VITAL VT: Virtual Integration for Telehealth Access through Libraries in Vermont.

Despite advancements in telemedicine, rural Vermont communities face persistent barriers to healthcare access, including geographic isolation, limited healthcare facilities, and technology gaps. Rural libraries are deeply trusted community resources with established technological infrastructure, offering a promising solution for improved telehealth access. Despite this, a standardized approach to assess and build library telehealth readiness is lacking. We will leverage the "Telehealth in Libraries: Pre-Implementation Workbook" to prepare two rural Vermont libraries for a telehealth pilot program.¹ By following a structured pre-implementation process over 12 months, we will prepare two libraries for telehealth services. We aim to establish a scalable, community-centered telehealth model that will support rural healthcare access while strengthening library-community partnerships. The overarching goal of this project is to evaluate the feasibility and readiness of Vermont's rural libraries as telehealth hubs. The structured process will include community needs assessments, technical readiness evaluations, and staff training sessions, creating a strong foundation for the pilot phase.

Goal 1: Strengthen community partnerships to support sustainable, library-based telehealth services. This goal focuses on building and solidifying relationships with community organizations, local partners, and healthcare providers to ensure the long-term success of telehealth services in rural libraries. By fostering these partnerships, we aim to create a collaborative network that will support the infrastructure, growth, and sustainability of telehealth services once they are implemented. These partnerships will be essential for ensuring the telehealth model in tailored to the needs of rural communities and can be scaled beyond the pilot phase.

Measurable Outcomes

We will track quantitative indicators to assess the number of community organizations, local stakeholders and library partners engaged throughout the 12-month period. This includes documenting the number of library staff and community members who participate in partnership meetings and outreach efforts. These activities will help gauge the level of involvement and commitment from the community to support telehealth services.

Goal 2: Conduct a comprehensive, stepwise pre-implementation process with two rural Vermont libraries to assess and build telehealth readiness. Using the "Telehealth in Libraries: Pre-Implementation Workbook" as a guide, we will systematically assess and develop the infrastructure of multiple Vermont libraries, staff training, and community partnerships. The structures process will include community needs assessments, technical readiness evaluations, and staff training sessions, creating a strong foundation for a future pilot phase of this project.

Measurable Outcomes

Our measurable outcomes for this goal will focus on both the completion of the pre-implementation process and the preparedness to the libraries to launch telehealth services. Quantitatively, we will measure the completion rate of community needs assessments and technical readiness evaluations for Vermont libraries, including the number of surveys distributed and the response rates obtained from key community stakeholders. With 185 libraries in Vermont, we aim to complete readiness assessments on at least 50% of them. As well as library need assessments, we will also complete community needs assessments, and provider needs assessments as outlined in the "Telehealth in

Libraries: Pre-Implementation Workbook." This will give us insight in the unmet health needs that exist in our communities, and gaps in services provided.

	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Kick off meeting												
Ongoing meetings												
Complete library needs & readiness assesments												
Complete community needs assesment												
Library Selection												
Complete healthcare provider needs assesment												
Reflect and connect												
Develop an implentation plan	·	·	·	·		·	·					
Analyze data and prepare for dissemination												

Figure 1: VITAL VT anticipated timeline

Community Impact

VITAL VT is intended to enhance healthcare access by leveraging trusted community libraries as telehealth hubs. This project seeks to address long standing barriers to healthcare access in rural areas, such as geographic isolation, limited healthcare facilities, and technology gaps, by utilizing the existing infrastructure and trust the rural libraries hold within their communities.

At the community level, VITAL VT will build awareness and engagement among community members about the potential for telehealth services though libraries. Although the direct implementation of telehealth services will not occur immediately, this project will create a foundation for future access to telehealth services in rural communities. We will provide education to communities on the potential for telemedicine and how these services can address unmet healthcare needs. The project will foster community dialogue and input through needs assessments, helping to ensure that telehealth services are tailored to meet the needs of the community they are intended to serve.

At the state level, we aim to establish a replicable model for integrating telehealth into rural libraries across Vermont. By following a structured pre-implementation process, the project will demonstrate the feasibility and readiness to libraries to serve as telehealth hubs, which can influence policy decisions and future funding opportunities for telehealth expansion statewide. This effort will contribute to creating a broader, statewide infrastructure to address rural health disparities.

