EXECUTIVE SUMMARY

The Delaware Academy of Medicine and the Delaware Division of Libraries have joined forces to conduct a strategic planning process for medical library and information services in Delaware. Titled “A Prescription for the Future,” the outcomes of the strategic plan are expected to document the need for improved medical library and information resources in Delaware, to make recommendations for improvements, and to encourage increased investment in these services for the benefit of all Delawarleans.

Until the early 2000s, the Delaware Academy of Medicine offered consumer health information services only at its Wilmington location. As the Academy prepared to move to new quarters on the campus of Christiana Care Health System (CCHS), its Director of Library and Information Services proposed assigning medical librarians to work in public libraries. A pilot project was developed and a full-time contract consumer health librarian was placed at the Dover Public Library in Kent County. In subsequent years, companion positions were added at the Rehoboth Beach Library in Sussex County and at the Bear Library in New Castle County.

The three consumer health librarians are employees of the Delaware Academy of Medicine and report directly to the Academy’s Director of Library and Information Services. Their job responsibilities include confidential reference service, education and outreach to the community, collection development, and developing the health reference skills of the public librarians throughout Delaware. Following a review of the literature and a series of interviews with the consumer health librarians and with public library managers from Delaware’s three counties, a series of best practices for health information services in public libraries is also presented.

The best practices for consumer health information in public libraries include the following:

- Form strategic partnerships that include public libraries, medical libraries, and community organizations and agencies.
- Assess community needs and plan the scope of service.
- Provide consumer health information at the time of need and at the point of service.
- Offer current, reliable and accurate sources of information.
- Promote and market the service widely.
- Develop plans to sustain and/or expand the service.

Descriptions of the best practices, including examples and scenarios of best practices in action, are presented along with recommendations and opportunities to improve the effectiveness of Delaware’s consumer health information service in public libraries.
I. INTRODUCTION

The Delaware Academy of Medicine and the Delaware Division of Libraries have joined forces to conduct a strategic planning process for medical library and information services in Delaware. Titled “A Prescription for the Future,” the outcomes of the strategic plan are expected to document the need for improved medical library and information resources in Delaware, to make recommendations for improvements, and to encourage increased investment in these services for the benefit of all Delawareans. PJ Grier, Director of Library and Information Services at the Delaware Academy of Medicine, likens the current state of medical librarianship in Delaware to four silos operating independently from each other. He describes these silos as follows:

1. Clinical information delivery to healthcare providers (facilities include hospitals, medical centers, and the Delaware Academy of Medicine).
2. Consumer health information delivery to the public (facilities include Rehoboth Beach Public Library, Dover Public Library, Bear Public Library, Gill Consumer Health Library at CCHS, and the Junior Board Cancer Resource Library at CCHS).
3. Public health information delivery to policymakers, lawmakers, courts and various state agencies (no physical place or space).
4. Virtual resources provided to the public, healthcare providers, public health information services and federally qualified health centers (provided through the Division of Libraries, Delaware Academy of Medicine, DelMIRA, and CCHS).

Grier seeks to determine what changes are needed to link these silos and ultimately to create an integrated statewide model for health information delivery.

Overview of the consumer health information movement

The consumer health movement in the United States emerged within the more general consumer movement in the 1960s -1970s. Although various media reports in subsequent decades would have us believe that healthcare providers were initially “against” the idea of patients seeking health information on their own, today there is a greater acknowledgement that being informed about our health care is a positive trend. Consumers more routinely seek to be informed about their health needs and to be engaged in health-related decisions. People go online, to the library, and to other information sources to learn about a new diagnosis, to find out more about medical tests and lab values, to understand medication side effects, to contemplate alternative therapies, to look for health insurance options, and to check the credentials of healthcare providers. The era of unquestioning compliance with doctors’ orders is over, and by and large, patients have accepted the reality that an extended office visit with a family physician has largely gone the way of the house call. Today, our medical appointments are brief if not rushed, and patients are increasingly expected to learn more on their own.

Along with the emergence of the consumer health movement came a shift in the access to health information. Prior to recognizing the benefit of patients being well informed, medical libraries and medical librarians were thought to speak a private language, to serve the exclusive needs of white-coated health professionals, and to be off-limits to patients. Complex jargon and a
specialized controlled vocabulary allowed, if not encouraged, healthcare providers to keep health information close to the vest, or shall we say, close to the lab coat.

The provision of consumer health information has long been of interest at the Delaware Academy of Medicine. In 1992, the Academy established a consumer health library in Wilmington. A frequently cited study conducted in the mid-1990s examined the use of information supplied by Delaware’s consumer health library and attempted to determine the impact of library services on consumers’ knowledge, actions, or feelings regarding personal health concerns. The findings of the study suggested that the impact of consumer health information services increases knowledge, leads to consumer contact with a healthcare provider for appointments or second opinions, assists consumers in choosing treatment options, encourages compliance with medical instructions, and contributes to changes in lifestyle (Pifalo, 1996).

In 1997, the National Library of Medicine (NLM) introduced free Medline searching online with the launch of PubMed. Initially anticipated to be used exclusively by healthcare professionals and medical librarians, NLM quickly realized that the general public had discovered its new resource and was attempting to use it to find information for the consumer. This increased interest in Medline led to the development of MedlinePlus, an online consumer health information resource, and provided the impetus for NLM’s focus on health information for the general public. In 1998, NLM began to explore ways to reach consumers through collaborations with public libraries and to foster partnerships between the National Network of Libraries of Medicine (NN/LM) and public libraries. “From the beginning of this initiative, there was clear recognition that hospital, academic health sciences, and public libraries are important partners in reaching the public,” said key personnel of the NLM. (Wood, 2000).

By the early part of the 21st century, the following additional changes culminated to impact the delivery of consumer health information in all settings, but particularly in public libraries: 1) increased access to the Internet; 2) increase in the quality of health information available on the Internet; 3) realization that American lifestyles are leading to serious health problems; 4) maturation of the consumer health movement; 5) increase in high-quality print resources for consumer health; 6) emphasis on health literacy; and 7) September 11, 2001. Other issues that remain on the minds of consumer health information providers include the number of health news items available in all media; the aging baby boomers and their impact on healthcare financing; less time for physicians and nurses to provide health information and patient education during regular office visits; and the popularity of complementary therapies (Gillaspy, 2005).

Today, consumer and/or patient health information services are increasingly available to patients through hospital libraries, and to the general public in public libraries. While reports on the number and types of health information queries in public libraries vary from region to region, there is little dispute that providing current and accurate health information, in multiple formats, languages, and reading levels, where and when consumers need the information, is important. Likewise a “given” is the importance of building partnerships to identify and effectively serve the health information needs of our communities.
Consumer Health Information Services in Delaware Today

The Delaware Academy of Medicine’s PJ Grier is credited for recognizing an opportunity to make a significant change in how consumer health information is provided in Delaware. Until the early 2000s, the Academy offered consumer health information services only at its Wilmington location. As the Academy prepared to move to new quarters on the campus of CCHS, Grier proposed placing medical librarians in public libraries. “We should place our staff where the people go,” he said, “and the people are going to public libraries.” He approached the Delaware Division of Libraries and initiated a pilot project that placed a full-time contract health librarian to provide consumer health information service at the Dover Public Library in Kent County. In subsequent years, companion positions were added in Delaware’s two other counties: at the Rehoboth Library in Sussex County and at the Bear Library in New Castle County.

The three consumer health librarians are employees of the Delaware Academy of Medicine and report directly to Grier. Their job responsibilities include confidential reference service, education and outreach to the community, collection development, and developing the health reference skills of the public librarians. The consumer health librarians attend health fairs, participate in local health-related coalitions and community activities, sponsor “Wellness Wednesdays” monthly in the libraries within their county-based service area, respond to patron health-related queries that come via walk-in, phone or email with detailed information packets, and contribute to “Go Local Delaware,” a portal of local health agencies and services hosted by MedlinePlus. Two of the three librarians also contribute to their host libraries by working one evening shift at the reference desk weekly and one Saturday per month.

According to Grier, around the same time that he was proposing an expansion of the consumer health information service, the State Division of Public Health had identified critical statewide concerns including disparities in health care, access to health care, under- and uninsured residents, socioeconomic factors affecting health, and health literacy issues. The consumer health program was seen as an effective tool for addressing some of the state’s current health concerns, and a good match for current sources of funding available for statewide health information services.

