adobe medicus 2009 2 March-April

Health Sciences Library and Informatics Center

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Outreach Connections: Native Health Information Wiki

An exciting new resource was recently launched that provides collaborative space where librarians, patient educators, and others who provide health information to American Indians, Alaska Natives, and Native Hawaiians may contribute information about their projects for the purpose of sharing resources and providing opportunities for collaboration. This space, called Outreach Connections: Native Health Information (http://native.outreachconnect.info/wiki/), is a wiki where projects involving health information outreach, education and training, research, and resources that have been developed may be contributed freely by individuals who can create their own accounts and become part of this Creative Commons, non-commercial share-alike community where resources can be borrowed and adapted for one’s own use.

The wiki was an outgrowth of the Conference on Native American Health Information Services in the United States, held in July 2006 at the Health Sciences Library and Informatics Center (HSLIC). Nearly 60 librarians, healthcare providers, and researchers who provide health data to Native Americans throughout the U.S. gathered to share experiences on the effective delivery of information. The outcome was the planning and development of a comprehensive Native American health information network to continue building and sharing effective practices. Funding provided by the National Library of Medicine® allowed for development of the wiki by HSLIC with support of a national steering committee.

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From the Associate Vice President

Students use the Health Sciences Library and Informatics Center in person far more than faculty, staff or the public, and are the primary users of library group study rooms, public computing, and general study space, and do most of the checkouts of books and media. HSLIC is strongly committed to ensuring that our student users are well-served, and we are grateful we now have access to student library and technology fee funds to improve our services and resources.

In March 2008, the Regents of the University of New Mexico approved a new student fee for library and technology services at the HSC campus (See May/June adobe medicus for more information about the fee). The purpose of the fee was to assure UNM students have access to the resources they need. In fiscal year 2007-2008, HSLIC’s collection budget ranked 99 out of 122 academic health sciences libraries who reported their collection budget to the Association of Academic Health Sciences Libraries. The fee was a result of discussions with deans from the HSC and was part of a range of new funding strategies for HSLIC including private donations, more state funding, and reallocating more research facilities and administration funds to the library.

The 2008-2009 school year marks the first year the student fee was assessed. Some of student computing and Domenici Center resources funded by this year’s fee include:

- LCD monitors for the library’s 315 and 332 study rooms

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The Evolution of the Native Health Database

New Mexico is home to the nineteen Pueblos, Jicarilla and Mescalero Apache, and the Navajo Nation. Eleven percent of the state’s population is Native, only Alaska has a higher percentage of Native population (15%). This unique demographic led to the creation of an exclusive resource for Native American health information by the HSLIC.

The Native Health Database (NHD) began as two separate databases—the Native Health History Database (NHHD) and the Native Health Research Database (NHRD). The NHHD originated in 1994 with the donation of 1,600 “Papers on Indian Health” by William Schottstaedt, MD to HSLIC. It served as a single source of historical information on the health/medical issues of American Indians and Alaska Natives with approximately 3,200 records ranging from the years 1672-1965.

In 1997 the Native Health Research Database was developed in partnership with the U.S. Indian Health Service (IHS) resulting in a contemporary source of American Indian/Alaska Native (AI/AN), and Canadian First Nations health and medical information. The content of this database ranged from 1966 to the present. The intended audience for both databases was healthcare professionals, students, tribes, AI/AN organizations, and academic researchers.

Usability tests conducted by the HSLIC found that users were often confused about the differences between the content of the two databases. In response to this finding the NHHD (history) and NHRD (research) were merged into one Native Health Database (NHD). The IHS has provided ongoing funding on a yearly basis to support full database integration and improvements in web functionality and usability, free document delivery service upon request, and promotion to appropriate users.

Native Health Database Advisory Board members contribute to the direction of the NHD. They have participated in usability studies of the database and have also provided feedback on funding resources, content development, database functionality, and document delivery. Board members are nominated by leaders in the American Indian/Alaska Native and Canadian First Nations healthcare communities who have an interest in improving health information for and about Native peoples. The board is composed of eight members from various fields including public health researchers, healthcare administrators, a health sciences librarian, a physician, and a statistician. The board meets twice a year, once in-person and once via teleconference and web conferencing.