The recipients of the anticipated outcomes will primarily be rural community members, especially those who are underserved or have difficulty accessing healthcare. These individuals will benefit from the future potential of telehealth services in libraries, including better access to care, improved health outcomes, and reduced travel burden. Additionally, healthcare providers and library staff will benefit from the training and partnership building activities that are part of the pre-implementation process, which will enhance their ability to support telehealth services when they are eventually launched.

Diversity, Equity, Inclusion, and Justice

VITAL-VT promotes Diversity, Equity, Inclusion, and Justice principles by focusing on underserved rural communities in Vermont, providing equitable access to healthcare. Rural areas often face significant health disparities due to barriers such as inadequate transportation, limited technological infrastructure, and a shortage of healthcare services. These challenges disproportionately impact marginalized populations, including low-income families, older adults, and individuals with disabilities. Similarly, limited access to reliable internet disproportionately affects these very same marginalized populations. Vermont's shortage of healthcare providers in rural areas limits access to local care, making telemedicine an essential option for residents who face obstacles like long travel distances, limited transportation, and a lack of available healthcare services.

Through collaborative community efforts and a focus on justice in healthcare, VITAL-VT aims to reduce health disparities, promote fairness, and create a more inclusive healthcare system for Vermont's rural populations. By exploring telehealth delivery in community spaces such as libraries, VITAL VT seeks to make access to telehealth services more equitable and accessible to those who are otherwise left behind.

VITAL-VT will actively engage a diverse group of UVM students, library staff, healthcare providers, and community stakeholders in the co-design and implementation of telehealth services. By ensuring that individuals from underrepresented and marginalized groups have a voice in the process, VITAL-VT prioritizes an inclusive approach to healthcare delivery that meets the needs of the most vulnerable patients. Special attention will be given to designing services that are accessible to people with limited technology literacy or resources, minimizing barriers. This diverse group helps to ensure that telehealth services are designed with the needs and preferences of marginalized populations in mind, particularly those with limited access to technology or low digital literacy. Community members will have a direct voice in the development and implementation of these services, ensuring their needs are addressed in the evolving telehealth model. With this in mind, we are requesting funds to provide a stipend for a graduate or medical student intern. Offering a stipend promotes diversity by enabling students who might otherwise need to work to participate in the grant. This support helps ensure a more inclusive range of perspectives and backgrounds in the project.

The VITAL VT initiative acknowledges the importance of justice in healthcare by actively addressing the systematic barriers that perpetuate healthcare inequities in rural Vermont. The project strives to eliminate these barriers by promoting fair access to telehealth services, reducing the healthcare disparities that currently exist between rural and urban communities. These efforts ensure that our most vulnerable individuals are not left behind in Vermont's healthcare system.

Integration of UVM Students, Faculty, and Resources

The VITAL VT project will integrate UVM students, faculty, and resources in several ways. UVM graduate and medical students will be given the opportunity to participate in the project through an internship. The student intern will actively engage in the community needs assessments, conducting surveys and evaluating library and community readiness for telehealth. This hands-on experience will allow students to meaningfully to the design and implementation process while gaining valuable skills. UVM faculty members will be involved as mentors, offering expertise on telehealth systems,

rural healthcare access, and community engagement. Faculty from the college of medicine and college of nursing will lend their knowledge on clinical practice, rural healthcare disparities, and community medicine. This partnership will ensure that VITAL VT aligns with clinical, academic, and research missions of our institutions.

