE/LOCAL EXHIBITS			
8/10/2007	Utah Multicultural Health Network	4 th Annual Health Disparities Conference	Salt Lake City, UT
8/27/2007	Nebraska Office of Minority Health	Annual Conference	Lincoln, NE
9/5-7/2007	Colorado Hospital Association	Annual Conference	Vail, CO
9/11-12/2007	Utah Lieutenant Governor's Native American Summit	2 nd Annual Summit	Cedar City, UT
9/14/2007	Utah Medical Association	Annual Meeting	Midway, UT
9/14/2007	Creighton University Office of Interprofessional Service Scholarship and Education (OISSE)	First Presbyterian Church Health Fair	Omaha, NE
9/14-15/2007	Nebraska Health Ministries	Annual Meeting	Omaha, NE
9/17-18/2007	Colorado Public Health Association	Public Health in the Rockies	Ft. Collins, CO
9/18-19/2007	Kansas Public Health Association	Fall Conference	Wichita, KS
9/18-19/2007	Utah Gerontological Society	Annual Meeting	Midway, UT
9/21/2007	Creighton University Office of Interprofessional Service Scholarship and Education (OISSE)	Heart Ministry Center Health Fair	Omaha, NE
9/25/2007	Creighton University Health Sciences Library	"Info Fair" at the Creighton University Medical Center	Omaha, NE
10/3-4/2007	Missouri Library Association	Annual Conference	Springfield, MO
10/5/2007	Creighton University Office of Interprofessional Service Scholarship and Education (OISSE)	St. Thomas More Health Fair	Omaha, NE
10/5/2007	Intermountain Health Care	Live Well, Prepare Well Conference	Salt Lake City, UT
10/15/2007	Boone County Health Department	BiNational Health Week in Mid-Missouri	Columbia, MO
10/15/2007	Midcontinental/Greater Midwest Joint Chapter Meeting	Annual Conference	Omaha, NE
10/25-26/2007	Nebraska Library Association/ Nebraska Educational Media Association	Annual Conference	Kearney, NE

Actionable Feedback received from Exhibit Visitors

No suggestions or recommendations were received from exhibit visitors this quarter.

MedlinePlus Go Local

A proposal for Kansas Go Local was received in September. Dana Abbey, Colorado/Consumer Health Liaison, recruited a board member and one of the state Go Local project managers to review the proposal. Questions from the reviewers and NLM's Go Local team were sent to the lead agency, the State Library of Kansas, to clarify their intent.

Table 4: Presentations and Training provided by RML Staff

Date	Last name of staff responsible	Title of presentation/training	Location (city, state)	Number of participants	In-person or distance education
8/3/2007	Champ-Blackwell	Wiki! Skype! Blog! Do More Than Surf the Net	Omaha, NE	5	In-person
8/14/2007	Jones	University of Missouri Health Journalists Bootcamp	Columbia, MO	15	In-person
8/15/2007	Abbey, Brown	Breezing Along with the RML – August	Salt Lake City, UT	30 Synchronous 35 Asynchronous	Distance
8/20/2007	Magee	Problem Based Learning Orientation for UNMC Medical Students	Omaha, NE	12	In-person
8/28/2007	Abbey	Alamosa AHEC Training	Alamosa, CO	8	In-person
9/4-10/1/2007	Magee	Thinking Like an MBA (Moodle Class)	Omaha, NE	12	Distance
9/11/2007	Magee	MedlinePlus Presentation for Omaha Downtown Rotary	Omaha, NE	130	In-person
9/12/2007	Hamasu	Breezing Along with the RML – September	Salt Lake City, UT	34 Synchronous 33 Asynchronous	Distance

Date	Last name of staff responsible	Title of presentation/training	Location (city, state)	Number of participants	In-person or distance education
9/17/2007	Abbey	Free & Reliable Substance Abuse Resources: Addressing a Public Health Priority	Ft. Collins, CO	28	In-person
9/17/2007	Jones	Public health nursing students	Columbia, MO	12	In-person
9/18/2007	Jones	Public health nursing students training - 2	Columbia, MO	12	In-person
9/19/2007	Jones	Public health nursing students training - 3	Columbia, MO	12	In-person
9/20/2007	Jones	Public health nursing students training - 4	Columbia, MO	12	In-person
9/21/2007	Jones	Public health nurses training	Columbia, MO	12	In-person
9/21/2007	Jones	School of Nursing Grant Training	Jefferson City, MO	16	In-person
9/25/2007	Stoddart, Hamasu	What is the NN/LM? and What is the NN/LM MidContinental Region?	Salt Lake City, UT	5	Distance
9/27/2007	Hamasu	What are the Special Project Areas of the NN/LM MCR? and Communication	Salt Lake City, UT	5	Distance
9/27/2007	Magee	Public Health Resources	Grand Island, NE	30	In-person
9/29/2007	Champ-Blackwell	Making the Most of Web Resources to Enhance Health Disparities	St. Louis, MO	20	In-person
10/1/2007	Magee	School of Public Health – Health Policies Class presentation	Omaha, NE	14	In-person
10/4/2007	Champ-Blackwell	Spanish for the Healthcare Provider	Omaha, NE	4	In-person
10/7/2007	Dennis	Using the Access Grid Videoconferencing System for Collaboration and Training: An Experiment with Distributed Personal Interface Grids (PIGs) (LITA Poster Presentation)	Denver, CO		In-person
10/12/2007	Magee	Moving to Moodle (MCMLA Poster Presentation)	Omaha, NE		In-person

