

Public Health Outreach Project Description

Title: Information Access for Public Health Professionals in Support of Elder Care

Staff: Julie McGowan, Naomi Fukagawa, Jeanene Light, Heather Johnson Lamarche

Organization: University of Vermont, Vermont State Department of Aging and Disabilities, PKC Corporation

Date: 11/98-1/01

Objectives:

- 1) use VtMednet to provide evidence-based information to Public Health Service Professionals
- 2) provide training for Information Access to Identified Groups
- 3) develop VT-CHIP to provide access to consumer health for elderly Vermonters
- 4) create a structured information dissemination model to provide knowledge-based information as needed

Target Audience:

Public health professionals, elderly Vermonters.

Needs assessment (methodology and results)

A telephone survey was conducted of community-based coalitions, area agencies on aging, and home health agencies to determine computer access/literacy level of users, as well as to gauge interest. A written survey of the Senior Assessment Coupler (PKC tool) was conducted during August 1999, with a total of 325 completed.

Intervention:

Presentations were made to public health professionals at the various Area Agencies on

Aging and training was conducted. Applications for Loansome Doc (LD) document delivery were filled out at training sessions (conducted 4/26 and 4/29/99). A total of 24

case workers involved in elder care support attended the two training sessions. 12

providers in 12 sites became active participants. Following the training, each case

worker was visited and offered assistance and additional training in PubMed and Loansome Doc. A website was developed to facilitate access to the Dana Medical Library's document delivery department, with links to other important health sites

(PubMed, etc.). A listserve was established for communication purposes.

Training and other materials developed:

A listserve for all participating health providers was established, as well as customized application forms for them to register for Loansome Doc service. A FAQ's was created as well, and posted on the website.

Website (developed as part of project and how maintained):

A website was created, with links to the Dana Medical Library, Voyager (UVM Libraries Online Catalog), VT-CHIP (Vermont Consumer Health Information Project) and PubMed/Loansome Doc. The website functioned in part as a "counter", to see how many provider/participants accessed these sites as part of participation in the project.

Poster Sessions, Exhibits, etc.

N/A

Partnerships:

As was reported earlier, this project involved many organizations: PKC for training and support, particularly in the use of the Elder Care Assessment Coupler; The Vermont State Department of Aging and Disabilities (DAD); the University of Vermont's General Clinical Research Center (GCRC); Dana Medical Library; and a variety of sites serving elders in Vermont.

Marketing:

Most marketing took place in the form of presentations given to the service providers, and through the listserve and website.

Administrative Issues:

There were numerous administrative issues that arose during this project, including personnel changes in the first two quarters. The original grant applicant and PI, Julie McGowan, left Vermont to take a position elsewhere, and was replaced by a faculty member from UVM's Gerontology Unit in the Department of Medicine (Dr. Fukagawa). The GCRC provided database support and created the website. Computer hardware support was provided primarily through the PKC Corporation, and library support was provided by Jeanene Light of the Dana Medical Library. A significant administrative issue was the decision by DAD to discontinue the use of the PKC Senior Assessment tool, resulting in slower acquisition of information to be used in the longitudinal database for elders in the different Vermont counties. Despite these difficulties, useful information

has been provided to those caseworkers who fully utilized the resources provided.

Challenges Faced:

As mentioned above, personnel changes caused difficulties in this project, including the postponement of the original start date. In addition, service providers were found not to be as comfortable with computers as was originally indicated, and Internet connections were not always readily available to these providers. Rural caseworkers found it difficult to devote time to literature searches, and frequently could not see the value in doing so. As mentioned above, DAD's decision to discontinue the use of the PKC Senior Assessment Coupler was a disappointment.

Were Project Objectives Met?

The library provided evidence-based documents, mostly journal articles, to service providers involved in the grant, although the number of requests were never as high as hoped. It was decided to accept the requests for information submitted by participants in any form, no longer requiring them to use Loansome Doc/PubMed. This allowed more providers to be involved. The elderly groups did not utilize their access to consumer health materials because few of the clients were comfortable with computer use and internet access. The longitudinal database will provide useful information for specific sites and can be used as preliminary data for future grant applications.

Sustainability:

It is apparent that training and education in the use of computers are vital to the success of projects of this type. Information overload contributed to the attrition rate.

Anecdotes or Other Observations:

An impression gained from this experience is that PHS professionals in the field are primarily interested in getting their work done efficiently. Because of the heavy case loads, there was little time available to increase their knowledge base via literature searches. Future directions in the use of technology to assist in the provision of services may be a focus on interactive web-based discussions with consultants as well as

librarians.