

DOCUMENT RESUME

ED 390 407

IR 055 754

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 TITLE After-Hours Access to the Cleveland Clinic Foundation Library Services Department: An Examination of Services.
 PUB DATE Nov 94
 NOTE 61p.; Master's Research Paper, Kent State University.
 PUB TYPE Dissertations/Theses - Undetermined (040)
 EDRS PRICE MF01/PC03 Plus Postage.
 DESCRIPTORS *Access to Information; Data Analysis; *Library Services; *Library Surveys; Medical Libraries; *User Needs (Information); User Satisfaction (Information); Use Studies
 IDENTIFIERS *Library Operations; Night; Ohio (Cleveland); Staffing Patterns

ABSTRACT

This study was launched to address concerns about the needs of after-hours users going unmet at the Cleveland (Ohio) Clinic Foundation Library Services Department. The collection itself is available for use on the premises by clinic employees 24 hours a day, but employees do not remain on site to provide assistance, materials may not be signed out after hours, and no online searching or library catalog searches may be done. The study consisted of distributing a questionnaire exclusively to 113 after-hours users of the library, and the responses (n=54) showed that overnight use of the premises is not casual, but purposeful and essential; 1 in 10 after-hours patrons make use of the library to answer questions regarding emergency or critical care. Other after-hours reasons for being in the library are represented in the data as well, like article pickup, access to a photocopier, or desire for a quiet area. More than any other desires for services, user responses called for expanded library hours and more continuous access to online databases. A followup study is recommended which would query a more representative sample of all patrons and solicit their insights into the efficacy of the present after-hours system and the dilemmas of providing services without benefit of staff. Six tables and three figures illustrate the results. (Author/BEW)

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AFTER-HOURS ACCESS TO THE
CLEVELAND CLINIC FOUNDATION LIBRARY SERVICES DEPARTMENT:
AN EXAMINATION OF SERVICES

A Master's Research Paper submitted to the
Kent State University School of Library and Information
Science in partial fulfillment of the requirements
for the degree Master of Library Science

by

Deanne Daniels Bouria

November, 1994

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ABSTRACT

The Cleveland Clinic Foundation Library Services Department exists to provide all Cleveland Clinic personnel with the information needed to support patient care, research, and education. It provides twenty-four-hour access to its holdings, primarily in answer to any emergency/critical care situations that might pop up around the hospital. No materials may be signed out after-hours; however, the entire collection is available for use on the premises by any Cleveland Clinic employee. No online searching of MEDLINE, any other databases, nor even the library catalog, is available overnight. Photocopy machines are available for use. Because the medical library desires to provide the most effective and appropriate access to its materials and services at all times, it is recognized that there may be special service needs that have gone unanswered overnight. The result of such concerns is the following study. It is based on questionnaires sent exclusively to after-hours users of the library from January through August 1994. Of a study population of one hundred and thirteen, fifty-four questionnaires were returned, for a response rate of 47.79%. Through this study it was found that individuals entered the library at a judicious rate after-hours, most often in conjunction with the necessary utilization of the library collection. However, while only slightly over one in ten patrons have been found to use the library after hours in answer to emergency/critical care situations, overnight use of the premises is apparently not casual, but purposeful and essential. This study has provided extremely valuable data, as well as unique insights, into the dilemma of providing optimal service to a patron population which uses the library when librarians are not there to provide assistance. Its drawback is in that it is difficult to extrapolate this data into a representation of the entire user population. It would be extremely valuable to engage in a follow-up survey which would query a representative sample of all CCF Library Services Patrons regarding their ideas on the import of providing after-hours library access, and the efficacy of the present system. However, these questionnaire results, in attempting to wade through desires and possibilities, fishing out the potentially feasible, constitute a promising beginning.

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ACKNOWLEDGMENTS

I would like to thank Marian Dorner and Gretchen Hallerberg from the CCF Library Services Department for providing invaluable assistance and insights during the planning and compilation of this research project.

