

Captions will appear here. DEVELOPMENT, PROGRAM PLANNING, PRESENTATIONS AND EVALUATION. ONE OF THE AREAS THAT WAS DIFFICULT, ACTUALLY, WAS MAKING ARRANGEMENTS FOR FOOD BECAUSE WE WERE PLANNING A ALL-STAFF MEETING/TRAINING SESSION AT THE FDR PRESIDENTIAL LIBRARY IN HIDE PARK AND YOU COULDN'T BRING MORE THAN A HUNDRED PEOPLE TOGETHER WITHOUT GIVING THEM SOMETHING TO EAT. IT WAS VERY TRICKY AND I REALLY FEARED THAT UNTIL THE LAST MOMENT I WAS GOING TO BE PAYING THIS BILL MYSELF, BUT WE MANAGED TO WORK IT OUT, BUT NOT WITH NLM FUNDS. THE OTHER THING THAT WAS MY RESPONSIBILITY, ESSENTIALLY, WAS TO PROVIDE THE FOLLOW-UP. AT THE SAME TIME, ON THE RIGHT-HAND SIDE OF THE SLIDE WITHOUT SUPPORT FROM THE BEGINNING BY THE COMMISSIONER OF THE HEALTH DEPARTMENT, THE ASSISTANT COMMISSIONERS AND THEIR WILLINGNESS TO REALLY ENCOURAGE FOLLOW-UP AND USE OF THE TRAINING OPPORTUNITY, I DON'T THINK WE WOULD HAVE BEEN NEARLY AS SUCCESSFUL. NOW THIS IS A HEALTH DEPARTMENT THAT IS READY TO APPLY FOR ACCREDITATION UNDER THE NEW HEALTH STANDARDS SO THAT SUCH THINGS AS THE CORE COMPETENCIES, THE ACCREDITATION STANDARDS WERE VERY IMPORTANT TO THEM AND PLAYED A BIG ROLE IN THEIR RESPONSIVENESS AND ALSO IN DEVELOPING THE CONTENT OF OUR PROGRAM. WHICH REALLY WAS A JOINT PROJECT. THEY, OF COURSE, SUBMITTED OUR MEEK ASSESSMENT TO THEIR STAFF. WE HAD A 75% PARTICIPATION RATE, AND THEN USED THOSE RESULTS WHICH THE BIOSTATISTICIAN REALLY, UM, TLOER THOUGH ROILY ANALYZED TO DEVELOP OUR TRAINING. ONE OF THE THINGS I SAID INTO THE PROGRAM, WE HAD A FULL-DAY CONFERENCE SESSION AT FDR WITH AN AFTERNOON SESSION FOR A SELECTED, INVITED GROUP OF STAFF, WAS THAT WE WOULD NOT COVER RESOURCES THEY ALREADY KNEW AND USING, BUT WOULD TRY AND IDENTIFY PUBLIC HEALTH RESOURCES THAT WOULD HELP THEM PLANNING E EVALUATING AND ASSESSING THEIR OWN PROGRAMS AGAINST BEST PRACTICE. ACTUALLY 20% OF THE PEOPLE SAID THEY WERE FAMILIAR AND IT TURNED OUT THAT THERE WERE SOME OF THE STAFF FOR WHOM REALLY IMPLEMENTING STATE REGULATIONS AND REQUIREMENTS WAS A PRIMARY RESPONSIBILITY OF THEIR WORK, AND QUITE FRANKLY THE EVIDENCE-BASED INFORMATION WAS NOT AS RELEVANT TO THEM. NEXT SLIDE PLEASE. OKAY. THIS IS AN OUTLINE OF OUR CONFERENCE TRAINING DAY AND IT WAS SIGNIFICANT THAT IT WAS REQUIRED FOR ALL THE HEALTH DEPARTMENT STAFF, AND THE OPENING PRESENTATION BY THE YOUNG VERY DYNAMIC AND VERY-WELL CONNECTED COMMISSIONER FOCUSED ON ESSENTIAL HEALTH SERVICES, ACCREDITATION, AND EVIDENCE-BASED PUBLIC HEALTH, AND QUITE [BACKGROUND NOISE] [INDISCERNIBLE] AND I BOTH HAD A ROLE IN

DEVELOPING HIS PRESENTATION AS DID HIS ADMINISTRATIVE STAFF AND IT COULD NOT HAVE BEEN MORE PERFECT. TRYING TO SET UP A FRAMEWORK WHERE PEOPLE WOULD REALLY PAY ATTENTION TO WHAT WE WERE TRYING TO DO. KATE AND I, AGAIN, WORKED TOGETHER ON HER PRESENTATION AND MY ROLE INTRODUCING BOTH THE COUNCIL, NLM, MEASURING ISP AND WHY THEY WERE THERE FOR THE GRANT. ONE OF THE THINGS WE HAD -- MISP -- TALKED ABOUT IN OUR PROPOSAL WAS DOING MORE WITH OUR APPS. IT TURNED OUT NOT TO BE APPROPRIATE IN TERMS OF THE NEED AND THE TIMING SO WE INCLUDED A LITTLE BIT OF A SLIDE SHOW WITH MOBILE APPS AND MENTIONED THEM AT THE END OF THE DAY'S PROGRAM AND GAVE THEM AN OPPORTUNITY TO COME UP, PERSONALLY. THE AFTERNOON SESSION, AGAIN, TAUGHT THE ONLINE -- WELL, THE LIVE SESSION ON STRATEGIES FOR FINDING THE EVIDENCE WITH TOPICS THAT I'D IDENTIFIED WITH THE CHAIR OF THIS AREA AND I IDENTIFIED WITH HANDOUTS AND PACKETS AND WITH THE PRESENTATION SPECIFIC RESOURCE THAT WOULD MEET THE NEEDS THAT WE IDENTIFIED. AND ONE OF THE THINGS THAT I THINK IS SIGNIFICANT IS THAT THERE SEEM TO BE IN THE PUBLIC HEALTH NURSING AREA IS GREAT CONFUSION BETWEEN BED SCAPE, MEDLINEPLUS, AND PUBMED. SO THAT I REALLY TRIED TO FOCUS ON THEIR UNDERSTANDING THE DIFFERENCES AND WHERE TO FIND E-MAIL LISTS IN PARTICULAR THAT COULD BE HELPFUL TO THEM. OUR SURVEY FOUND THAT ONLY A THIRD OF THE STAFF WERE USING E-MAIL LISTS SO THAT WE DID TRY TO IDENTIFY SPECIAL RESOURCES THAT THEY COULD USE, AND AGAIN, A MAJOR PART OF OUR PROJECT WAS FOCUSING ON HOW THE TO GET FULL TEXT BUT ALSO HOW TO GET THE ARTICLES IF THEY WERE NOT AVAILABLE FULL TEXT. NEXT PLEASE. THIS IS JUST AN OVERVIEW OF WHAT WE ACTUALLY DID IN THE GRANT AND I SHARED THIS AS PART OF THE PROGRAM. THIS WAS ONE OF THOSE EXPRESS GRANTS. WE DIDN'T ACTUALLY REALLY GET THE CONTRACT SIGNED AND EVERYTHING ELSE 'TIL SOMETIME WELL INTO DECEMBER. I STARTED WORKING WITH ONE COMMISSIONER AT THE HEALTH DEPARTMENT WHO THEN RESIGNED AND TOOK ANOTHER POSITION, SO WE HAD A LITTLE START-UP DELAY, UM, BUT, AT THE SAME TIME WE MANAGED TO ACCOMPLISH ALL OF THE THINGS THAT WE SAID WE WERE GOING TO DO, AND THE SIGNIFICANT PART OF THIS PROJECT THAT IS ONGOING IS THE DOCUMENT DELIVERY INTERLIBRARY LOAN PART. NEXT SLIDE PLEASE. OKAY. THIS WAS THE ESSENCE OF THE AFTERNOON SESSION, AND THIS WHEN WAS DEVELOPED SPECIFICALLY WITH THE ASSISTANT DIRECTOR OF THE PROGRAM WHO KNEW WHAT HER NURSES NEEDED, BUT OF COURSE SHE DIDN'T GIVE ME ANY FEEDBACK UNTIL THE FRIDAY BEFORE THE PROGRAM. NEXT. NEXT PLEASE. OKAY. AS YOU CAN SEE, WE HAD VERY POSITIVE EVALUATIONS, AND I FELT REALLY VERY GOOD THAT

66% OF THE MATERIAL WE COVERED WAS IDENTIFIED AS BEING EITHER 75% OR 100% NEW. WE HAD LOTS AND LOT OF POSITIVE COMMENT, AND A SUBSTANTIAL NUMBER SAID THEY WOULD CHANGE THEIR BEHAVIOR AS A RESULT AND SAID THEY'D DO THINGS THAT WE WANTED THEM TO DO AND THAT THEY WOULD USE RESOURCES WE HAD HIGHLIGHTED. NEXT PLEASE. OKAY. THIS JUST SHOWS YOU THE INITIAL RESPONSE RATE, AND IT WAS VERY HARD TO ADDRESS NEEDS OF PARTICULARLY WATER MANAGEMENT AND ENVIRONMENTAL CONTROL PEOPLE. NEXT. THE WORKSHOP, AGAIN, IN THE AFTERNOON, WE HAD A VERY HIGH E POSITIVE RESPONSE RATE. 95 PEOPLE SAID YES, AND WE HAD THE 22 PEOPLE WHO WERE INVITED, WE HAD 19, AND FOLLOW-UP WITH MANY OF THEM. NEXT PLEASE. OKAY. DURING THE FOLLOW-UP PERIOD WHICH WAS LESS THAN A MONTH, WE HAD TEN STAFF SESSIONS WITH EITHER ONE OR TWO PEOPLE, THREE PEOPLE, OR INDIVIDUAL, THREE EXTENSIVE PHONE CONVERSATIONS AND I DID USE THE IPAD MORE EXTENSIVELY IN DOING THIS INDIVIDUAL AND SMALL GROUP FOLLOW-UP SESSIONS. NEXT PLEASE. I THOUGHT YOU WOULD FIND IT OF INTEREST TO SEE ACTUALLY THE TITLES THAT WERE REQUESTED IN THAT THEY WERE NOT THE PUBLIC HEALTH TITLES THAT ARE FREQUENTLY SEEMS TO ME A FOCUS OF SOME PUBLIC HEALTH OUTREACH PROJECTS. ONLY ONE TITLE IN THE GRANT PERIOD WAS REALLY CONSIDERED A PUBLIC HEALTH TITLE, PER SE. NEXT PLEASE. THIS DOCUMENT DELIVERY HAS BEEN CONTINUING. YOU SEE IN THIS CASE IN THE PERIOD BETWEEN MAY FIRST AND PRESENT, ACTUALLY WE HAD THREE MORE COME IN LAST WEEK SO THAT WE REALLY HAVE HAD 31 REQUESTS SINCE THE END OF OUR GRANT, AND AGAIN, IT'S THE MEDICAL LITERATURE THAT PEOPLE SEEM TO BE NEEDING FAR MORE THAN PUBLIC HEALTH JOURNALS. WE'RE GETTING A LOT OF REQUESTS FROM THE MEDICAL EXAMINER'S OFFICE. WE'RE GETTING REQUESTS FROM HEALTH PLANNING AND EDUCATION. WE'RE GETTING OCCASIONAL REQUESTS FOR EMERGENCY AND FROM ENVIRONMENTAL DEPARTMENTS, AND IN ADDITION TO THE ARTICLE REQUESTS, WE'VE HAD CALLS FOR HELP SEARCHING PUBMED. SO I'VE BEEN ABLE TO WORK WITH PEOPLE ON THE PHONE. NEXT PLEASE. THIS IS THE ONE AREA IN WHICH OUR INITIAL PROJECTIONS DIDN'T PLAY OUT BECAUSE THE STAFF REALLY DID NOT HAVE ACCESS TO MOBILE RESOURCES, YOU TUBE, OR MANY OTHER THINGS ON THEIR NETWORK, BUT AGAIN I SUSPECT THAT THAT WILL BE CHANGING IN THE FUTURE. LET'S GO TO THE NEXT. I THINK THESE DIRECT AND INDIRECT OUTCOMES ARE REALLY IMPORTANT BECAUSE THE STAFF DO HAVE INCREASED AWARENESS OF EBM RESOURCE, NLM, AND OTHER GOVERNMENT AND PROFESSIONAL ASSOCIATION-SPONSORED RESOURCES WHICH SUPPORT WHAT THEY NEED TO BE DOING WITH BEST PRACTICE AND COMPARATIVE EFFECTIVENESS RESEARCH. THEY HAVE

ACCESS NOW TO FREE ARTICLES AND DOCUMENT DELIVERY. I'VE HAD A NUMBER OF STAFF SAY, THIS IS REALLY GOING ON? IT DIDN'T END WITH THE END OF THE GRANT? AND THEY ARE VERY PREESH TI, PEOPLE HAVE SAID, WE LOVE YOU. THE OTHER THING THAT'S HAPPENED IS THAT THERE HAVE BEEN STAFF WHO'VE REALLY ASKED FOR ADDITIONAL SEARCH ASSISTANCE AND REFERRALS INCLUDING THE COMMISSIONER WHICH HAS PLEASED ME, AND WE HAVE SEEN THAT THE STAFF WHO ALREADY HAVE SOME COMFORT WITH THE TOOLS ARE MENTORING THEIR COLLEAGUES TO EXPAND THE INFORMATION TRAINING AND USE OF RESOURCES. WE'VE HAD LOANSOME DOC SIGN UP, MY NCBI, AND THE GOOD NEWS FOR ME IS THAT IT WAS CONSIDERED SO SUCCESSFUL THAT THEY'RE REALLY VERY INTERESTED IN DOING MORE. THE 34ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN M34 ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUT34 ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTD34ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN THE FUTURE AND I'VE HAD INITIAL CONVERSATIONS WITH A COMMUNITY COLLEGE LIBRARY DIRECTOR WHO ALSO FELT THAT THEY MIGHT HAVE SOME ROLE IN ANOTHER PROJECT. BOTH THE DEPARTMENT OF HEALTH AND THE MID HUDSON LIBRARY SYSTEM ARE JOINING MAR, AND I DO THINK THAT ALL OF THE DOCUMENT DELIVERY ACTIVITY IF FITS VERY WELL INTO THE MISP GUIDELINES AND SO FAR IS VERY MANAGEABLE IN TERMS OF WHAT SOUTH EASTERN CAN HANDLE. AND WE ARE LOOKING AT POSSIBLY A FOLLOW-UP KIND OF PROJECT FOR NEXT YEAR THAT WOULD REACH ADDITIONAL REGIONAL HEALTH DEPARTMENT COLLEAGUES, AND I KNOW THAT I HAVE THE PEOPLE IN CHARGE OF THE DUTCHESS COUNTY HEALTH DEPARTMENT ON MY TEAM FOR THIS. SO THANK YOU.

>> THANK YOU SO MUCH. OUR NEXT SPEAKER THE BARBARA CIAMBOR AT ROCHESTER REGIONAL LIBRARY COUNCIL. BARBARA HAS WORKED AS A CIRCUIT LIBRARIAN AND AS A MEDICAL LIBRARIAN WITH THE COLIDA HEALTH SYSTEM IN BUFFALO, NEW YORK. IT'S ALL YOURS, BARBARA.