The funding for the salaries of the three full-time librarians, fringe benefits, plus modest amounts for health-related materials at the host libraries, program promotion and travel is provided through the Health Fund Advisory Committee, otherwise known as Delaware’s “tobacco money.” Funding is competitive through an annual application process and has remained flat since the inception of the program. Increasing personnel costs, particularly the cost of health benefits, has resulted in less money for new materials and for promoting the service. Grier has been urged by the Fund to seek additional funding from other organizations to sustain and/or expand the service. He concurs that adding other funding sources is essential to the long-term viability of the service.

Concerns about sustaining the funding for the current level of service are only heightened by the knowledge that there are critical needs that the program is currently unable to address because of a lack of resources. According to Grier, these needs include updated the print health collections in public libraries throughout the state, improved promotional materials with which to spread the
word about the consumer health information service, training to better position staffers in the public libraries to provide basic health information service at the time and place of need, and a statewide web portal for consumer health information resources.

**Purpose and organization of this document**

This document identifies and describes a series of best practices in consumer health information in public libraries. A ‘best practice’ is a technique or methodology that, through experience and research, has proven to reliably lead to a desired result. A commitment to using best practices in any field is a commitment to using all of the knowledge and technology at one’s disposal to ensure success. Unlike hospital libraries where Joint Commission accreditation standards exist to evaluate services and to secure government funding, public libraries are not subject to the same rigor. As a result, there is significant variation in the quality and quantity of public library services from town to town, and from state to state. Absent such standards or requirements, examining library services through a best practices framework is a positive, proactive way to strive for quality improvement.

The best practices for consumer health information in public libraries presented herewith are as follows:

<table>
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Each of these best practices is described in brief and includes “Best Practice in Action” examples and/or a “Best Practice How-To.” Appendices include a summary of consumer health information trends, a chart depicting the best practices applied to Delaware libraries, summaries of the interviews conducted, and a resource list for more information.

**Key Players in Determining Best Practices**

National organizations and agencies that have encouraged the development of best practices in consumer health information bear mentioning and are as follows:

*Healthy People 2010:* This initiative, launched by the Department of Health and Human Services in 2000, outlines a prioritized set of health objectives representing the most critical public health issues currently facing the United States. Its two main goals are to increase quality and years of health life and to eliminate health disparities. Healthy people 2010 recognizes that public and private agencies must form collaborative partnerships to address the following leading health indicator cornerstones:
• The information people have about their health and how they can make changes for improvement.
• The healthful behavior choices people make.
• Where and how people live.
• The quality and accessibility of health care people receive.

**Turning Point:** Funded by the Robert Wood Johnson Foundation and the W.K. Kellogg Foundation, the Turning Point initiative seeks to improve the public health system in the United States by making it more community-based and collaborative. Since its inception in 1997, Turning Point has resulted in 12 state and 41 community-level partnerships aimed at improving public health through community collaboration (Turning Point National Program Office, 2003).

**National Library of Medicine and the National Network of Libraries of Medicine:** Since the 1990s, the National Library of Medicine (NLM) and its regional National Network of Libraries of Medicine (NN/LM) have sponsored and funded numerous projects with an overarching goal of improving access to electronic health information for consumers. Many of the projects funded by NLM involved medical and public libraries in partnership with a wide range of community organizations, including public health departments, schools, churches, and local professional associations. Projects provided training in the use of MedlinePlus and other health information resources and support for Internet access in a variety of settings. Community engagement is a guiding theme in a number of the projects sponsored by NLM. Projects note the importance of identifying community representatives who can serve as liaisons between the targeted community and the library (Ruffin, 2005).

**Medical Library Association:** The Medical Library Association (MLA) defines consumer health information as information on health and medical topics provided in response to requests from the general public, including patients and their families. In addition to information on the symptoms, diagnosis, and treatment of disease, consumer health information encompasses information on health promotion, preventive medicine, the determinants of health and accessing the health care system. Patient education is a planned activity, initiated by a health professional, whose aim is to impart knowledge, attitudes and skills with the specific goal of changing behavior, increasing compliance with therapy and, thereby, improving health. Consumer health information and patient education overlap in practice, since patient behavior may change as a result of receiving health information materials. Patient education and consumer health information often differ in terms of the setting in which the process occurs, rather than in terms of the subject matter.

In 1996, the Medical Library Association’s Consumer and Patient Health Information Section (CaPHiS) issued the following statement about the librarian’s role in the provision of health information:

> Health librarians, because of their knowledge and training in the identification, selection, organization and dissemination of information, play an important role in both consumer health information services and patient education. The role of the librarian differs depending on the mission and policies of the organization. Librarians’ activities in this area should be oriented towards the goal of producing a
healthy society as well as assisting the individual in making informed health decisions.

The United States National Commission on Libraries and Information Science (NCLIS): In 2004, the Commission introduced a program designed to honor libraries with the first recognition program to identify libraries that excel in providing consumer health information or offer services that promote a healthy lifestyle. Each state library was invited to submit nominees for the award. Called the 2004 NCLIS Blue Ribbon Consumer Health Information Recognition Award for Libraries, the designation was created to honor those library programs that do the best to job of identifying, obtaining or accessing, and disseminating health information to their users. Awards were made to 37 libraries and the submitted entries—a collection of best practices in and of itself—are found in the online report _Libraries and Health Communication: Model Programs In Health Information Provided by Libraries Throughout the Nation_. The information included for each entry includes the program description, justification and outcomes, replicability, community collaboration and sustainability, outreach, and contact information. The programs of the award-winning libraries are categorized as follows:

Providing consumer health information:
- Direct information provision to library patrons, or resource sharing with other libraries and information centers for direct information provision to library patrons.
- Providing consumer health information services to an underserved community, especially minority and rural populations.
- Purpose-built web sites (or portals to web sites) accessible through the library or information center’s own web page.

Services promoting a healthy lifestyle:
- Presentations to the public, with library speakers or with outside experts as speakers.
- Presentations to schools, other educational organizations, and public agencies.
- Services, programming, and materials specifically focused on healthy lifestyles (nutrition classes, health fairs, etc.).

Training and outreach programs:
- Consumer-focused, or information training for workers in related healthcare professions.
- Library/information delivery (staff-focused).

Collaborative programs & strategic partnerships:
- With libraries and other information-focused organizations, and with non-library information organizations.

Delaware’s Kent County Consumer Health Circuit Library Program was acknowledged by the NCLIS as a model program. Described as the first of three county initiatives to provide onsite services in public libraries, the consumer health circuit librarian provides outreach and programming for all of the public and school libraries in Kent County as well as networking with physicians and other healthcare providers.
Libraries for the Future: In 2004, Libraries for the Future, a nonprofit organization that champions the role of libraries in American life, sponsored the Langeloth Forum: Building Healthy Communities Through Public Libraries. The forum and a subsequent planning meeting resulted in *Community Health Connections: Emerging Models of Health Information Services in Public Libraries*. This document presents its own “best practices inventory,” the common elements of which are distilled into these major attributes:

- Reaching out to local groups and populations that have not traditionally used the library.
- Improving the flow of knowledge and best practice between the academy and the public library.
- Having a dedicated health information center in the library.
- Taking full advantage of electronic information technology (library users must be able to find the information easily, and the library must display its health information capabilities with enough prominence on its website for maximum benefit).
- Establishing partnerships and other cooperative relationships with local organizations and groups that have an interest in health and wellness.
- Creating interesting programs for young people to encourage the health and wellness habit early in life.
- Having a state library that works actively to make librarians and library users more aware of the public library’s capacity for delivering health and wellness information.
- Providing ongoing professional training for public librarians, who must be kept up to date on these changes of content, presentation, and practice.

## II. BEST PRACTICES IN CONSUMER HEALTH INFORMATION SERVICE IN PUBLIC LIBRARIES

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<th>Best Practice: Form strategic partnerships that include public libraries, medical libraries, and community-based organizations and agencies</th>
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<td>▶ A partnership, or a series of partnerships, delivers a continuum of information services to the community and is among the first steps in creating a broad and effective consumer health information service.</td>
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<tr>
<td>▶ Partners identify key community and health issues, underserved populations, health disparities, and how consumers gather and use health information.</td>
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<tr>
<td>▶ The librarians think beyond the existing role of the library to focus on the overarching needs of the community. Health issues are almost always a part of a community’s needs and the public library is likely to be positioned to offer corresponding support and resources.</td>
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Public libraries are found in most communities and their very nature of providing free, welcoming service—including evening and weekend hours and access to library materials and the Internet—make them an important vehicle for reaching the general public. Medical libraries add another dimension to a partnership—both as backup and support to public libraries and as an important resource for academic information useful to leaders of community organizations.
Depending on the nature of the partnership, the role for the librarian at the table may not be crystal clear when the partnership is in its early stage. But as goals emerge and activities get underway, the roles of the public and medical librarians solidify and often include collecting and disseminating information needed by the partners, promoting programs and services through written press materials, websites, and brochures, as well as providing direct public service to consumers.