I. INTRODUCTION

The Cleveland Clinic Foundation Library Services Department exists to provide all Cleveland Clinic personnel with the information needed to support patient care, research, and education. The library collection includes approximately 8500 texts in medicine and nursing, as well as some 800 journal subscriptions. The professional library staff provides reference and online search services, utilizing two hundred to three hundred databases in medicine, nursing, engineering, business, and other disciplines. Additionally, since 1991 the Library Services Department computer network has provided any Clinic employee access to online searching of the full MEDLINE, Cinahl, Health, and ClinPSYC databases via the CCF fiberoptic backbone or modem. This service is available seven days a week, 7:00 to midnight. These access hours can be extended to those requesting it.

Library hours are as follows:

7:30 a.m.-8:00 p.m. Monday-Thursday

7:30 a.m.-6:30 p.m. Friday

8:30 a.m.-12:30 p.m. Saturday

Closed Sunday

As an integral part of its mission, timely access to the library's store of information has always been deemed essential. As interpreted, this mission has traditionally led to the provision of twenty-four-hour access to the library's collection for all regular CCF employees. Because

there is no staff on duty overnight, interested individuals must contact CCF Police in order to enter and exit the premises. Each employee is required to write their name on a sign-in sheet presented to them by the representative of CCF Police who let them in. Security must note each sign-in and sign-out time, as well as date, on a sheet designated for this purpose, then sign the sheet. These sheets are saved by Library Services as a nominal tracking system of those entering the library premises after hours. No other information is collected.

No materials may be signed out after hours; however, the entire collection is available for use on the library premises. Photocopiers are available on a twenty-four-hour basis. Patrons must turn on the machines themselves. While online searching of the MEDLINE, Cinahl, Health, and ClinPSYC databases can be conducted remotely until midnight, this service is not available after hours within the medical library itself, due to concerns that hackers may breach network security and wreak havoc on the system, or that computer jocks might use the system for purposes other than online searching, and then not reset the system for other patrons, and/or inadvertently cause system problems with their machinations.

Many view twenty-four-hour access to the library as a necessity in the hospital environment. Because the medical library desires to provide the most effective and appropriate access to its materials and services at all

times, it is recognized that there may be special service needs that have gone unanswered overnight. It became apparent that a study was in order to find out what those unanswered needs might be. The intent of the study would be to answer questions that the CCF Library Services Department has gleaned over the years regarding why patrons use the library after it is closed, as well as what activities they engage in while there, if their service needs are adequately met, or perceived to be met, or if the solution to unmet needs might be found within regular library hours (or even outside of the library environment).

Accordingly, it was decided to conduct a survey of all overnight library users to ascertain if present services are adequate, or whether those services may need to be altered. The need for such a survey has taken on even more relevance as the Clinic will be erecting a new Health Sciences Library, perhaps opening as soon as late 1996. Any service changes may need to be reflected, at a minimum, in the space planning and budget of the new facility.

Currently, it is difficult for library management and staff to ascertain the departmental and professional status of overnight users without the cumbersome checking of various lists, as well as circulation files. Most importantly, however, it is unknown what business these individuals conduct, nor what services they utilize after hours. Are their needs in the main simple, and are current services sufficient? Must services be expanded, and in what

areas? If the library is used primarily by one specific group of individuals, can their needs be met outside of the library's sphere? Are there currently services available of which the average patron is unaware? How may such situations best be rectified? In conducting a survey of overnight users some light has most assuredly been shed on these important subjects.

II. LITERATURE REVIEW

In preparation for the survey, an extensive literature review was conducted. The complete collections of Library and Information Science Abstracts, and Library Literature (hard copy and online) were searched, as were the databases Worldcat, Applied Science Index, Business Periodicals Index Inspec, Periodical Abstracts, News Abstracts, Health, and Lexis (on the theory that many law libraries would also need to provide twenty-four-hour access to their collections). Key words used in these searches include: access, library access, access services, library space planning, building service(s), library service(s), library service-hours, library security, hours, hours of opening, hours open, overnight, overnight library use, after hours, twenty-four, twenty-four-hours, reference and hours, searching and hours, medical library use studies. Many of these terms were combined or limited to conform better to the various databases or journals to which each was applied. Resulting information was scant. The paucity of information in this area makes a study all the more valuable a contribution to the existing body of library research.