>> THANK YOU. I'M HAPPY TO HAVE THE OPPORTUNITY TODAY TO SPEAK TO YOU ABOUT THE CLICK ON HEALTH OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS PROJECT INCLUDING THE MOST RECENTLY-COMPLETED PROJECT, THE OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS IS RURAL AREAS WHICH WAS COMPLETED THIS PAST SPRING. NEXT SLIDE

PLEASE. CLICK ON HEALTH IS A COMMUNITY PROJECT THAT BRINGS HIGH-QUALITY HEALTH INFORMATION TO THE PEOPLE OF ROCHESTER NEW YORK. MADE AVAILABLE THROUGH THE ROCHESTER REGIONAL LIBRARY COUNCIL. IT'S A COLLABORATIVE PROJECT, COLLABORATION WITH MEDICAL, PUBLIC, AND SCHOOL LIBRARIANS IN THE ROCHESTER, NEW YORK AREA. WE LIKE TO THINK IT PROVIDES ONE-STOP-SHOPPING FOR ALL PEOPLE IN ROCHESTER AREA, AND IT'S FREE OF CHARGE. NEXT SLIDE. THIS IS OUR WEB SITE. IT IS THE CENTERPIECE SO TO SPEAK ON THE CLICK ON HEALTH PROJECT. SERVES AS A GATEWAY, PORTAL TO LINKS TO REPUTABLE LOCAL AND NATIONAL HEALTH INFORMATION RESOURCES. NEXT SLIDE PLEASE. I LIKE TO TALK ABOUT CLICK ON HEALTH IN THE COMMUNITY. A STRONG TRAINING AND AWARENESS COMPONENT HAS ALWAYS BEEN A PART OF CLICK ON HEALTH. WE'VE TRAINED LIBRARIANS, SENIORS AND SCHOOL HEALTH STAFF TO SEARCH FOR QUALITY CONSUMER HEALTH INFORMATION. IN 20089 T CLICK ON HEALTH PROJECT WAS EXPANDED TO INCLUDE OUTREACH TO GROUPS OF UNAFFILIATED -- IN H THIS CASE -- NURSE WHO IS DID NOT HAVE ACCESS TO LICENSED LIBRARY DATA BASTES THROUGH AN AFFILIATION WITH A COLLEGE OR HOSPITAL. THE PURPOSE OF THE PROJECT WHICH WAS FUNDED BY NN/LM WAS DEVELOPED AN OUTREACH PROGRAM THAT WOULD TRAIN NURSES TO USE CLICK ON HEALTH WEB SITE TO ACCESS RELIABLE INFORMATION INCLUDING FREE, FULL-TEXT CLINICAL DATABASES. WE WORK WITH SEVEN AREAS SCHOOLS AND NURSING WITH THE LIBRARIAN THERE IS AND WITH OUR PARTNER AGENCIES, WE CONDUCTED A SURVEY TO DETERMINE THE INFORMATION NEEDS OF THE RNs THAT WERE EMPLOYEES AND STUDENTS GRADUATING AT THE NURSING SCHOOLS. WE WERE ABLE TO BASED ON THE FEEDBACK WE GOT INTERESTING FEEDBACK IN REGARDS TO THE INFORMATION NEEDS OF THE NURSES, THE TYPE OF INFORMATION THEY NEEDED, HOW THEY WANTED TO RECEIVE THE INFORMATION. WE AGAIN WORKED WITH THE FACULTY, LIBRARIANS, AND OUR PARTNERS TO DEVELOP A CURRICULUM THAT COULD BE USED VIA THE CLICK ON HEALTH WEB SITE. NEXT SLIDE PLEASE. CLICK ON -- IN 2010, WE WERE ACTUALLY ABLE TO GO OUT AND PROVIDE TRAINING USING THE CLICK ON HEALTH WEB SITE TO VRN s BUT ALSO EXTENDED THE TRAINING TO INCLUDE OTHER HEALTH PROFESSIONALS; SOCIAL WORKERS, THERAPISTS MANY OTHERS. IN 2011 THE PROJECT RECEIVED FUNDING TO EXTEND TO THE RURAL COUNTIES SURROUNDING ROCHESTER AND CURRENTLY WE HAVE BEEN FUNDED IN 2013, TO WORK WITH PUBLIC HEALTH WORKFORCE IN WESTERN NEW YORK INCLUDING THE COUNTIES AROUND ROCHESTER AND IN BUFFALO. WHAT I WOULD LIKE TO DO IS TO JUST TALK A LITTLE BIT ABOUT THE OUTREACH PROJECT TO RURAL COUNTIES. THIS PROJECT AS I MENTIONED, WE WENT OUT TO LIVINGSTON, ONTARIO AND WYOMING COUNTIES AND

WORKED WITH TWO AGENCIES. THEY WERE HEADQUARTERS IN MONROE COUNTY BUT HAD QUITE A FEW SATELLITE OFFICES IN THE RURAL COUNTIES SURROUNDING ROCHESTER. WE ALSO PARTNERS THE WAYNE FINGER LAKE BOCESE TRAININGS FOR LPN AND SCHOOL OF NURSING. THE GOALS AND OBJECTIVE OF THE PROJECT, THE GOAL WAS THAT NURSES AND OTHER HEALTH PROFESSIONALS IN THESE FOUR RURAL COUNTIES ESPECIALLY THOSE THAT WERE UNAFFILIATED WITH ANY OF THE REGION'S HOSPITALS WOULD BE MADE AWARE OF AND TRAINED TO ACCESS AND USE THE FREE HEALTH INFORMATION THAT'S AVAILABLE ON THE WEB HELPING THEM PROVIDE BETTER CARE. OBJECTIVES TO GET TO THESE GOALS, WE WANTED TO INCREASE AWARENESS OF THE FREE INFORMATION THAT WAS AVAILABLE USING THE CLIN ON HEALTH WEB PORTAL. WE ALSO WANTED TO DETERMINE SPECIFIC NEEDS OF THE RURAL POPULATION AND ADJUST AND ADD TO THE RESOURCES AS NEEDED. WE WANTED TO TRANSLATE THE CURRENT TRAINING CURRICULUM THAT HAD BEEN DEVELOPED IN AN EARLIER PROJECT AND REVISE IT FOR THE NEW AUDIENCE. WE ALSO WANTED TO PROVIDE DELIVERY VIA THE GO-TO MEETING WEBINARS OFFERING TRAINING IN A VARIETY OF FORMATS WE WERE ABLE TO PROVIDE AWARENESS SESSIONS ON-SITE, HANDS-ON TRAINING AND FOUR LIVE WEBINARS. WE WERE TRAINED -- I GUESS WE TRAINED 86 ALL TOGETHER, THAT INCLUDES THE ON-SITE PARTICIPANTS AND THE FOLKS THAT PARTICIPATED IN OUR WEBINARS. IN TERMS OF EVALUATION, WELL, EACH TRAINING SESSION, PARTICIPANTS WERE PROVIDED WITH A POST SESSION EVALUATION AND THE WEBINAR PARTICIPANTS THEY WERE POLLED DURING THE COURSE OF THE WEBINAR BUT THEY ALSO HAD A FOLLOW-UP SURVEY USING SURVEY MONKEY. THE EVALUATION INCLUDED 11 QUESTIONS DESIGNED TO DETERMINE IF THE TRAINING WAS EFFECTIVE, AND A STATED GOAL FOR THE PROJECT WAS TO RAISE AWARENESS OF THE FREELY-AVAILABLE HEALTH INFORMATION. WHEN WE ASKED THE QUESTION, THE EXTENT OF NEW KNOWLEDGE THAT I GAINED FROM THIS PROGRAM WAS... 64% SAID IT WAS EXTENSIVE, THE AMOUNT OF NEW KNOWLEDGE THAT WAS GAINED. WHEN ASKED DO YOU THINK YOU WILL USE ANY OF THIS KNOWLEDGE GAIN IN SUPPORTIVE PATIENT CARE, 100% SAID YES THEY WOULD, AND ALSO 100% OF THE RESPONDENTS SAID THEY DID PLAN TO SHARE THE INFORMATION WITH COWORKERS OR STUDENTS. TOWARD THE END OF THE PROMPT, IT WAS AN EXPRESS AWARD, COVERED FIVE MONTHS FROM DECEMBER THROUGH APRIL OF THIS YEAR, WE DID TOWARD THE END AS I SAID SEND OUT A FOLLOW-UP SURVEY. WE WANTED TO SEE IF FOLKS WERE USING THE INFORMATION THAT THEY HAD LEARNED EARLIER. OF THOSE THAT RESPONDED, 85% SAID THAT THEY HAD LEARNED, THEY HAD SHARED WHAT THEY LEARNED AT THE CLICK ON HEALTH

TRAINING SESSION. SO I THINK THAT THAT'S, YOU KNOW, USEFUL IN TERMS OF TRAIN THE TRAINER KIND OF AN IDEA WHERE FOLKS WHO ATTENDED THE SESSION PASS THE INFORMATION ON TO OTHERS. OKAY. NEXT SLIDE PLEASE. OKAY. DURING THE COURSE OF THIS PROJECT, WE DID AS I MENTIONED USE THE CLICK ON HEALTH PORTAL. WE DEVELOPED THE PAGE, THE OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS PAGE, UM, INCLUDED ARE SITES SUCH AS PUBMED/MEDLINE. WE'VE ADDED TO THAT THE PUBLIC HEALTH INFORMATION, CLINICAL PRACTICE GUIDELINES AND OTHER WEB SITES, AND THEN DEPENDING ON THE AUDIENCE, WE WOULD ADJUST THE TRAINING TO HOPEFULLY RESPOND TO WHAT THEY WERE INTERESTED IN HEARING ABOUT. NEXT SLIDE PLEASE. HERE AGAIN IS A LOOK OF LOOK AT THE PAGE. IT IS FOR LOCAL HEALTH PROFESSIONALS. WE TRIED TO CUSTOMIZE THE TRAINING AND RAISE AWARENESS, HANDS-ON TRAINING IS THE MOST EFFECTIVE, AND I THINK THAT USING THE CLICK ON HEALTH WEB PAGE LENDS ITSELF TO THAT TYPE OF TRAINING. NEXT SLIDE PLEASE. WE ALSO HAVE DEVELOPED TUTORIALS FOR HEALTH PROFESSIONALS PAGE. WE INCLUDE BOTH TUTORIALS FROM THE NATIONAL LIBRARY OF MEDICINE AND SOME WE HAVE RECORDED, THEY'RE ON UH YOU TUBE. YOU CAN'T SEE ON THIS SCREEN SHOT, BUT WE DO INCLUDE HERE THE WEBINARS THAT WERE RECORDED. THE WEBINARS WHEN THAT WAS SOMETHING NEW TO THIS PARTICULAR PROJECT. WE DID RECORD FOUR WHICH BASICALLY REINFORCED WHEN WE WOULD GO OUT AND DO TRAINING IF FOLKS WERE UNABLE TO ATTEND THE TRAINING, WE WANTED TO GIVE THEM THE OPTION OF ATTENDING THE WEBINARS OR ACTUALLY VIEWING THEM AT A LATER DATE. WE HAD AS I SAID 24 PARTICIPANTS FOR THE WEBINARS AND THEY DID RESPOND TO THE POLL QUESTIONS. WE DID A FOLLOW-UP, IT WASN'T A TERRIFIC RESPONSE IN TERMS OF A FOLLOW-UP IN TERMS OF HOW THEY USED THE INFORMATION. WE WOULD LIKE TO CONTINUE TO USE WEBINARS IN OUR TRAINING. I THINK WE JUST NEED TO EVALUATE THE EFFECTIVENESS OF THIS TYPE OF TRAINING, BUT WE WILL CONTINUE TO DO THIS. OKAY. NEXT SLIDE PLEASE. WE HAVE SOME PICTURES HERE OF ME IN ACTION. WE ARE ARE TRAINING HERE A MIX OF SOCIAL WORKERS, NURSES, AND THERAPISTS. THIS PARTICULAR GROUP WAS REALLY GREAT TO WORK WITH. I WAS ABLE TO DO NOT ONLY AN AWARENESS SESSION BUT A COUPLE OF FOLLOW-UP TRAINING, HANDS-ON TRAINING. NEXT SLIDE PLEASE. HERE IS AN EXAMPLE OF AN AWARENESS SESSION. VERY OFTEN I'LL BE INVITED TO DO AN AWARENESS SESSION IN ADVANCE OF ANY KIND OF FOLLOW-UP, HANDS-ON. SOMETIMES I'LL COME OUT AND DO THE HANDS-ON TRAINING, BUT THIS IS AN EXAMPLE OF A NURSING CLINICAL MANAGEMENT TEAM. NEXT SLIDE. OKAY, MORE TRAINING HERE. NEXT SLIDE PLEASE. OKAY. IN TERMS OF SOME OF THE PROJECT OUTCOMES AND IMPACTS, I BELIEVE THAT BASED ON SOME

OF THE GOALS, OBJECTIVES THAT WERE STATED, WE HAVE SUCCESSFULLY ATTAINED THESE IN TERMS OF THE TRAINING. WE HAVE MADE THE FOLKS THAT WE WORK WITH IN THE RURAL COUNTIES UNAFFILIATED HEALTH PROFESSIONALS, AGAIN, THOSE WHO DON'T HAVE READY ACCESS TO LIBRARY COLLECTIONS AND RESOURCES HAVE MADE THEM BETTER AWARE OF AND HELPED TO TRAIN THEM TO ACCESS AND TO USE FREE RELIABLE HEALTH INFORMATION ON THE WEB. YOU SEW, SERVING THE INFORMATION NEEDS OF THIS UNDERSERVED GROUP, WE ARE INTERESTED TO CONTINUE THIS AND WE ACTUALLY ARE DOING THAT RIGHT NOW. WE ARE WORKING WITH PUBLIC HEALTH DEPARTMENTS TO USE THE CLICK ON HEALTH PROJECT TO PROVIDE INFORMATION ABOUT PUBLIC HEALTH RESOURCES. NEXT SLIDE. OKAY. LESSONS LEARNED AND CHALLENGES. THERE ARE MANY FACTORS THAT ARE BEYOND YOUR CONTROL, REALLY, THAT AFFECT THE SCHEDULING OF TRAINING SESSIONS. TIME IS THE BIGGEST ISSUE. VARYING LEVELS OF STUDENTS SEARCHING SKILLS AND WHAT THEY KNOW COMING INTO A SESSION. TECHNICAL ISSUES -- SLOW COMPUTERS, FROZEN COMMUTERS, NO WIRELESS. IT'S VERY INTERESTING WHEN YOU GO OUT AND ABOUT AND NOT SURE WHAT TO EXPECT. ALSO TOO A LOT OF ENERGY -- ALL THE OUTREACH PROJECT WHAT IS I'VE EXPERIENCED IS THAT THERE'S A LOT OF ENERGY THAT IS EXPENDED IN TERMS OF ESTABLISHING LINES OF COMMUNICATION. YOU NEED TO PERSUADE POTENTIAL PARTNERS THAT THE SERVICE YOU'RE PROVIDING IS IMPORTANT ENOUGH TO BE INCLUDED IN BUSY SCHEDULE OF HEALTH PROFESSIONALS AND THEY ARE VERY BUSY. I WOULD SAY IF ANYONE WOULD ASK ME FOR ADVICE IN TERMS OF WORKING, YOU KNOW, WITH UNAFFILIATED HEALTH PROFESSIONALS, UH, TEACH THE BASIC SEARCH SKILLS. THEIR GOAL IS NOT TO BECOME EXPERT SEARCHERS BUT THEY NEED TO UNDERSTAND THAT THEY'RE SEARCHING PUBMED. MEDLINE FOR INSTANCE THERE ARE SEVERAL WAYS TO DO A GOOD SEARCH, BUT WE HAVE EMPHASIZED HOW TO LOCATE GOOD FULL TEXT INFORMATION AND THAT'S WHAT WE HEAR FROM OUR PARTICIPANTS THAT THAT'S WHAT THEY WANT. THEY WANT TO BE ABLE TO ACCESS FREE, FULL TEXT INFORMATION RIGHT AWAY. ALSO, IT'S IMPORTANT IS THAT YOU COMMUNICATE PRIOR TO THE SESSION, YOU KNOW ABOUT THE MAKEUP OF THE GROUP YOU'RE GOING TO BE WORKING WITH, AND TRY TO EMPHASIZE WHAT'S RELEVANT TO THAT GROUP BECAUSE DIFFERENT GROUPS DEPENDING ON WHO THEY ARE, THEY MAY BE INTERESTED IN DIFFERENT TYPES OF INFORMATION. NEXT SLIDE PLEASE. OKAY, THAT IS OUR URL, YOU'RE WELCOME TO CHECK IT OUT. IF YOU HAVE ANY QUESTIONS, I'D BE HAPPY TO ADDRESS THEM AT THE END OF THE EDUCATION IS, BUT I WOULD LIKE TO DO IS TO END MY PORTION OF THE PROGRAM WITH A SUCCESS STORY THAT'S RELAID TO US BY AN

OCCUPATIONAL THERAPIST FROM ONTARIO COUNTY PARTICIPATED IN ONE OF THE ON-SITE TRAINING SESSIONS AND SHE SAID, I CANNOT THANK PEOPLE ENOUGH FOR THIS LINK AND TOOL TO SELF-EDUCATION, SELF-IMPROVEMENT, UPDATING EDUCATION, BEING ABLE TO GET INFO FIRST-HAND WITHOUT COST, TRAVEL, FEES, AND POP H-UPS AND DWERLGSS. THANK YOU FOR ASSISTANCE IN MY PRIVATE EDUCATION AS WELL AS PROFESSIONAL AWARENESS OF CHANGES IN TREATMENT, MEDICATION STANDARDS AND RECOMMENDATIONS FOR CARE. I USED TO HAVE TO CALL AND ASK SOMEONE ELSE TO HELP ME OBTAIN RELIABLE INFORMATION ON SPECIFIC DIAGNOSIS AND NOW I WILL BE ABLE TO DO THIS INDEPENDENTLY FOR MYSELF AND OTHERS. THANK YOU AGAIN. I THANK YOU FOR YOUR ATTENTION AND AS I SAID I'D BE HAPPY TO ANSWER ANY QUESTIONS AT THE END OF THE SESSION.

