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Regional Advisory Board Meeting 2010

The NN/LM MidContinental Region held its annual board meeting at the University of Kansas Medical Center hosted by the Dykes Library on October 4-5, 2010. If you asked the board members "So, what did you do at the board meeting?" You might have scratched your head and been left wondering when they responded, "Oh, we built structures using marshmallows and played Wheel of Fortune!" You might have asked yourself, "Is this how the RML spends my tax dollars?!"

As they say in Australia, "No worries, mate!" The marshmallow construction exercise illustrated the importance of communication for individuals working together. The Wheel of Fortune was a fun way to review the key, and also less well known, resources that the National Library of Medicine produces to support health care and health decision making. By the way, Steve Rausch, one of our new board members, was by far the most expert on NLM's resources. He could describe every resource we put before the board.

As always, we use this board meeting to start our planning for the next year. Our next year (2011-2012) will be the first year of the new contract and there will be changes. The new contract will feature some new project areas. Here are the project areas for 2011-2016 and the coordinators who will lead them:

- Assessment and Evaluation - Betsy Kelly
- Education - Marty Magee
- Funding Resources - Jim Honour
- Health Information Literacy - Dana Abbey and Siobhan Champ-Blackwell
- Library Advocacy - Barb Jones
- Member Services - John Bramble
- Technology - Rebecca Brown and Sharon Dennis

MCR staff developed questions on how to implement the project areas - one for each project. The room buzzed and here's the advice and observations that the board members contributed.

Technology: What type of roles can librarians play in the implementation of electronic health records (EHR)?

The librarian members of the group noted that not all institutions welcome the librarian's assistance in implementing electronic health records. However, they suggested that librarians could approach administration with the following roles:

- Assist patients to access their personal health records (PHR),
- Help implement a link between the electronic or personal health record to patient health information (the patient discharge section is one place to do this),
- Provide a training center for EHRs and PHRs.

Funding Resources: Using your imagination, what would you see in an RFP that would enthruse you so much that you'd sit down to write a proposal?

The participants in this discussion wanted an RFP that had few guidelines so that the library could ask for funding that would meet

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the library’s needs. They also wanted RFPs that would encourage collaborating on proposals. Following the award they wanted minimal reporting requirements.

Library Advocacy: The MCR will be responsible for exploring new roles for librarians and health information professionals. What emerging roles do you see and how can the MCR explore and promote these roles?

The new roles that participants of this discussion envisioned were:

- Integration of librarians in the curriculum so that learning research and information evaluation skills are woven throughout each course,
- Support of employee information needs unrelated to their work (e.g., an employee who is a student),
- Involvement in the accreditation processes of the organization (e.g., Joint Commission, Magnet Status, American Osteopathic Association Healthcare Facilities Accreditation Program),
- Involvement in treatment protocols, IRB approvals and systematic reviews.

Health Information Literacy: Understanding that health information literacy includes the acquisition, assessment, and utilization of health information leading to informed decisions, how do you see the MCR developing this project area in the next five years?

Those involved in this discussion saw the activities such as exhibiting, presentation, and training as venues for the staff to increase the awareness among health care providers that patients do not always understand what they are told. They requested that the MCR identify and develop tools to help librarians assess the appropriateness of patient health information. It would be helpful to provide a forum where members can share how they promote and support health information literacy. We were reminded that information to consumers should be produced on a variety of platforms since people have different favorite communication mediums.

Network: If all health sciences libraries are moving to 100% electronic subscriptions to biomedical journal titles that have contract terms preventing ILL services, how will anyone, who relies on these services, gain access to the articles they seek?

For the publisher, selling of ads is decreasing and this results in decreasing revenues. Hence the increase in the license cost for libraries. The publisher is happy to sell articles that the library can no longer provide. Some librarians are negotiating licenses to ensure resource sharing; others are not. The group was divided on which practice is most prevalent. The enduser, whether a researcher or the public, expects the library to make the article available. They’re not concerned about license agreements. They just want to get what they need from their library--health sciences or public library.

Education: What topics and/or venues in addition to those currently offered should the RML cover? i.e., Should online offerings be expanded? What other audiences need/want our information and how can we best reach them?

Advisory Board members in this group suggested that the RML cover e-science, best practices, and changing roles of librarians. They recommended that we increase our work with schools by increasing our training of school nurses and school librarians.

Assessment & Evaluation: Improved access to health information is an overarching goal of the NN/LM program. What changes indicate “improved access” and how should the NN/LM MCR gather and measure data that reflects change?