Date	Last name of staff responsible	Title of presentation/training	Location (city, state)	Number of participants	In-person or distance education
10/17/2007	Dennis	Breezing Along with the RML – October	Salt Lake City, UT	28 Synchronous 31 Asynchronous	Distance
10/19/2007	Hamasu	The Distributed Model: The RML Going Local	Salt Lake City, UT	10	Distance
10/18, 24/2007	Dennis	Introduction to Blogs and Wikis	Salt Lake City, UT	7	Distance
10/26/2007	Magee	Looking for the Fountain of Youth: Senior Health Resources	Kearney, NE	19	In-person
10/30/2007	Champ-Blackwell	Spanish for the Healthcare Provider	Omaha, NE	22	In-person



Other Staff Activities

Table 5: Publications and Resources Developed by RML Staff

Date completed/ published	Last name of staff responsible	Title	Medium	Submitted to Clearinghouse ("yes" or "out of scope")
	Champ- Blackwell	BHIC Blog	WebJunction RSS Feed	Out of scope
8/17/2007	Brown	Subscribing to an RSS	Video (Jing)	Out of scope

Notable Staff Activities

October 5, 2007

At the request of Angela Ruffin, Ms. Hamasu contributed a summary of the TC4C Community Partnership project and attendance at the Research for Native Health: Strengthening Partnerships Promoting Trust and Increasing Communication conference to the HHS/NIH ICNAA Bi-Monthly Report that collects work on activities related to Native Americans.

October 9, 2007

Ms. Hamasu attended the semi-annual Public Health Partners Steering Committee meeting at NLM.

October 19, 2007

Ms. Hamasu took part in the NLM Associate orientation describing the distributed model and the shared position pilot. In response to a question on accountability, Ms. Hamasu explained that accountability was built into the logic model since the goals came from the statement of work.

October 22, 2007

Ms. Champ-Blackwell was accepted as a participant and attended the Nebraska Library Commissions "Thinking Outside the Borders" leadership training.

Photographs



Dana Abbey and Claire Hamasu at the RML booth during the MCMLA/Greater Midwest combined meeting.

Attachments

Attachment 1: Quarterly OARF Summary Data - RML Staff Activities

Outreach Activities Conducted by MCR RML Staff

RML Q2, 2007-2008

Generated: Thursday, December 27, 2007

18 Total Outreach Activities

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

Activities Summary

Total number of estimated participants:	391 participants
Average number of participants:	21.72 per activity
Average length:	3.68 hours
Under 1 hour:	1 activity (5.56%)
Between 1 and 2 hours:	14 activities (77.78%)
Over 2 hours:	3 activities (16.67%)
Hands-on practice:	9 activities (50.00%)
Conducted remotely:	2 activities (11.11%)
Offering continuing education:	2 activities (11.11%)
Significant number of minorities:	3 activities (16.67%)

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

Health sciences library:	18 activities (100.00%)
Public library:	1 activity (5.56%)
Government agency:	6 activities (33.33%)
Hospital:	4 activities (22.22%)
Clinical/Health care:	5 activities (27.78%)
Academic Institution:	18 activities (100.00%)
Community-Based:	1 activity (5.56%)
Faith-Based:	2 activities (11.11%)
Public Health Agency:	4 activities (22.22%)
Other:	4 activities (22.22%)

Session Content

PubMed:	2 activities (11.11%)
MedlinePlus:	16 activities (88.89%)
ClinicalTrials.gov:	9 activities (50.00%)
NCBI:	0 activities (0.00%)
NLM Gateway:	0 activities (0.00%)
TOXNET:	0 activities (0.00%)
Other technology content:	10 activities (55.56%)
Other, non-technology content:	4 activities (22.22%)

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:	3 activities (16.67%)
Native American:	0 activities (0.00%)

244 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:	88.9%
Health care or service providers:	117 participants (47.95%)
Health science library staff members:	31 participants (12.70%)
Public Health worker:	73 participants (29.92%)
Public/Other library staff members:	20 participants (8.20%)
Members of general public:	3 participants (1.23%)