>> ALL RIGHT. SUPER. THANK YOU, BARBARA. OUR NEXT SPEAKER IS ACTUALLY TWO PEOPLE, BRIDGETTE IS THE PUBLIC SERVICES LIBRARY AT THE COMMON WEALTH MEDICAL COLLEGE, RECEIVED HER LIBRARY SCIENCE DEGREE FROM THE UNIVERSITY OF PITTSBURGH. PRIOR TO WORKING AT PCMC SHE WAS REFERENCE LIBRARY AT A COMMUNITY LIBRARY AND WE ALSO HAVE JOANNE WHO IS THE FOUNDING LIBRARY DIRECTOR FOR PCMC WHICH ENTERED ITS FIRST CLASS OF MEDICAL STUDENTS IN THE FALL OF 2009. PREVIOUSLY, JOANNE WAS THE FOUNDING LIBRARY DIRECTOR FOR THE NORTHERN ONTARIO SCHOOL OF MEDICINE. SHE HAS OVER 20 YEARS OF EXPERIENCE IN THE UNITED STATES AND CANADA. ALL RIGHT. BRIDGETTE.

>> HELLO, EVERYONE, CAN UH YOU HEAR ME OKAY?

>> PERFECT.

>> OKAY. THANK YOU. NEXT SLIDE, MISSY, PLEASE. IN DECEMBER 2011, WE RECEIVED OUR \$10,000 GRANT FROM NNLM MAR. I'LL EXPAND WHAT OUR PROJECT GOALS WERE. THE PRIMARY GOALS WERE TO INCREASE USAGE OF EXISTING LIBRARY RESOURCES BY OFFERING THEM IN ALTERNATIVE FORMATS. FOR EXAMPLE, THROUGH MOBILE DEVICES USING APPS. TO ENHANCE AND EXPAND ACCESS FOR REGIONAL FOLLOW UP VOLUNTEER CLINICAL FACULTY ACTING AS SITE SUPERVISORS TO OUR STUDENTS BY PROVIDING THE LATEST UP-TO-DATE QUALITY HEALTH INFORMATION IN PORTABLE AND POINT OF CARE FORMATS. TO BE ABLE TO ASSESS USEFULNESS IN PRACTICAL SETTING. ENHANCE PATIENT EDUCATION AND PARTICIPATION IN THEIR HEALTH CARE THROUGH IMPROVED UNDERSTANDING OF MEDICAL CONDITIONS, TREATMENT OPTIONS, AND ACCESS TO INFORMATION. OUR TARGET POPULATION WAS OUR MD YEAR TWO STUDENTS, THEIR PRECEPTORS AND THEIR PATIENTS. WE SELECTED MD YEAR

TWO BECAUSE OF THE TIMING WITH THEIR COMMUNITY WEEK EXPERIENCE. DURING THIS WEEK THEY SPENT TIME WITH THEIR PRECEPTORS IN CLINICAL SETTING AND THAT WOULD OPTIMIZE OPPORTUNITIES TO MEET GOALS WE HAD OUTLINED. WE WORKED WITH OUR ITS DEPARTMENT AND SELECTED THE DELL LATITUDE ST TABLET. IN DECEMBER 2011 WE SET UP A LIVE GUIDE FOR THE PROJECT PROVIDING A VIRTUAL GATHERING PLACE FOR STUDENTS TO POST ABOUT THEIR EXPERIENCES AND IT WOULD SERVE AS A GO-TO PLACE FOR INFORMATION ABOUT THE PROJECT. WE DEVELOPED THE USER PREPROJECT EVALUATION TOOL THAT WOULD BE GIVEN TO THE STUDENTS BEFORE THEY RECEIVED THEIR TABLETS. IN FEBRUARY 2012 WE SENT OUT A NOTICE VIA E-MAIL TO OUR MD YEAR TWO STUDENTS ASKING FOR VOLUNTEERS. WE PURCHASED TEN TABLETS AND RECRUITED NINE STUDENTS TO KEEP ONE TABLET FOR OUR USE. STUDENTS' RESPONSE WAS RAPID AND HAD A GROUP IN A FEW DAYS. UPON SIGNING UP, STUDENTS AGREED TO ATTEND BOTH ORIENTATION AND EXIT SESSION TO FILL OUT USER, PREPROJECT AND POST PROJECT EVALUATION, TO MAKE A MINIMUM OF THREE ONE HUNDRED-WORD POST TO THE LIVE GUIDE AND TO TAKE THE TABLET WITH THEM DURING COMMUNITY WEEK. ON FEBRUARY 7TH, 2012, STUDENTS ATTENDED MANTTORY ORIENTATION SESSION. THEY FILLED OUT THE USER PREPROJECT EVALUATION, OUTREACH ACTIVITY PARTICIPATION INFORMATION SHEET, AND WERE GIVEN THEIR TABLET. I REVIEWED THE PROJECT AGREEMENT, DEMONSTRATED LIVE GUIDE, AND ASSISTED JOSH ROSE FROM OUR ITS DEPARTMENT IN ACQUAINTING THE STUDENTS WITH THE TABLETS. ON APRIL 18TH , WE MET WITH THE STUDENTS FOR THE EXIT SESSION, THAT WAS JOANNE AND MYSELF. STUDENTS RETURN THEIR TABLETS, FILLED OUT THE USER POST EVALUATION FORM, AND WHILE EATING THE PIZZA WE PROVIDED FOR THEM, DISCUSSED THE PROJECT AND THEIR EXPERIENCES WITH THE TABLET. THEY FELT POSITIVE ABOUT THE USE OF THE TABLET BUT EXPRESSED CONCERNED ABOUT THE CHOICE OF THE DELL TABLET FOR THIS PROJECT. TO ENCOURAGE ACTIVE PARTICIPATION, A STUDENT'S NAME WAS ENTERED INTO A UH DRAWING FOR A SKY SPACE GIFT CARD EVERY TIME HE OR SHE POSTED TO THE LIVE GUIDE AND THEN HELD THE DRAWING AT THE EXIT SESSION. NEXT SLIDE PLEASE. HERE I'LL JUST QUICKLY REVIEW WITH YOU OUR GOALS AND YOU CAN SEE HOW THEY WORKED OUT FOR US BASED ON OUR EVALUATIONS. SO OUR FIRST GOAL WE FELT THAT WE DEFINITELY MET THAT ONE. YOU CAN SEE THAT THE STUDENTS DEFINITELY INCREASED THEIR USE OF LIBRARY RESOURCES WHEN THEY WERE USING THE TABLETS. NEXT SLIDE PLEASE. GOAL TWO THERE WAS ALSO AN INCREASE. WE WERE HOPING THAT THE PRECEPTORS THEMSELVES THROUGH THE STUDENTS WOULD INCREASE THEIR USE OF MOBILE DEVICES.

NEXT SLIDE PLEASE. THIS WAS SORT OF A MORE QUALITATIVE TYPE QUESTION, SO WE ACTUALLY WEREN'T ABLE CHART THIS. THERE WERE SOME MIXED FEELINGS ABOUT THE USEFULNESS AND I'LL DISCUSS THAT IN JUST A MOMENT. NEXT SLIDE PLEASE. GOAL FOUR YOU CAN SEE ACTUALLY IT, UM, THE POTENTIAL ACTUALLY WENT DOWN. STUDENTS THOUGHT THERE WAS A LOT OF POTENTIAL FOR TABLET COMPUTERS TO ENHANCE PATIENT EDUCATION, HOWEVER WHEN THEY GOT OUT THERE VARIOUS FACTORS ACTUALLY DID NOT ALLOW THEM TO MEET OR TO INCREASE EXPECTATION FOR THAT GOAL. AND OUR LESSONS LEARNED. WHEN WE DEVELOPED THIS PROJECT, WE CONSIDERED THE FACT THAT SOME OF THE CLINICAL SITES THAT STUDENTS WOULD BE VISITING DURING THEIR COMMUNITY WEEK WOULD NOT HAVE ACCESS TO THE INTERNET THUS RESTRICTING ABILITY TO ACCESS THE LIBRARY POINT OF CARE AND CLINICAL RESOURCES. TO REMEDIATE THIS POBL POBLT WE PURCHASED A SUITE OF SKY SCAPE APPS LOADED ON TO EACH TABLET AND DID NOT REQUIRE THE INTERNET FOR ACCESS. THE SUITE OF APPS PROVIDED EXCELLENT INFORMATION FOR THE CLINICAL SETTING, BUT STUDENTS REPORTED THAT THEY WERE SLOW TO LOAD AND THIS WAS A DEFINITE DRAWBACK IN THE FAST-BASED CLINICAL SETTING. THE DELL TABLETS FEATURE A FULL WINDOWS 2000 WINDOWS OPERATING SYSTEM AND STUDENTS OBSERVED THAT AN IOS WOULD HAVE ALOUD FOR MORE PROCESSING SPEED. THERE WAS DIFFICULTY WITH A STATUS AND FOUND THAT USING THE TABLET TO RECORD PATIENT INFORMATION WAS ALMOST IMPOSSIBLE. THEY NOTED PEN AND PAPER WAS MORE EFFICIENT. ONE OF THE STUDENTS POSTED ON THE LIVE GUIDE THAT KEYBOARDS WOULD BE USEFUL FOR RAPID DATA ENTRY SO WE ORDERED THEM BUT WE DIDN'T GET THEM UNTIL AFTER COMMUNITY WEEK AND THE STUDENTS WEREN'T ABLE TO USE THEM AS PLANNED. IF TIME HAD PERMITTED CONDUCTING STUDENT FOCUS GROUPS TO DISCUSS ACTUAL USE OF TABLETS IN THE FIELD PROBABLY WOULD HAVE BEEN BENEFICIAL IN REFINING OUR PROJECT GOALS. WE ALSO COULD HAVE INVESTIGATED MORE FULLY THE PROS AND CONS OF USING iPADS VERSUS THE DELL TABLETS. P STUDENTS SAID PEN AND PAPER STILL REMAIN THE QUICKEST WAY TO RECORD PATIENT CONVERSATIONS IN THEIR OPINION. DELL TABLET ALLOWS FOR WRITE BUT THE AUTO CORRECT DOES NOT RECOGNIZE THE MEDICAL TERMS. TYPING ON A KEYBOARD IS AN OPTION BUT THEN THEY ALSO NOTED THAT THEY WERE OFTEN STANDING IN THE EXAMINATION ROOM AND THE PATIENT AND PHYSICIAN WERE SITTING, SO THEY WEREN'T ABLE TO REALLY ENTER INFORMATION VERY EASILY EVEN IF THEY'D HAD A KEYBOARD THAT WOULD HAVE BEEN SOMETHING ELSE THEY'D HAVE TO CARRY AROUND AND SET SOMEWHERE. ONE STUDENT SAID VOICE DICTATION WOULD HAVE BEEN EXCELLENT FOR SOMETHING LIKE THAT. IT

WAS INTERESTING TO READ OUR STUDENTS' POST AND LEARN ABOUT HOW THEY'RE USING THE TABLET. ONE STUDENT MADE P AN IMPORTANT POINT THAT TRYING TO LEARN AND INTEGRATE A NEW DEVICE IN A CLINICAL ROUTINE THAT IS ALSO VERY UNFAMILIAR TO THEM WAS A CHALLENGE. AT THE EXIT SESSION, STUDENTS OBSERVED THAT THIS TYPE OF PROMPT WOULD BE VERY APPROPRIATE FOR THIRD-YEAR STUDENT WHO IS SPEND MUCH OF THEIR TIME IN CLINICAL SETTING AND HAVE A HIGHER LEVEL OF COMFORT IN SUCH SETTINGS AS COMPARED WITH SECOND-YEAR STUDENTS. THE THIS OF COURSE UNDERSCORES THE IMPORTANCE OF UNDERSTANDING THE HABITS AND PREFERENCES OF OUR USERS WHEN DEVELOPING PROJECTS LIKE THIS. THE STUDENTS PROVIDED VALUABLE FE FEEDBACK ABOUT THEIR NEEDS BOTH IN AND OUT OF THE CLASSROOM AND FOR THE CLINICAL COMPONENT OF THEIR EDUCATION. EXHUMELATIVELY WE CONSIDER THIS TO BE A SUCCESSFUL OUTCOME OF THE PROJECT. OUR PRIMARY FUNCTION IS TO SUPPORT THE EDUCATIONAL NEEDS OF OUR STUDENTS AND OUR PROJECT PROVIDED US WITH AN OPPORTUNITY TO FURTHER PURSUE OUR MISSION. COMPARISON -- I'M SORRY, NEXT SLIDE. THESE ARE A COUPLE OF PICTURES. THE TOP ONE IS JOANNE AND MYSELF WITH ST STUDENTS AT THE EXIT SESSION TARNGSD BOTTOM ONE IS JOANNE AND MYSELF PRESENTING A POSTER PRESENTATION ABOUT THE PROJECT AT THE CANADIAN HEALTH LIBRARY ASSOCIATION CONFERENCE IN HAMILTON THIS SUMMER. NEXT SLIDE PLEASE. AND THIS IS MY LAST SLIDE. COMPARISON BETWEEN STUDENT RESPONSES IN THE USER PREAND POST EVALUATION FORMS INDICATE THAT THESE TABLETS WILL BE MOST USEFUL FOR THEIR MEDICAL EDUCATION RATHER THAN FOR CLINICAL WORK. THE LIBRARY WILL RETAIN THE TABLETS FOR CHECKOUT TO STUDENT WHO IS WANT TO USE A DEVICE THAT IS SMALLER THAN A LAPTOP BUT PROVIDES A LARGER READING AREA THAN A PHONE. WE EXPECT THAT STUDENTS MIGHT CHECK THEM OUT TO USE FOR USE IN SMALL GROUP AND THEIR CLASSES TO ACCESS LIBRARY DATABASES AND eBOOKS AND FOR STUDYING WHILE TRAVELING. THEY PROVIDED POSITIVE FEEDBACK FOR THESE TYPE OF USES DURING THE PROJECT. WE ARE ALSO CONSIDERING WAYS THAT FACULTY ADMINISTRATION AND STAFF CAN USE THE TABLETS. SO FAR, OUR STUDENT AFFAIRS OFFICE HAS USED THEM FOR PROCESSING PAPERWORK. FACULTY USED THEM WHEN THEY LEFT LAPTOPS AT HOME AND LIBRARY STAFF USED THEM AT CONFERENCES AND NOTE TAKING AND OUR MARKETING DEPARTMENT BORROWED ONE FOR A PHOTO OP THIS MORNING. THANK YOU FOR ALLOWING US TO DISCUSS OUR PROJECT WITH YOU.