Patricia Bradley, MLS
Native Services Librarian
Distance Services

Native Health Database Fast Facts

- The Native Health Database home page was viewed 49,408 times and visited 21,153 times in 2007.
- 2,276 documents were delivered to users—university and college-based, AI/AN related, and medical providers. These were self-identified.
- The NHD is searchable by key words, tribe, and title of article, respectively.
- Most viewed and requested articles are on traditional healing, diabetes, urban Indian health, and alcohol use.
- Most recently the Native Health Database was the lead article in the January 2009 issue of The IHS Primary Care Provider (see page 5).
Lecture Capturing Coming to the HSC

“But the students won’t attend class if we provide lecture capturing.” This commonly heard phrase spoken by faculty turned out to be a myth when the School of Medicine, College of Pharmacy, and Media Technology Services on Main Campus recently pilot tested various lecture capturing systems. In fact, attendance did not drop. When asked, students reported they attend lectures because they like the professors, are interested in the course topic, and want to be present when the professor is delivering the lecture.

Lecture capturing refers to any technology that allows instructors to record what happens in their classrooms and makes it available digitally to their students. A small digital recorder placed on the instructor’s podium to record the lecture is a familiar and simple form of lecture capturing. However, the instructor, a student, or third party then has to make multiple copies of the recording, label, and distribute to the students in the course.

The recent pilot tested lecture capturing systems that record video, audio, PowerPoint, objects placed on the document camera, cursor movement, typing, or any other on-screen activity and automatically uploads that multimedia file to a Web site. The lecture is titled and can be distributed in a variety of forms: such as a podcast for a laptop or mobile device. The lecture can be viewed as a live Web cast as the lecture is being delivered, or it can be viewed on demand after delivery of the lecture. Students can review the lecture as many times as they like and even have the capability to fast forward to specific points in the lecture.

The lecture capturing systems recently tested are MediaSite by Sonic Foundry, http://www.sonicfoundry.com/mediasite/default.aspx, Echo 360, http://echo360.com/, and the School of Medicine’s Studio. The Studio lecture capturing involved a considerable amount of staff time making it cost prohibitive. MediaSite and Echo360 delivered virtually the same product to students, and both required an equal amount of staff time (which is minimal). There were substantial cost differences among the various systems.

Like other educational technology, implementing lecture capturing systems requires knowing the motivations and objectives for using it, close collaboration between ITS and the schools implementing it, a knowledge of the variety of other equipment that must be purchased, set up, maintained, regularly checked, and replaced; servers to house the lectures captured; training of staff and faculty; buy-in from the faculty; plans for disseminating the recorded lectures; knowledge of copyright laws; and a rigorous evaluation plan to determine if the technology is, in fact, advancing student learning and professional development.

Now it is time for the next step . . . working out the details of purchasing, supporting, and training.

Deb LaPointe, PhD
Assistant Director Education Development
Learning Design Center

When you visit the wiki, you will be guided through the navigation section to browse existing projects or to submit your own project using the online tutorial and help page to get you started. To see the menu of exciting projects that have been submitted, click on Browse by Title. Click on a title to see information about the project which may include title of project, contact information, start date, end date, funding agency, location, and tribe/nation, each of which is also browsable through the Browse by Project Information section. A descriptive summary of the project will also be available for each title. For more information, you may contact those who submitted projects directly through the Contact Information section. To learn about the development and continued promotion of the wiki, visit the Community Portal section.

Although the funding for the development of the wiki ended in December 2008, an active community of interested individuals throughout the United States will serve as the second generation steering committee to share in the responsibility for the maintenance and promotion of this unique resource. For more information, contact Barbara Nail-Chiwetalu, Distance Services Coordinator, or Patricia Bradley, Native Services Librarian, at 505-272-2311.

Barbara Nail-Chiwetalu, PhD, MLS
Coordinator, Distance Services

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“Students can review the lecture as many times as they like and even have the capability to fast forward to specific points in the lecture.” - Photo by Barry Staver

The author thanks Steve Mitchell, School of Medicine, Chris Kiscaden, College of Pharmacy, and David Sanchez, New Media Technology Services, for sharing their knowledge of the systems and the results of their diligent pilot testing over the past year.
Solving Student Usability Issues in WebCT

Good usability is critical to the success of any form of online learning. What is usability? It is the degree to which students find any computer-based program easy (or difficult) to use. There are many factors that contribute to the level of usability. This article will focus on just two - organization and labeling.

Organization

When planning an online component of a course within WebCT, an obvious question to ask, but often one that is overlooked, is “How, and in what order, are the students going to interact with the online material?” The answer to this question is going to determine the organization of the course. Two commonly used models are time-based and topic-based. If the course is weekly and students have multiple things to do each week, (i.e., read material, review presentations, take a quiz) using a weekly module format often works better. Everything for a particular week will go into its own folder, so that the student only has to go to one place to get the materials for that week.