The group first worked on defining the terms and then recommended a new approach for evaluating how, through our training of librarians, we could collect evidence of improved access. They talked about “access” as including availability and usability and “improved” as increasing the number or making something better. To show improved access of our training sessions they recommended that we collect data from our members who use what they learned from us to teach others. They also recommended that we collect information on how our members are integrating staff into other areas of their organization such as committees, participation in accreditation, and support of the quality improvement activities.

The final advisory board meeting of the 2006-2011 contract successfully generated ideas for the RML staff to incorporate as they plan the year.

- Claire Hamasu, Associate Director



NN/LM MidContinental Regional Advisory Board May 2010- April 2011

Roxanne Bowers,
Staff Development Educator
University of Utah
Health Sciences Center
Salt Lake City, Utah

Paul Cesare, Coalition Coordinator
Mother and Child Health Coalition
Kansas City, Missouri

Bob Engeszer, Associate Director
Bernard Becker Medical Library
Washington University
St. Louis, Missouri

Ellen Graves, Reference Librarian
Exempla - St. Joseph Hospital
Denver, Colorado

Richard E Kammer,
Health Information Access Specialist
Olathe Medical Center
Olathe, Kansas

Sara Katsh, Library Manager
AORN
Denver, Colorado

Erica Lake, Medical Librarian
Intermountain Medical Center
Murray, Utah

Michlene Mankin, Medical Librarian
Campbell County Memorial Hospital
Gillette, Wyoming

Sharon Medcalf, Associate Director
Center for Biopreparedness Education
Omaha, Nebraska

Louise C. Miller,
Associate Teaching Professor
University of Missouri
Sinclair School of Nursing
Columbia, Missouri

Elizabeth Mueth, Coordinator
Missouri Baptist Medical Center
St. Louis, Missouri

Peggy Mullaly Quijas, Director
Health Sciences Library
University of Missouri-Kansas City
Kansas City, Missouri

Steve Rauch, Medical Librarian
Grand Junction Community Hospital
Grand Junction, Colorado

Paul Schoening, Director
Bernard Becker Medical Library
Washington University
St. Louis, Missouri

Nancy Woelfl, Director
McGoogan Library of Medicine
University of Nebraska
Omaha, Nebraska

Andrew Youngkin
Medical Librarian
St. George, Utah

Podcasts for Consumer Health

Are you always on the go? Now your health information can go with you - anywhere, anytime. On average, we spend over 100 hours a year commuting to and from work. Add to that time spent waiting in line, airport delays, and inclement weather and the hours of your day dwindle. Don't fret! These time vacuums provide a great opportunity to learn about health topics by listening to a podcast.

Podcasting is a method of accessing audio programs over the Internet. They can be played on your computer, or downloaded to a portable device such as an MP3 player or iPhone. Podcasts are generally quite short, the ones listed here range from 1-10 minutes. There are numerous quality podcasting sites for health information. Podcasts are a great way to conveniently catch up on current health news, get motivated in your exercise program, or learn a new recipe. Here are a few suggestions to get you started:

The Agency for Healthcare Research and Quality has a news series titled *Healthcare 411*. This weekly podcast - in English and Spanish - focuses on evidence-based information and features consumer-friendly health news. <http://healthcare411.ahrq.gov/subscribe.aspx>

Duke University Medical Center Library has compiled consumer/patient health information related podcasts - including National Public Radio's *NPR: Your Health Podcast*. <http://guides.mclibrary.duke.edu/content.php?pid=8784&sid=56867>

The National Heart Lung and Blood Institute offers podcasts on heart disease, insomnia, obesity, high blood pressure, and more! <http://www.nhlbi.nih.gov/health/dci/pods/podcasts.html>

The National Institutes of Health sponsors *NIH Radio*, a 24-hour audio news service broadcasting the latest in health research and news in English and Spanish. <http://www.nih.gov/news/radio/index.htm>

The U.S. Department of Health and Human Services *HHS HealthBeat* podcasts provides health promotion and disease prevention tips five days a week. <http://www.hhs.gov/news/healthbeat/>

The Department of Agriculture offers one minute *MyPyramid* audio podcasts to help you make better food choices throughout the day. <http://www.mypyramid.gov/audiopodcasts/index.html>

-Dana Abbey, Colorado/Consumer Health Liaison



Cool Tool - Instapaper:

Save Web Content for Reading Later on Your Computer, Smart Phone, or E-Book Reader

