

West Dakota Library Rx Case Overview

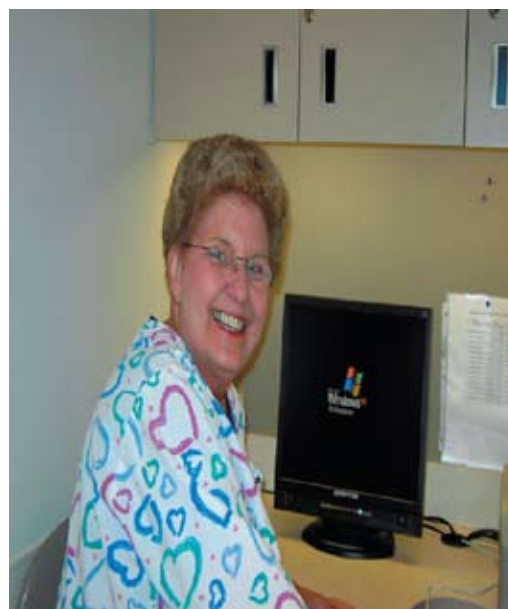


The mission of the West Dakota State Library (WDSL) is to ensure that every resident of West Dakota has equitable access to information resources to enable individuals to satisfy their own educational, working, cultural and leisure-time needs and interests, regardless of location, social or physical condition or level of intellectual achievement. Services and information resources are provided to the 700,000 residents through WDSL's statewide programs and through supplementary support to local libraries of all types in 38 counties to meet their users' needs.

West Dakota State Library (WDSL) became aware of the need for improvement in the health of WD residents through the National Center for Health Statistics Healthy People initiative (see [http://](http://www.cdc.gov/nchs/#statedata)

www.cdc.gov/nchs/#statedata for related information). Statistics for WD mortality and incidence of illness are high for many conditions that can be related to life-style and medical care choices. Six regional focus groups and a one-day meeting with key public library, education, social service, and health care professionals were held to gather information about health information patterns, library resources for providing consumer health information, and potential solutions and stumbling blocks. Among other important recommendations, focus groups pointed to adolescence as an important window of opportunity for developing lifelong health awareness.

Preventable health conditions impact the lives of WD citizens and the economy of WD as a whole. Chronic health conditions such as diabetes, hypertension, and heart disease lower the quality of life for a significant number of WD residents and result in preventable early deaths. Childhood injuries (through accident and sports) take a high toll. Other preventable health conditions reduce the ability to flourish and learn of WD children, with unwanted long-term consequences for the state as a whole. Many WD residents lack sources of reliable, readily-understood consumer health information. In the absence of such information, many WD residents turn to less reliable sources such as tradition and local wisdom.





We will apply for funding under the Library Services and Technology Act (LSTA) supporting LSTA purposes 1b), electronically link libraries to educational, social, or information services and 2), services to rural, urban, and poor residents, and people with difficulty using libraries. In order to increase the reliability of first-line consumer health information and improve individual choices for personal and family health, WDSL will provide statewide access to consumer health information through public libraries. A State Library health information Web site will be created and maintained to provide an identity for the program, to point users to high-quality free health information, and to help track database use.

Potential long-term benefits include improved mortality and health statistics throughout the state. Health information requires higher-order literacy and information literacy, and in WD neither the general public nor most local librarians have health information skills. In order to meet these challenges, WDSL will employ a full-time “traveling”

health information specialist to provide training at public libraries throughout the state to WD public librarians, high school educators (health, physical education, or media center specialists), and key social service and health care professionals.

Training will (a) orient users to the databases, (b) strengthen search and information literacy skills pertinent to the databases and to health information, and (c) strengthen professionals’ ability to transfer those skills to their audiences. The health information specialist will also provide first-line technical and reference assistance related to this project for participating librarians, and will spend one to two days on-site at each participating library on a rotation based on library and local interest.

WDSL recognizes that traditional sources of health information are powerful. In order to expand the information-seeking patterns of residents, WDSL will also develop a public information campaign to encourage the general public to use their public libraries to find health information (“Your Library Rx”). WDSL will evaluate the results of the health information initiative. Significantly changing the general health of the state’s residents is outside our mission or capacity, but we will continue to review the Center for Disease Control’s National Center for Health Statistics Healthy People initiative findings for any indications of impact at this broad level. Our key activity targets for the health information initiative include:

- 80% of WD public libraries will provide access to Library Rx by the end of the project.
- 100% of WD counties will have participating public libraries by project end.
- 100% of participating WD public libraries will have at least one staff member trained to assist users to find health information by project end.
- 100% of WD high schools will have at least one staff member trained to encourage and facilitate student use of public library health information by the end of the first year of the project.



Profiles of Stakeholders

These are fictional statements typifying attitudes and illustrating needs, not actual direct quotations.

WD State Librarian

I'm a reference librarian at the State Library. We answer telephone questions from both the public and from librarians around the state. Have you ever tried explaining how to use some of these medical databases over the phone? I had someone type in "diabetes education" and she got over 20,000 article citations. And what good did that do—many were in foreign languages and others aren't owned by anyone in our state. We need something better.