VITAL VT will harness the strength of UVM's Emergency Medicine Research in Emergency Medicine program. This program, comprised of Research Coordinators and Research Associates, has a proven track record of successfully executing research projects, while ensuring the protection of research subjects, and compliance with federal regulations surrounding research. Previous funded studies include; *Start Treatment and Recovery* (Funded by Substance Abuse and Mental Health Services, \$3,750,000 over five years), *Emergency Department Initiated Buprenorphine Intervention for Opiate Use Disorder* (Funded by Substance Abuse and Mental Health Services, \$1,500,000 over three years), *Validation of Field Assessment Stroke Triage for Emergency Destination* (Funded by the University of Vermont Health Network, Safety and Value Grant, \$50,000 over two years), *Advancing Unified Guidance for Medical Emergencies with Network Telehealth for the Emergency Departments and Emergency Medical Services (AUGMENT-ED/EMS) of Greater Vermont* (funded by Health Resources and Services Administration, \$1.2 million over four years), and Vermont Cardiac Arrest Registry Enhancing Survival (VT-CARES) (funded by the Office Of Minority Health, \$139,076 over two years).

The Department of Emergency Medicine retains 20% effort of biostatistical support through the Department Biomedical Statistics Research Core at UVM. The UVM Biomedical Statistics Research Core is a biostatistics research and service unit that provides capabilities in biostatistics, statistical genetics, epidemiology, randomized clinical trials, experimental design, data management and processing, and survey research. The faculty of the Core includes biostatisticians, epidemiologists and behavioral scientists, some of whom are affiliated with the Statistics Program of the College of Engineering and Mathematical Sciences or other academic units. The Core personnel currently consist of five PhD faculty and staff, three MS biostatisticians, and one budget manager / administrative staff member. The Core is located in the Hills Building on the main UVM campus adjacent to the Larner College of Medicine.

Sustainability Plan

To ensure long-term sustainability of VITAL VT, we will focus on building robust community partnerships and securing future funding streams. These partnerships will form the foundation for the ongoing development and operation of telehealth services in rural libraries. Working closely with local partners, we will ensure that VITAL VT is community driven and that local entities are invested in its success. These partnerships will also help integrate telehealth into the everyday function of libraries, to ensure its continuation beyond the pilot phase.

Additionally, we will explore long-term funding opportunities, including federal and state grants and foundation funding to ensure that financial support continues after the initial year. We have already submitted a letter of intent for a Clinical Innovation Grant through the University of Vermont Medical Group (UVMMG). This funding is for two years and would allow us to advance VITAL VT beyond

the pre-implementation phase and allow us to conduct a small-scale pilot for the two libraries selected as part of this grant. We have been selected to submit a full Clinical Innovation application.

Budget Justification

PERSONNEL

Roz King, MSN, RN will serve as Project Director and provide overall leadership and oversight for the project, including managing the budget, supervising project staff, coordinating partnerships, and ensuring all project activities align with the goals of the pre-implementation and pilot phases. Additionally, the PD will serve as the primary point of contact with stakeholders. Ms. King will provide 1 % effort over the 12-month period, ensuring successful planning and execution of the pre-implementation workbook tasks and telehealth pilot.

TRAVEL

Mileage: We are requesting funds to support travel for project staff to attend meetings throughout the project. This milage is calculated based on the University of Vermont's approved rate of \$0.67/mile.

OTHER EXPENSES

Trainee stipend will be made available for a medical or graduate students to work on this project. Offering a stipend promotes diversity by enabling students who might otherwise need to work to participate in the grant. This support helps ensure a more inclusive range of perspectives and backgrounds in the project. This student will assist in data collection, data analysis, and contribute to scholarly output related to the project. They will work under the direction of the Project Director and. This cost supports one stipend at \$1,500.

Engagement stipend will be offered to team members to attend the seven convenings required as part of this project. We are requesting \$1,500 to provide a stipend for 15 participants attending our project meetings. Each participant will receive a one-time stipend of \$100 for their commitment to attending seven meetings over the project period. This stipend is intended as a small gesture of appreciation for their time and participation, acknowledging the personal commitment required to support VITAL VT's success. Given our limited budget, we have prioritized essential items, and while we are unable to support everyone on the team's effort, this amount allows us to recognize participant's contributions in a modest way.

UVM Click Submission

This grant has been submitted in UVM Click under Funding Proposal (FP) 00005883.

Partner Letter of Support



November 11th, 2024

Dear Ms. King,

We are writing to express our enthusiastic support for the project titled VITAL VT: Virtual Integration for Telehealth Access through Libraries in Vermont. As collaborators on this project, we have been involved in the planning and development of this initiative, and believe it has tremendous potential to improve healthcare access in rural Vermont communities.