A public library/medical library partnership can vastly impact the potential for reaching target audiences and help both organizations identify and meet their objectives. Public libraries have general interest collections that circulate and they serve as a community resource center. They are an integral part of the community and may have developed important relationships with community groups, non-profit organizations and local media outlets. Today many hospital and medical libraries likewise have goals that include outreach to their immediate neighborhood in addition to providing in-house patient education. Medical libraries have access to journals and other academic information sources not typically available in public libraries. In addition, health sciences librarians have expertise searching the medical literature and can support public librarians when they are faced with advanced health information queries.

Engaging the community—whether a neighborhood or a particular target audience—in planning and designing a health information program increases each group’s investment in the project. In addition, collaborating with representatives and/or members of the target population in an advisory role for planning and needs assessment can underpin the long-term success of a consumer health information service. Sometimes a health information partnership is initiated by a library, and other times the library will benefit from participating in existing community-centered coalitions and partnerships. Examples of both are included.

An essential element in creating successful partnerships requires thinking beyond the library. Public and medical librarians must be willing to contemplate the current issues facing the community—issues which at times may seem beyond the scope of a traditional consumer health topic. When librarians begin to think about the health of their respective communities, including issues such as teen pregnancy, violence prevention, literacy and rates of high school drop-outs, drug and alcohol abuse, only then can they begin to take their place at the table with other community-based organizations.

BEST PRACTICE IN ACTION:

Library Advisory Council

Port Washington Public Library, New York
[www.pwpl.org/information/advisory.html]
A Health Advisory Council was created to support the work of the Health Information Center of the Port Washington Public Library. Members of the Health Advisory Council, volunteers who are Port Washington residents working in health-related fields, are appointed by the library’s Board of Trustees to advise and serve the health interests of the community.
Library-Centered Partnership

**Rochester Regional Library Council, New York**

**Clic-on-Health: Community & Library Information Collaboration on Health**

[www.cliconhealth.org](http://www.cliconhealth.org)

CLIC-on-Health is a project that brings together libraries, health organizations and associations, healthcare delivery systems, and educational institutions in order to provide all the people of the greater Rochester area with the high-quality healthcare information and resources they need to make wise lifestyle and healthcare choices. The project is supported by New York State grants, and by a grant from the National Library of Medicine. It is coordinated by the Rochester Regional Library Council, a multi-type library consortium serving libraries in the five-county Rochester area.

The project describes partnerships as being a key to its success and lists the following partners:

- 77 public libraries in two library systems
- Medical libraries at the two largest hospitals in Rochester
- Rochester City School District Library System
- Arthritis Foundation, Upstate New York Chapter
- Monroe County Health Department
- Monroe County Office for the Aging
- Rochester Regional Library Council (provides office facilities and other support)

In addition to establishing a steering committee, Clic-on-Health held a public forum on consumer health information attended by 100 people, developed models of partnership between medical libraries, urban, rural, and suburban public libraries, and school libraries. Training on health information resources was conducted for 50 public libraries; 30 health agency personnel; 70 school librarians, nurses, and health teachers; and 50 staff members and seniors at inner-city senior centers (Americans for Libraries Council / Libraries for the Future, 2005).

Community-Centered Partnership

**The Bronx Health Link**


The Bronx Health Link, Inc. is a Bronx-wide network of diverse service providers, organizations, coalitions, agencies, community stakeholders, residents, and students. Its mission is to improve community health by identifying emerging community health issues, increase communication to better serve the community, provide information to providers and community residents on services and resources, and increase access to available services and programs.

The Bronx Health Link serves the Bronx and New York City in various ways, including as a clearinghouse for information & referral, providing technical assistance as needed, and broadcasting information through an email communication network that has over 500 subscribers. It provides e-mail messaging service on a wide scope of information and
resources including funding/grant/job opportunities, community health and public health issues, community events and resources, and provider events and resources.

**Best Practice: Assess community needs and plan the scope of service**

- The community to be served and its health-related needs are identified.
- Existing data sources are compiled and new information is collected as needed.
- The services needed to promote a healthy lifestyle in the community are determined.
- Measurable goals and objectives for the program/service/project, including for each of the partners, are agreed upon.
- Roles and responsibilities are defined.

Responding to the health information needs of a diverse community poses multiple challenges for libraries. While attempting to provide consumer health information services for all residents of a major city, or even an entire state, is a laudable goal, it may encompass so much territory that the library is prevented from focusing its resources on the particular health disparities that exist.

The library, in collaboration with other partners, will be more effective if it conducts an assessment of community needs before setting its goals and objectives. Alpi (2005), suggests that communities need to be defined before they are identified and suggest that characteristics according to which a community can be defined include language, geography, race, ethnicity, age, sexual orientation, and faith.

Existing demographic data can be a useful tool for gathering information about the community, but because the data may not be current, and because communities are often mobile, supplemental sources of existing data may include the local school district’s student profile and information gathered from community stakeholders including religious leaders, elected officials, parent organizations, and local businesses.

Just as important as knowing the make-up and identity of the community is having a complete understanding of its health information needs. The library should assess the perception of need, use in-house library data to understand what sources of health information consumers are using, and determine what other organizations are providing health information. In addition to tracking related reference questions, local hospitals, clinics, and health care agencies can also inform libraries about the health needs of the neighborhoods they serve.

Other potential sources of information include local ethnic organizations and newspapers, churches, and community groups. Contacts at these types of organizations can reveal collection development needs, outlets for promoting library services, and opportunities to participate in health fairs and community-wide events. When data about the community and its health information needs is identified and compiled, the partnership is better positioned to set its focus and plan its goals.
This comprehensive online tool will be most relevant in planning a new service but may also be helpful for ongoing projects seeking to examine their organization and effectiveness. It includes the following topics:

Overview of Community Health Information Programs:
1. Set the direction with a community assessment
2. Define stakeholders and partners
3. Define measurable goals, outputs, and outcomes
4. Plan activities to reach project goals
5. Define how a program will work using the logic model
6. Define an evaluation plan

In addition, the manual offers a link to an excellent example of how to do community assessments in Chapter 1 of the book *Measuring the Difference: Guide to Planning and Evaluating Health Information Outreach* by Catherine M. Burroughs.

In this chapter, titled "Stage 1: Conducting a Community Assessment," Burroughs describes the various processes needed to identify a target community. The work begins with a practical flow-chart that lists the specific, practical questions under three umbrella categories:

Identify Target Community:
- What to find out
- How to find out

Conduct Community Assessment:
- What to find out
- How to find out

Analyze Results:
- Review when setting agenda of goals and objectives

Burroughs provides practical tools and real-life examples of establishing a broad understanding about the targeted group of health information users and their environment, saving time and energy by gathering and using literature and existing data sources, and obtaining user input through qualitative and quantitative methods of data collection.

Finally, this chapter includes a toolkit section with sample focus group questions related to specific services and information-seeking behavior, selected library research articles with published questionnaires, additional sources for needs assessments, detailed tips for questionnaire development, and a library case example. Key questions about how the
information gathered from interviews, focus groups, or questionnaires in a community assessment to help set an agenda for goals and objectives are also provided.

Best Practice: Provide consumer health information at the time of need and at the point of service

- Print and electronic health information sources and services are available in local libraries at all times the library is open to the public.
- All librarians and other library staff members are trained to feel comfortable and confident assisting users with health queries.
- Users are referred to other organizations, libraries, or information sources only when the scope of the public library’s onsite services, including online consumer health resources, have been thoroughly exhausted and/or are insufficient for answering the question at hand.
- Public libraries know which local hospital and/or health sciences libraries and librarians serve the general public and readily make appropriate referrals.
- Community-based facilities, including public libraries, make computers available for the general public to access health information websites.

Surveys conducted in many libraries coupled with anecdotes from public library consumer health services, including those in Delaware, tell us that public libraries are not typically the first place consumers turn to when they have health questions. Consumers list family, friends, pastors, colleagues, and mainstream media, including the Internet, as the places they are most likely to seek information. But while public libraries may not be the first stop, it has been discovered that a good percentage of health consumers do visit public libraries in their search for health information. It follows, therefore, that public libraries should emphasize consumer health information services and should strive to make access to information as easy as possible.