Attachment 2: Promotional Materials Provided

Date	Who	Items Provided	Purpose
8/15/2007	Rocky Mountain University of Health Professions Resource Center <i>Utah</i>	<ul style="list-style-type: none"> - 50 MedlinePlus Bookmark - 50 Health Information for Senior Citizens Card - 200 Tox Town Card - 50 NLM Worlds Largest Medical Library Card - 50 Our Collection/Our Databases Card - 50 PubMed Card 	More information for advanced degree students and to help them communicate with their patients.
8/20/2007	Research Medical Center Carl R. Ferris Medical Library <i>Missouri</i>	<ul style="list-style-type: none"> - 500 MedlinePlus Bookmark - 6 MedlinePlus poster - 500 NLM Pocket Card - 500 Consumer Health Card - 500 Good Health Information on WWW 	Table at an Employee Benefits Fair
8/27/2007	Utah Valley Regional Medical Center Medical Library <i>Utah</i>	<ul style="list-style-type: none"> - 100 MedlinePlus Bookmark - 200 Health Information for Senior Citizens - 200 PubMed Card 	Employee orientation, public health information
8/27/2007	Institute for Human Development <i>Missouri</i>	<ul style="list-style-type: none"> - 400 MedlinePlus Bookmark (Spanish) 	BiNational Health Week around Missouri
8/30/2007	Judith Flanagan <i>Utah</i>	<ul style="list-style-type: none"> - 250 MedlinePlus Bookmark - 50 Health Information for Senior Citizens - 75 Tox Town Card 	Neighborhood preparedness/health fair
9/11/2007	Omaha Public Library South Branch Nebraska	<ul style="list-style-type: none"> - 50 Spanish MedlinePlus bookmarks, - 25 MedlinePlus Cards (Spanish) - 25 MedlinePlus Cards - URLs for the English and Spanish trifold MedlinePlus brochures 	Used for consumers at the front desk.
9/13/2007	Poudre Valley Health System Medical Library <i>Colorado</i>	<ul style="list-style-type: none"> - 300 Connecting Native Americans To Health Information Card - 300 American Indian Health Brochure 	Symposium on Native American Health

Date	Who	Items Provided	Purpose
9/18/2007	BryanLGH College of Health Sciences Library <i>Nebraska</i>	<ul style="list-style-type: none"> - 25 MedlinePlus Bookmark - 25 MedlinePlus Card (English & Spanish) - 50 NLM Pocket Card - 25 Tox Town Card - 25 Tox Town Brochure - 50 NLM Worlds Largest Medical Library - 25 Our Story Card - 25 Our Collection/Our Databases Card - 25 How to Use NLM Card - 50 PubMed Card - 50 NLM Gateway Card - 50 DOCLINE Card - 50 The Visible Humans Card 	Library open house to advertise our new ILS and other resources and services
9/20/2007	UNMC sponsored South Omaha Health Fair <i>Nebraska</i>	<ul style="list-style-type: none"> - 300 MedlinePlus Bookmark (Spanish) - 100 MedlinePlus Bookmarks 	This activity was focused on consumers, provided by health professionals from UNMC.
9/20/2007	University of Southern Nevada South Jordan Campus Library <i>Utah</i>	<ul style="list-style-type: none"> - 100 MedlinePlus Bookmark - 100 MedlinePlus Bookmark (Spanish) - 50 MedlinePlus Card (English & Spanish) - 2 MedlinePlus poster - 100 Consumer Health Card - 50 AIDS Information Services Card - 100 Health Information for Senior Citizens Card - 50 Genetics Home Reference Card - 50 Household Products Database Card - 50 American Indian Health Brochure - 50 Asian American Health Brochure 	South Jordan Chamber of Commerce Health Fair, October 8, 2007
10/19/2007	St John's Mercy Health System Van K Smith Community Health Library <i>Missouri</i>	<ul style="list-style-type: none"> - 50 MedlinePlus Bookmark 	Distribution to library patrons from the library and community events.
10/19/2007	Hamilton College <i>Nebraska</i>	<ul style="list-style-type: none"> - 100 MedlinePlus bookmark 	Distribute to patrons
10/19/2007	Rural Health Education Network <i>Nebraska</i>	<ul style="list-style-type: none"> - 16 Resources for Science Teachers brochure - 16 MedlinePlus brochure 	Training for science teachers

