

alternatively, minutes of program use can be "broken down" by (1) the status of the user, (2) the program name, and (3) the terminal used. This breakdown procedure is also used with a compute card to determine anticipated costs for each host system.

The library executes the statistical runs in a batch mode at the university computer center during open access periods, times provided for use of the mainframe computer when it is not otherwise engaged in university business. The library incurs no expense in utilizing the SPSS program when statistics are tabulated during these open access periods. However, if fees were levied, the actual cost of a monthly SPSS statistical run would be no more than \$5. The University of Nebraska medical library has achieved other economies because a professional librarian no longer has to spend approximately eight to ten hours each month to tabulate manually the CAI usage data. It is now possible for a library assistant to encode the CAI logbook data and keypunch the cards in approximately one hour per month. The SPSS program analysis is prepared within thirty minutes of program submission at the computer center.

CAI statistical reports are prepared monthly. The keypunched cards are sorted and stored by month and processed again to prepare quarterly and annual reports concerning CAI usage and costs. Separate sets of monthly and annual control cards are maintained since different analyses of data are required in monthly and annual reports.

#### ADVANTAGES

The advantages of adapting the SPSS program to the management of the CAI service program are (1) the speed of calculation and analysis of data by the computer, (2) the many combinations of data comparisons, (3) the resultant ease in verification of monthly bills and preparation of monthly and fiscal year reports, and (4) the ability to use the data to assess growth of the service program and to identify usage trends for future budgetary planning. In addition, the library has been able to eliminate an annual service fee of \$300 previously needed to provide separate accounting codes to identify use at the satellite CAI facility in the Physicians Assistant Program offices.

In a record-keeping situation, SPSS has proven to be very efficient in analyzing CAI usage data. This suggests that SPSS may be applicable to other library record-keeping systems such as on-line usage statistics, circulation figures, or collection analysis. However, SPSS is only one of many

commercially available programs potentially useful in library management. Consultation with local computer analysts will help to determine the appropriate software package adaptable to the library's administrative needs.

In times of financial restraint, utilization of commercially-produced statistical software packages for administrative record keeping can save personnel time and aid in long-range planning. SPSS is a versatile and simple program to modify for library record keeping. While the majority of SPSS usage has been directed at research analysis, it has proven to be a valuable management planning tool for the library.

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### The Rural Area Hospital Can Afford a Librarian\*

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WITH THE establishment by the Joint Commission on Accreditation of Hospitals of minimum

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## BRIEF COMMUNICATIONS

criteria for hospital libraries in all hospitals, the requirement for efficient library service has become more obvious to administrators, librarians, and other hospital personnel. The circuit librarian program which was initiated in 1976 [1] by the Robert Packer Hospital Library may provide one answer to the accreditation requirement for the hospital which is remote from a large medical center.

The concept of the circuit librarian was first introduced by the Cleveland Health Sciences Library, an academic medical center and resource library, in 1973 [2]. That program originally served mainly suburban hospitals. Our service, in contrast, is managed by a hospital library and involves three qualified medical librarians serving nineteen hospitals and nursing homes in northern Pennsylvania and central New York State. The size of hospitals served varies from 31 to 181 beds, including skilled nursing facilities. The librarians travel about 600 miles in Pennsylvania and 550 miles in New York each week.

The Robert Packer Hospital serves a forty-county rural and semi-rural area in Pennsylvania and New York. This 323-bed hospital has a library collection including over 400 journal titles and more than 7,000 volumes. The collection, which was established more than fifty-five years ago, also has considerable depth.

### CIRCUIT LIBRARIAN PROGRAM FOR RURAL HOSPITALS

Because we believed that the hospital library's resources should be extended to serve smaller, surrounding communities and aid in the overall program of health information distribution, the circuit librarian program for rural hospitals was

started with funding from the Donald Guthrie Foundation for Medical Research in Sayre. The foundation's president, Dr. William C. Beck, is an enthusiastic library user and was instrumental in securing foundation support for the new program. As a result of the program's success, the New York circuit was initiated in October 1979 with resource project grant support from the National Library of Medicine.

### CIRCUIT LIBRARIAN OPERATIONS

The circuit library program essentially provides hospitals with a "librarian on the spot." The librarian travels each week, making regular rounds in each hospital, visiting nursing stations, the laboratory, the pharmacy, and other departments. The librarian has been well accepted as another member of the health care team.

A liaison person, appointed in each hospital, receives requests from those who have not had an opportunity to speak directly to the circuit librarian. As requests are received, they are filled at the Robert Packer Hospital Library by the circuit librarians who typically spend three days on the road and two days in the hospital library each week.

Interlibrary loans for materials not owned by the Robert Packer Hospital Library are obtained for requesters as well as audiovisual materials. Our experience indicates that audiovisual items are very popular with nursing in-service directors in particular. We have also found that the number of requests from the rural hospitals for information on administrative techniques, procedures, and requirements for hospitals is equal to or greater than the number of requests for clinical information.

TABLE 1  
USERS' REQUESTS BY YEAR\*

Type of User	1977	1978	1979	1980	Subtotal	Total	Percent
<i>Medical</i>							
Pennsylvania	378	180	360	564	1,482	2,528	25.4
New York	—	—	135	911	1,066		
<i>Nursing</i>							
Pennsylvania	419	257	613	1,499	2,788	4,346	43.5
New York	—	—	136	1,422	1,558		
<i>Others</i>							
Pennsylvania	512	457	461	1,013	2,443	3,105	31.1
New York	—	—	67	595	662		

\*Pennsylvania statistics include 1977 through 1980; New York statistics include October 1979 through 1980.