The very nature of public libraries makes them well suited to provide health information to the general public. After all, public libraries are available in most communities, they are often available in the evenings and on weekends, and people who are familiar how U.S. public libraries operate recognize that they provide free and friendly access to information. But at the same time, library patrons are known to have limited expectations of public libraries. Satisfaction surveys generally yield extensive praise and few complaints. Most users seeking reference assistance are frequently willing to settle for “good enough” sources rather than trouble the librarian for something that might better meet his or her needs. In addition, it has become a given in the profession that the questions library users pose to the librarian are very often not the question for which they are seeking an answer.

These public library realities suggest that consumer health information services will be most successful when the information is provided at the point of need. This can be accomplished by being prepared to provide assistance at the time it is requested and by offering adequate collections in local libraries. Public libraries are wise to assume that when they refer users to a medical library or an off-site consumer health expert, a percentage of patrons is unlikely to
follow-up on that referral. Therefore, training public service staff in public libraries to become comfortable and confident to assist patrons with health questions, while not without significant challenges, is superior to creating complex chains of referrals for information.

Librarians express their discomfort about helping patrons with health queries for a variety of reasons. The nature of the topic may be private or cause for embarrassment, the vocabulary can be complex and intimidating, the patron may be upset or anxious about the health concern, or the library staff member may worry about implications of providing incorrect information. All of these topics can be addressed through training of staff members at local libraries.

BEST PRACTICE IN ACTION:

**The New York Public Library**

[http://www.nypl.org/health/]

Like many large library systems, NYPL established and continues to maintain a Health Information Center in its mid-town Manhattan central library. However, recognizing the need to deliver consumer health information when and where it is requested, NYPL developed **CHOICES In Health Information**. In 1999, NLM provided three-year funding totaling $450,000 to support to expand the service to all 85 neighborhood branch libraries.

A consumer health information librarian was hired for each of the system’s three boroughs, the Bronx, Manhattan, and Staten Island (Brooklyn and Queens are separate library systems). When an in-house study revealed that patrons were willing to settle for the information provided during visits to their local libraries and usually did not follow-up when it was suggested that they contact the consumer health specialist available to them, an ambitious staff training program was offered to assure that the best possible service was offered on site at the time of the initial inquiry. The training consisted of the following components:

These three courses were offered twice a year. All librarians and selected support staff were encouraged to participate:

1. **Medical Terminology for Public Librarians** (taught by a medical librarian from the New York Academy of Medicine).
2. **Face-to-Face: Strategies for Consumer Health Communication**, (taught by the CHOICES Project Manager).
3. **Health Information on the Internet** (taught jointly by NYPL’s consumer health librarians and the NN/LM).

In addition, staff members interested in gaining advanced health information skills were encouraged to enroll in classes on searching Medline that were offered by the Regional Medical Library, at that time housed at the New York Academy of Medicine. Participants were awarded MLA continuing education units for completing these courses.

The New York Academy of Medicine remains an important partner in NYPL’s service. In addition to delivering staff training workshops, the reference desk at the Academy agrees to be ‘on call’ to assist public librarians fully answer a reference question at the point of service. Though requests may not be numerous, the public librarians appreciate knowing they may reach
out to an Academy librarian for help with a ‘stumper.’ Sometimes this is limited to clarification of vocabulary and other times it involves fulfilling a patron’s request for a journal article held at the Academy (or available through the Academy’s participation in DOCLINE).

Medical Library Association Consumer Health Information Specialization
[http://www.mlanet.org/education/chc/]
The Medical Library Association offers a Consumer Health Information Specialization credential, the goals of which are to improve health information services for consumers, create partners in the delivery of consumer health information, and increase access to consumer health information courses. Medical librarians, public librarians, librarians working in consumer health libraries, and allied health professionals may participate.

The Consumer Health Information Specialization was created to help keep information providers current in the consumer health information field by providing access to new resources and ideas. The program is divided into two levels of participation: CHIS Level I is for those who desire a basic familiarity with consumer health information resources and requires completion of twelve hours of approved CHIS courses. CHIS Level II is for those who want additional training in consumer health areas and requires completion of 24 hours in approved CHIS courses.

Providing the resources to encourage public librarians to seek MLA’s consumer health information specialization is a best practice that public libraries may wish to pursue.

Healthnet: Connecticut Consumer Health Information Network
Lyman Maynard Stowe Library, University of Connecticut Health Center
[http://library.uchc.edu/departm/hnet]
Healthnet’s goal is to increase access to high quality, authoritative consumer health information for the citizens of the state of Connecticut directly and through their local public libraries. Healthnet emphasizes the librarian-to-librarian aspect of its service by training public librarians to effectively answer consumer health questions and to locate and use authoritative, high quality resources including print, online, and Internet resources; assistance to help public librarians answer consumer health questions; and maintenance of a website with topical resource guides and other tools to help librarians and consumers research health questions.

Healthnet staff encourages individual libraries to develop their own community-wide consumer health information programs and is available to assist the libraries with training, collection development, and other program activities. Connecticut librarians who want to provide their own training can attend the “Healthy Websites” session specifically geared for librarians. The librarians can duplicate the print guides and use the online links to teach a “Healthy Websites” session in their own libraries. Healthnet staff is available to assist with publicity and to answer questions the librarians may have about specific websites.
Consumer Health Information In Practice: Marisa’s Story

Marisa is a 48-year-old woman who has been suffering from diarrhea and abdominal discomfort for more than a month. Her family doctor told her that she probably has irritable bowel syndrome, gave her a prescription for Bentyl® and suggested that she try to relax. A few weeks later, Marisa was feeling no better, and on top of everything else, the medication left her with a terrible dry mouth all the time. She didn’t feel like her physician really listened to her concerns so she asked for a referral to a specialist.

The specialist, Dr. Wang, told Marisa that she may have something more serious than irritable bowel syndrome. It could be Crohn’s Disease, or colitis, or even an ulcer. Dr. Wang said it was important to find the cause of the problem and scheduled Marisa for an endoscopy and a flexible sigmoidoscopy. By the time Marisa got home from this appointment she was truly worried. She was suddenly facing the fact that she might have a serious illness and she was scared about the medical tests that she would go through in a couple of weeks. Her worry caused her to lose a night’s sleep and she started the next day feeling tired and anxious. Marisa told her co-workers what was going on and they encouraged her to go online and connect with an online support group or something. One co-worker even found her a website that said she should try a wheat-free diet before undergoing any tests.

Remembering that a librarian from her town’s public library recently participated in the community health fair, Marisa spent her lunch hour at the library. The librarian listened to Marisa as she asked about the conditions Dr. Wang mentioned and about the medical tests she was facing. The librarian showed her a book that had detailed information about medical tests—exactly how each test is performed, what the patient should do to prepare for the test, and what the test results might indicate. Dr. Wang had explained the tests to Marisa, but she was nervous at the time and so the details were foggy in her mind. Marisa copied several pages from the book on medical tests and then asked about the various diagnoses Dr. Wang said she might have.

The librarian showed Marisa some family medical guides with basic information about the diseases, but the book didn’t give enough details. So the librarian suggested that Marisa look at some reliable health websites for more information. She showed Marisa MedlinePlus and how to get to specific disease topics. MedlinePlus had all kinds of information—some in Spanish, some with plenty of detail, and some with excellent illustrations.

Marisa left the library with several copies from reference books as well as printouts from websites the librarian showed her. By the end of the day she felt a sense of relief—the illness she might be facing could be serious, but she knew that it was something she could manage. She was still concerned, but felt better now that she was equipped with good information. Marisa slept better that night and knew that she would be able to wait for her scheduled medical tests without a non-stop sense of fear and dread.
Best Practice: Offer current, reliable and accurate sources of information

- Current, reliable and accurate sources of health information are provided at all sites, in various formats, languages, and reading levels.
- Pre-selected consumer health websites and electronic databases are easily accessible on computers at the public library and in other community facilities.
- Library users are taught how to evaluate print and online sources of health information.
- Access to advanced medical information resources, including journal articles not available through public library databases, as well as assistance from medical libraries and librarians is readily available.