Date	Who	Items Provided	Purpose
10/26/2007	Via Christi Regional Medical Center Via Christi Libraries- St. Francis Campus Kansas	<ul style="list-style-type: none"> - 40 MedlinePlus Bookmark - 40 MedlinePlus Bookmark (Spanish) - 40 MedlinePlus Card (English & Spanish) - 40 MedlinePlus poster - 40 NLM Pocket Card - 40 Consumer Health Card - 40 ClinicalTrials.gov Card - 40 AIDS Information Services Card - 40 AIDSinfo Brochure - 40 Consumer Guide to NIH HIV/AIDS Information Services Brochure - 40 Health Information for Senior Citizens - 40 Genetics Home Reference Card - 40 Tox Town Card - 40 Tox Town Brochure - 40 Tox Town Poster - 40 Household Products Database Card - 40 Haz-Map Occupational Health Database - 40 Connecting Native Americans To Health Information Card - 40 American Indian Health Brochure - 40 Asian American Health Brochure - 40 Arctic Health Brochure - 40 NLM Worlds Largest Medical Library - 40 Our Story Card - 40 National Network of Libraries of Medicine - 40 Good Health Information on WWW card - 40 Our Collection/Our Databases Card - 40 How to Use NLM Card - 40 PubMed Card - 40 NLM Gateway Card - 40 DOCLINE Card - 40 Public Health Resources - 40 Partners in Information Access for the Public Health Workforce - 40 Toxicology Brochure - 40 WISER Card - 40 Specialized Information Services Card - 40 The National Center for Biotechnology Information Card - 40 Telemedicine Card - 40 Health Services Research Information Program Card - 40 The History of Medicine at the National Library of Medicine Card - 40 Profiles in Science Card - 40 International Programs Card - 40 The Visible Humans Card 	Kansas Biomedical Librarians conference

Attachment 3:
Emergency Planning Ideas

Summary of discussion on Emergency Planning

NN/LM, Greater Midwest Region and MidContinental Region

Joint MLA Chapter Meeting – Omaha, NE

October 15, 2007

Staff from the two RMLs facilitated roundtable discussions using a technique called "Café To Go," in which participants moved from one table to another to address the key questions used to frame the discussion. Fifteen tables were used for the five key questions, with each table labeled A, B, C, D, or E to identify which question was being addressed.

Intended Outcomes:

1. Awareness that emergency planning means developing a continuity of service plan for health information services. This may involve working with the parent institution, other network members, and other community organizations.
2. Empowered to take the first steps on developing an emergency plan. Realization that developing the plan is something they need to work on: The RML is not going to do it for them.

Café Etiquette:

- **Focus** on what matters
- **Contribute** your thinking
- **Speak** your mind and heart
- **Listen** to understand
- **Link and connect** ideas
- **Listen together** for insights and deeper questions
- **Play, Doodle, Draw** - writing on the table cloths is encouraged
- **Have fun**

Key Questions (with responses):

A. What are the essential services that your library should be able to provide in case of an emergency?

Information Services:

1. Clinical Reference –
 - a. Using a phone
 - b. Use electronic resources if available or manual, print resources
 - c. Call another library on a different grid
 - d. Call for an assignment
 - e. Internet reference
 - f. Searches
2. Create "ready to go" updated information kit, with core emergency response tools
 - a. Pre-prepared information, based on probability of it happening, like flood.

- b. Cache of current medical paper books (infectious disease, drugs, diagnosis) for example the Washington Manual, Conn's Current Therapy.
3. Provide web site access with resources
4. Document delivery
5. Health Alert Notification – public health notices via fax

Other Library Services

1. Emergency responder command center
2. Community gathering place/shelter
 - a. Supplies such as food, blankets and water
3. Community place for the exchange of information
 - a. Direction, and instruction on where to go – i.e., implementing emergency plan
4. Going out into the community to let people know you are there
5. Support public health workers
6. Communication to those who need it – then offer library services, including public health information
7. General worker in an emergency
 - a. People to help hand out supplies
 - b. Runner

B. How will your library provide essential services if your library is non-functional?

What does non-functional mean? Conditions limiting service:

- No Internet
- No electricity
- Inability to get to library
- Condition of print collection
- Building collapse

Develop multi-level plan to define services and resources needed for varying types of emergencies

Service levels needed. Use national disaster level labeling within institution so status is easily understandable.

1. If the library and the institution are both down, then basic information is what can be provided
2. If the library is down, but the institution is still functioning, complete service is required.

Technology

1. Have a laptop with all essential information charged and ready to go if a disaster hits
2. Establish reference in a pack computer, resources that can be used from remote location when local site is inaccessible

3. Download WISER
4. Have core PDA products an emergency team should have at the ready
5. Use of PDAs
6. PDA plus battery recharger
7. Remember text-messaging as an option
8. Potential for having portable information van with wireless access, similar to or coordinated with mobile testing van
9. Laptops supplied to all key library personnel and are kept at home
10. All library staff supplied with cell phones and text messaging
11. Designated computer, printer, and fax that runs on emergency power
12. Digital resources hosted remotely
13. Use Internet to get information, otherwise use paper.
14. Redundant Internet/network
15. Mirrored server or proxy server so that off-campus access may be maintained
16. Servers backed up off site/out of state
17. Redundant phone systems
18. Two-way radios
19. Establish backup services: alternative access for digital resources
20. Need password access off-site such as if satellites/clinics who may be in operation if library is not
21. Vendor agreements might be by IP range so password system as backup
22. Need access to all passwords
23. Back-up on thumbdrive
24. Get a hand crank generator which will power computers. Can get basic model for \$100, better, gas powered model at \$250
25. Satellite phones

