
Providing health information to the general public: a survey of current practices in academic health sciences libraries*

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A questionnaire was mailed to 148 publicly and privately supported academic health sciences libraries affiliated with Association of American Medical Colleges (AAMC)-accredited medical schools in the United States and Canada to determine level of access and services provided to the general public. For purposes of this study, "general public" was defined as nonaffiliated students or health care professionals, attorneys and other nonhealth-related professionals, patients from affiliated or other hospitals or clinics, and general consumers. One hundred five (71%) libraries responded. Results showed 98% of publicly supported libraries and 88% of privately supported libraries provided access to some or all of the general public. Publicly supported libraries saw greater numbers of public patrons, often provided more services, and were more likely to circulate materials from their collections than were privately supported libraries. A significant number of academic health sciences libraries housed a collection of consumer-oriented materials and many provided some level of document delivery service, usually for a fee. Most allowed the public to use some or all library computers. Results of this study indicated that academic health sciences libraries played a significant role in serving the information-seeking public and suggested a need to develop written policies or guidelines covering the services that will be provided to minimize the impact of this service on primary clientele.

INTRODUCTION

As the twentieth century draws to a close and the consumer health movement continues to gain momentum, it is appropriate to reflect on the role of the academic health sciences library in providing the general public with current, reliable health information. Over the past two decades, health information has expanded exponentially. During this same time, growing numbers of libraries, both public and health sciences, have acquired resources or developed services and programs to meet health information needs of the general public. In some cases, public and health sciences libraries have joined forces in providing consumer health informa-

tion. Many of these joint projects, several of which have been described in the literature, have been fostered and funded by the Library Services and Construction Act.

In recent years, the National Library of Medicine (NLM) announced a commitment to play a larger role in providing health information to the general public and, in June 1997, began providing free access to MEDLINE via the Internet. MEDLINE, the major medical database in the United States, previously was searched primarily by librarians, other information services professionals, health care professionals, and students. It is now available to patients and health consumers as well. In the first year of free Internet access, MEDLINE searches increased twenty-fold—from seven million to 120 million. An estimated almost one-third of the total searches were conducted by consumers [1]. NLM's MEDLINEplus—a consumer oriented Web site that provides access to medical dictionaries

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as well as information about medical organizations, physicians, and hospitals in specific geographic regions—was introduced in 1998. Information about clinical trials in progress and instruction in how to contact clearinghouses that will provide literature about certain diseases and conditions are also included. This site provides links to MEDLINE and other NLM databases as well as to other relevant health-related Web sites.

Recent innovations in technology and telecommunications have improved and facilitated access to MEDLINE and other health information available via the Internet. Yet, the health information consumer is challenged with navigating search engines and developing effective search strategies to retrieve specific relevant information. When consumers search MEDLINE, they are also faced with the challenge of gaining free and easy access to the full text of articles published in medical journals indexed in this database. Until the early part of the twentieth century, most medical collections were housed in public libraries and were accessible to all. In 1904, when the Boston Public Library donated its 21,000 medical volumes to the Boston Medical Society, which later merged its collections with Harvard's Francis A. Countway Library of Medicine, a trend toward developing private collections of medical materials began [2]. Today many, if not most, of the thousands of medical journals published annually are available only in health sciences libraries. The local public library collection typically consists of only a few basic medical texts and a limited number of core clinical journals.

Consequently, many questions arise regarding current practices and policies of academic health sciences libraries to assist members of the general public with their health information needs. For example, is the general public:

- included in the mission or policy statement of the library?
- allowed unrestricted access to the library, its collections, and its equipment with or without a fee?
- provided ready or indepth reference assistance in-person? by phone? by mail?
- provided training in how to use computers and search databases or the Internet?
- copied and mailed or faxed materials with or without a fee?
- offered a document delivery service for them to obtain materials from another library?

Only in answering these questions, can an accurate picture of the role of the academic health sciences library as information provider to the general public be obtained.

PREVIOUS STUDIES

Only a handful of studies were found that report on policies and practices of health sciences libraries as a

whole in providing access or service to the general public. In the mid-1970s, at the beginning of the consumer health movement, Jeuell and colleagues surveyed publicly and privately supported libraries associated with medical schools listed in the *American Association of Medical Colleges Directory (1975–76)* to determine whether they provided access and, primarily, reference service to the general public [3, 4]. This information was to be used as a guide in developing a public services policy manual for the surveyors' library. At that time, they found more than 90% of respondents from both publicly supported and privately supported academic health sciences libraries provided access to *some* or *all* of the general public. Privately supported libraries generally limited access to specified user groups such as nonaffiliated health sciences professionals and subscribing members. Approximately 80% of publicly supported libraries and over 60% of privately supported libraries provided ready reference (brief) assistance to the general public, and roughly 30% and 23% respectively offered indepth assistance. It was inferred that most libraries at that time circulated materials only via interlibrary loan or with a fee-based library membership. Privately supported libraries were more likely than public ones to have a written reference service policy outlining services they would provide to the general public.