BRIEF COMMUNICATIONS

PROGRAM UTILIZATION

Table 1 provides a profile of user requests and shows that nursing personnel have utilized the circuit library service more frequently than medical or other requesters. This finding supports the concept that libraries should be available to all hospital and health-related personnel rather than medical staff only. Our experience indicates that no one has felt that the service has been discriminatory; all categories of users have expressed satisfaction with the service.

COSTS

Costs for the service are based on a per bed fee which is calculated each year from the budget established by the Robert Packer Hospital. After the initial study in Pennsylvania, supported by the Guthrie Foundation, only one hospital of the original six did not sign an agreement to continue the service at their expense. After one year without service, the sixth hospital returned to the circuit. All of the original Pennsylvania participants are using the service.

The budget for a circuit program is based on:

- Librarian's salary and fringe benefits;
- Clerical staff's salary and fringe benefits;
- Supervisor's time—10% to 30% of salary;
- Travel—miles per week multiplied by the going rate per mile or leased car;
- Conferences and continuing education;
- Supplies such as paper, pencils, and pens;
- Photocopy costs—number of sheets multiplied by the cost per copy;
- MEDLINE costs;
- Telephone;

- Postage;
- Proportion of books and journals; and
- Miscellaneous (approximately 10% or less of total).

Total program costs are divided by the number of beds served and a fee is established for each participating hospital. Hospitals are billed by the sponsoring hospital, the Robert Packer Hospital, on a quarterly basis.

PUBLICITY AND PROGRAM DEVELOPMENT

Brochures outlining available services are distributed at meetings held with department heads, medical staff, and nursing service staff. The written plus the spoken word helps to assure that almost everyone knows that access to information is available.

At several hospitals a library committee has been established for the first time as a result of the circuit library program. The circuit librarian meets with these groups to keep them informed of the use of the service and to advise them on the development of in-house collections. A basic library manual was compiled for each hospital.

As the program continues, the circuit librarian provides core lists of books and journals for each hospital and encourages their purchase so that each hospital will have at least basic reference sources readily available. Thus what began as a reference service has developed into almost complete library service. Books are cataloged, journals checked in, and acquisitions recommended.

The contribution of the liaison person in each hospital has also shown that this link is an absolute necessity in this type of program. Each of the

TABLE 2  
STATISTICS FOR COMBINED CIRCUITS  
January through December 1980

Type of Service	Pennsylvania Circuit	New York Circuit	Total
Literature search requests	986	1,101	2,087
Item requests	1,763	1,630	3,393
Audiovisual requests	327	197	524
Total requests	3,076	2,928	6,004
Patient-related requests	343	379	722
Books loaned	931	573	1,504
Audiovisuals delivered	443	247	690
Interlibrary loan requests	112	269	381*
Articles photocopied	5,425	4,743	10,168
Materials delivered	6,911	5,832	12,743
Pages photocopied	30,169	26,789	56,958

\*The percentage of interlibrary loans requested for the circuits was 2.9% of the total materials delivered.

people assigned to serve a liaison function by the administrator generates interest, receives requests, and helps throughout the week to make the visit of the librarian efficient and effective.

#### USE OF THE SERVICE

Generally, the use of the service has been consistent throughout the project's duration (Table 2). Users change, but interest continues. It is important to recognize that nursing service staff have been very consistent users of the service. It is also important to note that all health professionals use the program, not only physicians. Hospital librarians have been prone in the past to think, as indeed administrators have thought, that libraries were mainly for the use of physicians. Our experience shows that all hospital personnel are interested in information that is pertinent to their work, and that nurses, in particular, should be given more opportunity to use library facilities.

The program also reveals that personal contact by the librarian with all departments is the best way to generate requests and interest. This contact becomes a learning experience for the librarian as well as the requester. For example, the librarian is able, first hand, to ask questions relevant to a search request. The requester, on the other hand, is made aware of the facets and procedures involved in developing a search strategy. This is also a fine opportunity for the requester to learn about the many kinds of information that are available in libraries.

#### CONCLUSION

At the Robert Packer Hospital Library we feel that a new facet of serving rural area hospitals has been opened by making information available to all personnel in these hospitals. Our program shows that in those hospitals where budgets cannot support hiring a librarian and providing an in-depth collection, the circuit library program can supply and keep personnel in touch with the best health-related information available.

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## Documenting the Need for Consumer Health Information: Results of a Community Survey

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AN IMPORTANT question under discussion by librarians is, "Who should be responsible for meeting consumers' health information needs?" Although there is general agreement that demands for health information from the lay public continue to increase, the extent of these demands has not been documented.

Overlook Hospital in Summit, New Jersey plans to open a Consumer Health Information Library in its new building in the fall of 1981. In planning for the new library, a Library Development Task Force was formed. Members of the task force included representatives from school and public libraries, hospital administration, consumer groups, medical staff, hospital librarians, and other hospital personnel.

#### SURVEY CONDUCTED

The task force conducted a local community survey during the month of October 1980. The survey had a dual purpose. The primary intent was to gather information relevant to the development of the new library, but a secondary goal was to begin advance publicity about the library and to generate excitement about and anticipation for its opening. A questionnaire was distributed through four channels: pharmacies, public libraries, Summit junior and senior high school health classes, and elementary schools. The elementary school children were instructed to take the questionnaire home to their parents. The following general statement regarding the reason for the survey was printed at the top of the questionnaire:

Overlook Hospital is developing a community health information system in conjunction with school and public libraries in the area. A part of that system will be a special library at Overlook containing materials for consumers on

\*Currently, Reference Librarian, UCLA Biomedical Library, Los Angeles, California.