

Final Report Outline for NN/LM Pacific NW Region Subcontracts and Outreach Awards

Please save as a Word document and submit as an email attachment to the appropriate NN/LM PNR staff contact.

COVER SHEET

Title of the Project:	Oregon 211 Outreach Project
Name of Institution:	211info
Project Leader's Name:	Laura Kuperstein
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Time Period Covered:	September 1, 2008-August 31, 2009 Extension November 12, 2009-April 30, 2010
Date Submitted:	May 3, 2010

NARRATIVE DESCRIPTION

1. Executive Summary: Summarize the project's major accomplishments.

This project provided community based trainings to health and human service professionals in rural areas of Oregon on the services of 211info, efforts to create a 2-1-1 statewide system and NN/LM resources for both health and safety. OHSU Library of Medicine staff provided programmatic information, advice and materials for the trainings. A power point was created, materials were organized and evaluation tools were developed. The first training was a trial run with the rural Molalla police and fire departments to get feedback on the relevance of the materials and information presented. This was followed by a total of seven more trainings in the following counties: Marion (2), Douglas, Hood River, Wasco, Sherman, and Columbia counties.

A total of 87 professionals working in social services, health, libraries and employment offices attended the trainings. Time was spent reaching out to United Ways, Commissions on Children and Families, Community Action Agencies, Emergency Responders and hospitals to find interested parties and organizations willing to host and promote the event. The result was that both the venue and the audience varied from one community to the next. Each training started with a viewing of our new 211info film clip about our statewide expansion plans. This was a very effective tool which allowed the audience to see the 211info Call Center at work. This was followed by a power point presentation which included the use of screen shots to explain and demonstrate websites. The decision to use screen shots was based on the fact that internet access is not reliable in different settings and in some rural areas of Oregon. A sign in sheet aided in gathering the necessary information on participants including emails for a follow up survey. Evaluations were completed by most participants.

Overall the presentations were very well received. Participants expressed excitement about the idea of a statewide 211 system and many were happy to learn about MedlinePlus. The project did meet much of the original goals for increasing support for a statewide 2-1-1 system in Oregon, increased awareness of NN/LM resources and improved the ability of public health and human service professionals to meet their clients' needs. One area that was not fully addressed was increasing awareness of specialized websites such as PubMed, the Household Products Database, ToxTown, TOXNET and HazMap by emergency management professionals. During preparation and testing of the project, it was determined early on that it was best to present the area of MedlinePlus that addresses safety concerns and instruct about the materials and linkages available on the site. This was done because of the presenter's lack of expertise in this field of work and due to the feedback from the Molalla fire and police departments. In the end, although emergency responders were invited to a majority of the trainings, only one attendee identified himself as working in this field.

2. Geographic region/number of counties: List the geographic regions or all the counties that were impacted by the project.

The counties covered by this project were Columbia, Douglas, Hood River, Marion, Sherman and Wasco Counties in Oregon.

3. Collaborations/Partnerships: Include names and types of organizations with which there was collaboration at any time during the project. Provide the current status of the partnerships, challenges encountered, and lessons learned.

Emily Ford, OHSU Library of Medicine, provided advice and materials in the early stages of organizing the training. Each location became a partner in terms of promoting the event. The following is a list of locations and partner agencies:

Columbia County – Community Action Team

Douglas County – United Way

Hood River, Sherman, Wasco Counties – Commissions on Children and Families

Marion County – Marion County Health Department

Marion County – Salem Hospital Community Education Center

4. Training: *NOTE: If you haven't already done so, please complete a record of Training/Demonstration Sessions using the form at <http://nmlm.gov/evaluation/datacollection/ActivityInfo.pdf> and fax to your PNR staff contact at (206)543-2469. In this final report, provide a summary of the training events and participants:

Total # of sessions for the Project:	8
Total # of sessions in which half or more of participants were from minority populations:	0
Total # of participants for the Project:	87

Breakdown of the count of participants by:

Health care or service provider, with a subtotal for public health personnel	16
Health sciences library staff member	5
Public/other library staff member	1
Member of the general public	65

5. Training sites: Provide a brief description of training sites.

Trainings were provided in a variety of venues – 3 were in city halls, 1 at a county health department, 2 in public libraries, one at a United Way office and one at a hospital. All were adequate in terms of space and ability to project a power point presentation. One exceptional location was the new Salem Hospital Community Health Education Center. Another was a brand new public library that is located within a junior/senior high school in Moro.

6. Exhibits: List all the exhibits connected with the projects (if applicable). Include the meeting name, dates, location, estimated number of contacts made, demonstrations given and general impressions of success. *NOTE: If you haven't already done so for all exhibits, please complete an exhibit report found at <http://nmlm.gov/pnr/funding/ExhibitReportOutline09-12-02.doc> and submit with this report.

N/A

7. Resource materials: Provide a brief description of any materials that were developed for training or for promotion/marketing (include newspaper announcements, brochures, etc.). Include copies of materials developed. If web-based resources were developed, please provide the URL for the site where the materials are located. URLs for all web-based training materials should also be sent the National Training Center and Clearinghouse (NTCC) for inclusion in the Educational Clearinghouse (<http://nmlm.gov/train/>). Provide verification that this has been done or provide a date by which it is expected that URLs of web-based training materials will be sent to the NTCC's Educational Clearinghouse.