Several years later, in an effort to understand public access policies of medical libraries better, Schell conducted a survey of the largest medical library in each state. This survey included both hospital and academic health sciences libraries. The then current *Directory of Health Science Libraries in the United States* was used to identify this sample. Schell found while 91% of respondents provided access to the public, only 20% provided the public with full service. These findings concurred with Jeuell's findings for privately supported medical school libraries. Furthermore, this study found 43% of medical libraries responding to the survey referred most questions from the general public back to a public library [5].

In the mid-1980s, Paterson conducted a review of the literature to determine level and type of health information available to the lay person and urged all libraries to take a more active role in providing health information to the general public. In her report, she stated, "Medical libraries do not encourage public use of their collections and usually refer questions to the public library" [6].

Hafner revisited the issue of access in the early 1990s [7]. He reported on a survey conducted by the American Medical Association (AMA) Library and Information Division to determine whether patients had access to hospital and medical libraries. This survey was done to measure response to a 1991 AMA resolution that encouraged hospital and medical libraries to make their libraries accessible to patients and their

families. Hafner surveyed 481 medical libraries, including all main medical libraries affiliated with U.S. medical schools as identified in the 1990 *American Medical Directory*. Results, which did not distinguish academic health sciences libraries from hospital or other medical libraries, showed a majority of medical libraries allowed patient access—58.1% without restriction and 19.9% limiting access to specified groups. Hafner's survey did not address specific services offered.

The study reported here builds on and updates the earlier studies and provides a profile of how academic health sciences libraries are responding to health information-seeking behavior of the general public at the close of the twentieth century.

PURPOSE AND METHOD

The purposes of this study were: (1) to document the number of academic health sciences libraries—both publicly and privately supported—that provided access to some or all of the general public; (2) to gain information about the level of service these libraries provided the general public; (3) to gain information about fees charged for particular services provided; and (4) to determine whether these services were formally included in a policy or mission statement. For purposes of this study, "general public" was defined as nonaffiliated students, nonaffiliated health care professionals, attorneys and other nonhealth-related professionals, patients from affiliated hospitals or health centers, and general health information consumers.

The study population consisted of 148 academic health sciences libraries identified in the *Association of Academic Health Sciences Library Directors (AAHSLD) Annual Statistics of Medical School Libraries in the United States & Canada*, twentieth edition [8]. This population included libraries of medical schools holding "institutional" or "affiliated institutional" membership in the Association of American Medical Colleges (AAMC) as well as libraries affiliated with all osteopathic medical schools in the United States. In October 1998, a questionnaire (Appendix) was sent by mail to each of the libraries targeted for the study. The letter and survey were sent to the head of information services. A follow-up mailing was done several weeks later.

RESULTS

Of the 148 academic health sciences libraries surveyed, 105 completed and returned the questionnaire resulting in a 71% response rate. Respondents included 63 libraries from publicly (state) supported medical schools and 42 libraries from privately supported medical schools. Data were entered into a spreadsheet using the Statistical Package for the Social Sciences and crosstabs were run to facilitate comparison of services provided by publicly supported libraries to those pro-

Table 1

Contact with general public as approximate percentage of total number of patrons assisted per year

	Type of institution/library	
	Public N = 60	Private N = 36
Less than 10%	25 (41.7%)	22 (61.1%)
11%–25%	25 (41.7%)	13 (33.3%)
26%–50%	9 (15.0%)	2 (5.6%)
More than 50%	1 (1.7%)	0

Note: Percentages are based on actual responses to this question.

vided by privately supported libraries. All percentages represented in the following text and tables were based on actual number of respondents answering a question; not every respondent provided a response to every question.

While the vast majority of academic health sciences libraries reported they did not actively promote use of the library by the general public, it was interesting to note that sixty-two libraries (98.4%) affiliated with publicly supported medical schools and thirty libraries (71.4%) affiliated with privately supported medical schools (hereinafter referred to as sixty-two public libraries [98.4%] and thirty private libraries [71.4%]) indicated they provided access and service to all, including the general public. Five privately supported libraries reported they did not provide access to the general public and did not complete the questionnaire. These respondents were not included in the remainder of the analysis, leaving 100 total respondents for analysis of services offered. Over one-half of public libraries (54.8%) and 40.0% of private libraries included the general public as clientele in their mission statement.