>> THANK YOU SO MUCH. AND OUR FOURTH SPEAKERS ARE JULIA SOLLENBERGER DIRECTOR OF MEDICAL CENTER AT UNIVERSITY OF ROCHESTER MEDICAL CENTER. OVER 30 YEARS OF EXPERIENCE IN HEALTH

SCIENCES LIBRARIANSHIP BEGINNING HER CAREER AT THE NATIONAL LIBRARY OF MEDICINE. IN HER CURRENT POSITION, JULIA IS NOT ONLY RESPONSIBLE FOR LIBRARY SERVICES AND RESOURCE BUT ALSO FOR ONLINE LEARNING FOR THE ENTIRE MEDICAL CENTER AS WELL AS ALL STUDENTS COMPUTING SUPPORT FOR THE SCHOOL OF MEDICINE. WE ALSO HAVE STEVE CLARY HEAD OF INFORMATION SYSTEMS AND APPLICATIONS FROM MEDICAL CENTER LIBRARIES AND TECHNOLOGY AT THE UNIVERSITY OF ROCHESTER MEDICAL CENTER.

>> THANK YOU VERY MUCH. DO WE HAVE OUR SLIDES, YES. WER HAPPY TO BE DESCRIBING OUR iPad PROJECT TO ALL OF YOU TODAY AND WE DO THANK THE MIDDLE ATLANTIC NETWORK OFFICE FOR GIVING US THIS AWARD. IT HAS TRULY MADE A BIG DIFFERENCE IN OUR LIBRARY. NEXT SLIDE. THE OVERALL GOAL OF OUR PROJECT WAS FOR THE STAFF OF THE LIBRARY TO BECOME EXPERTS IN THE USE OF iPADS IN THE CURRICULUM BUT ALSO TO BE CONSIDERED EXPERTS BY THE STUDENTS AND FACULTY AND ADMINISTRATORS IN THE SCHOOL OF MEDICINE AND ALSO IN THE MEDICAL CENTER IN GENERAL. OUR MEDICAL SCHOOL HAD ALREADY DECIDED TO PROVIDE iPADS TO ALL FIRST-YEAR MED STUDENTS IN A PILOT MODE IN THE SPRING OF 2012. FOR MANY YEARS, THE LIBRARY HAS BEEN THE PROVIDER OF COMPUTER SUPPORT TO THE MED STUDENTS AND WE ALSO HAVE RESPONSIBILITY FOR THE MED CENTER'S ONLINE LEARNING PROGRAMS AS MISSY MENTIONED, SO WE NEEDED TO STEP UP AND LEAD THIS iPad INITIATIVE, BUT WE DIDN'T NECESSARILY ALL HAVE THE SKILLS TO DO THAT. SO THE TECHNOLOGY AWARD. THE FIRST OBJECTIVE WAS FOR THE LIBRARY STAFF TO GAIN KNOWLEDGE AND SKILLS -- NEW SLIDE, I'M SORRY. TO GAIN THE KNOWLEDGE AND SKILLS, ENOUGH TO FEEL COMPETENT IN SUPPORTING THE MEDICAL STUDENTS AND INSTRUCTORS. NEXT SLIDE. SOME OF US HAD ALREADY HAD iPADS THAT WERE PURCHASED BY THE LIBRARY, BUT WE BOUGHT AN ADDITIONAL 15 PLUS KEYBOARDS AND CASES WITH NN/LM WUND FUNDS. A STEERING TEAM DEVELOPED CURRICULUM AND SERVED AS INSTRUCTORS. DURING JANUARY AND FEBRUARY, WE OFFERED SIX, TWO-HOUR SESSIONS TO 20 LIBRARY STAFF MEMBERS -- LIBRARIANS, IT STAFF, AND eLEARNING STAFF. NOT COUNTING CURRICULUM DEVELOPMENT, PREP WORK, OR HOMEWORK, WE PUT 360 PERSON HOURS INTO THE FORMAL AND ALSO MANDATORY TRAINING. SO IN ADDITION TO THE INS AND OUTS OF USE THE iPad, ITSELF, WE EMPHASIZED CONNECTIONS TO RESOURCES; E-MAIL, VPN, BLACKBOARD MOBILE T MINOR SITE, AND ALL OF OUR DIGITAL INFORMATION RESOURCES. REGARDING TEXTBOOKS, THE MEDICAL SCHOOL WAS NOT PROVIDING THE FUNDS TO BUY TEXTBOOKS AND LOAD THEM ON THE iPADS AHEAD OF TIME, BUT WE DID LEARN ABOUT THE VARIOUS eBook PLATFORMS

THAT PROVIDE MEDICAL TEXTBOOKS AND THEY WERE FAMILIAR ENOUGH WITH THEM TO HELP STUDENTS DETERMINE WHICH THEY MIGHT WANT TO USE. WE PROVIDED A LIST OF WHERE EACH OF THEIR REQUIRED OR RECOMMENDED TEXTBOOKS WERE AVAILABLE AND THEN LET THE STUDENTS DECIDE ABOUT BUYING THEM OR NOT. SO I'M GOING THE TURN IT OVER NOW TO STEVE.

>> OKAY. NEXT SLIDE. NEXT SLIDE PLEASE. SO THE OTHER ACTIVITIES INCLUDED SETTING UP AN INTERNAL CLOUD SERVER SIMILAR TO WHAT YOU MIGHT GET FROM DROPBOX WHERE WE CAN FACILITATE THE UPLOADING, DOWNLOADS AND COLLABORATION OF FILES FROM THE iPad. YOU MAY KNOW THAT NATIVE FILE MANAGEMENT WITH THE iPad IS SOMEWHAT DIFFICULT SO THIS CLOUD SERVER NEGATES THAT PROBLEM. WE ALSO SET UP A WEB PAGE IS iPad SUPPORT AND WE AGGREGATED A BUNCH OF KNOWLEDGE RESOURCES, iPad TRAINING AND TUTORIAL INFORMATION AND LISTED ALL THE SUPPORT CHANNELS FOR STUDENTS. FOR iPad DISTRIBUTION AND TRAINING FOR THE MEDICAL STUDENTS, WE FOUND AN HOUR-AND-A-HALF INTO OUR SCHEDULE WHERE WE BROKE THEM UP INTO THEIR PERSONAL GROUPS AND PAIRED THEM WITH A TECHNOLOGY PERSON AND WALKED THEM THROUGH EVERYTHING FROM OPENING THE SHRINK WRAP, GETTING APPLE ID s, GETTING ON THE NETWORK AND SETTING UP E-MAIL. NEXT SLIDE PLEASE. SO IN OBJECTIVE TWO, eLEARNING AND IT STAFF DEVELOPED A PLAN TO CONVERT EXISTING LOCALLY-CREATED INTERACTIVE LEARNING MODULES INTO IOS-ENABLED INTERACTIVE CONTENT. NEXT SLIDE. SO THE ACTIVITIES FOR OBJECTIVE TWO INCLUDING TAKING PREEXISTING MATERIALS IN POWER POINT AND OTHER FORMATS AND CONVERTING THEM INTO AUDIO AND VIDEO FILES FOR DELIVERY ON THE iPad IN ORDER TO SAVE LECTURE TIME. WE ALSO STANDARDIZED THE COURSE CONTENT, THE DIGITAL COURSE CONTENT AND APPROPRIATELY SIZED AND FORMATTED THE CONTENT SO THAT IT COULD BE ON THE iPad VIA OUR LEARNING SYSTEM. WE TOOK ONE EDUCATIONAL MODULE AND CONVERTED IT INTO AN INTERACTIVE MAP. WE HAD SOFTWARE TO INSTALL ON A MAC OR PC THAT WE CONVERTED INTO AN IOS PLATFORM APP. NEXT SLIDE. IN OBJECTIVE THREE, WE WANTED TO CREATE A PORTAL WHERE WE COULD OFFER A COLLECTION OF LIBRARY STAFF-REVIEWED APPS FOR USE FOR STUDENTS AND FACULTY. NEXT SLIDE. HERE YOU'RE SEEING THE FRONT PAGE OF OUR IURMC APPS WEB SITE WHERE YOU CAN FIND OVER FIVE DOZEN APPS REVIEWED BY LIBRARY STAFF. WE ALSO ADDED THE ABILITY TO ALLOW USERS TO LEAVE THEIR OWN FEEDBACK AND YOU CAN ALSO REQUEST AN APP TO BE REVIEWED BY LIBRARY STAFF FROM THIS PAGE. NEXT SLIDE. SO IN OUR LESSONS LEARNED, YOU CAN SEE BY THE QUESTION THAT WE ASKED IN iPad ASSESSMENT, I AM VERY FAMILIAR WITH THE iPad THAT STAFF

THOUGHT THEY KNEW MORE THAN THEY DID, AND THAT IN THE END IT CHANGED THEIR OWN PERCEPTION OF WHAT THEY THOUGHT THEY REALLY KNEW AND MANY STAFF ACTUALLY SHARED WITH US THAT THEY HAD WISHED THEY HAD ANSWERED THIS QUESTION DIFFERENTLY FROM THE BEGINNING. NEXT SLIDE PLEASE. AND AS YOU CAN SEE BY OUR POST ASSESSMENT SCORES, WE HAD A SIGNIFICANT INCREASE IN OUR iPad SKILLS. NEXT SLIDE PLEASE. THIS IS IMPORTANT. WE FOUND THAT iPADS ARE VERY PERSONAL DEVICES AND IN FACT A LOT OF OUR CLASSROOM TRAINING DETERIORATED INTO MORE OF A ONE-ON-ONE SESSION WITH PEOPLE BECAUSE THEY ALL HAD THEIR OWN INDIVIDUAL NEEDS AND QUESTIONS. WE ALSO FOUND THAT YOU CAN'T REALLY GIVE SOMEBODY AN iPad FOR THE DAY OR LEND THEM ONE AND EXPECT THAT THEY'LL BE SUCCESSFUL. IF THEY DON'T ESSENTIALLY OWN IT, THEY'RE NOT GOING TO INTEGRATE THIS DEVICE INTO THEIR LIVES SUCH AS CONNECTION TO E-MAIL AND SOCIAL MEDIA AND SO ON. NEXT SLIDE PLEASE. SO TO TALK A BIT ABOUT OUR OUTCOMES AND UPDATES AND WHERE WE ARE NOW WITH RESPECT TO TECHNOLOGY, THAT CLOUD STORAGE SERVICE WE SET UP INTERNALLY DIDN'T WORK WELL SO WE'RE EVALUATING OTHER OPTIONS EXTERNALLY LIKE BOX.COM AND TRYING TO DECIDE IF WE CAN USE THIS SERVICE AND STILL MEET THE SECURITY NEEDS THAT WE HAVE IN OUR HEALTH ARENA. WE ALSO HAD OPENED -- HOPED THE STUDENTS WOULD BE ABLE TO USE THEIR iPADS AND DO WIRELESS PROJECTIONS FROM THEIR SMALL CLASSROOMS AND WE WERE COUNTING ON APPLE TV TECHNOLOGY TO HELP US WITH THIS, AND ALTHOUGH IT WORKS GREAT AT HOME, IT DIDN'T WORK WELL IN THE ENTERPRISE. SO WE'RE LOOKING FOR A SOLUTION FOR THAT AS WELL. I'LL TURN IT OVER TO JULIE.

>> OKAY. ANOTHER VERY POSITIVE OUTCOME FOR US WAS THAT THE USE OF THIS TOOL THE iPad, REALLY CHANGED THE MEDICAL STUDENTS' THINKING ABOUT USING TECHNOLOGY IN THE CURRICULUM. THEY'RE NOW REALIZING THAT TECHNOLOGY'S IMPORTANT AND THEY'RE BEGINNING TO INVEST IN ITS DEVELOPMENT AND ITS USE WITHIN AND OUTSIDE THE CLASSROOM. A BRAND NEW POSITION AND INSTRUCTIONAL SUPPORT PERSON FOR THE SCHOOL OF MEDICINE WAS APPROVED AND FUNDED WITHIN THE eLEARNING GROUP OF THE LIBRARY. IT TOOK US SEVERAL MONTHS BUT WE FINALLY HIRED SOMEONE WHO WILL START WORK WITH US NEXT WEEK, IN FACT, WORKING JUST WITH THE SCHOOL OF MEDICINE FACULTY TO AUGMENT TRADITIONAL FACE-TO-FACE COURSES WITH INTERACTIVE MULTI MEDIA CONTENT AND THEN DELIVER THAT IN A DIGITAL MOBILE ENVIRONMENT. ANOTHER OUTCOME OF HAVING iPADS IS THAT THEY NOW ALLOW THE MINOR LIBRARIANS TO HAVE FUNCTIONAL KIND OF ON-THE-GO ACCESS TO RESOURCES AND TOOLS. THIS SUPPORTS THE LIBRARIANS LIAISON WORK WITH

FACULTY STAFF AND STUDENTS IN ALL THE DEPARTMENTS OF THE MED CENTER AS WELL AS WITH PATIENTS IN OUR INFORMATION PRESCRIPTION PROGRAM. AND FINALLY, THE MOST SIGNIFICANT OUTCOME IS THAT THIS PROJECT SHOWCASED THE LIBRARY'S TECHNOLOGY EXPERTISE AND OUR COLLABORATIVE APPROACH IN WORKING WITH SO MANY DIFFERENT CURRICULUM AND TECHNOLOGY-RELATED GROUPS AND INDIVIDUALS IN THE MED CENTER. IT REALLY HELPED US TO ACHIEVE A WHOLE NEW LEVEL OF

>> THIS MEETING IS NOW BEING RECORDED.

>> ALL RIGHT. ONCE AGAIN I'D LIKE TO WELCOME EVERYONE TO OUR SESSION TODAY AND JUST LIKE A MONTH AGO WE HAVE INVITED FOUR DIFFERENT INSTITUTIONS WHO HAVE RECEIVED MAR FUNDING TO COME AND SHARE WITH US TODAY WHAT THEY'VE DONE WITH THEIR FUNDING. I FIND THIS FASCINATING. WE'RE JUST GOING TO DO THIS STRAIGHT ALPHABETICAL BY THE INDIVIDUALS. THE FIRST ONE I'M GOING TO INTRODUCE -- ONE SECOND HERE -- THE FIRST ONE IS PA TRI YEAH CARROLL-MATHES FROM SOUTH EASTERN NEW YORK LIBRARY RESOURCES COUNCIL. -- INCLUDING A SABBATICAL AT THE -- AT ESTER SHE INTRODUCED INTERNET AND WEB IN EARLY DAYS AS WELL AS CREATING COURSES FOR CLASSES. AT SENYLRC SHE WORKS FOR A LICENSES PROGRAM THAT INCLUDES WEB SITE AND CATALOG MANAGEMENT AND HOSTING. PATRICIA, IT'S ALL YOURS.

>> FIRST OF ALL I JUST WANT TO SAY THAT WHEN I DEVELOPED THIS GRANT, I REALLY DIDN'T KNOW WHAT I WAS GETTING INTO. AND ESSENTIALLY I LEARNED A GREAT DEAL ABOUT PUBLIC HEALTH AND HOW PUBLIC HEALTH AND PARTICULARLY IN NEW YORK STATE DEPARTMENT ACTIVITIES ARE FAR DIFFERENT FROM OTHER ORGANIZATIONS WHICH I'VE HAD EXPERIENCE. ONE OF THE THINGS I TRIED TO STRESS IN WORKING WITH THE HEALTH DEPARTMENT WAS TO, OF COURSE, MAKE THEM ALL MORE AWARE OF NOT ONLY THE MIDDLE ATLANTIC REGION WHICH FORTUNATELY HAS A NICE SLOGAN OF ADVANCING THE PROGRESS OF MEDICINE, IMPROVING THE PUBLIC HEALTH THROUGH ACCESS TO HEALTH INFORMATION; AND I USED THAT CERTAINLY IN MY TRAINING, BUT I WAS AMAZED WHEN I FOUND HOW LITTLE AWARENESS THERE WAS OF NLM AND ITS ROLE IN PROVIDING QUALITY INFORMATION. ALL THE PEOPLE I WORKED WITH RELIED ON THE CDC BUT DIDN'T SEEM TO BE AWARE OF NLM RESOURCES. SO MISSY, PLEASE NEXT. WE ACTUALLY USED THIS AS PART OF OUR MISP OUTREACH. FOR THOSE OF YOU NOT IN NEW YORK STATE, THIS IS A STATE-FUNDED PROGRAM THAT GOES TO THE LIBRARY COUNCIL TO SUPPORT MEDICAL INFORMATION. IT PRIMARILY SUPPORTS CLINICAL INFORMATION FOR ACUTE CARE HOSPITALS, BUT IS REALLY DESIGNED TO MAKE MEDICAL INFORMATION MORE

AVAILABLE TO ALL TYPES OF LIBRARIES AND TO ALL RESIDENCE OF NEW YORK STATE. SO AT MY COUNCIL WE FELT THIS WAS AN OBVIOUS LINK TO THE MISP PROGRAM. NEXT. OKAY. ACTUALLY, THERE WERE TWO ONGOING ASPECTS TO THE PARTNERSHIP IN THAT THE COUNCIL TOOK CARE OF SOME PARTS OF OUR ACTIVITIES AND THE COUNTY HEALTH DEPARTMENT TOOK CARE OF OTHERS, AND I CHOSE DUTCH DUTCH DUTCH ES NOT JUST BECAUSE I LIVE THERE BUT LOOKING AROUND THEY SEEM TO BE NOT JUST THE MOST PRESENT ON THE WEB BUT THEY SEEM TO PRESENT THEMSELVES WITH CLEARLY-DEFINED GOALS AND I FOUND THEY WERE MUCH MORE LIKELY PARTNER FOR AN EVIDENCE-BASED PUBLIC HEALTH PROJECT. CAN YOU HEAR ME WELL?