While collection development is a familiar, comfortable role for public librarians, in the area of consumer health information this traditional activity requires constant attention and a commitment to providing ample resources. Keeping abreast of the numerous publications, new editions of standard resources that quickly go out of date, as well as the vast array of health topics of interest to healthcare consumers is a challenging task. A collection development policy for health information will help a library determine the scope of its collection and answer these important questions:

- Will the focus be on a core collection of ready reference books or will the library also purchase circulating books on a variety of health topics?
- Will the library offer only consumer health books or will academic health sciences materials be included as well?
- What health topics are most needed by the target audience?
- Will alternative health topics be represented in the collection?
- What formats will be collected?
- Will materials in languages other than English be represented?
- What about materials for people with limited reading abilities?
- What criteria will be used to evaluate the health information sources considered for purchase?
- What criteria will be used to assure that the collection stays current?

Twenty Years Forward: A Statewide Library Services and Construction Infrastructure for Delaware Libraries recommends three different types of library facilities (three differently sized library facilities) for the state of Delaware: Anchor Library, Regional Library, and Community Library. The plan calls for varying levels of consumer health materials for each type of library. As implementation of the plan gets underway, a consumer health collection development policy can help determine the appropriate collections for Anchor, Regional, and Community Libraries.

BEST PRACTICE IN ACTION:

There are many examples of core collections that may be customized for public libraries. The CAPHIS website encourages libraries to post their core health lists on its website [http://caphis.mlanet.org/chis/collection.html]. However, when referring to any core list of health titles, it is important to remember that a core list is only as helpful as it is current.
Bibliography of Consumer Health Books: May 2005
From the Arkansas Consumer Health Information Network Resource Task Force
[http://caphis.mlanet.org/chis/archin.html]
This core bibliography includes 50 consumer health books that have been selected and evaluated by the Resource Task Force of the Arkansas Consumer Health Information Network. These books cover many subject areas to answer questions frequently asked in public and hospital libraries. Titles in the core reference section are considered essential for a basic collection in any size library while titles in other subject categories may be collected in accordance with each library's budget and user needs.

Healthnet: Connecticut Consumer Health Information Network
Recommended Books for a Consumer Health Library
[http://library.uchc.edu/departm/hnet/corelist.html]
In addition to this all-purpose core list of books, the following resources are available:
Alternative Medicine Resources [http://library.uchc.edu/departm/hnet/altmedres.html]
and Consumer Health Magazines and Newsletters [http://library.uchc.edu/departm/hnet/nlist.html]

Philly Health Info: The College of Physicians of Philadelphia’s Regional Community Health Information Project
[www.phillyhealthinfo.org]
The College of Physicians of Philadelphia created Philly Health Info (PHI), a regional community health information model. The goals of the project include providing citizens of the Philadelphia area with good health information and reaching people who are underserved through community sites such as library branches, community health centers, physician offices, and other convenient locations. An Internet portal that strives to benefit the community-at-large also provides targeted information for seniors, women, minorities, children, and youth. The web portal provides general health information and a directory of more than 500 regional health and medical services and resources. A network of community-based partnerships throughout the region offers access and assistance to consumers seeking health information. The project also recruits and trains volunteers to help the public access health resources and services.

The purpose of the MLA’s CAPHIS Top 100 List is to provide CAPHIS members and other librarians with a resource to use in their daily practice and teaching.

BEST PRACTICE HOW-TO:

Kenyon & Casini’s book, The Public Librarian's Guide to Providing Consumer Health Information (2002) offers extensive details on the topic of collection development and collection management. The authors caution that an abundance of health materials and a wide variety of medical topics must be addressed and note that in some medical subject areas there is too much available, and in other areas there is little or nothing at all published. In addition,
they note that health information is quickly out of date. The authors provide an extensive sample collection management policy for consumer health collections in public libraries with guidelines for determining the purpose and scope of the collection and selection tools and sources of health materials that include book reviews, bookstores and book jobbers, core lists, US government, health organizations, library collections, medical centers, electronic discussion lists, professional associations, newsletters, periodicals, journals, audiovisual materials, pamphlets, multicultural and multilingual health sources, and low literacy and health literacy resources.

**Best Practice: Promote and market the service widely**

- Partners and other community organizations are enlisted to assist in promoting the consumer health information service.
- Community culture brokers are contacted to assure that information is shared with segments of the population that may be unfamiliar with public library services.
- Marketing and promotional materials are targeted to the community identified as most in need of health information services. Brochures, flyers, newsletters, press releases and other materials are prepared and updated as needed, including in languages other than English where appropriate.
- Relationships with local media outlets help assure frequent exposure for the consumer health service and its community-based activities.
- A website describing the consumer health information services that are available is maintained and prominently linked from the websites of all partners.
- Health-related programs, lectures, and/or screenings identified to be of value to the target community are offered in conjunction with partner organizations.

Libraries sometimes err in thinking that outreach and promoting library services is best delegated to one person on the staff. With health information services, there can be an outreach role for everyone on the team. Youth services staff can be enlisted to share information about the program during school visits. The circulation department can assist by inserting promotional materials into health books being checked out. The need for health information is universal and library managers and supporters can talk up health information services anytime they have the opportunity to present information about their library.

Offering health information collections is not necessarily enough to bring new users to the library. Partners and community groups must be sufficiently informed of the health information collections and services to become comfortable referring their clients to the library on a regular basis. Engaging these organizations to present programs, lectures, and screenings in the library, or in conjunction with the library’s consumer health service, can draw people who might otherwise overlook the library.

Outreach is time consuming and depending on the size of the target population and the service area, it can feel like it is difficult to make a dent. Enlisting the help of volunteers, Friends’ of the Library groups and other advocates can help promote library services to local media, businesses, religious organizations, and local schools. Volunteers can also be asked to distribute the library’s
brochures for distribution at health offices and human services agencies (hospitals, senior centers, clinics, day care centers) and at community events. Libraries lacking resources in the language of the community might try reaching out to service organizations with bilingual staff that assist those populations, or to ESL classes where English-language materials may be shared or translated for non-English speakers (Alpi, 2005).

While outreach is time consuming, marketing can be downright expensive. Few public libraries have the resources to develop glossy brochures, to mail newsletters to everyone in the service area, or to insert paid advertisements in daily newspapers. This is where identifying target audiences helps assure that resources are applied where they are most needed. Perhaps the costs of advertising in the daily newspaper are prohibitive, but including information about consumer health information services in local church bulletins may be within reach. Likewise, smaller weekly newspapers are more likely to cover library programs and services, or perhaps even give the library a regular column. Libraries are also using email newsletters and listservs as a more economical way to get the word out.

BEST PRACTICES IN ACTION:

Health Information Center
Montgomery County Public Libraries, Wheaton, Maryland
[http://www.montgomerycountymd.gov/libtmpl.asp?url=/content/libraries/HealthInfo/hic.asp]
The Health Information Center in Wheaton, Maryland, identified the importance of outreach and marketing to minority groups who may not be familiar with public library services. An outreach coordinator was hired to promote the program in the following ways:

- Distributing brochures about the Health Information Center through Montgomery County.
- Offering educational programs on topics of significance to minority groups.
- Writing articles that describe the service for local newspapers.
- Provide training on effective outreach to librarians.

Consumer Health Information In Practice: Jack’s Story

Jack is a busy financial executive whose father was recently diagnosed with Parkinson’s disease. His father was not tolerating the medication his physician prescribed and the subsequent recommendation was for something called gamma knife treatment.

Jack’s mother called him at work in a state of panic and said that the doctors were going to cut open her husband’s head. She was terrified that he was too weak to undergo a major brain operation and also worried that Medicare wouldn’t cover this gamma knife surgery, which surely must be experimental. Jack tried to reassure his mother that everything would be ok and said that he would do some research into the treatment and come by over the weekend to be with his parents.
Jack went online at work and found some basic information about treating Parkinson’s Disease with gamma knife. He learned that gamma knife treatment was not a knife at all, but a machine that emits highly focused gamma radiation beams. He also learned that the success rate for gamma knife treatment is quite high, that it is not considered experimental, and that it usually is covered by Medicare. Jack felt better, but he knew that he needed a greater understanding of the treatment before he visited his parents. His mother, a retired nurse, would want to read everything about the treatment.

On his way home from work, Jack stopped at his local library, which he knew had a health information section. He was looking for more detailed information than what he previously found online. He showed the librarian the websites he already checked and asked what else he could read. The librarian suggested that Jack use a database, Ebsco’s Health Source®, to get recent journal articles. She showed him how to use the database and he was amazed at how many articles he found. He was glad to learn about this new source for more advanced information, and even more satisfied when the librarian told him that he could use his library card number to access the database later, from his home computer, when he had more time to devote to reading up on the subject. Jack knew that he would be well prepared for his weekend visit with his parents.