Nurse

I'm a nurse at the OneCity Downtown Clinic. Every day I go from patient to patient, and it always seems like a crisis when they get here: an asthma attack, or fainting from low blood sugar. I worry even more about the people who don't come in here—how many people have high blood pressure and don't know it? I try my best to help but not everyone has time to come in here. I wish there were something friendly for people to use online. I know many people don't have internet at home, but they take their kids to the library on the weekend and they could use the library computers then.



Librarian, Regional Library

Everybody knows Western Dakota's residents aren't as healthy as they should be, and I am sure we could help them more. The free medical databases are really hard to use—I can't believe that "Pub" in PubMed means "public!"—and I don't trust the drug company sites. I don't really have time even to research alternatives.

State Official

I'm in charge of community outreach for the state Medicaid program. We have elderly and disabled and poor people—and more and more sick people. West Dakota residents rank fourth from last in the United States on preventable health care issues. I want to try every avenue I can to get health information into residents' hands. I know we will have to have lots of different ways, because poor health is seen in many communities and types of residents.



WD Resident

My mother was just diagnosed with diabetes, and she has high blood pressure too. She's had high blood pressure a while now, but she doesn't really do anything about it—maybe she should take pills but that's

expensive. But with diabetes it seems she has to really watch or she'll end up in the hospital again. I wonder if I might get diabetes too—I'm a lot like her. And things they know about diabetes keep changing—someone told me that even if you have diabetes you don't always have to give yourself shots. I wish I could find out more. I can't afford to go to the doctor to just talk, though. I'm not sick right now.

IMLS

The Library Services and Technology Act (LSTA) makes funds available through the Institute for Museum and Library Services (IMLS) to states to award for library improvement. A state with a low population and huge area should be able to leverage internet access to help with an information campaign. It would require an ambitious program, but it's doable and measurable. Seeing results helps us bolster the case for good use of federal funds and more resources.

High School Coach

Lots of my athletes have questions—and not just about playing time or whether their sprains will heal in time for the big game. I don't have many answers. I wish there were some place I could point them to get good health information, privately. I stopped telling them to just use the Internet, because half of them don't have it, and the rest keep finding places that try to sell them steroids or speed. There should be some good information out there somewhere.



Logic Model Worksheet

I. Situation: program partners and stakeholders	
What is the program's name ?	West Dakota Library Rx West Dakota State Library Making reliable, easy-to-use health information available online through libraries, health professionals and teachers will help West Dakota residents to make healthy decisions about treatment and life style choices.
What partners are involved?	WD state library and regional libraries WD rural health provider network WD State Nurse Association WD Department of Education
Who are the program's stakeholders ? (Be sure to include yourself, your target audience, partners, funders and any other stakeholders.)	What does each stakeholder want to know?
Health Insurers/Medicaid	Will having free health information prevent unnecessary medical visits? Do we need to have our own help line if the libraries are already doing this?
Health Professionals	Will good preventive care information reduce visits to the emergency room or clinics? Will our staff be able to see more or fewer patients? Will they be able to educate patients better? How much time will my staff spend in training and in helping consumers? Should we charge for our staff time? How can we partner with people who don't charge (libraries?)
Library Directors and Boards	Will citizens use libraries more? Will more citizens become public library card holders? How much (more) time will librarians spend on (new) patron questions?
WD State Department of Health	Are West Dakota residents making wise health decisions? When WD residents have questions about their health, is information readily available?

Teachers	Where can I send my students for reliable, easy-to-find information that won't encourage inappropriate drug use or sex education?
West Dakota Residents	How can I find reliable information that's up-to-date and free? Where can I find it?
II. Program planning: connecting needs, solutions, and results	
Who are the audiences ?	Librarians, health professionals and teachers (8-12); West Dakota residents
What are the needs of the audience?	<ul style="list-style-type: none"> •Citizens of West Dakota need easy access to reliable health information and assistance accessing it to alleviate high mortality incidence of illnesses related to life-style and medical care choices. •Most WD public libraries cannot afford to provide a comprehensive, authoritative consumer health information source for personal and family health decisions

<p>What are some audience considerations?</p>	<ul style="list-style-type: none"> •Neither the general public nor most local librarians have health information skills. •Particularly in inner city and rural areas, few people have internet access at homes. Schools and libraries often provide the main network points of access to the internet. •People in most inner city areas do not patronize libraries as much as in suburban and more wealthy areas, indicating they may be unaware of the library's potential for assisting with life questions. •Librarians in WD tend to be lower-paid and place-bound, with an average age higher than in most other states (this is more acute in rural and poorer areas). Thus, the librarians' education is less likely to have included online resources. •Access to continuing professional education for librarians is restricted by tight staffing (difficult to get away), funding, and (for rural librarians) travel times. •Education for health professionals has a limited patient education component and does not cover cooperative work with libraries for patient education.
<p>What solution fulfills the needs?</p>	<ul style="list-style-type: none"> •Provide statewide access to consumer health information through public libraries. •Train librarians and other key professionals to promote and facilitate use of the resource. •Provide technical assistance for librarians. •Advertise the availability of consumer health information.