>> WE HEAR YOU FINE.

>> OKAY. GREAT. SO I WANT TO DO A SHOUT OUT TO ALL THE LIBRARIANS WHO HELPED ME IN THIS PROJECT.

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>> WE HEAR YOU FINE.

>> OKAY. GREAT. SO I WANT TO DO A SHOUT OUT TO ALL THE LIBRARIANS WHO HELPED ME IN THIS PROJECT. YOU SEE ON THE SLIDE THAT I MENTION THE ROCHESTER REGIONAL LIBRARY COUNCIL, AND BARBARA WHO'S ON NEXT WAS VERY HELPFUL IN PROVIDING INFORMATION TO ME -- SURVEYS THEY HAD DONE, INFORMATION ABOUT THEIR PROJECT. I MADE EXTENSIVE USE OF EXISTING NLM AND MLA ONLINE COURSES AND I ALSO HAVE TO MENTION THAT KATE WAS FABULOUS AS A PARTNER AND I DON'T THINK I COULD HAVE DONE THIS WITHOUT HER. SO I WAS REALLY RESPONSIBLE FOR CONTENT DEVELOPMENT, PROGRAM PLANNING, PRESENTATIONS AND EVALUATION. ONE OF THE AREAS THAT WAS DIFFICULT, ACTUALLY, WAS MAKING ARRANGEMENTS FOR FOOD BECAUSE WE WERE PLANNING A ALL-STAFF MEETING/TRAINING SESSION AT THE FDR PRESIDENTIAL LIBRARY IN HIDE PARK AND YOU COULDN'T BRING MORE THAN A HUNDRED PEOPLE TOGETHER WITHOUT GIVING THEM SOMETHING TO EAT. IT WAS VERY TRICKY AND I REALLY FEARED THAT UNTIL THE LAST MOMENT I WAS GOING TO BE PAYING THIS BILL MYSELF, BUT WE MANAGED TO WORK IT OUT, BUT NOT WITH NLM FUNDS. THE OTHER THING THAT WAS MY RESPONSIBILITY, ESSENTIALLY, WAS TO PROVIDE THE FOLLOW-UP. AT THE SAME TIME, ON THE RIGHT-HAND SIDE OF THE SLIDE WITHOUT SUPPORT FROM THE BEGINNING BY THE COMMISSIONER OF THE HEALTH DEPARTMENT, THE ASSISTANT

COMMISSIONERS AND THEIR WILLINGNESS TO REALLY ENCOURAGE FOLLOW-UP AND USE OF THE TRAINING OPPORTUNITY, I DON'T THINK WE WOULD HAVE BEEN NEARLY AS SUCCESSFUL. NOW THIS IS A HEALTH DEPARTMENT THAT IS READY TO APPLY FOR ACCREDITATION UNDER THE NEW HEALTH STANDARDS SO THAT SUCH THINGS AS THE CORE COMPETENCIES, THE ACCREDITATION STANDARDS WERE VERY IMPORTANT TO THEM AND PLAYED A BIG ROLE IN THEIR RESPONSIVENESS AND ALSO IN DEVELOPING THE CONTENT OF OUR PROGRAM. WHICH REALLY WAS A JOINT PROJECT. THEY, OF COURSE, SUBMITTED OUR MEEK ASSESSMENT TO THEIR STAFF. WE HAD A 75% PARTICIPATION RATE, AND THEN USED THOSE RESULTS WHICH THE BIOSTATISTICIAN REALLY, UM, TLOER THOUGH ROILY ANALYZED TO DEVELOP OUR TRAINING. ONE OF THE THINGS I SAID INTO THE PROGRAM, WE HAD A FULL-DAY CONFERENCE SESSION AT FDR WITH AN AFTERNOON SESSION FOR A SELECTED, INVITED GROUP OF STAFF, WAS THAT WE WOULD NOT COVER RESOURCES THEY ALREADY KNEW AND USING, BUT WOULD TRY AND IDENTIFY PUBLIC HEALTH RESOURCES THAT WOULD HELP THEM PLANNING E EVALUATING AND ASSESSING THEIR OWN PROGRAMS AGAINST BEST PRACTICE. ACTUALLY 20% OF THE PEOPLE SAID THEY WERE FAMILIAR AND IT TURNED OUT THAT THERE WERE SOME OF THE STAFF FOR WHOM REALLY IMPLEMENTING STATE REGULATIONS AND REQUIREMENTS WAS A PRIMARY RESPONSIBILITY OF THEIR WORK, AND QUITE FRANKLY THE EVIDENCE-BASED INFORMATION WAS NOT AS RELEVANT TO THEM. NEXT SLIDE PLEASE. OKAY. THIS IS AN OUTLINE OF OUR CONFERENCE TRAINING DAY AND IT WAS SIGNIFICANT THAT IT WAS REQUIRED FOR ALL THE HEALTH DEPARTMENT STAFF, AND THE OPENING PRESENTATION BY THE YOUNG VERY DYNAMIC AND VERY-WELL CONNECTED COMMISSIONER FOCUSED ON ESSENTIAL HEALTH SERVICES, ACCREDITATION, AND EVIDENCE-BASED PUBLIC HEALTH, AND QUITE [BACKGROUND NOISE] [INDISCERNIBLE] AND I BOTH HAD A ROLE IN DEVELOPING HIS PRESENTATION AS DID HIS ADMINISTRATIVE STAFF AND IT COULD NOT HAVE BEEN MORE PERFECT. TRYING TO SET UP A FRAMEWORK WHERE PEOPLE WOULD REALLY PAY ATTENTION TO WHAT WE WERE TRYING TO DO. KATE AND I, AGAIN, WORKED TOGETHER ON HER PRESENTATION AND MY ROLE INTRODUCING BOTH THE COUNCIL, NLM, MEASURING ISP AND WHY THEY WERE THERE FOR THE GRANT. ONE OF THE THINGS WE HAD -- MISP -- TALKED ABOUT IN OUR PROPOSAL WAS DOING MORE WITH OUR APPS. IT TURNED OUT NOT TO BE APPROPRIATE IN TERMS OF THE NEED AND THE TIMING SO WE INCLUDED A LITTLE BIT OF A SLIDE SHOW WITH MOBILE APPS AND MENTIONED THEM AT THE END OF THE DAY'S PROGRAM AND GAVE THEM AN OPPORTUNITY TO COME UP, PERSONALLY. THE AFTERNOON SESSION, AGAIN, TAUGHT THE ONLINE -- WELL, THE LIVE SESSION ON STRATEGIES FOR FINDING

THE EVIDENCE WITH TOPICS THAT I'D IDENTIFIED WITH THE CHAIR OF THIS AREA AND I IDENTIFIED WITH HANDOUTS AND PACKETS AND WITH THE PRESENTATION SPECIFIC RESOURCE THAT WOULD MEET THE NEEDS THAT WE IDENTIFIED. AND ONE OF THE THINGS THAT I THINK IS SIGNIFICANT IS THAT THERE SEEM TO BE IN THE PUBLIC HEALTH NURSING AREA IS GREAT CONFUSION BETWEEN BED SCAPE, MEDLINEPLUS, AND PUBMED. SO THAT I REALLY TRIED TO FOCUS ON THEIR UNDERSTANDING THE DIFFERENCES AND WHERE TO FIND E-MAIL LISTS IN PARTICULAR THAT COULD BE HELPFUL TO THEM. OUR SURVEY FOUND THAT ONLY A THIRD OF THE STAFF WERE USING E-MAIL LISTS SO THAT WE DID TRY TO IDENTIFY SPECIAL RESOURCES THAT THEY COULD USE, AND AGAIN, A MAJOR PART OF OUR PROJECT WAS FOCUSING ON HOW THE TO GET FULL TEXT BUT ALSO HOW TO GET THE ARTICLES IF THEY WERE NOT AVAILABLE FULL TEXT. NEXT PLEASE. THIS IS JUST AN OVERVIEW OF WHAT WE ACTUALLY DID IN THE GRANT AND I SHARED THIS AS PART OF THE PROGRAM. THIS WAS ONE OF THOSE EXPRESS GRANTS. WE DIDN'T ACTUALLY REALLY GET THE CONTRACT SIGNED AND EVERYTHING ELSE 'TIL SOMETIME WELL INTO DECEMBER. I STARTED WORKING WITH ONE COMMISSIONER AT THE HEALTH DEPARTMENT WHO THEN RESIGNED AND TOOK ANOTHER POSITION, SO WE HAD A LITTLE START-UP DELAY, UM, BUT, AT THE SAME TIME WE MANAGED TO ACCOMPLISH ALL OF THE THINGS THAT WE SAID WE WERE GOING TO DO, AND THE SIGNIFICANT PART OF THIS PROJECT THAT IS ONGOING IS THE DOCUMENT DELIVERY INTERLIBRARY LOAN PART. NEXT SLIDE PLEASE. OKAY. THIS WAS THE ESSENCE OF THE AFTERNOON SESSION, AND THIS WHEN WAS DEVELOPED SPECIFICALLY WITH THE ASSISTANT DIRECTOR OF THE PROGRAM WHO KNEW WHAT HER NURSES NEEDED, BUT OF COURSE SHE DIDN'T GIVE ME ANY FEEDBACK UNTIL THE FRIDAY BEFORE THE PROGRAM. NEXT. NEXT PLEASE. OKAY. AS YOU CAN SEE, WE HAD VERY POSITIVE EVALUATIONS, AND I FELT REALLY VERY GOOD THAT 66% OF THE MATERIAL WE COVERED WAS IDENTIFIED AS BEING EITHER 75% OR 100% NEW. WE HAD LOTS AND LOT OF POSITIVE COMMENT, AND A SUBSTANTIAL NUMBER SAID THEY WOULD CHANGE THEIR BEHAVIOR AS A RESULT AND SAID THEY'D DO THINGS THAT WE WANTED THEM TO DO AND THAT THEY WOULD USE RESOURCES WE HAD HIGHLIGHTED. NEXT PLEASE. OKAY. THIS JUST SHOWS YOU THE INITIAL RESPONSE RATE, AND IT WAS VERY HARD TO ADDRESS NEEDS OF PARTICULARLY WATER MANAGEMENT AND ENVIRONMENTAL CONTROL PEOPLE. NEXT. THE WORKSHOP, AGAIN, IN THE AFTERNOON, WE HAD A VERY HIGH E POSITIVE RESPONSE RATE. 95 PEOPLE SAID YES, AND WE HAD THE 22 PEOPLE WHO WERE INVITED, WE HAD 19, AND FOLLOW-UP WITH MANY OF THEM. NEXT PLEASE. OKAY. DURING THE FOLLOW-UP PERIOD WHICH WAS LESS THAN A MONTH, WE HAD TEN STAFF

SESSIONS WITH EITHER ONE OR TWO PEOPLE, THREE PEOPLE, OR INDIVIDUAL, THREE EXTENSIVE PHONE CONVERSATIONS AND I DID USE THE IPAD MORE EXTENSIVELY IN DOING THIS INDIVIDUAL AND SMALL GROUP FOLLOW-UP SESSIONS. NEXT PLEASE. I THOUGHT YOU WOULD FIND IT OF INTEREST TO SEE ACTUALLY THE TITLES THAT WERE REQUESTED IN THAT THEY WERE NOT THE PUBLIC HEALTH TITLES THAT ARE FREQUENTLY SEEMS TO ME A FOCUS OF SOME PUBLIC HEALTH OUTREACH PROJECTS. ONLY ONE TITLE IN THE GRANT PERIOD WAS REALLY CONSIDERED A PUBLIC HEALTH TITLE, PER SE. NEXT PLEASE. THIS DOCUMENT DELIVERY HAS BEEN CONTINUING. YOU SEE IN THIS CASE IN THE PERIOD BETWEEN MAY FIRST AND PRESENT, ACTUALLY WE HAD THREE MORE COME IN LAST WEEK SO THAT WE REALLY HAVE HAD 31 REQUESTS SINCE THE END OF OUR GRANT, AND AGAIN, IT'S THE MEDICAL LITERATURE THAT PEOPLE SEEM TO BE NEEDING FAR MORE THAN PUBLIC HEALTH JOURNALS. WE'RE GETTING A LOT OF REQUESTS FROM THE MEDICAL EXAMINER'S OFFICE. WE'RE GETTING REQUESTS FROM HEALTH PLANNING AND EDUCATION. WE'RE GETTING OCCASIONAL REQUESTS FOR EMERGENCY AND FROM ENVIRONMENTAL DEPARTMENTS, AND IN ADDITION TO THE ARTICLE REQUESTS, WE'VE HAD CALLS FOR HELP SEARCHING PUBMED. SO I'VE BEEN ABLE TO WORK WITH PEOPLE ON THE PHONE. NEXT PLEASE. THIS IS THE ONE AREA IN WHICH OUR INITIAL PROJECTIONS DIDN'T PLAY OUT BECAUSE THE STAFF REALLY DID NOT HAVE ACCESS TO MOBILE RESOURCES, YOU TUBE, OR MANY OTHER THINGS ON THEIR NETWORK, BUT AGAIN I SUSPECT THAT THAT WILL BE CHANGING IN THE FUTURE. LET'S GO TO THE NEXT. I THINK THESE DIRECT AND INDIRECT OUTCOMES ARE REALLY IMPORTANT BECAUSE THE STAFF DO HAVE INCREASED AWARENESS OF EBM RESOURCE, NLM, AND OTHER GOVERNMENT AND PROFESSIONAL ASSOCIATION-SPONSORED RESOURCES WHICH SUPPORT WHAT THEY NEED TO BE DOING WITH BEST PRACTICE AND COMPARATIVE EFFECTIVENESS RESEARCH. THEY HAVE ACCESS NOW TO FREE ARTICLES AND DOCUMENT DELIVERY. I'VE HAD A NUMBER OF STAFF SAY, THIS IS REALLY GOING ON? IT DIDN'T END WITH THE END OF THE GRANT? AND THEY ARE VERY PREESH TI, PEOPLE HAVE SAID, WE LOVE YOU. THE OTHER THING THAT'S HAPPENED IS THAT THERE HAVE BEEN STAFF WHO'VE REALLY ASKED FOR ADDITIONAL SEARCH ASSISTANCE AND REFERRALS INCLUDING THE COMMISSIONER WHICH HAS PLEASED ME, AND WE HAVE SEEN THAT THE STAFF WHO ALREADY HAVE SOME COMFORT WITH THE TOOLS ARE MENTORING THEIR COLLEAGUES TO EXPAND THE INFORMATION TRAINING AND USE OF RESOURCES. WE'VE HAD LOANSOME DOC SIGN UP, MY NCBI, AND THE GOOD NEWS FOR ME IS THAT IT WAS CONSIDERED SO SUCCESSFUL THAT THEY'RE REALLY VERY INTERESTED IN DOING MORE. THE 34ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME

OUTREACH WITH US IN M34 ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUT34 ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTD34ID HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN HUDSON LIBRARY SYSTEM HAS EXPRESSED AN INTEREST IN DOING SOME OUTREACH WITH US IN THE FUTURE AND I'VE HAD INITIAL CONVERSATIONS WITH A COMMUNITY COLLEGE LIBRARY DIRECTOR WHO ALSO FELT THAT THEY MIGHT HAVE SOME ROLE IN ANOTHER PROJECT. BOTH THE DEPARTMENT OF HEALTH AND THE MID HUDSON LIBRARY SYSTEM ARE JOINING MAR, AND I DO THINK THAT ALL OF THE DOCUMENT DELIVERY ACTIVITY IF FITS VERY WELL INTO THE MISP GUIDELINES AND SO FAR IS VERY MANAGEABLE IN TERMS OF WHAT SOUTH EASTERN CAN HANDLE. AND WE ARE LOOKING AT POSSIBLY A FOLLOW-UP KIND OF PROJECT FOR NEXT YEAR THAT WOULD REACH ADDITIONAL REGIONAL HEALTH DEPARTMENT COLLEAGUES, AND I KNOW THAT I HAVE THE PEOPLE IN CHARGE OF THE DUTCHESS COUNTY HEALTH DEPARTMENT ON MY TEAM FOR THIS. SO THANK YOU.