The only article found specifically addressing the problems of overnight access to any library collection is entitled "Twenty-four-hour Access to a Library Collection" (Ugolini and Fare 1991). It describes how, since January 1, 1986, the library of the National Institute for Cancer

Research in Genoa, Italy has provided twenty-four-hour access to its collection.

Entrance and security is different than that found at CCF. Authorized users enter the door by utilizing a magnetically-coded entry card. Entrance and exit times are recorded by a doorkeeper. Patron movements are monitored within the library by video cameras.

This study is valuable in that it breaks down the users into three categories, clinical, experimental and scientific, showing that various types of users were more likely to utilize the library after-hours. While this may have some comparative relevance to the current study, the drawback is that the types of information that each patron group utilized were not recorded.

In 1988 the library of the National Institute in Genoa sent out a survey in which it was found that over 95% of its patrons deemed twenty-four-hour access helpful, assuring that this service would continue. With the greater access to materials overnight service has afforded the Genoan Research Institute patrons, coupled with strict security monitoring, loss of their materials has remained low. If CCF Library services are better tailored to patron needs as a result of the proposed survey, it will be interesting to see if a similar positive impact on the library collection's integrity will be found. However, while a certain amount of material is found to be missing after each annual inventory,

there is currently no way to link these missing items to after hours library use.

The previous article has three citations. The first two are of a kind, and because technology has changed so, not particularly relevant to this study. The first is entitled "Varieties of Information Requests in a Medical Library" (Kronick 1964). It refers to the types of requests the library routinely receives, and what percentage of total requests each type represents. The attempt was to see if these distributions would have any affect on library services. The second article is entitled "Development of Methodologic Tools for Planning and Managing Library Services" (Orr et al. 1968). This study enumerates specific tools whereby a library can measure its ability to provide various services. Both articles are not on subjects relevant to this study.

The third reference is a chapter in the book Health Information for all: A Common Goal (Evangelisti, Patrone, and Ugolini 1989). This book presents the problems people have in gaining access to the expensive loop of vital health information, and is particularly relevant in today's environment of constant and vociferous health care debates. However, its relevance to this study is nonexistent.

Also found during the literature review was a 47-page pamphlet entitled Open Twenty-Four Hours: A Case Study (Heim 1990) While this work seems promising in examination of its title, it is in fact about an academic library

staying open twenty-four hours for two weeks twice-yearly so that undergraduate students may prepare for their final examinations. Because staff is on duty during these periods, relevance to this study is limited. In fact, CCF Library Services is constantly attempting to discourage overnight use of the library by their policies. One of the reasons for this study was to develop services and policies that would potentially answer patron needs while the library is open. In direct counterpoint, the library described in this occasional paper actually decides to advertise that they will be open twenty-four hours-a-day prior to exams, using it as a public relations tool. However, the library did enact a helpful study to gauge the demand by users for the program. The polling instrument, also a questionnaire, was of double import to the present study, not only for its format, but also for the fact that it polled a delineated population, just as did this study.

In the Handbook of Medical Library Practice (Darling 1982, 88) there is a small amount of material dedicated to the subject of after-hours access. Discussed are the merits and drawbacks to various modes of access to library premises after-hours. As security and access has already been decided at the CCF Medical Library this is of no import. Also discussed are the closing off of most of the library and providing access to basic research materials and journals, expanding hours the library is open so that there is no need for after-hours access, or maintaining small

collections elsewhere within the hospital for off-hours emergencies. Of these three alternatives, only the expansion of hours is being considered at the CCF Medical Library. This subject is covered in the questionnaire.

Hospital Library Management (Bradley 1983, 95-96) includes two paragraphs which address the subject of after-hours access. The necessity of such access is discussed. At the time of this book's publication, the Joint Commission on Accreditation of Hospitals required that essential library materials be available when the library was closed. While the Commission currently requires only timely access to library materials (Joint Commission 1994, sec. IM 9), the CCF Medical Library still operates on the premise that twenty-four-hour access is essential. Also included in Hospital Library Management is a thumbnail sketch of security alternatives for after-hours access so brief as to be of little real value.