When time is not the organizing unit of measure, consider using topics to organize the materials. No matter which model you use, avoid making students hunt through multiple folders to gather what they need. Not only is this extremely frustrating for the student, it is time-consuming and can actually disrupt learning. Before creating folders and uploading files in WebCT, it is a good idea to think it through with pencil and paper. Create a written outline that illustrates the structure. List the files that you are including. Categorize them if there are multiple files. This is a big time-saver, the more you add, the more likely your additions will impact the course organization, and it is a lot easier to change that on paper than in WebCT.

Labeling

Another critical usability issue is labeling. There are two rules for labeling: 1. Call It What It Is; and 2. Be Consistent. Students like to be able to look at a course from the student’s point of view. And critical information. Perhaps this seems obvious but often we can forget if he or she is looking at the right document. Instead, call the document “Introduction to Epilepsy and Seizure Management” or “Intro to Epilepsy & Seizure Management.” It’s best to label links using meaningful terms and critical information. Perhaps this seems obvious but often we can forget to look at a course from the student’s point of view.

These are just a couple of examples of how you can improve usability. For more information on usability, go to: http://www.usability.gov/.
Another Happy LDC Customer

Randall Stewart, MD approached the faculty and staff members of the Learning Design Center (LDC) in HSLIC to assist him with an Evidence Based Medicine (EBM) project as part of the School of Graduate Medical Education (GME) curriculum. Dr. Stewart joined the UNM School of Medicine faculty in 2008 following his fellowship in Biomedical Informatics at HSLIC. As one of his initial responsibilities, Dr. Stewart immediately faced the challenge of creating an EBM training program that would meet the needs of UNM’s diverse array of medical residency programs. Some residency programs had developed fairly robust EBM training programs while other residencies still were in their nascent stages so Dr. Stewart also had to take these variations into account in his plan.

Dr. Stewart needed to create an EBM training program that would encompass a central web-based instructional experience for all medical residents. This web-based resource would serve as the foundation for the specific educational experiences on EBM tailored for each residency program.

The LDC faculty assisted him with instructional design for the overall project to increase the possibility that the medical residents would learn EBM. LDC faculty and staff helped Dr. Stewart define realistic, measurable learning objectives for each instructional module in the project and design a web-based instructional experience that would actively engage medical residents. At the time of publication of this article Dr. Stewart continues to be involved with the LDC in designing the next five modules of his EBM project. To view the first module in this series:

1. Log on to Learning Central at: https://learningcentral.health.unm.edu/plateau/user/login.jsp
2. Search the catalog for Graduate Medical Education
3. Select Evidence Based Medicine
4. Click on “Go to content”

Dr. Stewart reports that his collaboration with the LDC has been a rewarding one. He notes that, “LDC helped me not only with the delivery of an educational product, but also gave me an excellent learning experience on how to expand my repertoire of teaching techniques.”

If you would like assistance with an educational offering, feel free to contact the LDC http://hsc.unm.edu/library/ldc/.

Jon Eldredge, MLS, PhD
Library Knowledge Consultant
Learning Design Center

Quick CME Credits

How would you like an opportunity to earn some free Continuing Medical Education credits? Every three months, Dr. Martha Miller and Dr. Edward Rose of the department of Pediatrics offer a new CME course on the HSC Moodle site. The topics of these courses have ranged from pediatric asthma to MRSA. Users read an article, take a quiz, and fill out a course evaluation to receive 0.5 CME credits. This is a great free learning opportunity for anyone with a busy schedule. To access the courses, go to http://hsc-moodle.health.unm.edu, create a Moodle account using the login box on the right side of the screen, and then click the link for Pediatric CME Series.

Leslie Sandoval
Training Support Analyst
Learning Design Center

Sarah Morley, MLS
Clinical Services Librarian
Reference & User Support Services

Exponential Potential

Recent publications from HSLIC Faculty include:


First I Had to Learn a Learning Management System and Now Social Software?

A phenomena that is changing technology-enabled education is the use of Web 2.0 social networking applications, like YouTube video, Audacity, blogs, wikis, podcasts, and social spaces like del.ici.ous, FaceBook, MySpace, and Second Life. Rather than thinking about social software as additional technologies to learn, instructors and designers are exploring social software as tools to communicate and think with (Downes, 2005).

Social software promotes collaborative learning, group interactions, gathering and sharing of resources, connections with experts, access to multiple perspectives, and the opportunity to personalize the learning environment.