>> THANK YOU SO MUCH. OUR NEXT SPEAKER THE BARBARA CIAMBOR AT ROCHESTER REGIONAL LIBRARY COUNCIL. BARBARA HAS WORKED AS A CIRCUIT LIBRARIAN AND AS A MEDICAL LIBRARIAN WITH THE COLIDA HEALTH SYSTEM IN BUFFALO, NEW YORK. IT'S ALL YOURS, BARBARA.

>> THANK YOU. I'M HAPPY TO HAVE THE OPPORTUNITY TODAY TO SPEAK TO YOU ABOUT THE CLICK ON HEALTH OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS PROJECT INCLUDING THE MOST RECENTLY-COMPLETED PROJECT, THE OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS IS RURAL AREAS WHICH WAS COMPLETED THIS PAST SPRING. NEXT SLIDE PLEASE. CLICK ON HEALTH IS A COMMUNITY PROJECT THAT BRINGS HIGH-QUALITY HEALTH INFORMATION TO THE PEOPLE OF ROCHESTER NEW YORK. MADE AVAILABLE THROUGH THE ROCHESTER REGIONAL LIBRARY COUNCIL. IT'S A COLLABORATIVE PROJECT, COLLABORATION WITH MEDICAL, PUBLIC, AND SCHOOL LIBRARIANS IN THE ROCHESTER, NEW YORK AREA. WE LIKE TO THINK IT PROVIDES ONE-STOP-SHOPPING FOR ALL PEOPLE IN ROCHESTER AREA, AND IT'S FREE OF CHARGE. NEXT SLIDE. THIS IS OUR WEB SITE. IT IS THE CENTERPIECE SO TO SPEAK ON THE CLICK ON HEALTH PROJECT. SERVES AS A GATEWAY, PORTAL TO LINKS TO REPUTABLE LOCAL AND NATIONAL HEALTH INFORMATION RESOURCES. NEXT SLIDE PLEASE. I LIKE TO TALK ABOUT CLICK ON HEALTH IN THE COMMUNITY. A STRONG TRAINING AND AWARENESS COMPONENT HAS ALWAYS BEEN A PART OF CLICK ON HEALTH. WE'VE TRAINED

LIBRARIANS, SENIORS AND SCHOOL HEALTH STAFF TO SEARCH FOR QUALITY CONSUMER HEALTH INFORMATION. IN 20089 T CLICK ON HEALTH PROJECT WAS EXPANDED TO INCLUDE OUTREACH TO GROUPS OF UNAFFILIATED -- IN H THIS CASE -- NURSE WHO IS DID NOT HAVE ACCESS TO LICENSED LIBRARY DATA BASTES THROUGH AN AFFILIATION WITH A COLLEGE OR HOSPITAL. THE PURPOSE OF THE PROJECT WHICH WAS FUNDED BY NN/LM WAS DEVELOPED AN OUTREACH PROGRAM THAT WOULD TRAIN NURSES TO USE CLICK ON HEALTH WEB SITE TO ACCESS RELIABLE INFORMATION INCLUDING FREE, FULL-TEXT CLINICAL DATABASES. WE WORK WITH SEVEN AREAS SCHOOLS AND NURSING WITH THE LIBRARIAN THERE IS AND WITH OUR PARTNER AGENCIES, WE CONDUCTED A SURVEY TO DETERMINE THE INFORMATION NEEDS OF THE RNs THAT WERE EMPLOYEES AND STUDENTS GRADUATING AT THE NURSING SCHOOLS. WE WERE ABLE TO BASED ON THE FEEDBACK WE GOT INTERESTING FEEDBACK IN REGARDS TO THE INFORMATION NEEDS OF THE NURSES, THE TYPE OF INFORMATION THEY NEEDED, HOW THEY WANTED TO RECEIVE THE INFORMATION. WE AGAIN WORKED WITH THE FACULTY, LIBRARIANS, AND OUR PARTNERS TO DEVELOP A CURRICULUM THAT COULD BE USED VIA THE CLICK ON HEALTH WEB SITE. NEXT SLIDE PLEASE. CLICK ON -- IN 2010, WE WERE ACTUALLY ABLE TO GO OUT AND PROVIDE TRAINING USING THE CLICK ON HEALTH WEB SITE TO VRN s BUT ALSO EXTENDED THE TRAINING TO INCLUDE OTHER HEALTH PROFESSIONALS; SOCIAL WORKERS, THERAPISTS MANY OTHERS. IN 2011 THE PROJECT RECEIVED FUNDING TO EXTEND TO THE RURAL COUNTIES SURROUNDING ROCHESTER AND CURRENTLY WE HAVE BEEN FUNDED IN 2013, TO WORK WITH PUBLIC HEALTH WORKFORCE IN WESTERN NEW YORK INCLUDING THE COUNTIES AROUND ROCHESTER AND IN BUFFALO. WHAT I WOULD LIKE TO DO IS TO JUST TALK A LITTLE BIT ABOUT THE OUTREACH PROJECT TO RURAL COUNTIES. THIS PROJECT AS I MENTIONED, WE WENT OUT TO LIVINGSTON, ONTARIO AND WYOMING COUNTIES AND WORKED WITH TWO AGENCIES. THEY WERE HEADQUARTERS IN MONROE COUNTY BUT HAD QUITE A FEW SATELLITE OFFICES IN THE RURAL COUNTIES SURROUNDING ROCHESTER. WE ALSO PARTNERS THE WAYNE FINGER LAKE BOCESE TRAININGS FOR LPN AND SCHOOL OF NURSING. THE GOALS AND OBJECTIVE OF THE PROJECT, THE GOAL WAS THAT NURSES AND OTHER HEALTH PROFESSIONALS IN THESE FOUR RURAL COUNTIES ESPECIALLY THOSE THAT WERE UNAFFILIATED WITH ANY OF THE REGION'S HOSPITALS WOULD BE MADE AWARE OF AND TRAINED TO ACCESS AND USE THE FREE HEALTH INFORMATION THAT'S AVAILABLE ON THE WEB HELPING THEM PROVIDE BETTER CARE. OBJECTIVES TO GET TO THESE GOALS, WE WANTED TO INCREASE AWARENESS OF THE FREE INFORMATION THAT WAS AVAILABLE USING THE CLIN ON HEALTH WEB PORTAL. WE ALSO WANTED TO DETERMINE

SPECIFIC NEEDS OF THE RURAL POPULATION AND ADJUST AND ADD TO THE RESOURCES AS NEEDED. WE WANTED TO TRANSLATE THE CURRENT TRAINING CURRICULUM THAT HAD BEEN DEVELOPED IN AN EARLIER PROJECT AND REVISE IT FOR THE NEW AUDIENCE. WE ALSO WANTED TO PROVIDE DELIVERY VIA THE GO-TO MEETING WEBINARS OFFERING TRAINING IN A VARIETY OF FORMATS WE WERE ABLE TO PROVIDE AWARENESS SESSIONS ON-SITE, HANDS-ON TRAINING AND FOUR LIVE WEBINARS. WE WERE TRAINED -- I GUESS WE TRAINED 86 ALL TOGETHER, THAT INCLUDES THE ON-SITE PARTICIPANTS AND THE FOLKS THAT PARTICIPATED IN OUR WEBINARS. IN TERMS OF EVALUATION, WELL, EACH TRAINING SESSION, PARTICIPANTS WERE PROVIDED WITH A POST SESSION EVALUATION AND THE WEBINAR PARTICIPANTS THEY WERE POLLED DURING THE COURSE OF THE WEBINAR BUT THEY ALSO HAD A FOLLOW-UP SURVEY USING SURVEY MONKEY. THE EVALUATION INCLUDED 11 QUESTIONS DESIGNED TO DETERMINE IF THE TRAINING WAS EFFECTIVE, AND A STATED GOAL FOR THE PROJECT WAS TO RAISE AWARENESS OF THE FREELY-AVAILABLE HEALTH INFORMATION. WHEN WE ASKED THE QUESTION, THE EXTENT OF NEW KNOWLEDGE THAT I GAINED FROM THIS PROGRAM WAS... 64% SAID IT WAS EXTENSIVE, THE AMOUNT OF NEW KNOWLEDGE THAT WAS GAINED. WHEN ASKED DO YOU THINK YOU WILL USE ANY OF THIS KNOWLEDGE GAIN IN SUPPORTIVE PATIENT CARE, 100% SAID YES THEY WOULD, AND ALSO 100% OF THE RESPONDENTS SAID THEY DID PLAN TO SHARE THE INFORMATION WITH COWORKERS OR STUDENTS. TOWARD THE END OF THE PROMPT, IT WAS AN EXPRESS AWARD, COVERED FIVE MONTHS FROM DECEMBER THROUGH APRIL OF THIS YEAR, WE DID TOWARD THE END AS I SAID SEND OUT A FOLLOW-UP SURVEY. WE WANTED TO SEE IF FOLKS WERE USING THE INFORMATION THAT THEY HAD LEARNED EARLIER. OF THOSE THAT RESPONDED, 85% SAID THAT THEY HAD LEARNED, THEY HAD SHARED WHAT THEY LEARNED AT THE CLICK ON HEALTH TRAINING SESSION. SO I THINK THAT THAT'S, YOU KNOW, USEFUL IN TERMS OF TRAIN THE TRAINER KIND OF AN IDEA WHERE FOLKS WHO ATTENDED THE SESSION PASS THE INFORMATION ON TO OTHERS. OKAY. NEXT SLIDE PLEASE. OKAY. DURING THE COURSE OF THIS PROJECT, WE DID AS I MENTIONED USE THE CLICK ON HEALTH PORTAL. WE DEVELOPED THE PAGE, THE OUTREACH TO UNAFFILIATED HEALTH PROFESSIONALS PAGE, UM, INCLUDED ARE SITES SUCH AS PUBMED/MEDLINE. WE'VE ADDED TO THAT THE PUBLIC HEALTH INFORMATION, CLINICAL PRACTICE GUIDELINES AND OTHER WEB SITES, AND THEN DEPENDING ON THE AUDIENCE, WE WOULD ADJUST THE TRAINING TO HOPEFULLY RESPOND TO WHAT THEY WERE INTERESTED IN HEARING ABOUT. NEXT SLIDE PLEASE. HERE AGAIN IS A LOOK OF LOOK AT THE PAGE. IT IS FOR LOCAL HEALTH PROFESSIONALS. WE TRIED TO CUSTOMIZE THE TRAINING AND

RAISE AWARENESS, HANDS-ON TRAINING IS THE MOST EFFECTIVE, AND I THINK THAT USING THE CLICK ON HEALTH WEB PAGE LENDS ITSELF TO THAT TYPE OF TRAINING. NEXT SLIDE PLEASE. WE ALSO HAVE DEVELOPED TUTORIALS FOR HEALTH PROFESSIONALS PAGE. WE INCLUDE BOTH TUTORIALS FROM THE NATIONAL LIBRARY OF MEDICINE AND SOME WE HAVE RECORDED, THEY'RE ON UH YOU TUBE. YOU CAN'T SEE ON THIS SCREEN SHOT, BUT WE DO INCLUDE HERE THE WEBINARS THAT WERE RECORDED. THE WEBINARS WHEN THAT WAS SOMETHING NEW TO THIS PARTICULAR PROJECT. WE DID RECORD FOUR WHICH BASICALLY REINFORCED WHEN WE WOULD GO OUT AND DO TRAINING IF FOLKS WERE UNABLE TO ATTEND THE TRAINING, WE WANTED TO GIVE THEM THE OPTION OF ATTENDING THE WEBINARS OR ACTUALLY VIEWING THEM AT A LATER DATE. WE HAD AS I SAID 24 PARTICIPANTS FOR THE WEBINARS AND THEY DID RESPOND TO THE POLL QUESTIONS. WE DID A FOLLOW-UP, IT WASN'T A TERRIFIC RESPONSE IN TERMS OF A FOLLOW-UP IN TERMS OF HOW THEY USED THE INFORMATION. WE WOULD LIKE TO CONTINUE TO USE WEBINARS IN OUR TRAINING. I THINK WE JUST NEED TO EVALUATE THE EFFECTIVENESS OF THIS TYPE OF TRAINING, BUT WE WILL CONTINUE TO DO THIS. OKAY. NEXT SLIDE PLEASE. WE HAVE SOME PICTURES HERE OF ME IN ACTION. WE ARE ARE TRAINING HERE A MIX OF SOCIAL WORKERS, NURSES, AND THERAPISTS. THIS PARTICULAR GROUP WAS REALLY GREAT TO WORK WITH. I WAS ABLE TO DO NOT ONLY AN AWARENESS SESSION BUT A COUPLE OF FOLLOW-UP TRAINING, HANDS-ON TRAINING. NEXT SLIDE PLEASE. HERE IS AN EXAMPLE OF AN AWARENESS SESSION. VERY OFTEN I'LL BE INVITED TO DO AN AWARENESS SESSION IN ADVANCE OF ANY KIND OF FOLLOW-UP, HANDS-ON. SOMETIMES I'LL COME OUT AND DO THE HANDS-ON TRAINING, BUT THIS IS AN EXAMPLE OF A NURSING CLINICAL MANAGEMENT TEAM. NEXT SLIDE. OKAY, MORE TRAINING HERE. NEXT SLIDE PLEASE. OKAY. IN TERMS OF SOME OF THE PROJECT OUTCOMES AND IMPACTS, I BELIEVE THAT BASED ON SOME OF THE GOALS, OBJECTIVES THAT WERE STATED, WE HAVE SUCCESSFULLY ATTAINED THESE IN TERMS OF THE TRAINING. WE HAVE MADE THE FOLKS THAT WE WORK WITH IN THE RURAL COUNTIES UNAFFILIATED HEALTH PROFESSIONALS, AGAIN, THOSE WHO DON'T HAVE READY ACCESS TO LIBRARY COLLECTIONS AND RESOURCES HAVE MADE THEM BETTER AWARE OF AND HELPED TO TRAIN THEM TO ACCESS AND TO USE FREE RELIABLE HEALTH INFORMATION ON THE WEB. YOU SEW, SERVING THE INFORMATION NEEDS OF THIS UNDERSERVED GROUP, WE ARE INTERESTED TO CONTINUE THIS AND WE ACTUALLY ARE DOING THAT RIGHT NOW. WE ARE WORKING WITH PUBLIC HEALTH DEPARTMENTS TO USE THE CLICK ON HEALTH PROJECT TO PROVIDE INFORMATION ABOUT PUBLIC HEALTH RESOURCES. NEXT SLIDE. OKAY. LESSONS LEARNED AND CHALLENGES. THERE ARE MANY FACTORS THAT ARE