At this stage, the VITAL VT initiative is focused on conducting comprehensive community needs assessments to determine library and community readiness for telehealth services. By engaging with local libraries, community organizations, and residents, we aim to identify the barriers to healthcare access, including connectivity challenges, technological literacy, and the specific needs of the populations we seek to serve. These assessments will lay the groundwork for future phases of the project, which will work to establish libraries as accessible, trusted telehealth hubs.

As part of the project team, we are committed to contributing out shared expertise in public health, healthcare operations, sustainability, telemedicine, library science, and clinical care to ensure the success of the needs assessment process. This initiative presents a unique opportunity to foster collaboration between the University of Vermont, the University of Vermont Health Network, local libraries, and rural communities while involving students in valuable learning experiences.

We believe that the VITAL VT initiative will create a sustainable model for telehealth access in rural areas, improving health outcomes for Vermonters and addressing existing health disparities. We look forward to the continued work on this important project and the opportunity to make a meaningful impact in out communities.

Sincerely,

Matthew Siket, MD, MS, Medical Officer for the Care Coordination System, UVMHN; Associate Professor of Emergency Medicine and Neurological Sciences

Diane Imrie, RD, MBA, Network Director of Sustainability, UVMHN

Pam Mackenzie, Chair of the Board of Trustees, Home, Health and Hospice, UVMHN

Abimbola Leslie, MD, MPH, MDP, Faculty Research Scientist, Depart of Radiology, UVM

Beth Zigmund, MD, Radiology Department, Associate Professor of Radiology, Larner College of Medicine

Christopher P. Kruglik, MSc, MPH, Medical Student at the Larner College of Medicine

Erin Leighton, DNP, APRN, FNP-BC, Clinical assistant professor, UVM Department of Nursing

Jennifer Murray, Library Director, South Burlington

Havaleh Gagne, MD, Associate Professor of Radiology, Radiology Department, Larner College of Medicine **Alicia Jacobs MD FAAFP**, Medical Director of Wellbeing Informatics, OneCare ACO Physician Leader, UVMHN



Telehealth in Libraries: Pre-Implementation Workbook



The purpose of the Telemedicine in Libraries (TIL): Pre-Implementation Workbook is to:

- 1.) Aid libraries in connecting with their communities
- 2.) Determine the needs of a TIL program in their community
- 3.) Establish partnerships to aid in implementation

Librarians and community partners are guided through a series of activities and data collection to better understand the unmet healthcare needs in the community, establish necessary partnerships, and provide resources to successfully implement a program.

This workbook is a product of a collaborative partnership between individuals representing the Indiana Rural Health Association (Kasia Hamann, MPH), University of Virginia Health (Pamela B. DeGuzman, PhD, RN, CNL), and the University of Southern Indiana (Zachary Ward, Ed.D.).

For questions or comments regarding this workbook, please send a LinkedIn message to the <u>National Working Group for Telemedicine in Libraries</u>.

Suggested citation: Hamann, K., Ward, Z., & DeGuzman, P.B.,(2023). Telehealth in Libraries: Pre-Implementation Workbook.

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Activities

INTRODUCTION

How to use this workbook

Congratulations! Whether you are a public librarian, community agency, or healthcare provider, you are taking an important step toward ensuring your community members have the opportunity to utilize telemedicine.

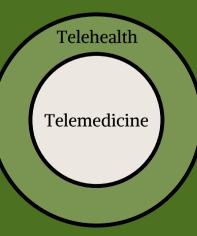
For Librarians: This workbook is designed for public librarians to use to develop a Telemedicine in Library (TIL) program that successfully connects community members with their healthcare providers over a telemedicine connection. Using the tools contained in this workbook, you can walk through the elements of a TIL program to consider before launching and implementing your program. You can use some or all of the tools contained herein – not every tool will be appropriate for every case. Feel free to use what is applicable to your situation and/or goals.

For community agencies, healthcare providers, and others: To use this workbook, we recommend first connecting with your public librarian and walking through the tools in the workbook in collaboration with them and other community partners.

What is Telemedicine?