One article has proven to be of true value. It is entitled "Security and the PC-Based Public Workstation" (Koga 1990). It was relevant not in providing information about twenty-four-hour service in a medical library setting, but rather in that it helped in the understanding of the various security devices that may be attached to a library's computer network in a guard against hacking.

III. METHODOLOGY

In realizing that a review of after hours services is in order, the library decided that the questioning of the users of those services would provide the most valuable information for decision-making on the subject. The polling instrument was a questionnaire, as it allowed not only strict fact-based answers to questions, but valuable commentary as well (see appendix A). A cover letter accompanied each questionnaire. Both were mailed out to the entire study population, which consisted exclusively of overnight library users (see appendix B). Because overnight users of the CCF Medical Library are required to write their name on a designated sign-in sheet before the CCF Police allow them access to the library, these sheets provided the means to pinpoint the individuals who comprised the population chosen for the study. In order to allow for a population of more manageable size, it was decided to limit the sending out of questionnaires to 1994 overnight users only. This had the additional benefit of assuring that the vast majority of these individuals would still be employed by the Clinic during enactment of the project. (Many of these patrons, such as residents, only work at the Clinic for a prescribed period of time.) CCF mail was used to send out questionnaires.

A total of two mailings was sent out in an attempt to ensure a higher response rate from individuals whose lives

are so very busy. Each was sent out on a Friday in order that they might (hopefully) be received on the following Monday. The first mailing was sent out to one hundred and twenty-five individuals on August 26, 1994. It was on white paper. Of these mailings, eight were returned by the mailroom because those individuals were no longer working at the Cleveland Clinic. This lowered the total number of relevant questionnaires to one hundred and seventeen. Of these one hundred and seventeen, forty-two were returned. The second mailing was sent out on green paper to delineate it from the first. While every attempt was made to not send out duplicate mailings to anyone, because inclusion of the respondent's name was optional, some individuals would have been sent a second questionnaire. This mailing was sent to ninety-six individuals on September 21, 1994. Of this second set of mailings, twelve were completed and returned by respondents, while four were returned by the mailroom because those individuals were no longer working at the Cleveland Clinic. The final number of questionnaires upon which the study results are based stands at one hundred and thirteen. Of those one hundred and thirteen questionnaires, a total of fifty-four were returned, for a 47.79% response rate.

IV. DATA ANALYSIS

Here, a brief summary of the data is in order, to be followed immediately by a more in-depth analysis.

Of the fifty-four respondents, thirty-two (59.26%) categorized themselves as Resident/Fellow, seventeen (31.48%) categorized themselves as Professional Staff, zero categorized themselves as Nurse, three (5.56%) categorized themselves as Other, and two (3.70%) withheld his/her hospital status (see Table 1).

Respondents were asked "Why did you use the library after-hours? (Check all that apply)" (see Figure 1). Forty-five individuals (27.11%) went to the library at that hour to engage in research, thirty people (18.10%) were too busy to go there during the day, twenty-six (15.66%) went there to photocopy articles, twenty-one (12.65%) went there at that time to utilize the library's reference books, seventeen (10.24%) went there to answer an emergency/critical care need, nine (5.42%) went there for quiet study, and nine (5.42%) because it was more convenient than using the library during the day, six (3.62%) went there to pick up articles or searches prepared by the library staff, two (1.20%) used it as an alternative study or relaxation area, and one (.60%) stated other reasons for utilizing the library after-hours.

Respondents were also queried as to how often they used the above-stated library services after-hours (see Tables 2