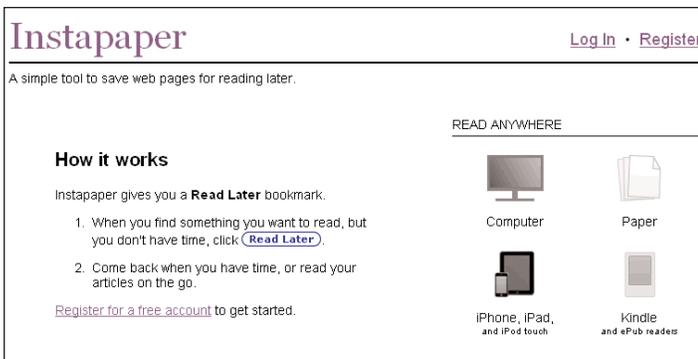
Have you ever felt overwhelmed by the number of interesting links to web articles that come your way each day? You may quickly skim the articles but do not immediately have time to read them in-depth. If you have ever wished there was an easy way to save articles for later reading, then you may want to take a look at Instapaper (<http://www.instapaper.com>).

Instapaper is a simple to use free tool for saving web content to "read later." You will also be able to read the article in a text format without the extraneous content on the page such as ads and sidebar links (Instapaper does retain the images in the body of the article).

Besides saving web content to read later in your browser, Instapaper allows you to download the content to a Kindle, Sony Reader, or other e-book reader. This is particularly useful for long articles that would be tiring to read on a computer screen; instead, you can read the saved content just as you would any other e-book.

Instapaper is simple to use. Here is a brief tutorial to help you get started.

1. Go to <http://www.instapaper.com>. You will see this screen:



2. Click on "Log In" and sign up for an account. You can use your e-mail address or any other log in you prefer.

3. Drag the "Read Later" icon to your bookmark tool bar.

4. Browse to a page you'd like to "read later." Click the Read Later bookmark in your toolbar. You should see a pop-up window indicating that the page was saved.

5. Return to the Instapaper site. Refresh the page. You should see the article listed under "Unread." Click on "Text" to read the re-formatted version of the article. In this screen shot, the MidContinental Region News has been saved under "Unread."



6. You can now read the text of the article, archive it for later (you can also organize archives in folders), or delete the article.

Download Content to An E-Book Reader

You can download saved content to an e-book reader either in Kindle or ePub format (the ePub format is compatible with the Sony Reader and many other e-book readers). Click on the appropriate link in the right hand column labeled "Download":



The Kindle and ePub links will prompt you to save your articles to your computer hard drive for later transfer to an e-book reader. Files can be transferred via USB to a Kindle with no charge. Instapaper also allows you to transfer the file wirelessly to a Kindle, although there is a small charge levied by Amazon when you transfer files wirelessly.

Other Features

Instapaper is very simple to use, but also has some other useful features:

- iPhone / iPod / iPad version: Instapaper also has an app available for the iPhone, iPod, or iPad.
- Send to e-mail: once you are logged in, Instapaper will provide you with a "secret" e-mail address where you can e-mail links.
- Google Reader: You can send items from Google Reader by highlighting the item and then clicking the Read Later bookmark. This is useful when you want to read a long article from your RSS feeds later.
- Other Features: View more features at <http://www.instapaper.com/extras>.

-Sharon Dennis, Technology Coordinator



Whooo Says:....

Dear Whooo,

I know a hospital librarian who is very enthusiastic, bright, and curious. He is always interested in furthering his practice of librarianship, and reaching out into new venues to provide information services and promote the library. Some of his ideas are great and are well received by his users. Other ideas, particularly those having to do with new technology are routinely vetoed by his IT department. His common practice is to find a work around solution. I'm worried that he is setting himself up for termination or at least censure. What do you think, Whooo?

Concerned Charlie

Dear Charlie,

Your friend sounds like a very motivated librarian! It's always heartwarming to hear about librarians who are so committed to providing the very best services possible.

I hear a couple of messages in your question. The first statement about finding ways to reach out and promote the library sounds fabulous. It is a clever librarian who sees opportunities to create a library promotion from routine events. We have one example here in our own region. Dick Kammer at Olathe Medical Center library is famous for taking routine communications and turning them into library promotions. His most recent example was prompted by a communication on the effectiveness of DOCLINE and resulted in an email sent to his clientele titled "Why can the Library do it so fast?" I'm including Dick's email here because it is such a good example of what savvy librarians are doing to promote their services.

Since the OHSI Health Sciences Library is so small, you may wonder why we are able to fill so many requests so fast. Well, on the one hand we belong to a group of all the medical libraries in the metropolitan area. We trade for free and we trade pretty fast.

On the other hand, we do this nationally and internationally through a special system called DOCLINE set up by the National Library of Medicine (NLM), which includes libraries which provide low and zero cost loans. At 12:06 pm Eastern Time yesterday, October 19, Saint Louis University posted the 30,000,000th request on that system, and at 4:06 pm Eastern Time, 4 hours later, The University of Nevada School of Medicine in Reno filled the request.