Back up Library

1. Have a buddy system in place with another library, locally and nationally
2. Partner with remote hospital
3. Run the library out of a branch location
4. Buddy library: formal and informal agreements

Preparation for an Emergency

1. Do a needs-assessment at our institutions
2. Disaster plan needed:
 - a. How to contact staff: Provide a library triage—emergencies don't always happen during working hours, have a way/means to contact staff. Text messaging.
 - b. Phone tree
 - c. How to get to library/ and who
 - d. Agree to meet at the command center in case of emergency
 - e. Essential staff list
 - f. Designated administrator on call each day

3. Librarian should be on planning committee
4. Staff contacts kept on file with the State Library
5. Talk about different scenarios with staff – what to do when
6. Drills
7. Find out what local responders need
8. Compile a core list of basic resources needed. Disaster closet to include quick references for health information (toxicology, infectious disease, trauma, radiology)
9. Identify and label key print resources within collection, locate them centrally, and have them ready for "evacuation" in a disaster situation. Notify emergency responders of location and labeling so they can be removed from the library and used wherever needed.
10. Have an emergency kit in the library

C. What can the RML program staff provide to support your planning or support your library in time of an emergency?

1. Coordinate advanced emergency planning by providing: research on who is already doing what; manuals, guidelines, and recommended collections and/or equipment useful during a disaster; training, organization of partners who can help each other out (similar to a calling tree of resources).
2. RML should have an internal backup within region. If Chicago is hit by the big one, so will LA probably. Worst case scenario
3. Major power grids are not enough, need to go down to sublevel power grids (Such as UIC →University of Iowa)
4. Help find or provide funding
5. Generate manuals of procedures
6. Training on pre/during/post disaster
7. Just in time learning resources
8. Provided quick access to information
9. Reduce and lookout for duplicative services
10. Tools to access the Internet when power or hardwired Internet is not available
11. Identify who is available to help
12. Organize who can help during a disaster
13. Panel of experts on specific types of disasters as a resource
14. Establish pathways of communication between local and national efforts
15. Create triage teams
16. Offer more stories from librarians who have worked through a disaster
17. Collection development recommendations to be used by responders
18. Identify planning models local or national organization use
19. Preplanning strategies
20. Decision tree
21. Disaster planning templates
22. Provided quick access to information

D. What role can you see for other Network Members, representatives from your institution, or representatives from community organizations in the development of your library plan?

1. Libraries need to be involved in emergency planning at their institutions and at the community level (local, city, county government; public health; churches). This will give the library an idea of what emergency planning teams need (information on PDAs, CDs).
2. Partner with other "information" providers: radio stations, television, cable to get information out to the community.
3. Public Librarians can/should be trained to provide health related reference services
Strengthen consortia arrangements to provide back up partners who are geographically remote
4. Talk to local groups and consortia about potential partnerships
5. Plan for day 7, not day 1, establishing local and remote partnerships for health information services
6. Find out what the community thinks is necessary

E. After this meeting what are the steps that you need to take to implement a plan for your library?

Library and Institution

1. Find out if the parent organization has an emergency plan
2. Find out if the library is on the emergency generator system
3. Check if library's plan meshes with the institution's plan
4. Check with Information Technology department to see about their back-up/disaster plans
5. Learn about institution's disaster plans. Is there a team? Who is on it? If you're not already part of that team, request to be part of it.
6. Check to see what other services might be needed if patients are sent to your hospital in the event of an emergency (i.e., when incoming pediatric patients and families were routed to one hospital, social workers used computers in library to help people fill out forms, apply for benefits etc.)

Library and Community

1. Network with community institutions coordinating their strengths. For example, one may have a wind turbine another may have a well.
2. Contact first responders about their real needs. One library expected that their staff would assist in case of a fire, but the firemen wouldn't let them into the building.
3. Work with the Go Local planners in my state to make sure emergency preparedness resources are included

Learn More

1. Research emergency planning
2. Learn more about emergency preparedness – Read the stories from Katrina
3. Get training on how to provide services during an emergency.
4. Find trustworthy environmental information (for example on decontamination), when being sent back to homes. Your own physical environment could be contaminated.

Determine Essential Services

1. Decide what are the library's essential services, essential resources, essential equipment
2. Designate critical services for my library
3. Find out if my Library's Disaster plan has identified essential services
4. Set up an emergency kit of ready reference materials

Establish partnerships

1. Check with your director to see if you can be allowed to have time to back-up another library, and stress that the partnership would have benefits to your library as well
2. Contact the public library to determine whether they have an emergency plan and work together to develop a cooperative plan
3. Make contacts with other libraries who may be potential partners
4. Bring up the idea of emergency preparedness with a local library consortium group
5. Check with other members of a group from MLA. For instance, if you are part of a group of pediatric medical librarians, make contact with other members of the group to share common information.