Librarians in public institutions saw greater numbers of public patrons than did their counterparts in private ones. Sixty-one percent of privately supported libraries estimated less than 10% of the total number of patrons assisted on an annual basis were classified general public, while 41.7% of public libraries followed this pattern. Staff in public libraries were almost three times as likely as their private counterparts to spend between 25% and 50% of their time assisting public patrons. This information is summarized in Table 1.

While almost all responding academic health sciences libraries currently allow access for all or some of the general public, only 15% of libraries—public and private—actively promote public use. Promotion is accomplished in a number of ways. Almost all encourage public and other libraries to refer patrons to them; two-thirds encourage affiliated health professionals to refer patients to them; and half meet with community groups, advertise their services, work with patient education committees, offer workshops or seminars, or promote use of their library via a Web page.

Table 2
Circulation of library materials to general public (by material type)

Material type	Type of institution/library	
	Public N = 57	Private N = 36
Circulate no materials*	20 (35.1%)	29 (80.5%)
Circulate print books	35 (61.4%)	5 (13.9%)
Circulate only consumer-oriented materials	1 (1.8%)	2 (5.5%)
Circulate AV materials	22 (38.6%)	2 (5.5%)
Circulate serials	10 (17.5%)	2 (5.5%)
Circulate other†	5 (8.8%)	2 (5.5%)

Note: Percentages are based on total responses to the question.
 * Several respondents who answered they "circulate no materials" noted they will circulate materials to the general public either via interlibrary loan or with a library membership.
 † Other included models, teaching aids, and computer software.

Participants were asked whether they have ever participated in a formal, well-defined relationship with a nonhealth-sciences library or other agency in the community to provide the general public with health information, for example, a grant funded project. Fifteen public libraries (24.2%) and seven private libraries (19.4%) have been involved in such a partnership. Half of these projects have been grant funded, and about a quarter have been funded either by one institution or both institutions. A small number of projects received support from the community or other sources.

Several questions gathered information about consumer health materials found in academic health sciences libraries. Results showed a significant number of responding libraries (44.4% private and 36.5% public) housed a collection of consumer-oriented resources. Contents of these collections were similar, with both types of libraries favoring books and electronic resources (including consumer-oriented Web sites) over serials and audio-visual materials. Pamphlets and other materials located in vertical files were also popular. Almost half of the libraries responding to the survey (48.6% private and 44.3% public) indicated they planned to add consumer materials to an existing collection or develop a consumer health collection in the near future.

Consumer-oriented materials in academic health sciences libraries were identified and shelved in a variety of ways. Less than half of respondents representing public libraries reported they shelved consumer materials separately from clinical collections; over two-thirds of private libraries followed this practice. Almost as many used special labels to identify materials oriented to the consumer or general public. Less than 10% of respondents indicated they used a different classification system, such as Library of Congress Classification, to differentiate between consumer and clinical collections. A small number of respondents indicated their consumer-oriented materials were identified as "popular works" in the online public access

Table 3
Reference assistance provided the general public

	Type of institution/library	
	Public	Private
Ready reference‡	N = 62	N = 36
Inperson	62 (100.0%)	36 (100.0%)
Mail	53 (85.5%)	24 (66.7%)
Phone	58 (93.5%)	35 (97.2%)
Indepth reference§	N = 1	N = 36
Inperson	51 (83.6%)	21 (58.3%)
Mail	34 (55.7%)	15 (41.7%)
Phone	29 (47.5%)	14 (38.9%)
Perform mediated search**	N = 62	N = 36
Public	57 (90.5%)	25 (59.5%)

Note: Percentages are based on total responses to each question.
 ‡ Ready reference includes finding information in a directory or dictionary or providing brief information (usually on a single topic and from one or two basic texts).
 § Indepth reference involves an extensive search for information in several different sources, e.g., journals, books, databases.
 ** Mediated search is a search for information performed by a librarian or other library personnel for a specific patron, usually for a fee.

catalog. One respondent reported that its consumer-oriented materials were not in any way distinguishable from those materials included in their clinical collections.