Telemedicine is a subset of telehealth that involves the **delivery of direct, real-time patient care delivered virtually,** such as a video visit with a provider.

Telehealth refers to any use of electronic information and telecommunications technologies to support and promote long-distance health care, such as emailing a provider or using an electronic health record.



Partnerships

Partnerships are the key to a successful telemedicine program. Many libraries could make their facilities available to the community for telehealth visits. However, research suggests that the most successful programs are those in which libraries establish partnerships with healthcare providers and community health agencies prior to implementation.

Who are the potential partners in your area? As a public librarian, you may not have a collective list of all the potential partners in your community. If there is a list of community partnerships, then use that list to develop a network to start designing a TIL program. If there is not a list and potential partners need to be identified, a Community Mapping activity is included in the Appendix on page 23. The mapping activity will ask you to identify agencies that already work closely with you, so that you can use existing networks to maximize your reach. After identification of community agencies, talk with those agencies to identify others that can collaborate on a TIL program.



Overview of Assessment Tools

After community partnerships have been identified, it's time to plan the dissemination of the needs assessments, data collection efforts, and data analysis. A brief overview of the assessment tools and the recommended process is below.

The process starts with a Library Assessment. This assessment allows the librarian to determine their own knowledge of existing community needs and resources, as well as what resources or information may be needed at the library prior to launching a program.

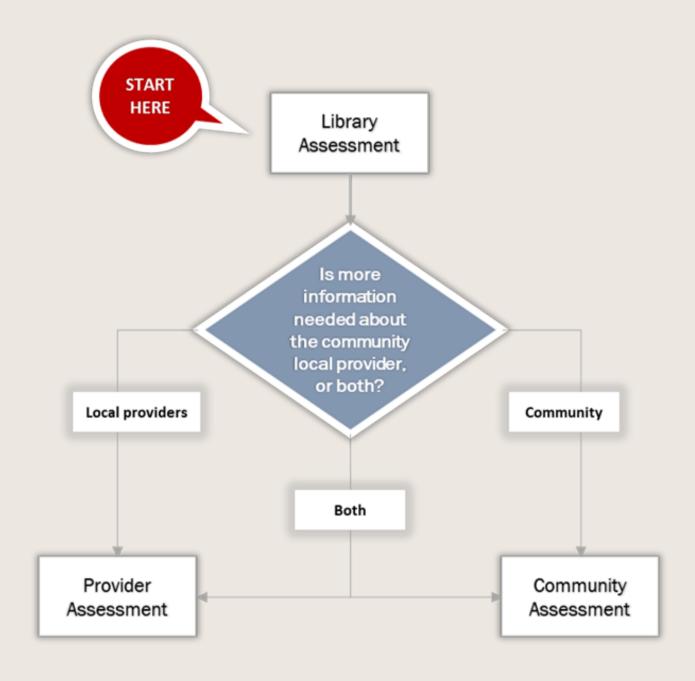
To answer questions about current community needs and resources and available healthcare providers, additional assessments will need to be conducted: a Healthcare Provider Needs Assessment and a Community Needs Assessment.

The following page includes a diagram to determine when/if each assessment should be completed.

More information about how to complete each assessment is in Section 3.



Assessment Diagram



Data Collection & Assessment Tools: Library, Community, Healthcare Provider

To begin the process of the TIL implementation, use the Community Mapping activity to identify who will help with survey distribution, data collection/storage, data analysis, planning, and program implementation. In the appendix is a short Timeline activity where you can identify which partner is helping with a task, indicate the timeline, and list your TIL network's contact information.

To start the process of evaluating your library's readiness, start with the Library Needs Assessment (page 9). The library system can answer one survey, or each of the local library branches in the library system can answer surveys separately from the entire library system. This depends on how your library system operates and how you would like to design your TIL program. The goal is to collect enough information to understand if the library currently has the resources needed to implement a TIL program.

The remaining two assessments include the Community Needs and Healthcare Provider Needs. Before distributing the surveys, discuss with your network an expected number of completed assessments. This will help inform your network of the amount of time and availability from your partners you need to reach your goal.