FIGURE 1

ACTIVITY UTILIZATION
of CCF LIBRARY SERVICES
AFTER-HOURS

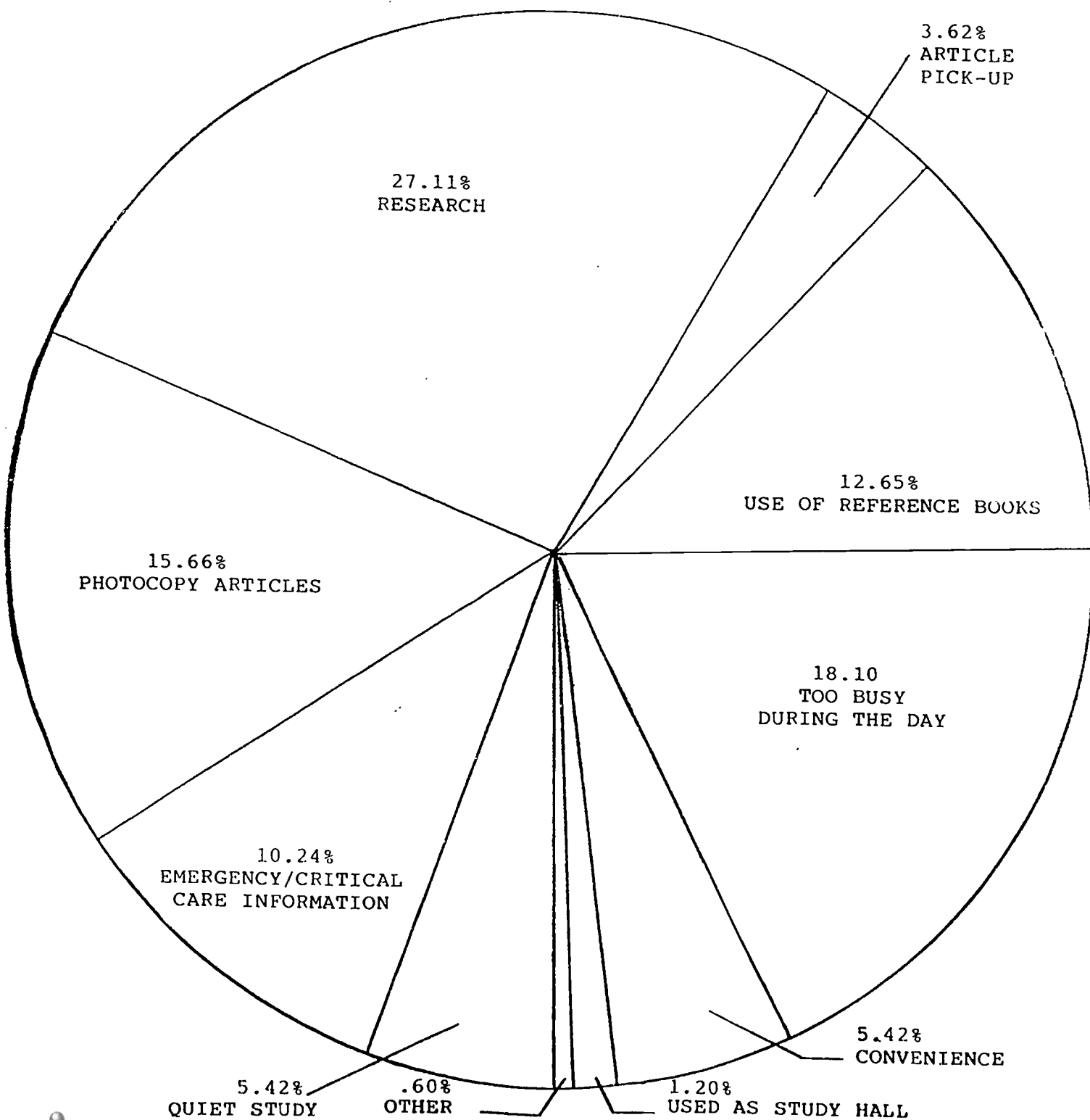


TABLE 1
BREAKDOWN OF RESPONDENT POPULATION

POPULATION GROUP		
RESIDENT/FELLOW	32	59.26%
PROFESSIONAL STAFF	17	31.48%
NURSE	0	0.00%
OTHER	3	5.56%
WITHELD STATUS	2	3.70%

TABLE 2
 ANALYSIS OF REASONS
 FOR AFTER-HOURS LIBRARY USE
 BY FREQUENCY OF AFTER-HOURS USE

Reasons for after-hours use	Frequency of using service any time during year/ % Total	Frequency of never using service/ % Total
Quiet study	19 / 8.19%	14 / 6.03%
Search for information for emergency care	28 / 12.07%	13 / 5.60%
Photocopying	28 / 12.07%	7 / 3.02%
Research--use library materials for project/paper	47 / 20.26%	3 / 1.29%
Reference books--read consult	34 / 14.65%	6 / 2.59%
Pick up materials prepared by Library staff	25 / 10.78%	8 / 3.45%