According to a report issued by the NLM today, "DOCLINE currently serves over 2,900 libraries in the United States, Canada, and other countries around the world. Currently, DOCLINE libraries report more than 1.6 million serial holdings. The current fill rate is 92.9% and the average number of libraries to which a request must route before completion is just 1.26! The average time for lenders to fill a DOCLINE request is 1.04 days."

And that's how this little Library can do so much.

The second statement I hear in your question concerns dealing with a difficult IT department and finding work-arounds. This statement concerns me. Certainly there are times when other departments are difficult to work with; they have a different set of priorities and professional knowledge. The goal for all of us must be to find a way to get to a win-win solution.

I am certainly aware of the always present pressures and time constraints involved in health care and librarianship. Librarians always have too much going on and a limited budget. The idea of a work-around that will solve the immediate problem is very attractive. However, there is danger in that attraction, and librarians must weigh the options very carefully.

As we all know, human interactions work much better when everyone is getting what they want or need from the transaction. Working around another department (we'll call them B) carries a risk that B will be offended and make your life even more difficult. If your work-around becomes public knowledge, and B is embarrassed or insulted, that will not make future interactions easy. In fact, if B has more political "power" than you, your position may be at risk.

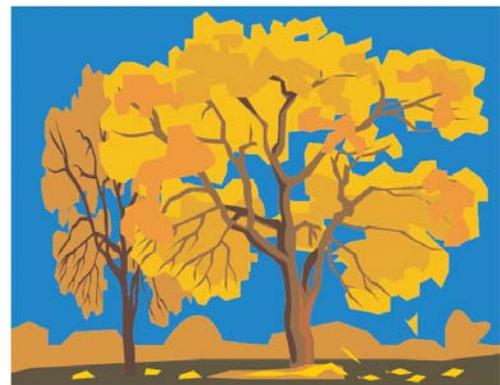
Looking at this from a systems point of view, the need for a work-around indicates a problem within the system. If a librarian needs a work-around and continues to use it without solving the underlying issue, the door is opened for system breakdowns. Health sciences librarians must always be concerned that their practice impacts health care in a positive way. If there is a system breakdown involving the provision of information for health care, the cost may be a life. That is a large price to pay.

Again, I understand how a work-around can be useful and attractive. However, I ask that you all use caution, and look at the situation from a long term perspective. Getting the underlying issue solved, though it may be difficult and time-consuming, is a much better way to approach the situation.

Thank you for your questions, Charlie. I've found this topic to be very interesting, and want to talk more about it in our future conversations.

Sincerely,

Whooo



Call for Nominations: Outstanding Public Library/Public Health Partnership Awards

Awards will be offered by the National Network of Libraries of Medicine, MidContinental Region (NN/LM MCR) to recognize public libraries that have had successful public library/public health partnerships involving health information. Recipients will receive a \$200 cash award or gift.

Nomination Requirements and Eligibility:

- Public library must be an Affiliate or Full Network Member of the NN/LM MCR. Not a member? Join today, it's FREE! <http://nnlm.gov/mcr/services/network/index.html>
- Partnership must be between a public library and a public health entity. An entity encompasses those organizations whose focus is to protect and improve the health of a community through education, promotion of healthy lifestyles, and research for disease and injury prevention.
- Nominations must demonstrate the success of the partnership.
- Self-nominations are encouraged.

Examples of outstanding partnerships can include, but are not limited to:

- Partnerships to improve access to health information for underserved/vulnerable populations.
- Partnerships to provide access to health information before/during/after a disaster or emergency. (i.e., natural disaster, pandemic, man-made disaster)
- Partnerships to benefit the overall library community's access to health information.
- Partnerships to conduct innovative health information outreach programs.

Nomination Process:

- A summary of the public library/public health partnership supporting success with anecdotes or evidence.
- Do not exceed four typed pages or 1,000 words (double-spaced; minimum 12-point type size)
- Provide complete contact information, including name, address, phone/fax number, and e-mail address of the nominee and nominator.
- Nominations should be submitted in MS Word and sent via email to Dana Abbey at dana.abbey@ucdenver.edu
- Questions? Please contact Dana Abbey toll free at 1-800-338-7657, select option 1, option 2, option 3.

Nominations must be received by: March 16, 2011
Award recipients will be notified by: April 16, 2011

This information is also available on the NN/LM MCR funding page (<http://nnlm.gov/mcr/funding/>).

-Dana Abbey, Colorado/Consumer Health Liaison

GET PLUGGED IN TO EDUCATION!