What will be the desired results ?	<ul style="list-style-type: none"> •Increase the ability of health care providers and librarians to utilize information resources to address citizen health questions. •Increase the utilization of reliable medical information by citizens. •Make the lifestyle choices of WD citizens more healthy.
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II. Logic model summary: program purpose statement

We do what?	<ul style="list-style-type: none"> •Provide statewide access to consumer health information through public libraries. •Train librarians and other key professionals to promote and facilitate use of the resource. •Provide technical assistance for librarians. •Advertise the availability of consumer health information.
For whom ?	West Dakota residents, public librarians, teachers and other key health information providers
For what outcome /benefit(s)?	<ul style="list-style-type: none"> •Librarians know how to help the public find health information they are looking for. •The public increases their use of reliable consumer health information to improve individual choices for personal and family health.

III. Program elements

Inputs	Outputs (or counts)
State- wide licenses for health databases	\$ for database licensing fees
Programmer time for web design and maintenance	Hours of web designers
Time of public librarians, across the state, for training	Hours of staff librarians
Time of health care providers, across the state, for training	Hours of health care providers

Administrative time for evaluation, management, reporting	FTE of state library staffing devoted to project
Advertising (public service and/or paid)	
Instructional designer for workshops and educational materials	
Printing hard- copy flyers and other materials	
Health information specialist; travel expenses	
Facilities for workshops; mileage/expenses for participants	
Activities	Outputs (or counts)
Choose and license consumer health databases	
Create web page	
Recruit libraries	# of counties represented by participating libraries and workshop participants
Hire traveling health information specialist	
Evaluate training and public awareness campaigns	
Services	Outputs (or counts)
Provide professional training	# of participating libraries and librarians completing training Number of health providers and teachers completing workshops
Provide public education materials	Number of site visits and technical assistance calls provided Number of logons to the health databases and associated WSDL Web site

Advertise health information availability	Numbers, types, and distribution of promotional and public education materials
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V. Outcomes

Outcome 1: Teachers and other key information providers have key skills they need to use the online health resource.				
Indicator(s)	Applied to	Data Source	Data Interval	Target
The number and percentage of teachers/ key information providers log onto the database without errors AND	All workshop participants (librarians, health/social service professionals, and high school educators)	Observation and checklist of workshop trainer Post-workshop quiz	During and at end of workshop	75%
The number and percentage of teachers/key information providers locate the early warning signs of cancer, diabetes, and heart attack within 5 minutes for each search AND	All workshop participants (librarians, health/social service professionals, and high school educators)	Observation and checklist of workshop trainer Post-workshop quiz	During and at end of workshop	75%
The number and percentage of teachers/key information providers locate a previously unfamiliar full-text article on a common health question or a personal health issue within 5 minutes AND	All workshop participants (librarians, health/social service professionals, and high school educators)	Observation and checklist of workshop trainer Post-workshop quiz	During and at end of workshop	75%

The number and percentage of participants who know at least 5 key questions to ask to verify the accuracy of health information from a list of 8 possible questions	All workshop participants (librarians, health/social service professionals, and high school educators)	Observation and checklist of workshop trainer Post-workshop quiz	During and at end of workshop	75%
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Outcome 2: WD residents use the public library databases as a preferred source of health information.

Indicator(s)	Applied to	Data Source	Data Interval	Target
The #/% of citizens who report logging into at least one database, putting in a search word or topic, and retrieving an accurate response from the database	Random sample of 1500 WD residents	Mail survey	At end of year 1, year 2 and year 4	30%

Outcome 3: WD residents report satisfaction with the health information databases.

Indicator(s)	Applied to	Data Source	Data Interval	Target
The number and percentage of WD residents who say that they trust the public library databases for health information “much” to “very much” on a six part Likert scale survey question AND	Random sample of 1500 WD residents	Mail survey	At the end of year 1, year 2 and year 4	35%

<p>The number and percentage of WD residents who say someone recommended the public library databases to them as a source of health information</p> <p>AND</p>	<p>Random sample of 1500 WD residents</p>	<p>Mail survey</p>	<p>At the end of year 1, year 2 and year 4</p>	<p>20%</p>
<p>The number and percentage of WD residents who say their family or someone not in their family has benefited from their public library databases</p>	<p>Random sample of 1500 WD residents</p>	<p>Mail survey</p>	<p>At the end of year 1, year 2 and year 4</p>	<p>15%</p>

Outcome 4: *WD residents make personal health decisions based on reliable health information.*

Indicator(s)	Applied to	Data Source	Data Interval	Target
<p>The number and percentage of WD residents who say they made a personal health decision based on information they received from their public library or from public library databases</p> <p>AND</p>	<p>Random sample of 1500 WD residents</p>	<p>Mail survey</p>	<p>At the end of year 1, year 2 and year 4</p>	<p>20%</p>

The number and percentage of WD residents who say they know someone outside their family who made a personal health decision from their public library databases	Random sample of 1500 WD residents	Mail survey	At the end of year 1, year 2 and year 4	15%
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