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**Best Practice: Sustain and/or expand the service**

- Planning begins early for the long-term sustainability of consumer health programs, services, and/or projects that launch in pilot mode or with short-term or non-renewable funding sources.
- A plan to periodically evaluate the effectiveness of the program/service/project is established.
- Health information is integrated, not absorbed, into ongoing programs and services.
- Partners contribute staff, time, and financial resources toward expanding and/or sustaining the services.
- An institutional commitment by all partners assures the long-term viability of consumer health information services.

As programs demonstrate impact and effectiveness, a commitment should be made to evolve beyond pilot project status to assure growth and long-term sustainability. A commitment of institutional support by all partners is essential. Reflecting on the sustainability of activities, Alan Rees, an early pioneer in the field of consumer health information service, observed the following pattern among consumer health information projects:

There would appear to be a sequence of events in the development of structured CHI programs. Under the initial impetus provided by one or more persons, funding is secured from local, state, and/or federal sources for the initiative of the program. After successful promotion, demonstration, and marketing, the program is absorbed into regular library operations as a result of the buildup of expectations, resources, and expertise. In this manner, successful CHI programs “self-destruct” as they become part of the parent library system.
The desired objective of funded CHI programs is, therefore, to catalyze, develop, extend, demonstrate, evaluate, and refine innovative services that will then be integrated into regular library operation (Rees, 1982).

Though Rees’ observation goes back twenty-five years, it holds true today. The Health Information Services at the New York Public Library is an example of a program that was absorbed into regular library service. While the mid-town Health Information Center continues to exist, the CHOICES program in the branch libraries has largely disappeared despite the fact that the need for health information services continues to persist throughout New York City. Sustaining health information services requires a financial commitment as well as buy-in that the service should be universal and integrated into the overall scope of public library services.

Establishing an ongoing steering committee or advisory council for the consumer health information service is one strategy for increasing sustainability. The Port Washington model did this by finding a prominent physician, community leader, and government official and making them honorary life-time members. An ongoing mechanism for evaluating the progress of the consumer health information can provide data to justify the service if and when funding becomes threatened. And because stories speak volumes, collecting anecdotes to share at opportune moments can be effective in making the case.

**Consumer Health Information In Practice: Paula’s Story**

Paula was a new librarian working at a branch library of an urban public library in the mid-1990s, the time when Internet access was newly available in public libraries but not yet found in most private homes. A woman Paula guessed to be in her late-thirties came to the library one day and asked Paula if she would teach her how to use the Internet. The library was crowded at the time, and there was a 60-minute wait for a public computer, so Paula encouraged her to come back in the morning when she knew she could better assist her.

The patron took Paula up on that offer, and Paula spent an hour or so with the woman, showing her what she knew about searching the Internet. For a while, the woman became a regular user of the library, coming in several mornings a week to use the Internet. Several months later, after not having been at the library in some time, the woman returned pushing a double stroller with two toddlers. She came specifically to introduce Paula to her adopted son and daughter, twins, and to thank Paula for teaching her how to use the Internet. “You didn’t know this,” she said, “but I wanted to learn the Internet because after years of dealing with infertility issues, my husband and I decided to adopt. I used what you taught me to find my way to these beautiful babies.” The patron became a wonderful spokesperson for the library from that point forward.

Consumer health information services that have lasting power are those that have institutional buy-in, authoritative governance, and an ongoing source of funds. In its 2005 best practices inventory, Americans for Libraries Council / Libraries for the Future notes the importance of having a state library that works actively to make librarians and library users more aware of the
public library’s capacity for delivering health and wellness information. The examples of best practices presented here focus on statewide programs.

BEST PRACTICES IN ACTION

**Consumer Health Information Resource Service (CHIRS): A Resource for Nebraska University of Nebraska Medical Center**
McGoogan Library of Medicine

In January 1985, a cooperative of three independent groups and agencies initiated the Consumer Health Information Resource Service (CHIRS) for Nebraska residents. The cooperative members included the McGoogan Library of Medicine at the University of Nebraska Medical Center, the Nebraska Library Commission (NLC), and more than 70 public libraries in the state. In the early 1980's, the state’s public libraries were receiving an increasing number of requests for medical information. However, the public libraries did not have the resources or the professional training to handle these requests. The public libraries referred the requests to the McGoogan Library of Medicine. McGoogan Library is the largest public health sciences library in the state and Nebraskans recognize McGoogan as the logical source for their health information.

McGoogan Library perceived the need for a consumer health information service based on the large number of requests and referrals for health information from Nebraska’s public libraries. The Nebraska Library Commission (NLC) divides the state into six library regions, designating six regional resource libraries to support each region’s smaller libraries. Because of this organized network of libraries, McGoogan recognized the NLC as an obvious partner in providing consumer health information.

In 1984 the McGoogan Library sought LSCA Title III funding from the Library Commission to develop a consumer health information program for the state. As stated in the grant application, the original objectives of CHIRS were to work within the structure of Nebraska Library System to improve the delivery of consumer health information to Nebraskans; to provide educational and consultation services to non-health science librarians, which would enable them to deliver enhanced first-line services, and to serve as a health information resource library for the state of Nebraska by providing information services beyond the capacity of the local library.

CHIRS aims to provide quality health information to Nebraska residents anywhere in the state at no charge. The public libraries and NLC readily accepted this model because CHIRS intends to enhance public library service. McGoogan resides in the background, while the public library remains the service point for residents. In order for the public librarians to remain comfortable as the first line in the information process, McGoogan provided training throughout the state to increase their knowledge of health resources. Through this training, McGoogan introduced public librarians to specialized health materials. McGoogan also provided written guidelines to improve local public libraries’ abilities to deal with medical questions.

During the early years McGoogan and the NLC publicized CHIRS to public libraries, healthcare professionals, and consumers by preparing brochures and posters for each audience. Additionally, McGoogan developed a display and traveling slide show that described and
promoted this new service. McGoogan Library and the NLC established a CHIRS governing board consisting of members from NLC, representatives from the six library systems, and the Nebraska Department of Health. The board advises and acts as advocates for the program throughout the state.

**Healthnet: Connecticut Consumer Health Information Network**  
Lyman Maynard Stowe Library, University of Connecticut Health Center

[http://library.uchc.edu/departm/hnet/](http://library.uchc.edu/departm/hnet/)

Healthnet was one of the first statewide consumer health information programs in the United States. Its services and programs include training public librarians throughout Connecticut to effectively answer health questions, assisting public librarians to answer health questions, providing a research service for Connecticut residents who can call Healthnet directly to obtain a customized packet of printed information related to a personal medical concern, training consumers to develop effective search skills, evaluating consumer health resources, and maintaining a website with topical resource guides and other tools to help librarians and consumers research health questions.

Originally funded with federal grant money from the Connecticut State Library, Healthnet was so successful in its first two years that the Connecticut Library Association, in its legislative lobbying efforts, was instrumental in obtaining state funding to allow the program to continue. The network concept of Healthnet focuses on the public library as the central source for up-to-date, authoritative health information. The structural relationship between the public libraries and other components of the network can be described as a free flow of information between all points of the network including Healthnet, the UCONN Health Center Library, public libraries, voluntary health associations, state agencies, senior centers, and self-help groups (National Commission on Libraries and Information Science, 2006).

**Massachusetts Board of Library Commissioners**  
[http://mblc.state.ma.us/index.php](http://mblc.state.ma.us/index.php)

A Health Reference Institute, developed in partnership with the University of Massachusetts Medical School, Harvard School of Public Health, and the New England Region of the National Library of Medicine has 100 participants, primarily public and school librarians. Activities include lectures, presentations, small group exercises, and hands-on work with medical library staff. The State Library, using LSTA funds, developed Health Reference Mini Grants of $6,000 for multi-format collections, health-related programming, required community partnerships, and publicity to raise awareness of new programs and services including a web presence. By 2005, twenty-nine proposals had been funded. The program fosters self-sustaining efforts to maintain collections and services, and it affirms partnerships across libraries and agencies (Americans for Libraries Council / Libraries for the Future, 2005).
III. RECOMMENDATIONS

With the launch of a consumer health information service for Delaware’s public libraries, the stakeholders have acknowledged that good information contributes to the overall health and well-being of Delaware residents. Three talented, enthusiastic consumer health librarians have been hired to implement the service. Under the direction of the Delaware Academy of Medicine, the consumer health information service is positioned to positively impact Delaware’s capacity to meet its health information goals.

What follows are recommendations for consideration in the short-term (18-24 months). These recommendations stem from the best practices that are presented herewith and from conclusions gleaned through interviews with consumer health librarians and public library managers.

