**Voice of the Customer**

Information when and where you need it ... at your desk or on the go

**Objectives**

The purpose of this project was to explore how Hospital and Clinic staff accessed and used information for clinical and professional needs. The findings were, and continue to be, used to align knowledge resources with the needs of library customers.

**Methods**

In 2011, the library went from a staff of eight down to three. With reduced staff, we needed to focus our time on providing services that added the most value to Ministry Health Care. Utilizing the work written by Higa-Moore et al. in JMLA 2002, we developed a plan to access the voice of the library customer. In the Higa-More model, focus groups were used to determine the needs of library patrons. We submitted a project proposal and received approval to implement the project and hire a consultant to facilitate the focus groups.

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**Results**

**Trends identified:**

1. Access to the physical library and print materials was a barrier to getting information to answer clinical questions. Clinical information must be available on the unit 24/7 to be useful.

2. Our virtual library did not make sense to the staff. They felt there was too much information, too many links and it was unclear to them how to access the information they needed.

3. The staff needs help in determining what resources to use, what information is most current, what information is evidence-based and what steps to take to retrieve the information.

**Background**

Ministry Health Care is a system of 15 hospitals and 41 clinics located throughout Wisconsin, with one location in Minnesota.

**Focus Group Locations:**

- St. Elizabeth’s Hospital
- Ministry Saint Michael’s Hospital
- Ministry Saint Mary’s Hospital
- Ministry Saint Joseph’s Hospital
- Ministry Saint Clare’s Hospital
- Ministry Home Care
- Mercy Medical Center
- Howard Young Medical Center
- ... (remaining locations listed)

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**Reference**


**Conclusion**

Reduction in staff pushed us to listen to the voice of the customer, we closed all libraries but one, and now the focus is on building virtual library services.

**Improvements include:**

1. **Access:** Information obtained supported the purchase of Clinical Key and Nursing Reference Center. These tools provide online access to clinical information 24/7. **Athens** is being explored to provide single sign-on.

2. **Organization:** We implemented LibGuides as a way for specialties to easily and efficiently organize and access information. Newly recruited subject matter experts work with librarians to identify and maintain relevant content.

3. **Education:** A communication plan was launched. Librarians use the library blog, organization newsletter, online tutorials and face-to-face meetings with staff to teach and enhance skills at accessing online resources.

**ClinicalKey**

**Nursing Reference Center**