Under traditional course design, teaching strategies, learning activities, and resource materials are designed and developed independently by the instructor. Social software allows learners to find and share multimedia learning resources, connect with experts, and span boundaries to collaborate with learners in Spain, China, Morocco, and Canada, for example. As a result, traditional instructor responsibilities for designing learning activities, locating resource materials, arranging guest speakers, and finding clients for students to collaborate with can, and are, being undertaken by students, mentors, and tutors. Social software changes teaching from imparting information and transmitting “complete” knowledge in a package to teaching as coaching, facilitating understanding, and bringing about conceptual change and students’ intellectual development as the students apply concepts, theories, and ideas to individual and group projects, case studies, and authentic client problems. Instructors may soon no longer be creating complete courses but rather creating shells in which many activities and many participants populate the learning resources, activities, and interact in engaging and changing learning environments.

The challenges for the instructor and instructional designer are to understand what makes an effective and engaging learning experience, which social software can be integrated to foster learning for a specific course and competency development, and, most importantly, how to do it effectively. An additional challenge for instructors and designers is the realization that we can no longer even count on the student’s learning environments to be in their homes or in the library. Our students are using portable devices to connect, communicate, access resources, and learn at anytime, from anywhere, including the Frontier, the Railrunner Express, RapidRide, and Starbucks. What does your course look like on an iTouch?

I recently heard that learning management systems as we know them won’t exist five years from now, but communication tools that connect people and ideas will!

Deb LaPointe, PhD
Assistant Director Education Development
Learning Design Center

References

Online Survey Software

Do you need to conduct a survey? Does your course need feedback from students? If you answered yes to either of these questions, you might want to consider using Opinio online survey software. Opinio, an online questionnaire tool, is available to University of New Mexico units and UNM students conducting research and/or evaluations. It has many benefits over other commercial services including its own UNM address and its own layer of security protection. And Opinio’s electronic online survey/opinion reporting cuts down on paper consumption tremendously.

The Opinio online survey software lets you conduct any type of web survey consisting of a wide range of questions and response types covering all your online survey needs. It guides you through web survey creation, helps you publish your online survey and even sends e-mail invitations to personnel as reminders to complete the survey.

Opinio allows the creator of the survey complete control of the survey and question design. The creator of the survey works smarter and increases response rates using conditional branching, asking only necessary, relevant questions. Opinio also has a unique “Piping” functionality that allows the creator to link to other surveys or evaluations without having to redo the original survey. Besides the piping function, the creator can include images in questions and select predefined templates, or customize a template to suit his or her needs. One of the strong features of Opinio is that each published survey or evaluation can easily be copied and reset for later use. One example would be the creation of a standard end-of-course student evaluation that could be reused over time.

Opinio also contains a report feature for the creator to use once the survey/evaluation is closed. It allows the survey creator to build views based on the data gathered from the survey in a number of ways, using report elements, filter, and other settings. A typical example is shown above to the right. The Chart feature in Opinio is very flexible and allows customization by the survey creator.

Since the advent of Opinio at the University of New Mexico, HSLIC’s Learning Design Center (LDC) has advised several units, such as the Medical Laboratory Science Department, on how to create course evaluations for their online UNM courses using WebCT or Moodle. If you are interested in learning more about Opinio, or want guidance on survey creation, please contact the Learning Design Center (http://hsc.unm.edu/library/ldc/).

Jack Granato, MA
Analyst Programmer 2
Learning Design Center

Sarah Morley, MLS
Clinical Services Librarian
Reference & User Support Services

Learning Design Center
Client Service Survey

Created in 2005 the LDC supports the missions of the HSC academic components—the School of Medicine, the College of Nursing, the College of Pharmacy, and the Health Sciences Library and Informatics Center—by helping faculty and staff find innovative ways to use technology to meet learning needs. Over the past several years, the LDC has assisted many HSC faculty and staff in the development, creation, and maintenance of online course modules. Now that the LDC staff has experience working with a wide variety of people on numerous projects, we’d like to find out from our customers how we are doing.

Pending HRRC approval, the LDC will use Opinio online survey software to ask a sample of LDC clients to provide information on the LDC performance. Data received from this anonymous survey will be used as a formative evaluation. By asking clients for their opinion regarding their experience working with the LDC, we hope to gain a better understanding of what our clients need and expect when they do business with us. Results from this study will be used to improve the resources and services provided by the LDC to HSC faculty and staff. So, if you receive an email invitation, please consider taking a few minutes to answer questions about your interactions with the LDC and the product(s) the unit has provided you.

If you have any questions or comments regarding the survey, you may contact Sarah Knox Morley at smorley@salud.unm.edu.

Sarah Morley, MLS
Clinical Services Librarian
Reference & User Support Services
HSLIC Is Here For You

Our mission is to improve and enhance human health through support, innovation, and leadership in the organization, delivery, and use of quality information. We create an environment that fosters the development and sharing of knowledge for the UNM Health Sciences Center and its partners.