Data Collection & Assessment Tools: Library, Community, Healthcare Provider

When completing the Community Needs Assessment, you can either partner with a community organization, such as a local health department or rural health agency, or simply ask patrons in your library to complete it. You will want to have as many completed surveys as possible and have a demographic that is representative of your community as a whole.

The Healthcare Provider Needs Assessment is to be completed by local physicians, nurse practitioners, office managers, behavioral/mental health providers, and other healthcare providers (HCPs) in your community or that provide services to your community. When completing the Healthcare Provider Needs Assessment, you may find it difficult to gather information directly from healthcare providers. In this case, you can use the internet or other local resources to identify healthcare providers in your area. It is recommended to contact HCPs in your community/surrounding area because you will need to have buy-in and engagement from an HCP to provide TIL services.



Part 1: Community Readiness Assessment

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
People in my community have difficulty accessing healthcare (e.g., lack of transportation, too few community providers, or inability to connect to telemedicine).					
People in my community would use telemedicine if they had a place to do it and someone to show them how.					
I am aware of healthcare providers serving the community who support patients using telemedicine in the library.	Υe	es		No)

Note: If you selected "Don't Know" to #1 or 2, complete the Community Needs Assessment on page 10. If you selected "Don't Know" to #3, complete the Healthcare Provider Needs Assessment on page 12.

Part 2: Library Readiness Assessment

Library System or Library Branch Only? (Circle one)

Are you completing this form on behalf of your -

Library System Name:	-	
Library Branch Name:	-	
Equipment		
How many computers in your library are available to the public?		
Of those computers, how many are located in (or could be moved to) a private space?		
How many of those computers have a built-in camera?		
Number of headsets		
Number of external web cameras		
Internet Speed		
What is the typical Wi-Fi speed at the library? Use <u>Speed Test</u> to estimate speed.		
Is internet speed sufficient for patrons to stream videos at the library without interruption?	Yes	No
Are wired connections (to support stream videos) available for patrons?	Yes	No

Part 2: Library Readiness Assessment

Human Resource		
Are staff able to assist patrons with connecting to internet resources (such as telemedicine visit)?	Yes	No
Do staff assist with scheduling private spaces?	Yes	No
Are staff members trained in HIPAA, Consumer Health Information (CHI), and/or Protected Health Information (PHI)?	Yes	No
Please list staff concerns in relation to HIPAA, CHI, PHI:		
Library Board		
Is the board supportive of the library offering telemedicine visits?	Yes	No
If not, are there informational needs that would help develop their support?	Yes	No
Please list the informational needs:		

Part 2: Library Readiness Assessment

Financial				
What additional resources (equipment, staff, space) are needed to support telemedicine in the library?				
To your knowledge, what grants or funding opportunities can support additional needs/resources?				
Partnerships				
Do you have local/regional/statewide partnerships with healthcare entities? If yes, please list those on the Community Mapping activity page.	Yes	No		

Librarians: This short survey can help you identify specific populations in your community that may benefit from a Telehealth in Libraries program. Consider placing this survey in the library or partnering with a community health agency to collect information about the needs in your community.

1. What is the zip co	de where you live?	
2. Sex		
a. Female	D. Other	
b. Male	E. Declined to Answer	
c. Non-Binary	E. Decimed to Answer	
c. I toli Bilary		
3. Race		
a. American Indian	or Alaska Native	e. White
b. Asian		f. Two or more races (circle identified races)
c. Black or African A	American	g. A race not listed here
d. Native Hawaiian	or Other Pacific Islander	h. Uncertain/Not Sure
		i . Declined to Answer
4. Ethnicity		
a. Hispanic	c. Uncertain/Not Sure	
b. Not Hispanic	d. Declined to Answer	
-		
5. Age		
a. 10-14 years	e. 35-44 years	i. Declined to Answer
b. 15-19 years	f. 45-54 years	
c. 20-24 years	g. 55-64 years	
d. 25-34 years	h. 65+ years	
6 Education		
		f 2-year degree/Technical/Trade
· ·	ol (Grades 9–12)	•
· ·	,	
d. 25-34 years6. Educationa. 8th grade or lessb. Some High School	h. 65+ years	f. 2-year degree/Technical/Trade g. Bachelor's Degree h. Graduate or Professional School

i . Declined to Answer

d. G.E.D.

e. Some College

Please indicate to which degree the below services are available to people who live in your community.