BEYOND YOUR CONTROL, REALLY, THAT AFFECT THE SCHEDULING OF TRAINING SESSIONS. TIME IS THE BIGGEST ISSUE. VARYING LEVELS OF STUDENTS SEARCHING SKILLS AND WHAT THEY KNOW COMING INTO A SESSION. TECHNICAL ISSUES -- SLOW COMPUTERS, FROZEN COMMUTERS, NO WIRELESS. IT'S VERY INTERESTING WHEN YOU GO OUT AND ABOUT AND NOT SURE WHAT TO EXPECT. ALSO TOO A LOT OF ENERGY -- ALL THE OUTREACH PROJECT WHAT IS I'VE EXPERIENCED IS THAT THERE'S A LOT OF ENERGY THAT IS EXPENDED IN TERMS OF ESTABLISHING LINES OF COMMUNICATION. YOU NEED TO PERSUADE POTENTIAL PARTNERS THAT THE SERVICE YOU'RE PROVIDING IS IMPORTANT ENOUGH TO BE INCLUDED IN BUSY SCHEDULE OF HEALTH PROFESSIONALS AND THEY ARE VERY BUSY. I WOULD SAY IF ANYONE WOULD ASK ME FOR ADVICE IN TERMS OF WORKING, YOU KNOW, WITH UNAFFILIATED HEALTH PROFESSIONALS, UH, TEACH THE BASIC SEARCH SKILLS. THEIR GOAL IS NOT TO BECOME EXPERT SEARCHERS BUT THEY NEED TO UNDERSTAND THAT THEY'RE SEARCHING PUBMED. MEDLINE FOR INSTANCE THERE ARE SEVERAL WAYS TO DO A GOOD SEARCH, BUT WE HAVE EMPHASIZED HOW TO LOCATE GOOD FULL TEXT INFORMATION AND THAT'S WHAT WE HEAR FROM OUR PARTICIPANTS THAT THAT'S WHAT THEY WANT. THEY WANT TO BE ABLE TO ACCESS FREE, FULL TEXT INFORMATION RIGHT AWAY. ALSO, IT'S IMPORTANT IS THAT YOU COMMUNICATE PRIOR TO THE SESSION, YOU KNOW ABOUT THE MAKEUP OF THE GROUP YOU'RE GOING TO BE WORKING WITH, AND TRY TO EMPHASIZE WHAT'S RELEVANT TO THAT GROUP BECAUSE DIFFERENT GROUPS DEPENDING ON WHO THEY ARE, THEY MAY BE INTERESTED IN DIFFERENT TYPES OF INFORMATION. NEXT SLIDE PLEASE. OKAY, THAT IS OUR URL, YOU'RE WELCOME TO CHECK IT OUT. IF YOU HAVE ANY QUESTIONS, I'D BE HAPPY TO ADDRESS THEM AT THE END OF THE EDUCATION IS, BUT I WOULD LIKE TO DO IS TO END MY PORTION OF THE PROGRAM WITH A SUCCESS STORY THAT'S RELAID TO US BY AN OCCUPATIONAL THERAPIST FROM ONTARIO COUNTY PARTICIPATED IN ONE OF THE ON-SITE TRAINING SESSIONS AND SHE SAID, I CANNOT THANK PEOPLE ENOUGH FOR THIS LINK AND TOOL TO SELF-EDUCATION, SELF-IMPROVEMENT, UPDATING EDUCATION, BEING ABLE TO GET INFO FIRST-HAND WITHOUT COST, TRAVEL, FEES, AND POP H-UPS AND DWERLGSS. THANK YOU FOR ASSISTANCE IN MY PRIVATE EDUCATION AS WELL AS PROFESSIONAL AWARENESS OF CHANGES IN TREATMENT, MEDICATION STANDARDS AND RECOMMENDATIONS FOR CARE. I USED TO HAVE TO CALL AND ASK SOMEONE ELSE TO HELP ME OBTAIN RELIABLE INFORMATION ON SPECIFIC DIAGNOSIS AND NOW I WILL BE ABLE TO DO THIS INDEPENDENTLY FOR MYSELF AND OTHERS. THANK YOU AGAIN. I THANK YOU FOR YOUR ATTENTION AND AS I SAID I'D BE HAPPY TO ANSWER ANY QUESTIONS AT THE END OF THE SESSION.

>> ALL RIGHT. SUPER. THANK YOU, BARBARA. OUR NEXT SPEAKER IS ACTUALLY TWO PEOPLE, BRIDGETTE IS THE PUBLIC SERVICES LIBRARY AT THE COMMON WEALTH MEDICAL COLLEGE, RECEIVED HER LIBRARY SCIENCE DEGREE FROM THE UNIVERSITY OF PITTSBURGH. PRIOR TO WORKING AT PCMC SHE WAS REFERENCE LIBRARY AT A COMMUNITY LIBRARY AND WE ALSO HAVE JOANNE WHO IS THE FOUNDING LIBRARY DIRECTOR FOR PCMC WHICH ENTERED ITS FIRST CLASS OF MEDICAL STUDENTS IN THE FALL OF 2009. PREVIOUSLY, JOANNE WAS THE FOUNDING LIBRARY DIRECTOR FOR THE NORTHERN ONTARIO SCHOOL OF MEDICINE. SHE HAS OVER 20 YEARS OF EXPERIENCE IN THE UNITED STATES AND CANADA. ALL RIGHT. BRIDGETTE.

>> HELLO, EVERYONE, CAN UH YOU HEAR ME OKAY?

>> PERFECT.

>> OKAY. THANK YOU. NEXT SLIDE, MISSY, PLEASE. IN DECEMBER 2011, WE RECEIVED OUR \$10,000 GRANT FROM NNLM MAR. I'LL EXPAND WHAT OUR PROJECT GOALS WERE. THE PRIMARY GOALS WERE TO INCREASE USAGE OF EXISTING LIBRARY RESOURCES BY OFFERING THEM IN ALTERNATIVE FORMATS. FOR EXAMPLE, THROUGH MOBILE DEVICES USING APPS. TO ENHANCE AND EXPAND ACCESS FOR REGIONAL FOLLOW UP VOLUNTEER CLINICAL FACULTY ACTING AS SITE SUPERVISORS TO OUR STUDENTS BY PROVIDING THE LATEST UP-TO-DATE QUALITY HEALTH INFORMATION IN PORTABLE AND POINT OF CARE FORMATS. TO BE ABLE TO ASSESS USEFULNESS IN PRACTICAL SETTING. ENHANCE PATIENT EDUCATION AND PARTICIPATION IN THEIR HEALTH CARE THROUGH IMPROVED UNDERSTANDING OF MEDICAL CONDITIONS, TREATMENT OPTIONS, AND ACCESS TO INFORMATION. OUR TARGET POPULATION WAS OUR MD YEAR TWO STUDENTS, THEIR PRECEPTORS AND THEIR PATIENTS. WE SELECTED MD YEAR TWO BECAUSE OF THE TIMING WITH THEIR COMMUNITY WEEK EXPERIENCE. DURING THIS WEEK THEY SPENT TIME WITH THEIR PRECEPTORS IN CLINICAL SETTING AND THAT WOULD OPTIMIZE OPPORTUNITIES TO MEET GOALS WE HAD OUTLINED. WE WORKED WITH OUR ITS DEPARTMENT AND SELECTED THE DELL LATITUDE ST TABLET. IN DECEMBER 2011 WE SET UP A LIVE GUIDE FOR THE PROJECT PROVIDING A VIRTUAL GATHERING PLACE FOR STUDENTS TO POST ABOUT THEIR EXPERIENCES AND IT WOULD SERVE AS A GO-TO PLACE FOR INFORMATION ABOUT THE PROJECT. WE DEVELOPED THE USER PREPROJECT EVALUATION TOOL THAT WOULD BE GIVEN TO THE STUDENTS BEFORE THEY RECEIVED THEIR TABLETS. IN FEBRUARY 2012 WE SENT OUT A NOTICE VIA E-MAIL TO OUR MD YEAR TWO STUDENTS ASKING FOR VOLUNTEERS. WE PURCHASED TEN TABLETS AND RECRUITED NINE STUDENTS TO KEEP ONE TABLET FOR OUR USE. STUDENTS' RESPONSE WAS RAPID AND

HAD A GROUP IN A FEW DAYS. UPON SIGNING UP, STUDENTS AGREED TO ATTEND BOTH ORIENTATION AND EXIT SESSION TO FILL OUT USER, PREPROJECT AND POST PROJECT EVALUATION, TO MAKE A MINIMUM OF THREE ONE HUNDRED-WORD POST TO THE LIVE GUIDE AND TO TAKE THE TABLET WITH THEM DURING COMMUNITY WEEK. ON FEBRUARY 7TH, 2012, STUDENTS ATTENDED MANTTORY ORIENTATION SESSION. THEY FILLED OUT THE USER PREPROJECT EVALUATION, OUTREACH ACTIVITY PARTICIPATION INFORMATION SHEET, AND WERE GIVEN THEIR TABLET. I REVIEWED THE PROJECT AGREEMENT, DEMONSTRATED LIVE GUIDE, AND ASSISTED JOSH ROSE FROM OUR ITS DEPARTMENT IN ACQUAINTING THE STUDENTS WITH THE TABLETS. ON APRIL 18TH , WE MET WITH THE STUDENTS FOR THE EXIT SESSION, THAT WAS JOANNE AND MYSELF. STUDENTS RETURN THEIR TABLETS, FILLED OUT THE USER POST EVALUATION FORM, AND WHILE EATING THE PIZZA WE PROVIDED FOR THEM, DISCUSSED THE PROJECT AND THEIR EXPERIENCES WITH THE TABLET. THEY FELT POSITIVE ABOUT THE USE OF THE TABLET BUT EXPRESSED CONCERNED ABOUT THE CHOICE OF THE DELL TABLET FOR THIS PROJECT. TO ENCOURAGE ACTIVE PARTICIPATION, A STUDENT'S NAME WAS ENTERED INTO A UH DRAWING FOR A SKY SPACE GIFT CARD EVERY TIME HE OR SHE POSTED TO THE LIVE GUIDE AND THEN HELD THE DRAWING AT THE EXIT SESSION. NEXT SLIDE PLEASE. HERE I'LL JUST QUICKLY REVIEW WITH YOU OUR GOALS AND YOU CAN SEE HOW THEY WORKED OUT FOR US BASED ON OUR EVALUATIONS. SO OUR FIRST GOAL WE FELT THAT WE DEFINITELY MET THAT ONE. YOU CAN SEE THAT THE STUDENTS DEFINITELY INCREASED THEIR USE OF LIBRARY RESOURCES WHEN THEY WERE USING THE TABLETS. NEXT SLIDE PLEASE. GOAL TWO THERE WAS ALSO AN INCREASE. WE WERE HOPING THAT THE PRECEPTORS THEMSELVES THROUGH THE STUDENTS WOULD INCREASE THEIR USE OF MOBILE DEVICES. NEXT SLIDE PLEASE. THIS WAS SORT OF A MORE QUALITATIVE TYPE QUESTION, SO WE ACTUALLY WEREN'T ABLE CHART THIS. THERE WERE SOME MIXED FEELINGS ABOUT THE USEFULNESS AND I'LL DISCUSS THAT IN JUST A A MOMENT. NEXT SLIDE PLEASE. GOAL FOUR YOU CAN SEE ACTUALLY IT, UM, THE POTENTIAL ACTUALLY WENT DOWN. STUDENTS THOUGHT THERE WAS A LOT OF POTENTIAL FOR TABLET COMPUTERS TO ENHANCE PATIENT EDUCATION, HOWEVER WHEN THEY GOT OUT THERE VARIOUS FACTORS ACTUALLY DID NOT ALLOW THEM TO MEET OR TO INCREASE EXPECTATION FOR THAT GOAL. AND OUR LESSONS LEARNED. WHEN WE DEVELOPED THIS PROJECT, WE CONSIDERED THE FACT THAT SOME OF THE CLINICAL SITES THAT STUDENTS WOULD BE VISITING DURING THEIR COMMUNITY WEEK WOULD NOT HAVE ACCESS TO THE INTERNET THUS RESTRICTING ABILITY TO ACCESS THE LIBRARY POINT OF CARE AND CLINICAL RESOURCES. TO REMEDIATE THIS

POBL POBLT WE PURCHASED A SUITE OF SKY SCAPE APPS LOADED ON TO EACH TABLET AND DID NOT REQUIRE THE INTERNET FOR ACCESS. THE SUITE OF APPS PROVIDED EXCELLENT INFORMATION FOR THE CLINICAL SETTING, BUT STUDENTS REPORTED THAT THEY WERE SLOW TO LOAD AND THIS WAS A DEFINITE DRAWBACK IN THE FAST-BASED CLINICAL SETTING. THE DELL TABLETS FEATURE A FULL WINDOWS 2000 WINDOWS OPERATING SYSTEM AND STUDENTS OBSERVED THAT AN IOS WOULD HAVE ALOUD FOR MORE PROCESSING SPEED. THERE WAS DIFFICULTY WITH A STA LUS AND FOUND THAT USING THE TABLET TO RECORD PATIENT INFORMATION WAS ALMOST IMPOSSIBLE. THEY NOTED PEN AND PAPER WAS MORE EFFICIENT. ONE OF THE STUDENTS POSTED ON THE LIVE GUIDE THAT KEYBOARDS WOULD BE USEFUL FOR RAPID DATA ENTRY SO WE ORDERED THEM BUT WE DENT GET THEM UNTIL AFTER COMMUNITY WEEK AND THE STUDENTS WEREN'T ABLE TO USE THEM AS PLANNED. IF TIME HAD PERMITTED CONDUCTING STUDENT FOCUS GROUPS TO DISCUSS ACTUAL USE OF TABLETS IN THE FIELD PROBABLY WOULD HAVE BEEN BENEFICIAL IN REFINING OUR PROJECT GOALS. WE ALSO COULD HAVE INVESTIGATED MORE FULLY THE PRO s AND CON s OF USING iPADS VERSES THE DELL TABLETS. P STUDENTS SAID PEN AND PAPER STILL REMAIN THE QUICKEST WAY TO RECORD PATIENT CONVERSATIONS IN THEIR OPINION. DELL TABLET ALLOWS FOR WRITE BUG THE AUTO CORRECT DOES NOT RECOGNIZE THE MEDICAL TERMS. TYPING ON A KEYBOARD IS AN OPTION BUT THEN THEY ALSO NOTED THAT THEY WERE OFTEN STANDING IN THE EXAMINATION ROOM AND THE PATIENT AND PHYSICIAN WERE SITTING, SO THEY WEREN'T ABLE TO REALLY ENTER INFORMATION VERY EASILY EVEN IF THEY'D HAD A KEYBOARD THAT WOULD HAVE BEEN SOMETHING ELSE THEY'D HAVE TO CARRY AROUND AND SET SOMEWHERE. ONE STUDENT SAID VOICE DICTATION WOULD HAVE BEEN EXCELLENT FOR SOMETHING LIKE THAT. IT WAS INTERESTING TO READ OUR STUDENTS' POST AND LEARN ABOUT HOW THEY'RE USING THE TABLET. ONE STUDENT MADE P AN IMPORTANT POINT THAT TRYING TO LEARN AND INTEGRATE A NEW DEVICE IN A CLINICAL ROUTINE THAT IS ALSO VERY UNFAMILIAR TO THEM WAS A CHALLENGE. AT THE EXIT SESSION, STUDENTS OBSERVED THAT THIS TYPE OF PROMPT WOULD BE VERY APPROPRIATE FOR THIRD-YEAR STUDENT WHO IS SPEND MUCH OF THEIR TIME IN CLINICAL SETTING AND HAVE A HIGHER LEVEL OF COMFORT IN SUCH SETTINGS AS COMPARED WITH SECOND-YEAR STUDENTS. THE THIS OF COURSE UNDERSCORES THE IMPORTANCE OF UNDERSTANDING THE HABITS AND PREFERENCES OF OUR USERS WHEN DEVELOPING PROJECTS LIKE THIS. THE STUDENTS PROVIDED VALUABLE FE FEEDBACK ABOUT THEIR NEEDS BOTH IN AND OUT OF THE CLASSROOM AND FOR THE CLINICAL COMPONENT OF THEIR EDUCATION. EXHUMELATIVELY WE CONSIDER THIS TO BE A

SUCCESSFUL OUTCOME OF THE PROJECT. OUR PRIMARY FUNCTION IS TO SUPPORT THE EDUCATIONAL NEEDS OF OUR STUDENTS AND OUR PROJECT PROVIDED US WITH AN OPPORTUNITY TO FURTHER PURSUE OUR MISSION. COMPARISON -- I'M SORRY, NEXT SLIDE. THESE ARE A COUPLE OF PICTURES. THE TOP ONE IS JOANNE AND MYSELF WITH ST STUDENTS AT THE EXIT SESSION TARNGSD BOTTOM ONE IS JOANNE AND MYSELF PRESENTING A POSTER PRESENTATION ABOUT THE PROJECT AT THE CANADIAN HEALTH LIBRARY ASSOCIATION CONFERENCE IN HAMILTON THIS SUMMER. NEXT SLIDE PLEASE. AND THIS IS MY LAST SLIDE. COMPARISON BETWEEN STUDENT RESPONSES IN THE USER PREAND POST EVALUATION FORMS INDICATE THAT THESE TABLETS WILL BE MOST USEFUL FOR THEIR MEDICAL EDUCATION RATHER THAN FOR CLINICAL WORK. THE LIBRARY WILL RETAIN THE TABLETS FOR CHECKOUT TO STUDENT WHO IS WANT TO USE A DEVICE THAT IS SMALLER THAN A LAPTOP BUT PROVIDES A LARGER READING AREA THAN A PHONE. WE EXPECT THAT STUDENTS MIGHT CHECK THEM OUT TO USE FOR USE IN SMALL GROUP AND THEIR CLASSES TO ACCESS LIBRARY DATABASES AND eBOOKS AND FOR STUDYING WHILE TRAVELING. THEY PROVIDED POSITIVE FEEDBACK FOR THESE TYPE OF USES DURING THE PROJECT. WE ARE ALSO CONSIDERING WAYS THAT FACULTY ADMINISTRATION AND STAFF CAN USE THE TABLETS. SO FAR, OUR STUDENT AFFAIRS OFFICE HAS USED THEM FOR PROCESSING PAPERWORK. FACULTY USED THEM WHEN THEY LEFT LAPTOPS AT HOME AND LIBRARY STAFF USED THEM AT CONFERENCES AND NOTE TAKING AND OUR MARKETING DEPARTMENT BORROWED ONE FOR A PHOTO OP THIS MORNING. THANK YOU FOR ALLOWING US TO DISCUSS OUR PROJECT WITH YOU.