Requirements:

All online webinar classes require: 1) a computer with Internet access and speakers, and 2) a phone. Log in to the specified web site, enter your phone number when prompted, and the system calls you! What could be easier? Captioning available. Questions to: mmagee@unmc.edu

Breezing with the RML

- a monthly update from the NN/LM MidContinental staff

When: 3rd Wednesday of each month at 10-11 MT, 11-12 CT

Where: Online at: <https://webmeeting.nih.gov/mcr>

Registration: No registration.

- November 17, 2010 Barb Jones & Claire Hamasu
- No Breezing session in December

Spotlight! On National Library of Medicine Resources

- online sessions focused on NLM resources

When: 4th Wednesday of each month at 12-1MT, 1-2 CT

Where: Online at: <https://webmeeting.nih.gov/mcr>

MLA CE credit: 1 Medical Library Association Continuing Education credit is offered upon completion of class exercises and class evaluation.

Registration: Registration is encouraged, but not required at: <http://tinyurl.com/mcrclasses>

- November 10, 2010 PhPartners.gov (Public Health Partners)
- December 8, 2010 Kids' Resources

Emergency Planning - Ten Step Classes on Service Continuity

- build your plan through five sessions

When: 2nd Wednesday of each month at 12-1 MT, 1-2CT

Where: Online at: <https://webmeeting.nih.gov/mcr>

Registration: Registration is encouraged, but not required at: <http://tinyurl.com/mcrclasses>.

- January 12, 2011 - Session 4
 - o Step 7 - Identify your core print collection
 - o Step 8 - Identify your unique or highly valued resources

DOCLINE and Document Delivery

Where: Online at <https://webmeeting.nih.gov/memberservices>

MLA CE Credit: 1 Medical Library Association Continuing Education credit is offered upon completion of class exercises and class evaluation.

Registration: No registration. All class start time are 11-12 MT/ 12-1 Central Time

More about these classes at: <http://nnlm.gov/mcr/education/online.html#A3>

Beginning Decline

- November 10
- December 8

Serial Holdings

- November 11
- December 9

Routing Tables

- November 17
- December 15

Borrow and Lend

- November 18
- December 16

NetLibrary - a free online resource for e-books. More than 90 books on technical and library management topics.

See: <http://nnlm.gov/mcr/education/netlibrary.html>



Calendar of MCR events:

<http://nnlm.gov/mcr/education/calendar.html>

Wyoming Symposium

A group of thirty medical, academic, and public librarians met July 14-16 for this year's Wyoming Symposium for Health Information Professionals at the Coe Library, University of Wyoming in Laramie. This was the seventh such meeting and aptly entitled *Kaleidoscope of Health Information: Reflections from Libraries*. This year's meeting attracted participants from communities in Wyoming and from the states of Montana, Colorado, Nebraska, Kansas, and Missouri. One participant, Samantha Hewakapuge, had the distinction of traveling the farthest to the meeting. She is the National Network of Libraries of Medicine Consumer Health Coordinator at the University of Illinois, Chicago. Siobhan Champ-Blackwell, Community Outreach Liaison, when referring to the Symposium, said that "Librarians of all kinds come from all over the state and this year from across the region, to share ideas, to learn from each other, and leave refreshed and energized."

The focus this year was on health literacy. We looked at the definitions of health literacy, demographics of the health literate population, how we as librarians can assist health professionals with effectively delivering health information to patients, and how we can help consumers find reliable health information so they feel empowered to act. We also learned how we can raise awareness of the need for improved labeling on prescriptions so that medications may be taken safely, health literacy initiatives in other parts of the country, lessons learned about health literacy, along with instructional design basics, and methods of strategic collaboration for libraries with their communities. Lesley Boughton, Wyoming State Librarian, was the keynote speaker and provided us with her view of accessing health/biomedical information in Wyoming, seasoned with some examples of health information Wyoming consumers may have viewed in the 19th century.

Samanthi, the attendee from Chicago stated that "I learned about health literacy projects in other regions, and gathered some tools and resources that I can share with the librarians in my region. The best part of the symposium is the expertise of the attendees, and their willingness to open up and share their ideas and experiences."