**Partnerships:**

- Develop partnerships among public libraries, hospital and health sciences libraries, health educators from local hospitals and health centers, and public health officials.

- Continue to seek out and participate in local coalitions and neighborhood organizations, especially those related to the community-based health and human services. Encourage public library managers to play a role in community-based partnerships.

**Community Assessment and Planning:**

- Conduct an analysis of the health needs within each county and consider focusing the consumer health information service on those specific needs rather than trying to be all things to all people.

- Develop measurable goals and objectives for the consumer health information service. Identify activities needed to achieve the goals and a mechanism for evaluating the effectiveness of the service.

**Reference & Information Services:**

- Develop a statewide health reference services training program for public library staff and encourage (or require) that 1-2 staff members from each public library complete the program over the next two years.
Define the scope and level of the health information services that should be provided at the time of need and at the point of service. Make the measure of success be the number of health questions that are thoroughly answered at the time and place of need, rather than the number referred to a medical or consumer health librarian.

Define what kind of health information queries are beyond the scope of the public library and create a strategy to make it simple for users to obtain instantaneous or overnight service from a consumer health specialist via phone, email, and/or synchronous online chat. The procedure for referring questions to a specialist should be clear and straightforward, and one with which every public library staff member is familiar.

Health Information Sources:

- Create a model health information collection management policy that can be easily adapted for all public libraries.
- Develop a list of core reference and circulating health materials for small, medium, and large libraries. Provide funds to support the purchase of items on the core list, including updates and new editions.
- Offer easy-to-read books to borrow and easy-to-read giveaway pamphlets on perennial health topics at all public libraries.
- Create a web portal with links to the best websites for Delawareans.

Promotion and Marketing:

- Enlist partners to promote the consumer health information service and to refer clients to the public libraries for health questions.
- Develop marketing and promotional materials (e.g., brochures and flyers) aimed at the target population(s). Enlist volunteers and partners to help distribute the promotional materials on a continuous basis.
- Develop a website that provides detailed information about the consumer health service. Require the public libraries and encourage the partner organizations to provide a link to the website on their own homepages.

Sustain and/or Expand the Service:

- Establish a statewide Steering Committee that includes leaders from the Delaware Academy of Medicine and the Delaware Division of Libraries and participation by key stakeholders from all three counties.
Identify and seek additional and alternate funding sources to supplement the current funding which holds no promise of expanding to meet new needs or increasing expenses.

Implementing these broad, hefty recommendations may require adding resources or shifting the existing allocation of resources. While retaining the services of a consumer health librarian for each county is a significant step toward improving statewide health information services, the current workload of the consumer health librarians is significant and it may be fruitful to examine whether the three consumer health librarians, so key to implementing the service and making it “stick,” have the resources they need to provide services throughout their respective counties.

Although the service has been in place for a number of years, in many ways it appears to be a program in the early stages of development. Roles are continuing to be defined and the importance of assessing the scope and activities of the service in conjunction with the strategic planning process for statewide health information service has been acknowledged. Interviews with the consumer health librarians and with library managers show that the service is the strongest in the host libraries where the consumer health librarians spend the majority of their time, and is perceived as less valuable at other public libraries in as far as the service impacts staff training, outreach and promotion activities, collection development, and direct service to patrons. This suggests a need for more personnel, or for a different allocation of the current personnel. For example, the location of the host libraries could rotate periodically, or the time spent covering reference shifts at the host library might be reallocated to other libraries in the respective county.

Interviews with the public library managers at the non-host libraries suggest that the managers need a better understanding of the roles of the consumer health librarians, especially with respect to understanding when and how it is most appropriate to refer patrons to the consumer health librarians for assistance. The managers would also benefit from a better understanding of the nature and purpose of the Wellness Wednesdays visits should those visits continue in their present form. Finally, the interviews with the public library managers confirms that the managers have a connection with, and respect for, the Delaware Division of Libraries. An ongoing endorsement of the consumer health information service by the Division might help encourage greater buy-in and enthusiasm for the service on the part of the public libraries.
RESOURCES


Appendix A: Best Practices At-A-Glance

Attached separately
Appendix B

Consumer Health Information Services in Public Libraries Summary (e.g., for legislators)

Diabetes. Heart disease. Cancer. Depression. Autism. Side effects of medications. Medical tests. Physician credentials. Smoking cessation. Pregnancy. Diet. Fitness. These are but a handful of the topics that Delawareans are asking about at their public libraries. And in many cases, the public library is the first place people are going after they have been to see their doctors. Consumers more routinely seek to be informed about their health needs and to be engaged in health-related decisions. They are turning to their public libraries for current, reliable, and authoritative sources of health information. The following trends in consumer health information service in public libraries are positioning public libraries to deliver.

Strategic partnerships are formed and include public libraries, medical libraries, and community-based organizations and agencies.
- Partners identify key community and health issues, underserved populations, health disparities, and how consumers gather and use health information.
- The librarians think beyond the existing role of the library to focus on the overarching needs of the community. Health issues are almost always a part of a community’s needs and the public library is positioned to offer corresponding support and resources.

The community is assessed and the scope of service is planned.
- The community to be served and its health-related needs are identified.
- Existing data sources are compiled and new information is collected as needed. The services needed to promote a healthy lifestyle in the community are determined.
- Measurable goals and objectives for the program/service/project, including for each of the partners, are agreed upon and roles and responsibilities are defined.

Consumer health information is provided at the time of need and at the point of service.
- Print and electronic health information sources and services are available in local libraries at all times the library is open to the public.
- All librarians and other library staff members are trained to feel comfortable and confident assisting users with health queries.
- Users are referred to other organizations, libraries, or information sources only when the scope of the public library’s onsite services, including online consumer health resources, have been thoroughly exhausted and/or are insufficient for answering the question at hand.
- Public libraries know which local hospital and/or health sciences libraries and librarians serve the general public and readily make appropriate referrals.
- Community-based facilities, including public libraries, make computers available for the general public to access health information websites.

Public libraries offer current, reliable and accurate sources of information.
- Current, reliable and accurate sources of health information are provided at all sites, in various formats, languages, and reading levels.
- Pre-selected consumer health websites and electronic databases are easily accessible on computers in the public libraries and in other community facilities.
Library users are taught how to evaluate print and online sources of health information. Access to advanced medical information resources, including journal articles not available through public library databases, as well as assistance from medical libraries and librarians, is readily available.

Public libraries promote and market the consumer health information service widely.

- Partners and other community organizations are enlisted to assist in promoting the consumer health information service.
- Community culture brokers are contacted to assure that information is shared with segments of the population that may be unfamiliar with how public library service works.
- Marketing and promotional materials are targeted to the community identified as most in need of health information services. Brochures, flyers, newsletters, press releases and other materials are prepared and updated as needed, including in languages other than English where appropriate.
- Relationships with local media outlets help assure frequent exposure for the consumer health service and its community-based activities.
- A website describing the consumer health information services is maintained and prominently linked from the websites of all partners.
- Health-related programs, lectures, and/or screenings identified to be of value to the target community are offered in conjunction with partner organizations.

Public libraries remain committed to sustain and/or expand the consumer health information service.

- Planning begins early for the long-term sustainability of consumer health programs, services, and/or projects that launch in pilot mode or with short-term or non-renewable funding sources.
- A plan to periodically evaluate the effectiveness of the program/service/project is established.
- Partners contribute staff, time, and financial resources toward expanding and/or sustaining the services. An institutional commitment by all partners assures the long-term viability of consumer health information services.
Appendix C: Summary of Interviews Conducted

INTERVIEWS WITH CONSUMER HEALTH LIBRARIANS

On February 21-22, 2008, in-person site-visits and interviews were conducted with Delaware’s
three consumer health information librarians. The consumer health librarians are employed by
the Delaware Academy of Medicine and each is assigned to one of Delaware’s three counties.
The librarians maintain office space at a host library but have responsibilities for providing
countywide service. Despite significant variation in size of area served, population density,
population characteristics, and number of libraries served, the librarians noted many similarities
in the scope and nature of their assignments.

Below is a summary of the responses sorted into those that highlight the strengths of the existing
service and those that emphasize opportunities for improvement.