The only item developed for this training was a two page flyer on 211info (attached separately). Other materials distributed were brochures on Oregon SafeNet and Go Local along with MedlinePlus and Go Local pens.

8. Web sites: Detail the current status of web sites created as part of the project. Include URL, plans for future maintenance, and impact.
N/A

9. Document delivery and reference services: If document delivery services and reference services were provided, please provide appropriate statistics.
N/A

10. Approaches and interventions used: Describe the specific steps or activities used in the following areas: identifying and scheduling sessions; promotion/marketing; training; personnel/staffing; web site development.

The following steps were used to prepare for and publicize the trainings:

- Met with Emily Ford and Dolores Judkins, OHSU Library of Medicine, to increase knowledge of NN/LM disaster related resources and outreach methods to rural areas of Oregon. Met two more times with Emily to continue these discussions, gather materials and review plans.
- Created power point, surveys, and developed and organized handouts for presentations
- Met with Stephen Guntley, 211 statewide coordinator, to discuss the current status of statewide outreach efforts and organize contacts
- Discussed project with 211info Board member, Mark Tennyson, 9-1-1 Program Analyst with

Oregon Emergency Management

- Discussed project with Tom Clancey-Burns, Executive Director, Community Action Partnership of Oregon
- Tested presentation with the Molalla Police and Fire Departments
- Identified possible organizations who are natural community organizers/conveners in their area and who might be interested in the presentation. Started contacting organizations in areas where there is not currently a 2-1-1 service in operation.
- Used those organizations who agreed to convene the meetings to locate the space and publicize through their networks as these presentations were geared for professionals. Publicizing was done almost exclusively through e-mail announcements.

11. Evaluation: How was the project evaluated? What results were achieved based on the objectives of the project?

A post survey was given out at the end of each training and a follow up survey was done within 1-2 months using Survey Monkey. Results of these surveys are attached.

12. Problems or barriers encountered: Provide details on problems encountered in the areas of promotion/marketing; training; equipment/telecommunications; personnel/staffing; and web site development.

There were several problems that created challenges for this project. First was the fact that the 2-1-1 landscape has changed significantly since the writing of the original proposal. The OR 211 organization no longer exists and 211info has taken over the responsibility of creating a statewide system. We are farther along at this stage with developing partnerships in various parts of the state. As a result, areas that were mentioned in the original proposal did not see the need for an introductory training on 2-1-1. This created additional challenges with finding organizations who would be interested in the training. In addition, completing the project in the five month extension period contributed to the fact that only 8 trainings were completed rather than 10.

13. Continuation plans: Report on how you plan to continue the project. Will all or some of the project's activities continue? Who will provide the funding and staffing to do so?

At this time there are no plans to continue with this project. However, we will build on the interest that was generated by these trainings as we work towards the statewide 2-1-1 system.

14. Impact: Include information on the perceived and actual impact of the project on the library, institution, or consortium. This can include the effect of the project on the library's image, increased utilization of the library, etc.

The trainings were very well received and it was a great opportunity to talk about MedlinePlus to audiences who were unaware of this wonderful resource.

15. Recommendations for improvement: Include suggestions for alternative methods, training

materials, promotional materials, etc.

Given that few emergency responders were reached through this project, more time may have allowed for increased efforts to reach this group and develop a training that would meet their needs.

FOLLOW-UP QUESTIONS

If answers to the follow-up questions are contained elsewhere in your report, indicate where they are located.

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| 1. | Were your original project goals and objectives met? If not, why not?
Already addressed in the Executive Summary. |
| 2. | What significant lessons were learned which would be of interest or use to others conducting outreach projects? Which strategies were the most effective in implementing the project? Relying on local, community oriented organizations was an effective and efficient way to promote the project. These are the same organizations who will be involved in the development of a statewide 2-1-1 system. These relationships, particularly in rural areas, are invaluable to the success of such a project. In addition, creating a project around reaching rural communities was very much appreciated by the hosting organization and the attendees. |
| 3. | If you were to start all over again, what, if anything, would you change about your goals, project plans, etc.? I might have put less emphasis on the various disaster related websites in the original proposal. Without expertise in this field, it is difficult to fully comprehend to the needs of emergency responders and what is most relevant to present in a short training. Instead introducing all participants to the section of MedlinePlus that addresses safety and disaster issues was a good fit within this project. |
| 4. | What advice or recommendations would you give to anyone considering a similar outreach effort?

In this case, I was very mindful of the fact that rural areas have limited resources and that participants probably have a high degree of understanding of their local services. I provided other reasons why our services and the information presented would be useful. I believe that the responses to the surveys indicated that there is a need for reliable information, for information that may be outside of a specific geographic area or outside of a person's expertise. The professionals who attended expressed the fact that they appreciated learning about both 211info and MedlinePlus which will support them in their work with patients and clients. |
| 5. | Please describe plans for disseminating lessons learned and other information about the project, such as through a conference presentation or publication. In accordance with the |

NIH Public Access Policy (<http://publicaccess.nih.gov>), project directors are asked to submit voluntarily to the NIH manuscript submission (NIHMS) system (<http://www.nihms.nih.gov>) at PubMed Central (PMC) final manuscripts upon acceptance for publication. I would be happy to discuss ways in which we can get the information out.