Presentations included:

- Health Literacy: Status and Impact - Barbara Jones, Missouri/Library Advocacy Liaison, NN/M MCR
- Health Information Literacy for College Students and Young Adults: How Do We Know What They Don't Know and What Can We Do About It? Mary Henning, Librarian, Teaching & Learning Center, Albany County Campus/Laramie County Community College
- Online Medical Resources for Children, Parents, and Teachers - Tamara Meredith, Head of the Learning Resource Center at the University of Wyoming
- Emergency and Disaster Planning for Public Libraries - Dana Abbey, Colorado/Consumer Health Liaison, NN/LM MCR
- Health Literacy and Medication Safety - Rebecca Brown, Kansas/Technology Liaison, NN/LM MCR

- What Have We Learned about Health Information Literacy? Jean Shipman, Director, Spencer S. Eccles Health Sciences Library, University of Utah and NN/LM MCR
- Adequate Health Literacy: In This New World of Health Care, What Is Enough? - Linda Gore Martin, Associate Professor, Social and Administrative Pharmacy, University of Wyoming School of Pharmacy

Marty Magee, Nebraska/Education Liaison, provided the group with awesome ideas on how to design presentations for maximum effect; Sharon Dennis, NN/LM MCR's Technology Coordinator updated the assembly with current technology tools available for librarians and Siobhan Champ-Blackwell, NN/LM Community Outreach Liaison, ended the meeting with a robust interactive session on collaboration.

Ann Rutherford, Library Director at Miles Community College, Miles City, Montana and attendee, nicely summed up the experience: "There was a wealth of information and it was well worth the time!"

We'll soon be planning the next symposium, so watch for announcements early next year for registration information on the MCR's news blog and email lists in the region. To see the full program and learn more about the presentations, you may view the web page: http://nmlm.gov/mcr/states/wyoming_symposiumJuly2010.html.

-Jim Honour, Wyoming Liaison

LinkOut for Libraries

NEW animated tutorials, promotional tips, and freshen up your LinkOut button!

http://www.nlm.nih.gov/bsd/disted/linkout_for_libraries/loforlib.html



LinkOut allows libraries to link directly from PubMed citations to their library's online full-text subscriptions and local print holdings records or to their institution's OpenURL-based service (link resolver).

There is a growing list of animated tutorials called "Quick Tours" to help librarians better use the service. The average length is about 4 minutes. Topics you will find there are:

- Library Submission Utility: An Introduction
- Retrieving your password for the Library Submission Utility
- Library Submission Utility: Finding Journals
- Library Submission Utility: Entering Online Holdings Information
- Library Submission Utility: Print Holdings
- Library Submission Utility: Managing Outside Tool
- Library Submission Utility: Export Holdings
- Library Submission Utility: View Usage Statistics

New to LinkOut? Or are your LinkOut stats low? Try utilizing the promotional materials and LinkOut class presentation templates. Both are customizable and can help get the word out to library users.

Do you need a custom LinkOut button? Is your LinkOut button icon looking a little drab or out of date? Consider freshening up your look or make it match your institution's logo for instant recognition by your library users. Contact John Bramble, Network Membership Liaison and he will assist you with your button or with other LinkOut questions you have.

Outreach to Seniors

Johnny Daurio
Executive Director
Grillo Health Information Center
JohnnyDaurio@grillocenter.org

The Grillo Health Information Center Senior Center Outreach Project was supported with funds from the NN/LM MCR. The purpose of the project was to increase health information literacy, in partnership with the City of Boulder, by providing on-site health information resources to the 1200 seniors who patronize the Senior Center.

Prior to the start of the project, we implemented a needs assessment, which found that 80% of seniors said they often or sometimes need additional health information, and 78% said they highly or somewhat value having access to additional sources of reliable health information.

To meet this clearly identified need, we stationed a trained volunteer researcher at the senior center. However, in the initial stages of this project, we found that some seniors were reluctant to utilize our services. We learned that it was critical to establish trust and personal connections with this population. By doing so, we found that the Grillo Center volunteer, in a one-on-one confidential interaction, was able to provide caring support to help the senior citizen frame the health question, and understand exactly what information was needed. The more introductory activities in which we engaged to help seniors understand and trust our intentions, the more effective we were in establishing a welcoming presence at the project site and providing individual services.

From these lessons, we expanded our presence to other senior community locations, specifically three retirement communities. The new locations are a direct outgrowth of the efforts of the initial NN/LM MCR funded project. By our expanded presence, working relationships have been enhanced and have opened doors to new opportunities regarding collaboration and outreach ideas. For example, a physician and a physical therapist in one facility wish to explore creative ways to market to and attract resident seniors to seek reliable health information and to better access health care. Another facility is targeting outreach and marketing materials regarding Grillo Health Information Center services to family members of senior residents. Another opened its facilities to the public for one of the Grillo Center's health lecture series on the H1N1 virus and flu vaccinations.

Over the course of this project we have received increased requests for reliable health information research. The Grillo Center's overall caseload increased 61%. A new development for us as well, is that an unusual number of senior citizens, have applied to be Grillo Health Information Center volunteers. A few have even been those who reside in the very retirement communities where we have conducted activities and presentations. Our volunteer workforce is becoming stronger with this level of educated and motivated senior

citizens. We believe this change adds credibility in the eyes of other seniors who come to the Grillo Health Information Center for their health information needs.