Issue	Don't Know	Very Available	Some Are Available	Not Available	
Mental Health Care Providers					
Primary Care Providers (General/Regular doctor or Nurse Practitioner)					
Reproductive Healthcare Services (Care for pregnancy)					
Specialty Care Providers (Care for special health care issues, cancer, diabetes, HIV, etc.)					
Transportation to medical visits					
Treatment for Substance Use (such as Alcoholism or drug use)					
What services do you need that are not available?					

Please indicate how far you (or someone in your community) has to drive to access these healthcare providers. It does not have to be exact.

Provider	Miles it takes to drive there	<u>Minutes</u> it takes to drive there	Don't Know
Primary Care Providers (General/Regular Doctor or Nurse Practitioner)			
Mental Healthcare Provider			
Specialty Care Providers (Doctor or Nurse Practitioner who provides care for special health care issue such as, cancer, diabetes, HIV, etc.)			
Reproductive Healthcare Providers (Doctor who sees people who are pregnant or trying to have a baby)			
Other (Indicate which services):			

Please indicate your answer to the below questions about telemedicine. Telemedicine is a visit with your healthcare provider that is done over video, similar to Face Time, Zoom, or Skype.

	Yes	No	Not Sure
1.Have you ever had a telemedicine visit with a provider? (If no, skip to question #3)			
2.Were you able to do the telemedicine visit from your home?			
3. Do people in your community have internet access that is fast enough to watch a movie or other video?			
4. If you could have a telemedicine visit from a private location in your public library, would you do it?			

Please write any thoughts and/or questions you have about telemedicine in a public library.

HEALTHCARE PROVIDER NEEDS ASSESSMENT

This survey can help identify available healthcare providers that may be interested in a telemedicine in libraries program.

Facility Name:	'acility Name:				
List the counties served	d by your practice:				
Circle facility type					
Clinic	Addictions Treatment				
Hospital	Urgent Care				
Imaging Center	Other:				
Mental Health					

Provider Types in your Facility

Provider	Number in facility	List Specialty Area(s)
Nurse Practitioner		
Medical Doctor		
Physician's Assistant		
ЕМТ		
Physical Therapist		
Other - Please list		

HEALTHCARE PROVIDER NEEDS ASSESSMENT

Telemedicine Services

Do providers in your facility offer telemedicine healthcare services?	Yes No Don't Know
If no, are they interested in providing telemedicine healthcare services?	Yes No Don't Know
Are providers interested in expanding access to patients by offering telemedicine in their local public library?	Yes No Don't Know

If yes, please indicate below what equipment, information, and/or training you would need access to before offering telemedicine in a public library.

Equipment		Information		Training		
Computer			Privacy in Library		HIPAA Compliance	
Video Camera			Scheduling Visits		How to do telemedicine	
Other			Liability		Billing telemedicine	

Please list any other Comments/Concerns/Questions below.

Reflect and Connect

Once you have completed data collection, conduct these steps to determine next how to use your results.

Library Needs Assessment, Part 1 Look back at those in which you responded "don't know" on any of the community-focused questions and complete the Community Needs Assessment and the Provider Needs Assessment as indicated. Use the Mapping Exercise in the Appendix to identify partners that can help you supplement your knowledge in any areas.

Library Needs Assessment, Part 2 Any "no" answers in part 2 indicates areas where you may need to obtain resources. List those resources below under "Next Steps". See Section 5 to find additional information about suppliers and funding.

Community Needs Assessment The demographic information reveals insights into unmet health access needs of vulnerable populations within the community and may indicate the need for a library-based telemedicine program with specific populations. Use this information to guide your selection and engagement of partners.

Provider Needs Assessment This assessment will help you understand which services are currently being offered locally and which services a community member must travel to receive, as well as the telemedicine capabilities of each. Compare the results of the community health survey (unmet community needs) with the provider survey (services offered) to gauge which services might have the highest demand for telemedicine in your library.