Circulation policies and practices were also examined. It was found, overall, public academic health sciences libraries were far more likely than private ones to circulate materials directly to the general public. Close to three-quarters of private libraries did not circulate any type of material directly to the public. Several respondents, however, noted that they circulated materials to the general public via interlibrary loan while others loaned materials to public patrons who purchased a membership in the library. Circulation practices, by material type, are summarized in Table 2.

The survey also gathered data about policies and practices pertaining to reference service provided to the general public. Results showed 51.6% of public academic health sciences libraries and 38.8% of private ones have developed a written policy outlining the level of reference service to be provided to the general public. Questions were included to determine level or depth of reference assistance provided as well as the manner in which it was provided, such as in person, by phone, or by mail. All respondents indicated they provided ready (brief) reference in person and most provided this same level of service by phone. Public libraries were generally more likely than their private counterparts to provide indepth reference assistance to the general public. Several private libraries noted they provided indepth assistance as a fee-based mediated service. Results and definitions of terms are included in Table 3. Fifty-seven of responding public academic health sciences libraries (91.9%) and twenty-five of pri-

Table 4
Use of library computers by general public

	Type of institution/library	
	Public	Private
Library allows general public to use computers:	N = 62	N = 36
Yes, all of them	32 (51.6%)	11 (30.5%)
Yes, select computers	28 (45.2%)	18 (50.0%)
No	2 (3.2%)	7 (19.4%)
If yes, for what purpose:	N = 60	N = 29
Any purpose—no limits	29 (48.3%)	6 (20.7%)
May search Internet with no restrictions	6 (10.0%)	10 (34.5%)
May search only HEALTH-RELATED sites on Internet	10 (16.7%)	3 (10.3%)
May search MEDLINE	23 (38.3%)	11 (37.9%)
May search all library databases	13 (21.6%)	6 (20.7%)
May search OPAC	24 (40.0%)	20 (68.9%)
Other††	6 (10.0%)	4 (13.8%)
	N = 57	N = 28
Fee charged for printing materials from a computer	24 (42.1%)	10 (35.7%)

Note: Percentages are based on total responses to each question.
†† Includes CAI materials, GPO documents, selected licensed resources.

vate ones (69.4%) provided a fee-based mediated search service for the general public. Fees for this service ranged from free to \$60 per search; the fee charged most often was \$25.00.

Participants were asked to respond to several questions related to public use of library computers and electronic resources. Results showed a majority of responding libraries, both public and private, allowed the general public to use some or all library computers to search for health information. Private libraries were more likely than public libraries to place restrictions on use of computers. Several respondents commented primary users were always given priority over the general public and some indicated e-mail was not supported for the general public. A significant number of academic health sciences libraries imposed a fee for printing materials, for example, full text of an article. Fees ranged from \$0.03 to \$0.20 per page, with most libraries charging \$0.10. Computer use and associated fees are summarized in Table 4.

When asked whether they provide *formal* or *scheduled* instruction for the general public in how to use a computer to search library databases or other health information sites on the Internet, the overwhelming response (85.7%) was "no." A small number of libraries (6 public and 2 private) reported they provided training that, if not specifically geared to the general public, was not restricted to exclude this group. Several more libraries planned to offer some type of formal instruction in the near future. Two respondents said they provided fee-based instruction for the general public.

A final series of questions was included to learn more about photocopy, fax, and document delivery

services available to the general public and fees established for provision of these services. Almost all libraries responding to the survey (99.0%) provide public access to a copy machine. Public libraries (10.0%) were more likely than private ones (2.5%) to copy a few pages of materials for the general public at no charge. A greater number of libraries (18.0% public and 10.0% private) would fax a small amount of information to the general public at no charge. Approximately one-half of each group of respondents would copy or fax materials from their own collections for the general public for a fee. Fees for these services ranged from \$2 to \$15 per article (or \$0.10 to \$0.50 per page) to copy an article and \$1 to \$20 per article (or \$0.10 to \$0.50 per page) to fax an article. Most libraries charged between \$5 to \$10 per article.

A sizable number of academic health sciences libraries (35.5% public and 29.7% private) provided a document delivery service to the general public and would obtain materials not available in their own collections. The fees for this service ranged from \$5 to \$30 per article, with most charging between \$8 to \$15. Some libraries limited this service to specific user groups, such as unaffiliated health care professionals, or only ordered articles from specific libraries. Less than half of respondents from public or private academic health sciences libraries referred public patrons to a commercial document delivery service; most referred to the nearest public library. Finally, a majority of responding libraries (80.3% public and 70.3% private) would establish a Loansome Doc contract for all or some (e.g., unaffiliated health professionals) public patrons. Loansome Doc, a feature of Grateful Med, is a fee-based service that allows unaffiliated health professionals and others to establish a contract with a medical library to order full-text copies of journal articles.