We ask patrons to evaluate our effectiveness and to provide some voluntary demographic information. Respondents to demographic questions show that 75% of those we serve are senior citizens. Sixty percent rate themselves as low-income. Formal feedback showed that 97% of those who responded rated the quality of our services as excellent or good. Ninety percent stated the health information provided was very useful or useful.

The Senior Center Outreach Project has allowed us to learn new lessons as we grow and serve more and more vulnerable populations. It has also helped us focus on health literacy as a primary goal. Because we do not have hard outcome data on improvements to health literacy, we have engaged the University of Colorado on a new project to demonstrate how health literacy impacts individuals and health care costs. Next steps include developing longitudinal evaluation mechanisms to capture outcome measurements that we anticipate will demonstrate the impact on health literacy and health care costs by comparing pre and post Grillo Center's interventions.

Biomedical Publishing 101

December 7, 2010
2pm Mountain Time, 3pm Central Time
90 minutes

A free Webinar via Adobe Connect

- Created by the Chicago Collaborative, a joint partnership of librarians, publishers, and editors
- Sponsored and hosted by the MidContinental, Pacific Southwest, and South Central Regions of the National Network of Libraries of Medicine and the Four Corners Committee

This 90-minute webinar provides an opportunity to learn about the publishing cycle of biomedical journals, both in print and online. The complexities of publishing, in a world of rapidly changing delivery formats and devices will be explored, including the publishing challenges and opportunities posed by each. Presenters include John Tagler of the Association of American Publishers, Inc. and the session will be moderated by Jean Shipman, Director of the Spencer S. Eccles Health Sciences Library and the NN/LM MCR.

Participants will gain knowledge of the various roles and responsibilities of different players in the scientific publishing chain and of the international aspects of bioscience communication. All participants will have a chance to engage in discussions with the presenters. Key topics to be covered include:

- o The Current Biomedical Publishing Landscape
- o The Publishing Process
- o Publication Ethics
- o Production & Delivery
- o Practical Considerations
- o The Road Ahead

Please register at <http://tinyurl.com/mcrclasses>
by December 4, 2010 if you plan on attending.
Connection instructions will be provided upon registration.

Professional Development Award 2010

Supporting Clinical Care: An Institute in Evidence-Based Practice for Medical Librarians, Dartmouth College, Hanover, NH.

Lenora Kinzie
Director, Library Services
Stormont-Vail HealthCare
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The entire Dartmouth Institute was a learning experience from start to finish. It was my first trip to New Hampshire and Vermont...the history of the campus and city, life in a dormitory (dorm beds, rest-rooms and showers down the hall) and so many trees. After a few days I began to feel the need to be able see the horizon. Medical librarians from Dartmouth, Duke, Regina, Canada, and the University of Texas conducted the Institute, in its third year.

In our institution there is a lot of talk among physicians, nurses, rehabilitation staff, etc. regarding Evidence-Based Practice (EBP), but I am not sure, that we, truly understand what EBP is, and/or how we bring it to our practices. I want to share some of my experiences and some brief thoughts using the Steps of Evidence-Based Practice, which the instructors also used. As a relative newcomer to EBP, the first 2-3 steps are much more comfortable as I have a basic working knowledge using them, but the instructors stretched my understanding as we moved past PICO (Patient/Problem, Intervention, Comparison, Outcome) and the few standard resources I routinely use.

ASSESS the patient/problem: Librarians can encourage the sense of inquiry in all staff members.

ASK a focused question: The clinical question is the most important part of the EBP process. How will you know you have your answer if you don't know what the question is? As librarians searching for literature we already break down a question to search for the relevant information, but our users typically do not. Using PICO to help provide focus with a clinical question is beneficial. We reviewed study designs and which studies best matched the clinical question.

ACQUIRE the best evidence : This step is ours to own in my opinion. As I attend non-library related sessions such as at the Magnet Conference or AONE (American Organization of Nurse Executives) Leadership webinars, the presenters always state that this is when you need the help of your librarian...this is our opportunity. We know resources and can use or direct staff to them. depending on their question. During the Institute we were able to trial resources that were not available in our institutions such as point-of care resources (DYNAMED, MDCONSULT/FIRST CONSULT), evidence-based resources (Cochrane, Joanna Briggs, DARE), etc. New to me was the TRIP Database www.tripdatabase.com, which is a great resource. Also PubMed's Clinical Queries and the Grey Literature

are resources that I need to incorporate into my searching and teaching processes.