Reflect and Connect

Next Steps Below is a checklist to use for the next steps. Feel free to add your own next steps and necessary tasks to reach the implementation stage.

Next Steps - List others as needed

- Prioritize tasks
- Highlight and address areas of concern
- Review necessary resources
- Identify available funding streams
- Creation of implementation plan
- Make list of equipment, resources, and items needed

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Resources

Bridging the Digital Divide: Telehealth and Libraries Webinar Series – Learn how libraries of all kinds can provide access to telehealth resources in their communities. This series of webinars from the Network of the National Library of Medicine is designed for stakeholders, including workers at health science and public libraries, health professionals and the public at large. Each session will feature a different guest speaker.

<u>Medicare Telehealth Trends Dashboard</u> – Interactive data dashboard with aggregated 2019–2021 Medicare FFS claims, includes state profiles on telehealth use.

National Consortium of Telehealth Resource Centers – Technical assistance for telehealth education and implementation in rural and underserved communities.

Telehealth 101: What Libraries Need to Know – This free, online course from the Network of the National Library of Medicine introduces telehealth in libraries, examines a few trailblazing programs around the country and covers issues that libraries need to consider in deciding whether telehealth is a good fit for them. The course requires three hours over three weeks and carries continuing education credit from the Medical Library Association.

<u>Telehealth.HHS.gov</u> – A hub to increase understanding of telehealth. This website includes information and resources for patients and providers.

Telehealth in Library Examples -

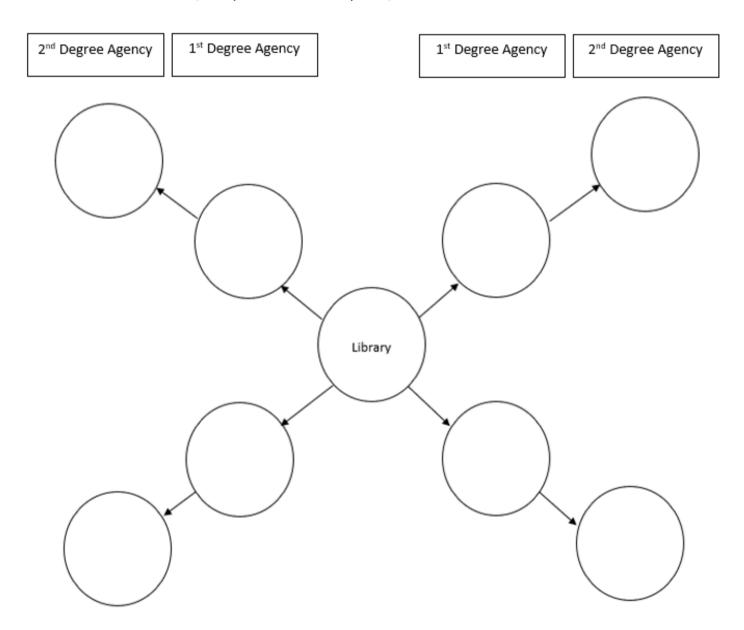
- The Pottsboro Area Library
- #GetConnectedDE
- NJHealthConnect @ Your Library



APPENDIX

Community Mapping

Directions: Complete the below chart by filling in your agency in the center circle. Then fill in each outside circle with agencies/community partners that you work closely with, and you would classify as part of your inner network. For 2nd degree agencies, discuss with your 1st degree community partners and ask them to indicate agencies and community partners that they work closely with and would be potentially beneficial partners to a telehealth in libraries project. This will allow you to establish a larger, connected network to assist with implementing a TIL program. In addition, this activity will be used in Section 4 to add tasks for each agency. Add as many degrees as needed.



Timeline

Directions: Identify tasks, timeframes, and responsible parties in the charts below. Add as many charts as neccesary.

Objective: Distribute Assessments (Library, Community, Healthcare Provider)				
Task	Timeline	Responsible Party	Contact Information	
Objective: Data Collection				
Task	Timeline	Responsible Party	Contact Information	
	1			

Timeline

Objective: Data Analysis				
Task	Timeline	Responsible Party	Contact Information	
Objective:				
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Timeline

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