Strengths

The Consumer Health Librarians noted that:

• The types of queries to which they are responding are not easily generalized. The
  questions range from basic to sophisticated and can take a short time or up to a full day to
  fully research and answer. Some examples of recent information needs include Medicare
  and Medicaid coverage, recipes for low cholesterol diets, Hepatitis C, services for adult
  children of alcoholics, pictures of the human body, diverticulitis, MRI scans, stress,
  unexplained hives, Lyme disease, Parkinson’s disease, health insurance coverage, health
  provider credentials, hospital rankings, alternative treatments, understanding newly
diagnosed conditions, and various health issues recently featured in the news (e.g., MRSA).
• Queries are received by phone, email and in person.
• Information is compiled quickly and sent to the patron’s home or nearest public library.
• The Wellness Wednesdays program offered to each library for two hours a month was
designed as a patron walk-in service but is largely used as an opportunity to connect with
staff in the libraries.
• Program funds have significantly improved the health collections in the three host
libraries.
• The public libraries seem open to suggestions about weeding and collection development
by the consumer health librarians
• The three consumer health librarians know exactly how and where to access sophisticated
medical information not readily available in the public libraries. They are confident in their
abilities to search Medline and other databases and know they can count of the resources of
the Delaware Academy of Medicine to fill consumers’ requests.
• There is a direct correlation between the amount of outreach/promotion and how many
questions the consumer health librarians receive. Outreach is essential but so time
consuming.
• They are looking forward to the new name and tag line, Delaware Health Source: You
Ask, We Search, and the new brochure currently in the works.
Opportunities for Improvement

The Consumer Health Librarians noted that:

- It is taking time to gain the trust of staff in the public libraries. Smaller libraries are less interested in the service. Librarians without reference librarians are less inclined to understand the service and therefore less likely to refer patrons.
- The multi-faceted nature of the consumer health librarian positions is not always understood.
- The public library staff members don’t always think to call on the consumer health librarians for difficult reference questions.
- Most queries are from existing library users, only a few from new users.
- It is hard to know how well health questions are handled by staff members in the public libraries. There has been little training and sometimes health questions make staff nervous.
- The health collections in the public libraries, with the exception of the host libraries, lack depth and breadth, and in many cases are out of date.
- A core list of health resources on key health issues in Delaware is needed, as is funding to purchase items on the core list for all public libraries.
- The public libraries’ individual websites do not link to the Consumer Health Information Service website.
- The Consumer Health Information Service website is in need of a redesign. It should do a better job describing the service and provide links to high-quality websites that are relevant to Delawareans.
- Digital divide and health literacy issues exist throughout the state.
- Keeping up with the broad scope of responsibilities is challenging for the consumer health librarians. They would like to spend more time in their respective libraries but they have a lot of ground to cover in addition to the service they are obliged to provide at their host libraries. They would also like to do more community outreach work, noting that staff in the public libraries is rarely able to get out into the community. Each expressed concern about not doing as much outreach and promotion as she would like to do.
- Few broad-based coalitions in which the consumer health librarians may participate have been identified. Relationships with hospital or health sciences libraries/librarians, excepting the Delaware Academy of Medicine, have not been established.
- If additional funds were available, the consumer health librarians would suggest improving the health collections in all of the public libraries, adding a health educator to the team to help with outreach and programming (a Spanish speaker for Sussex County), spending money on paid advertising, creating a web portal, and providing better promotional materials.

INTERVIEWS WITH PUBLIC LIBRARY MANAGERS

In March 2008, telephone interviews were conducted with nine public library managers in Delaware. The consumer health librarians each provided contact information for three libraries in their respective counties. It was requested that a mix of libraries be included in the interviews: libraries of differing sizes and libraries that are very enthusiastic about Delaware’s Consumer Health Information Service, as well as some who seem less interested. One of the nine libraries
included is a host library for the consumer health information service. A chart showing the specific responses of the nine libraries contacted is attached separately. A summary of the responses sorted into those that highlight the strengths of the existing service and those that emphasize opportunities for improvement is below.

**Strengths**

The Public Library Managers noted that:

- There are a modest number of health information questions at the libraries. Patrons who do seek health information are frequently following up from a visit with their physicians.
- Topics of the queries vary widely and include medical tests, medications, pregnancy, cancer, diabetes, surgery, Alzheimer’s disease, Medicare and Medicaid, alternative medicine, nutrition, and fitness.
- They appreciate the statewide databases and use them regularly when assisting patrons with health information queries.
- The need for more medically advanced information than what is provided at the library or through online and database resources is infrequent. These requests are usually handled through a referral to the consumer health librarian.
- The manager and staff of the host library are very knowledgeable about the service. They have an advantage because the consumer health librarian is working at their library. They explain the service in a way that encourages patrons to follow-up on the referral to the consumer health librarian.
- The quality of the service provided by the consumer health librarians is excellent. The consumer health librarians are accessible, easy to work with, and respond to patrons very quickly.
- Even though they don’t use the consumer health information service often, knowing that it is there when they need it makes the libraries feel supported.

**Opportunities for Improvement**

The Public Library Managers noted that:

- Though print reference sources are not used as frequently as they were in the past, concern exists about having enough money and knowledge to weed and replace books on a regular basis.
- Patrons continue to borrow popular books on health subjects. Often they prefer to browse the collection on their own rather than ask for help. Keeping the circulating collection current is a concern.
- Library staffers need a list of good health websites. Patrons ask for health information printouts from the Internet. Librarians are unsure which sites are the best. Several said they typically turn to Google, Yahoo, and/or WebMD. Only one of the managers mentioned MedlinePlus and only two were familiar with “Go Local Delaware.”
- They don’t refer many questions to the consumer health librarians because their patrons want information on the spot and are unlikely to follow-up on referrals (e.g., patrons don’t want to hear “someone will get back to you,” they want to leave with information in-hand).
• They are unsure of the scope of Delaware’s Consumer Health Information Service. There is a mixed reaction to the Wellness Wednesdays program. Some of the managers use the monthly visit by the consumer health librarian to seek advice on their health collections and to ask the consumer health librarian for tips on resources, especially websites. Other managers think the consumer health librarian is only there to answer patron questions and they know that the patrons are unlikely to ‘save’ their health questions for the two hours per month when the consumer health librarian is in the building.
• The service is not well defined or adequately promoted.
• Little to no training on health-related reference service has been offered to managers or the staff in their libraries. They are open to receiving this training provided it does not require traveling far. [NOTE: the question about staff training invoked an unsolicited and almost universally positive recollection about the good training provided on the use of the statewide databases].
• Health related programs are offered in the libraries on an occasional basis. The managers report that it is difficult to gauge the topics of interest to the public and whether a health program will result in good attendance.
• Health related outreach does not occur on a regular basis largely because staffing levels make it difficult to release staff to spend time outside of their libraries.

INTERVIEW WITH HOSPITAL-BASED CONSUMER HEALTH LIBRARIAN

Following a site-visit to the Junior Board Cancer Resource Library on the campus of Christiana Hospital in February, a phone interview was conducted with the librarian who coordinates that library and the consumer health/patient education services there and at the Wilmington Hospital Library. That interview yielded the following information:

• The consumer health collection at the Wilmington Hospital Library is newly formed and currently small in size. Plans for a larger library and more consumer health resources are in the works.
• The Junior Board Cancer Resource Library provides an extensive consumer health collection of books, journals, magazines, videos, materials for children, Internet access, and a welcoming, attractive, and prominently located facility. Materials are provided in English and in Spanish and attempts are made to acquire easy-to-read materials for consumers with limited reading abilities.
• Services at both sites are limited to standard business hours: Monday-Friday, 8:30 AM – 5:00 PM.
• The general public is welcome to use the facilities and to borrow materials from both sites. The majority of the referrals come from the Wilmington Institute as a result of public library patrons being able to view the holdings of Wilmington Hospital Library through the shared online catalog.
• The librarian’s contact with the public libraries is limited. The librarian does not generally refer people to the public libraries because their health collections are perceived to be out of date and small. She does not know the specifics of Delaware’s Consumer Health Information service and said that her libraries have not been provided with any promotional materials.
List of Librarians Interviewed

Consumer Health Librarians:

• Patty Hartmannsgruber (Kent County)
• Susan LaValley (New Castle County)
• Linda Leonard (Sussex County)

Public Library Managers/Directors:

• Pat Birchenall (New Castle County)
• Patricia Brown (Sussex County)
• Leigh Ann Depope (Sussex County)
• Christine Hayward (Kent County)
• Beverly Hirt (Kent County)
• Kay Hudson (Kent County)
• Beth Kloetzer (New Castle County)
• Susan Menson (New Castle County)
• Veronica Schell (Sussex County)

Hospital-based Consumer Health Librarian:

• Barbara Henry