APPRAISE for validity/use: This is where my knowledge takes a nose dive, however my goal is to become as comfortable with critiquing as with the PICO tool. We practiced appraising the validity of articles for therapy-specific questions, systematic reviews and articles for diagnosis-related questions. We, the students, drove the instructor to the edge with our obsessive questions regarding Forest Plots...they made perfect sense that day but will need more study on my part.

APPLY to patient/practice: Again, this is an area where I have more questions than answers at this time. Is what I am sending to staff for patient care or practice changes even a valid study? Is this my decision to make or do I let them evaluate? What do I need to do in my hospital setting? What are my user's expectations?

ASSESS the patient/performance: Evaluate, assess, and reassess the impact of the evidence.

This is just the tip of the iceberg; so consider joining me for an online session on November 16th at 9 -10 am (Mountain Time) or 10 -11 am (Central Time) as I share more about EBP Resources. <https://webmeeting.nih.gov/mcr>

Be Prepared!

That was the slogan I frequently heard when I was a Boy Scout and the question that always went through my head was "for what?" The answer, of course, was "for anything and everything!" Does your library have emergency plan in place, so, in the event of a crisis or disaster, you'll be able to continue your services and feel that you'd prepared for anything and everything? If you need to start a plan or improve it, you may want to visit the NN/LM's Emergency Preparedness & Response Toolkit, (<http://nnlm.gov/ep>) for a wealth of resources and ideas! It has tutorials, sample emergency plans, and much more.

Meanwhile, the MidContinental Region's staff has been providing online training this year based on the Toolkit's 10 Step Approach to Service Continuity. Starting in June, Dan Wilson, Coordinator for the National Network/Libraries of Medicine (NN/LM) National Emergency Preparedness & Response plan and Marty Magee, kicked off the series with presentations on Steps 1 & 2. Since then, three more sessions have been presented. We have two more sessions for Steps 7-10 scheduled in January and March, 2011.

Do you want to know more? Visit the MCR web page: http://nnlm.gov/mcr/services/updates/ep_classes.html. Archived sessions may also be viewed by following the links and MLA CEs can be earned by attending the remaining sessions. You can register at: www.tinyurl.com/mcrclasses.

-Jim Honour, Wyoming Liaison

Professional Development Award

Yes, there is still funding available for YOUR professional development (travel and registration), up to \$1500 for a conference or training session to be completed before April 30, 2011. Priority is being given to requests for emergency preparedness, personal and electronic health records, health information literacy, or library advocacy and would include online training. Follow-up responsibilities include making an online presentation to share your new knowledge and/or writing an article for the Plains to Peaks Post. Further information can be found at: <http://nnlm.gov/mcr/funding/>.

Apply online at: <http://www.surveymonkey.com/s/ProfessionalDevelopmentAward>.

Congratulations to our first awardees!

-Marty Magee, Education/Nebraska Liaison

Name	Institution	Event
Lenore Kinzie	Stormont-Vail HealthCare	Supporting Clinical Care: An Institute in Evidence-Based Practice for Medical Librarians - Hanover, NH
Laura Cullerton	Platt College	Midcontinental Chapter of the Medical Library Association Annual Meeting 2010 - Wichita, KS
Lillian Hoffecker	University of Colorado Health Sciences Library	The Cochrane Colloquium 2010 - Keystone, CO
Allisa Dornink	Nebraska Methodist College	Electronic Resources and Libraries 2011 - Austin, TX
Ann Heimann	BryanLGH College of Health Sciences	Association of College and Research Libraries 2011 - Philadelphia, PA
Heather Brown	University of Nebraska Medical Center	Association of College and Research Libraries 2011 - Philadelphia, PA

The NN/LM MidContinental Region Wants You!

- Has your institution adopted an electronic health record system (EHR)?
- Is your institution in the process of implementing an EHR system?
- Does the EHR system have a 'patient view'?
- Does the EHR system link to consumer health information?

If so, we would like to hear from you. The NN/LM MCR would like to identify Network members whose hospitals link their EHR systems to consumer health information, or are planning to do so. The MCR would like to form a group to discuss issues relating to connecting EHR systems to reliable consumer health information.

If this is a project that you would like to be involved in, please reply to Rebecca Brown at rbrown3@kumc.edu with the following information:

- 1) Your Name
- 2) LIBID
- 3) Email address
- 4) Phone
- 5) EHR system
- 6) Brief description of what's happening or is being planned at your institution.



MCR's 10th Birthday Celebration at MCMLA 2010



Trivia, prizes, cupcakes, and fun for all!

NN/LM MidContinental Region Staff

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