Follow up for an Emergency Preparedness Plan

1. Develop a continuity of operation plan for events that are short and long term and differing levels of seriousness
2. Get emergency preparedness planning back on the radar in my library
3. Urge my library administration to articulate an emergency preparedness plan
4. Go back and find out what happens if there is a fire in my library (water damage from sprinklers could be worse than fire damage)
5. Start to think about working with vendors, requesting special permission in the event of an emergency re: copyright and sharing.
6. Identify levels of disaster. You may call upon different people depending on the issue(s) in your library
7. Check on different modes of communication that you may have available, i.e. Internet, cell phones, Blackberries, regular phone and purchasing a phone card, television/radio contacts

Attachment 4:
Regional Advisory Board Meeting Minutes

**NN/LM MidContinental Region
Regional Advisory Board Meeting Agenda
Friday October 12, 2007
Creighton University Health Sciences Library
Omaha, Nebraska
8:00 am – 3:30 pm**

Welcome

Jim Bothmer, Director, welcomed the Advisory Board and the RML staff to the library. Joan Stoddart, Interim Director, welcomed the Advisory Board to the annual meeting stressing the important role they play for the NN/LM.

NLM Update

Angela Ruffin, Head of the NNO, provided an update of personnel changes, improvements to resources, and progress in emergency planning at NLM and among the RMLs.

World Café

Theme for small group discussions: What role do librarians see for themselves in the global health information universe? Do they limit their participation to their library or institution or are they members of the larger library and health information community? How does that self definition affect them and their work? And by extension, how does that self definition affect how they participate in the programs that the RML develops?

Discussion topics:

1. Community Outreach--How do libraries, institutions and community organizations develop and sustain partnerships that contribute to the health information vision?
2. Network Members--How does understanding the librarian's place in the health information vision affect her/his involvement in advancing that vision?
3. Technology--What will enable information providers and consumers to adopt new technologies as a means of contributing to the health information vision?
4. Education--Education supports the health information vision. What affects the librarian's and consumer's ability/choice to take advantage of educational offerings?

Ideas Generated from World Café Discussions:

1. Community Outreach

- Outreach descriptors--being visible, a good neighbor, sustaining, building advisory groups with the community
- What's in it for the partners –more than information, selling the librarian
- Sensitive to the culture
- Using emergency preparedness as the entrée to engage community organizations
- Creating a triage model – public health, public libraries, health sciences libraries
- Defining roles – strengths of each – defining the triage system
- Partners with local city government
- Barriers and resources, time, staff priorities, be honest and realistic with self and partners
- RML: creating tools to help people do needs assessment, build relationships, pull suggestions from public library website
<http://nnlm.gov/outreach/community/index.html>

2. Network Members

- Using a network – 1:1 or using a larger network like RML or NNLM; portability of networks
- Expressing how and why it's important to get involved; step outside comfort zone/library
- Change from tunnel to 360 degree view
- Time issue – need to be able to utilize just in time tools, colleagues (like DOCLINE services)
- Privacy, trust, trade secrets (in for-profit organizations)
- How to develop peer to peer networking – what's the hook that gets the message out?
- The electronic medical record as a source of information distribution
- Volunteer for even the less exciting committees
- Volunteer – get out of your “cubicle”, walk up and down the hall (carry your clipboard☺)
- Value of being seen
- Meddle, don't mouse
- Listen to the key decision makers – what are their interests?
- Following trends, be adaptive, the library as more than “place”
- Outside the door is a political environment, need to be able to navigate, understand needs and priorities of others and treat them appropriately, fairly
- RML: help librarians change their vision from tunnel to big picture, use tools, articles, to extend the message, use (institutional) Learning Management System to offer online tutorials, write articles to generate interest in taking courses – online and in person; write your own commercials
- Elevator/stairwell message

3. Technology

- Audience includes consumers, Network members, librarians
- Barriers - money, time, firewalls, filters, lack of control
- Getting around barriers: Training face to face to help overcome fears – might be more expensive, sand box/playtime, bribery/incentives
- Digital natives (younger) vs. older community—this is changing, older are getting more computer comfortable
- Open training
- Television – the ubiquitous entity – how to use for training
- One laptop per child (olpc.com) – buy one for yourself, have to buy one for a child = world peace
- Unique partnerships: online banking: train consumers
- RML needs to stay ahead, be on bleeding edge, push info, when members are ready the RML is there for them, just in time

4. Education

- One person libraries – no funds to travel – need distance education
- Hard to get groups together to educate; provide other opportunities instead of the traditional in-person classroom
- Lack of support for time away – could use web conference while at reference desk
- Barriers – firewalls
- Promoting outside your library – out there, selling, politicking
- Commercials to get them in the door – like the theaters: your RML/library is a source for ... running before conference/rounds begin.
- Get to know AV staff
- Make other people's lives easier through Camtasia, NLM tutorials
- Interpersonal skills, politics, know who controls the money
- Listen – learn what they need and provide it
- Public health – know what they are doing and partner with them
- Adobe Connect – one approach to getting information out
- Evaluation – know how to do it and use it
- Difference between marketing/promoting/public relations
- In corporations, 7% of budget is spent on development. How can we set that expectation for librarians that they can take to their institutions
- Library schools – are they teaching new students what we need them to know – evaluation, politics, salesmanship
- Cultural competency –New north Omaha branch of the Omaha Public Library – opened with IceT – lots of kids came and keep coming. New staff needs grew out of it.