>> THANK YOU SO MUCH. AND OUR FOURTH SPEAKERS ARE JULIA SOLLENBERGER DIRECTOR OF MEDICAL CENTER AT UNIVERSITY OF ROCHESTER MEDICAL CENTER. OVER 30 YEARS OF EXPERIENCE IN HEALTH SCIENCES LIBRARIANSHIP BEGINNING HER CAREER AT THE NATIONAL LIBRARY OF MEDICINE. IN HER CURRENT POSITION, JULIA IS NOT ONLY RESPONSIBLE FOR LIBRARY SERVICES AND RESOURCE BUT ALSO FOR ONLINE LEARNING FOR THE ENTIRE MEDICAL CENTER AS WELL AS ALL STUDENTS COMPUTING SUPPORT FOR THE SCHOOL OF MEDICINE. WE ALSO HAVE STEVE CLARY HEAD OF INFORMATION SYSTEMS AND APPLICATIONS FROM MEDICAL CENTER LIBRARIES AND TECHNOLOGY AT THE UNIVERSITY OF ROCHESTER MEDICAL CENTER.

>> THANK YOU VERY MUCH. DO WE HAVE OUR SLIDES, YES. WER HAPPY TO BE DESCRIBING OUR iPad PROJECT TO ALL OF YOU TODAY AND WE DO THANK THE MIDDLE ATLANTIC NETWORK OFFICE FOR GIVING US THIS AWARD. IT HAS TRULY MADE A BIG DIFFERENCE IN OUR LIBRARY. NEXT SLIDE. THE OVERALL

GOAL OF OUR PROJECT WAS FOR THE STAFF OF THE LIBRARY TO BECOME EXPERTS IN THE USE OF iPADS IN THE CURRICULUM BUT ALSO TO BE CONSIDERED EXPERTS BY THE STUDENTS AND FACULTY AND ADMINISTRATORS IN THE SCHOOL OF MEDICINE AND ALSO IN THE MEDICAL CENTER IN GENERAL. OUR MEDICAL SCHOOL HAD ALREADY DECIDED TO PROVIDE iPADS TO ALL FIRST-YEAR MED STUDENTS IN A PILOT MODE IN THE SPRING OF 2012. FOR MANY YEARS, THE LIBRARY HAS BEEN THE PROVIDER OF COMPUTER SUPPORT TO THE MED STUDENTS AND WE ALSO HAVE RESPONSIBILITY FOR THE MED CENTER'S ONLINE LEARNING PROGRAMS AS MISSY MENTIONED, SO WE NEEDED TO STEP UP AND LEAD THIS iPad INITIATIVE, BUT WE DIDN'T NECESSARILY ALL HAVE THE SKILLS TO DO THAT. SO THE TECHNOLOGY AWARD. THE FIRST OBJECTIVE WAS FOR THE LIBRARY STAFF TO GAIN KNOWLEDGE AND SKILLS -- NEW SLIDE, I'M SORRY. TO GAIN THE KNOWLEDGE AND SKILLS, ENOUGH TO FEEL COMPETENT IN SUPPORTING THE MEDICAL STUDENTS AND INSTRUCTORS. NEXT SLIDE. SOME OF US HAD ALREADY HAD iPADS THAT WERE PURCHASED BY THE LIBRARY, BUT WE BOUGHT AN ADDITIONAL 15 PLUS KEYBOARDS AND CASES WITH NN/LM WUND FUNDS. A STEERING TEAM DEVELOPED CURRICULUM AND SERVED AS INSTRUCTORS. DURING JANUARY AND FEBRUARY, WE OFFERED SIX, TWO-HOUR SESSIONS TO 20 LIBRARY STAFF MEMBERS -- LIBRARIANS, IT STAFF, AND eLEARNING STAFF. NOT COUNTING CURRICULUM DEVELOPMENT, PREP WORK, OR HOMEWORK, WE PUT 360 PERSON HOURS INTO THE FORMAL AND ALSO MANDATORY TRAINING. SO IN ADDITION TO THE INS AND OUTS OF USE THE iPad, ITSELF, WE EMPHASIZED CONNECTIONS TO RESOURCES; E-MAIL, VPN, BLACKBOARD MOBILE T MINOR SITE, AND ALL OF OUR DIGITAL INFORMATION RESOURCES. REGARDING TEXTBOOKS, THE MEDICAL SCHOOL WAS NOT PROVIDING THE FUNDS TO BUY TEXTBOOKS AND LOAD THEM ON THE iPADS AHEAD OF TIME, BUT WE DID LEARN ABOUT THE VARIOUS eBook PLATFORMS THAT PROVIDE MEDICAL TEXTBOOKS AND THEY WERE FAMILIAR ENOUGH WITH THEM TO HELP STUDENTS DETERMINE WHICH THEY MIGHT WANT TO USE. WE PROVIDED A LIST OF WHERE EACH OF THEIR REQUIRED OR RECOMMENDED TEXTBOOKS WERE AVAILABLE AND THEN LET THE STUDENTS DECIDE ABOUT BUYING THEM OR NOT. SO I'M GOING THE TURN IT OVER NOW TO STEVE.

>> OKAY. NEXT SLIDE. NEXT SLIDE PLEASE. SO THE OTHER ACTIVITIES INCLUDED SETTING UP AN INTERNAL CLOUD SERVER SIMILAR TO WHAT YOU MIGHT GET FROM DROPBOX WHERE WE CAN FACILITATE THE UPLOADING, DOWNLOADS AND COLLABORATION OF FILES FROM THE iPad. YOU MAY KNOW THAT NATIVE FILE MANAGEMENT WITH THE iPad IS SOMEWHAT DIFFICULT SO THIS CLOUD SERVER NEGATES THAT PROBLEM. WE ALSO SET UP A WEB PAGE IS

iPAD SUPPORT AND WE AGGREGATED A BUNCH OF KNOWLEDGE RESOURCES, iPAD TRAINING AND TUTORIAL INFORMATION AND LISTED ALL THE SUPPORT CHANNELS FOR STUDENTS. FOR iPAD DISTRIBUTION AND TRAINING FOR THE MEDICAL STUDENTS, WE FOUND AN HOUR-AND-A-HALF INTO OUR SCHEDULE WHERE WE BROKE THEM UP INTO THEIR PERSONAL GROUPS AND PAIRED THEM WITH A TECHNOLOGY PERSON AND WALKED THEM THROUGH EVERYTHING FROM OPENING THE SHRINK WRAP, GETTING APPLE ID s, GETTING ON THE NETWORK AND SETTING UP E-MAIL. NEXT SLIDE PLEASE. SO IN OBJECTIVE TWO, eLEARNING AND IT STAFF DEVELOPED A PLAN TO CONVERT EXISTING LOCALLY-CREATED INTERACTIVE LEARNING MODULES INTO IOS-ENABLED INTERACTIVE CONTENT. NEXT SLIDE. SO THE ACTIVITIES FOR OBJECTIVE TWO INCLUDING TAKING PREEXISTING MATERIALS IN POWER POINT AND OTHER FORMATS AND CONVERTING THEM INTO AUDIO AND VIDEO FILES FOR DELIVERY ON THE iPAD IN ORDER TO SAVE LECTURE TIME. WE ALSO STANDARDIZED THE COURSE CONTENT, THE DIGITAL COURSE CONTENT AND APPROPRIATELY SIZED AND FORMATTED THE CONTENT SO THAT IT COULD BE ON THE iPAD VIA OUR LEARNING SYSTEM. WE TOOK ONE EDUCATIONAL MODULE AND CONVERTED IT INTO AN INTERACTIVE MAP. WE HAD SOFTWARE TO INSTALL ON A MAC OR PC THAT WE CONVERTED INTO AN IOS PLATFORM APP. NEXT SLIDE. IN OBJECTIVE THREE, WE WANTED TO CREATE A PORTAL WHERE WE COULD OFFER A COLLECTION OF LIBRARY STAFF-REVIEWED APPS FOR USE FOR STUDENTS AND FACULTY. NEXT SLIDE. HERE YOU'RE SEEING THE FRONT PAGE OF OUR IURMC APPS WEB SITE WHERE YOU CAN FIND OVER FIVE DOZEN APPS REVIEWED BY LIBRARY STAFF. WE ALSO ADDED THE ABILITY TO ALLOW USERS TO LEAVE THEIR OWN FEEDBACK AND YOU CAN ALSO REQUEST AN APP TO BE REVIEWED BY LIBRARY STAFF FROM THIS PAGE. NEXT SLIDE. SO IN OUR LESSONS LEARNED, YOU CAN SEE BY THE QUESTION THAT WE ASKED IN iPAD ASSESSMENT, I AM VERY FAMILIAR WITH THE iPAD THAT STAFF THOUGHT THEY KNEW MORE THAN THEY DID, AND THAT IN THE END IT CHANGED THEIR OWN PERCEPTION OF WHAT THEY THOUGHT THEY REALLY KNEW AND MANY STAFF ACTUALLY SHARED WITH US THAT THEY HAD WISHED THEY HAD ANSWERED THIS QUESTION DIFFERENTLY FROM THE BEGINNING. NEXT SLIDE PLEASE. AND AS YOU CAN SEE BY OUR POST ASSESSMENT SCORES, WE HAD A SIGNIFICANT INCREASE IN OUR iPAD SKILLS. NEXT SLIDE PLEASE. THIS IS IMPORTANT. WE FOUND THAT iPADS ARE VERY PERSONAL DEVICES AND IN FACT A LOT OF OUR CLASSROOM TRAINING DETERIORATED INTO MORE OF A ONE-ON-ONE SESSION WITH PEOPLE BECAUSE THEY ALL HAD THEIR OWN INDIVIDUAL NEEDS AND QUESTIONS. WE ALSO FOUND THAT YOU CAN'T REALLY GIVE SOMEBODY AN iPAD FOR THE DAY OR LEND THEM ONE AND EXPECT THAT THEY'LL BE SUCCESSFUL. IF THEY DON'T

ESSENTIALLY OWN IT, THEY'RE NOT GOING INTEGRATE THIS DEVICE INTO THEIR LIVES SUCH AS CONNECTION TO E-MAIL AND SOCIAL MEDIA AND SO ON. NEXT SLIDE PLEASE. SO TO TALK A BIT ABOUT OUR OUTCOMES AND UPDATES AND WHERE WE ARE NOW WITH RESPECT TO TECHNOLOGY, THAT CLOUD STORAGE SERVICER WE SET UP INTERNALLY DIDN'T WORK WELL SO WE'RE EVALUATE OTHER OPTIONS EXTERNALLY LIKE BOX.COM AND TRYING TO DECIDE IF WE CAN USE THIS SERVICE AND STILL MEET THE SECURITY NEEDS THAT WE HAVE IN OUR HEALTH ARENA. WE ALSO HAD OPENED -- HOPED THE STUDENTS WOULD BE ABLE TO USE THEIR iPADS AND DO WIRELESS PROJECTIONS FROM N THEIR SMALL CLASSROOMS AND WE WERE COUNTING ON APPLE TV TECHNOLOGY TO HELP US WITH THIS, AND ALTHOUGH IT WORKS GREAT AT HOME, IT DIDN'T WORK WELL IN THE ENTERPRISE. SO WE'RE LOOKING FOR A SOLUTION FOR THAT AS WELL. I'LL TURN IT OVER TO JULIE.

>> OKAY. ANOTHER VERY POSITIVE OUTCOME FOR US WAS THAT THE USE OF THIS TOOL T IPAD, REALLY CHANGED THE MEDICAL STUDENTS' THINKING ABOUT USING TECHNOLOGY IN THE CURRICULUM. THEY'RE NOW REALIZING THAT TECHNOLOGY'S IMPORTANT AND THEY'RE BEGINNING TO INVEST IN ITS DEVELOPMENT AND IT'S USE WITHIN AND OUTSIDE THE CLASSROOM. A BRAND NEW POSITION AND INSTRUCTIONAL SUPPORT PERSON FOR THE SCHOOL OF MEDICINE WAS APPROVED AND FUNDED WITHIN THE eLEARNING GROUP OF THE LIBRARY. IT TOOK US SEVERAL MONTHS BUT WE FINALLY HIRED SOMEONE WHO WILL START WORK WITH US NEXT WEEK, IN FACT, WORKING JUST WITH THE SCHOOL OF MEDICINE FACULTY TO AUGMENT TRADITIONAL FACE-TO-FACE COURSES WITH INTERACTIVE MULTI MEDIA CONTENT AND THEN DELIVER THAT IN A DIGITAL MOBILE ENVIRONMENT. ANOTHER OUTCOME OF HAVING iPADS IS THAT THEY NOW ALLOW THE MINOR LIBRARIANS TO HAVE FUNCTIONAL KIND OF ON-THE-GO ACCESS TO RESOURCES AND TOOLS. THIS SUPPORTS THE LIBRARIANS LIAISON WORK WITH FACULTY STAFF AND STUDENTS IN ALL THE DEPARTMENTS OF THE MED CENTER AS WELL AS WITH PATIENTS IN OUR INFORMATION PRESCRIPTION PROGRAM. AND FINALLY, THE MOST SIGNIFICANT OUTCOME IS THAT THIS PROJECT SHOWCASED THE LIBRARY'S TECHNOLOGY EXPERTISE AND OUR COLLABORATIVE APPROACH IN WORKING WITH SO MANY DIFFERENT CURRICULUM AND TECHNOLOGY-RELATED GROUPS AND INDIVIDUALS IN THE MED CENTER. IT REALLY HELPED US TO ACHIEVE A WHOLE NEW LEVEL OF CREDIBILITY. WE ARE NOT ONLY REC NICED AS THE IPAD EXPERTS, BUT AS THE TECHNOLOGY PROVIDER WHO IS WILL STEP UP AND GET THINGS DONE. THE IT'S DEFINITELY BEEN A WIN FOR OUR LIBRARY AND FOR OUR INSTITUTION. THANK YOU.