CONCLUSION

In the mid-1970s, two studies by Jeuell and colleagues showed a majority of academic health sciences libraries allowed access to the general public. Many, however, limited access to specific groups, such as nonaffiliated health care professionals. Most libraries, both publicly and privately funded, provided only minimal service. At that time, 80% of public libraries and 62% of private ones provided ready (brief) reference assistance to the general public either in person, by phone, or by mail; however, less than 30% overall provided in-depth assistance. Approximately one-half of responding libraries from each group provided a mediated search service for the general public. Circulation practices in those early studies were examined only indirectly. It was inferred the general public had access and inhouse use of materials in academic health sciences libraries, yet circulation of materials was

largely limited to patrons who purchased a library membership or initiated an interlibrary loan at another library [9, 10].

Although several respondents from the current study commented that lack of time, staff, or resources served as barriers to offering a full range of services to all persons wishing to use the library, results of this survey suggest academic health sciences libraries today are, in fact, expanding their role as information providers to health-conscious consumers, regardless of affiliation, and many are providing a greater level of service than they were able to provide in the early years of the consumer health movement. A growing number of libraries, both public and private, have developed, or plan to develop, a consumer collection geared to information needs of the general public and most allow the general public to use library computers to search the Internet or many library databases. While most respondents indicate they do not currently provide instructional programs in using computers that are designed specifically for the general public, several noted this group of users is not excluded from participating in general instructional sessions offered by the library. Finally, a sizable number of academic health sciences libraries now offer some type of document delivery service, usually for a fee, which allows for copying and mailing or faxing journal articles to the general public. Many libraries have agreed to establish Loansome Doc contracts with public patrons and some will order articles from other libraries.

In the late 1990s, virtually all academic health sciences libraries, regardless of institutional funding, assist onsite patrons with ready reference assistance. The majority also provide this service by mail or phone. Most publicly supported libraries provide in-depth reference assistance, though many require onsite patron assistance, and over half of privately supported libraries provide this level of assistance to public patrons onsite. A growing trend toward end-user searching has not negatively impacted the provision of a mediated search service for the general public. Most academic sciences libraries today, both public and private, continue to provide this service. Over 60% of public libraries circulate books or other library materials to the general public. A majority of private libraries do not circulate library materials directly to the general public, but almost all provide a copy machine and many will circulate materials from their collection via interlibrary loan. General comments indicate almost 20% of academic health sciences libraries, both public and private, currently require the purchase of a library membership for circulation of library materials to the general public.

While, arguably, academic health sciences libraries should make their resources available to anyone interested in obtaining health information, maintaining a balance between meeting the needs of the general pub-

lic and fulfilling their obligation to their primary clientele is important. In their 1988 publication [11], Landwirth and colleagues offered several suggestions for maintaining this balance, including scheduling hours around primary users' needs, setting reference guidelines to ensure that primary users receive top priority, implementing charges for certain services beyond basic level reference assistance, and placing increased emphasis on training library staff in providing reference assistance. They also suggested that those academic medical libraries without written reference services guidelines were vulnerable and in danger of letting outside demand overshadow the university's obligation to its primary clientele. This study found a significant number of academic health sciences libraries today are, in fact, producing a written reference policy that outlines services they will provide to the general public. The number of public libraries producing a written policy (51.6%) has doubled over that reported in the Jeuell study twenty years ago. Of particular interest, the number of privately supported libraries reporting they have a written reference services policy (38.8%) has declined significantly from the number (63%) reported in the Jeuell study.

Though lack of time, staff, and resources have been mentioned as deterrents to offering a full range of service to all persons wishing to use academic health sciences libraries, results of this survey show that most are committed to helping the health information-seeking public. As increasing numbers of the general public have become aware of the availability of the academic health sciences library to them, libraries are making their collections accessible and are providing assistance in a variety of ways. To the extent that information is vital to maintaining good health, U.S. and Canadian academic health sciences librarians are integral to the effort of promoting a healthier population. This effort continues the trend and broadens the scope of involvement reported in earlier studies.

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APPENDIX

Academic health sciences libraries services available to public or nonaffiliated patrons

Please answer the following questions describing services available to the general public.