Open Space

Discussion Topics:

1. Portable, durable, cheap information distribution & emergency preparedness
2. Changing the librarian model, getting health sciences librarians to become key players in their organizations
3. Culturally appropriate and culturally specific outreach
4. Retooling – preparing the librarian to advocate for a role in adding value to the clinical information system/EMR

Ideas Generated from Discussions and Actions the RML Could Take:

1. Portable, durable, cheap information distribution & emergency preparedness
 - OLPC.com (One Laptop Per Child) – durable, solar power, basic
 - Using OLPC in an emergency prep situation; how to bring librarians into the triage operation to get information to the people who need it
 - Ways to use, who would use, how to get devices to people, information to load, maintenance of current information
 - How to fund
 - Ways to reach out to communities that might need devices
 - Basic tool for quick and dirty; not for major downloads

RML

- In a collaboration, the community owns the project
- Keep devices at RML, use for various purposes;
- Available for “on call” use; allows RML to keep updated, in working order
- Public library/public health department partnerships
- Help users in deciding what to install on devices
- Lanyards, flash drives to easily plug in and upload info
- Web site to provide downloadable resources for transfer to devices

Actions:

- Create partnerships with PH, libraries (all types)
- Assessment – pilot, feasibility of content, file size, usefulness of local and offline computer access , community receptiveness, identify barriers
- Promoting existence of units, intent
- Each liaison/coordinator has one; MCRML AD sells to other ADs
- Use for outreach by RML staff – continuous use, create mini lab for little money (apply for grant funding from Homeland Security \$\$, corporate)

2. Changing the librarian model, getting health sciences librarians to become key players in their organizations

- Four areas of importance:
 - expectations of professional behavior;
 - reporting and awareness of how we add value to the system: know what's going on in our "systems"
 - politicking
 - communication
- Reality check for people going to library school—do they know what library work is?
- Influence curriculum in library schools – accounting, financial management, communication, marketing, management techniques, technology, politics, organizational behavior
- MLS is the union card; individual and professional organizations responsible for additional competencies, skills sets to meet job requirements
- Information needs: librarians know what resources are available, what we can do to help
- Desktop learning, Breezing sessions (esp. those presenting new technologies for introduction and further investigation)
- Fact sheets, tid bits, supporting current issues in the field – clinical decision support, technology, informatics – for front of brain awareness. Trends to watch and how the librarian fits in
- Should support come from MLA or RML?

RML

- Connections with library schools
- Current facts to know about – obtain RAB input
- Educating administrators

Actions

- Continue Breezing Along with the RML
- Fact sheets – current awareness – short bits, easily digestible information – recent articles
- Pipeline to the library schools
- Questionnaire – poll members about topics of interest – suggest known, open ended for additional thoughts – not looking for solutions, but for hot topics, what would you like to help your admin learn about, what intimidates you that more information could boost your confidence?

3. Culturally appropriate and culturally specific outreach

- Good neighbor, definition
 - open
 - there
 - part of community
 - honest
 - participates fully
- Librarian may work with multiple different groups – how to prepare for that work
 - ask the group about their culture
 - research the literature
- Tailor outreach to the group
 - localizing resources and information so characters, examples are local, familiar, comfortable, identifiable
- Use technology appropriately – be aware of literacy levels (Example: Spanish/German Mennonites – language differences)
- Behavior, community, other factors in CA, NY, TX, and FL (HHS Hispanic Elders Health Initiative)
- Train the trainer
- Culture is broader than ethnicity – work, religion, age etc
- Relationship building enhances communication
- Do your homework, test
- How do you evaluate your effectiveness? Being asked back? Other?