- Institution status: Public Private
 Approx. no. of volumes in library (monographs & serials): _____
 Information Services Staff (FTE): Professional Paraprofessional
 Definition: For purposes of this questionnaire, "general public" shall include nonaffiliated students, nonaffiliated health care professionals, attorneys and other nonhealth-related professionals, patients from affiliated hospitals or health centers, and general consumers.
1. Does your library provide service to the general public?
 Yes, to all [Go to Q3]
 Yes, to specific groups (please specify) _____
 No [Go to Q2]
 2. If "no," why not? (Please explain and go to "Other Comments.") _____
 3. Are general public included clientele in your library's mission statement?
 Yes No Don't know We have no mission statement
 4. In your estimation, how many public patrons do you assist throughout the year?
 Less than 10% of contacts Between 26% and 50% of contacts
 Between 11% and 25% of contacts Over 50% of contacts
 5. Does your institution actively solicit or promote public use of your library?
 Yes No [Go to Q7]
 6. If yes, how? (Please check all that apply.)
 Advertise
 Encourage affiliated health professionals to refer patients to the library
 Encourage public and other libraries to refer consumers to you
 Meet with community groups
 Other (please specify) _____
 7. Does your library currently have, or have you had in the past, a well-defined or longstanding relationship, e.g., a grant-funded program, with a nonhealth sciences library or other agency in your community to provide consumers with health information?
 Yes [How many?] _____ No [Go to Q9]
 8. How are (were) these projects/programs supported? (Please check all that apply.)
 Grant funded
 Community funded
 Institutionally funded by each partner
 Institutionally funded by one partner
 Other (please specify) _____

The following questions relate to collections available to the general public.

9. Does your library house a collection of consumer oriented materials?
 Yes No [Go to Q12]
10. What is included in this collection? (Please check all that apply.)
 Print books
 Serials
 AV materials (slides, videos, audiocassettes)
 Electronic resources, e.g., consumer database such as Health Reference Center
 Other (please specify) _____
11. How is your consumer collection identified? (Please check all that apply.)
 Special labels are used to identify consumer materials
 Consumer materials are shelved as a separate collection
 Consumer materials are catalogued differently, e.g., use Library of Congress classification system
 Other (please specify) _____
12. Do you plan to add consumer materials to your collection or expand your existing collection, in the near future?

- Yes No
 13. Which of the following materials will you loan to the public? (Please check all that apply.)
 None AV materials
 Print books Serials
 ONLY consumer materials Other (please specify) _____

The following questions relate to reference service provided to the general public.

14. Do you have a written reference policy that outlines services you will provide the general public?
 Yes No
15. Do you provide ready reference assistance, e.g., directory assistance, brief information:
 By mail: Yes No
 By phone: Yes No
 Inperson: Yes No
16. Do you provide indepth reference service, e.g., extensive search of journals, books, or database:
 By mail: Yes No
 By phone: Yes No
 Inperson: Yes No

The following questions relate to public use of computers and online databases.

17. Do public consumers have access to library computers?
 Yes, all of them Yes, select computers No [Go to Q21]
18. If "yes", for what purpose? (Please check all that apply)
 No limits are imposed on public consumers
 Consumers may search the Internet with no restrictions
 Consumers may search only health-related sites on the Internet
 Consumers may search MEDLINE
 Consumers may search any database available to faculty, staff, student
 Consumers may search library catalogs
 Other (please specify) _____
19. Do you charge a fee for materials printed from a computer, e.g., an article from Health Reference Center?
 Yes (\$_____ per page) No
20. Beyond basic assistance, do you provide formal or scheduled training, tailored specifically to the public user, in how to use a computer to search library databases or to search for information on the Internet?
 No
 No, not presently but we plan to do so in the future
 Yes (please describe) _____
21. Do you provide a mediated search service for public consumers?
 Yes No
 If "yes," how much do you charge per search? \$_____

The following questions relate to services and fees applicable to the general public.

22. Do public consumers have access to a photocopier in the library?
 Yes No
23. Will you copy materials from your own collection for consumers?
 Yes, no charge Yes, for a fee (\$_____ per page/article) No
24. Will you fax information to the general public?
 Yes, no charge Yes, for a fee (\$_____ per page/article) No
25. Do you provide a photocopy or document delivery service for the general public if materials they need are not available at your library?
 Yes, no charge Yes, for a fee (\$_____ per page/article) No
26. Will you establish a Loansome Doc contract for a public patron?
 Yes Yes, for specified groups No
27. Do you refer public patrons to a commercial document delivery service?
 Yes No

Other comments: (Please continue on another sheet if necessary) _____

Thank you for taking the time to complete this survey.