RML

- Train the trainer
- Use what we know to get background and be part of groups where testing can happen
- Assessment and evaluation
- Build relationships through the Network

Actions

- Breezing Along with the RML topic: culturally sensitivity
- Template examples for presenting a product in a culturally sensitive way – different audiences – black, Hispanic, Bosnian, GLBT
 - choose names appropriate to the culture
 - tell a story related to the community
 - terminology appropriate for the community
- Ask RAB for stories on collaboration tools (Example: the Mudflap girl used by public library in Wyoming)

4. Retooling – preparing the librarian to advocate for a role in adding value to the clinical information system/EMR

- Watch trends, stay ahead in technology
- Where can I take a class so I can be active and participate/be at the table with people making decisions
- As we cast ourselves as partners in a larger group we gain credence (RML/national)
- Place yourself in good company
- Write articles, share titles of articles read
- MLA should have AHIP credit/other credit for trend watching

RML

- Environmental scans
- Distill information
- Push out information
- Contribute to collection development
- Connect library work to trend topics
- RML website – 5 things to watch
- Panel discussions on Breezing Along with the RML
- What’s new in librarianship
- Legislative update
- Establishing informatics working group
- Guillermo Del Fiol recommended for Breezing Along with RML presentation

Actions

- Offer classes
- Encourage sharing citations to articles
- Distill class contents and share via Breezing Along with the RML
- Scholarships

Commercials

Through out the day staff delivered commercials on the following NLM resources:

- PubMed, Wiser, HazMap
- PubMed Central
- MedlinePlus
- Senior Health
- NCBI Bookshelf
- Go Local
- Daily Med
- ToxMystery

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Attachment 5:
Go Local Quarterly Report

University of Nebraska
Go Local Nebraska

Quarterly Report
July – September 2007
Submitted by Marie Reidelbach, McGoogan Library of Medicine,
University of Nebraska Medical Center, Omaha, NE

Current primary staff and their roles

- No changes to report at this time

Major changes or additions made to the database

- Concentrating on updating records and beginning to add chiropractors to the database.
- Plans are underway to send out a mass mailing to all the clinics and hospitals listed in the database to have them review their record. The mailings will begin in October.

Outreach and promotion efforts

- The Go Local Nebraska initiative now has its own email address: golocal@unmc.edu.
- The mailing sent to the clinics and hospitals will also include promotional materials about the project.
- CHIRS monthly newsletter promotes Go Local Nebraska as one year old. This newsletter is sent to Nebraska public libraries and other service providers. All newsletters are linked from the CHIRS page <http://www.unmc.edu/library/consumer/>
- On September 28, the Go Local Nebraska directory, along with other McGoogan Library of Medicine information resources, was promoted to 49 new faculty members of the University of Nebraska Medical Center. The Go Local exhibit was one of 15 exhibits during the all-day annual New Faculty Orientation. Faculty members appeared glad to learn that these resources existed for their use. One College of Nursing faculty member took extra baseball cards to share with students doing rounds in the community.
- Go Local and CHIRS were presented to the Grace/Mayer Insurance Agency on September 17, as part of their monthly Wellness programs. 15 insurance professionals learned about the services and resources available to them through Go Local Nebraska links to MedlinePlus.gov, and through the Consumer Health Information Resource Service at the McGoogan Library of Medicine.
- Information about Go Local Nebraska was distributed to attendees at the annual Community Health Fair, hosted by The Nebraska Medical Center on September 8, 2007. The Health Fair drew over 280 participants that took advantage of the cholesterol and other screening tests, then visited the 9 information booths and free breakfast in the Storz Pavilion. Health fair participants and volunteers alike were impressed with the quality and quantity of information accessible through Go Local Nebraska. Comments received are provided in the next section. Go Local Nebraska cards were also given to fellow booth representatives in the effort to get them to check out their own organization's entry in the directory, and give feedback to the Go Local team as to the correctness of their entry.
- The National Network/Libraries of Medicine Education and Nebraska Liaison shared information about GoLocal Nebraska and the CHIRS program at the following events:

Attachment 6:
Go Local Quarterly Report

University of Wyoming
Wyoming Go Local

October 15, 2007

Wyoming Quarterly Go Local Project Report

Current staff and their roles

Rex Gantenbein, Ph.D. is director of the Wyoming Center for Rural Health Research and Education, and manages the project.

Bob Wolverton is the project coordinator (and only person assigned to the project), overseeing the site maintenance.

Web Usage and Outreach

According to the very extensive NLM web usage reports, Wyoming's Go Local site had the following activity:

- July: 2130 hits from 353 visitors, who visited the site 618 times.
- August: 1382 hits from 278 visitors, who visited the site 575 times.
- September: 1373 hits from 248 visitors, who visited the site 487 times.

Outreach for this quarter has been primarily word-of-mouth. Our health librarians publicize Go Local when they speak around the state. With no funding for Go Local, we cannot expend money on paid site promotion.

Ongoing support

Bob Wolverton reviews links reported as broken by the NLM Link checker each week. We generally have just over 25 links reported as down each week. Most of the average week's links (estimated 80%), which are reported down each week are restored on Monday or Tuesday.

Links that remain broken for more than a week are disabled in the database and entered into a Microsoft® Excel® file. Bob then checks the recalcitrant links until they are restored and re-activates them in the database. As links are checked or restored, Bob audits the sites, adding them to the audited list.

This quarter we deleted two records, which are no longer in operation, added one and audited several that had been reported as broken.