TABLE 3
 CROSSTAB ANALYSIS OF REASONS
 FOR AFTER-HOURS LIBRARY USE
 BY FREQUENCY OF AFTER-HOURS LIBRARY USE

Reason for after- hours use	Frequency of After Hours Library Use					
	Once/mo.	2-3 mos.	6 mos.	Once/yr.	Never	Total
	f / %	f / %	f / %	f / %	f / %	f / %
Quiet study	8 / 24.24%	4 / 12.12%	1 / 3.03%	6 / 18.18%	14 / 42.42%	33 / 14.22%
Inf. for emergency care	8 / 19.51%	12 / 29.27%	4 / 9.76%	4 / 9.76%	13 / 31.71%	41 / 17.67%
Photo-copying	11 / 31.43%	9 / 25.71%	8 / 22.86%	0 / 0.00%	7 / 20.00%	35 / 15.09%
Research papers/projects	19 / 38.00%	20 / 40.00%	8 / 16.00%	0 / 0.00%	3 / 6.00%	50 / 21.55%
Pick up materials prepared by staff	4 / 12.12%	9 / 27.27%	5 / 15.15%	7 / 21.21%	8 / 24.24%	33 / 14.22%
Consult reference books	12 / 30.00%	13 / 32.50%	5 / 12.50%	4 / 10.00%	6 / 15.00%	40 / 17.24%
Total	62 / 26.72%	67 / 28.88%	31 / 13.36%	21 / 9.05%	51 / 21.98%	232 / 100.00%

and 3). There were a total of two hundred and thirty-two responses to this question in all categories. Nineteen individuals (8.19%) used the library after-hours for quiet study, and fourteen of the total number of individuals (6.03%) never used it for this purpose. Of those individuals that stated after-hours library use for the purpose of quiet study, 24.24% (eight individuals) used the library once-a-month or more, 12.12% (four people) used it once every two to three months for quiet study, 3.03% (one person) used it once every six months, and 18.18% (six people) used it for that purpose once-a-year. Twenty-eight people, or 12.07% of respondents to this question, used the library after-hours in answer to an emergency/critical care situation. Of all responses, thirteen individuals (6.03%) explicitly stated that she/he never used the library after-hours for this purpose. Of those coming to the library after-hours in response to an emergency/critical care situation, 19.51% (eight individuals) went there once-a-month or more, 29.27% (twelve individuals) went there for that purpose once every two to three months, 9.76% (four people) went there for that purpose once every six months, and 9.76% (four people) went there once-a-year. Of those using the library after-hours, twenty-eight, or 12.07%, went there to photocopy articles. Of all respondents, seven, or 3.02% never went there after-hours for that reason. Of this set of individuals, 31.43% (eleven people) went to the library after hours once-a-month or more for purposes of photocopying, 25.71% (nine people)

went there once every two to three months, 22.86% (eight people) went there every six months, and nobody stated they went there for that purpose after-hours only once-a-year. Forty-seven individuals, or 20.26% of all respondents to this question, indicated that they used the library after-hours for research purposes. From the entire set of responses, three people, or 1.29%, never used the library after-hours for this purpose. In this group of after-hours researchers, nineteen people, or 38.00%, come to the library once-a-month or more to engage in research, 40.00%, or twenty people come there for that purpose once every two to three months, eight, or 16.00%, come there once every six months, and no one claimed to come there only once-a-year for that purpose. Of all answers to this question, twenty-five individuals, or 10.78%, come to the library after-hours to pick up materials previously prepared by library staff. Eight of these individuals, or 3.45%, never come to the library overnight for this purpose. Within the group who come to the library after-hours for pick ups, four people, or 12.12%, came to the library after-hours once-a-month or more for this purpose, nine people, or 27.27%, come there once every two to three months for this purpose, 15.15%, or five individuals come there approximately once every six months for this purpose, and seven people, or 21.21%, come there once-a-year for after-hours pick-ups. Finally, thirty-four people, or 14.65%, claim to come to the library after-hours to consult reference books. Six people, or

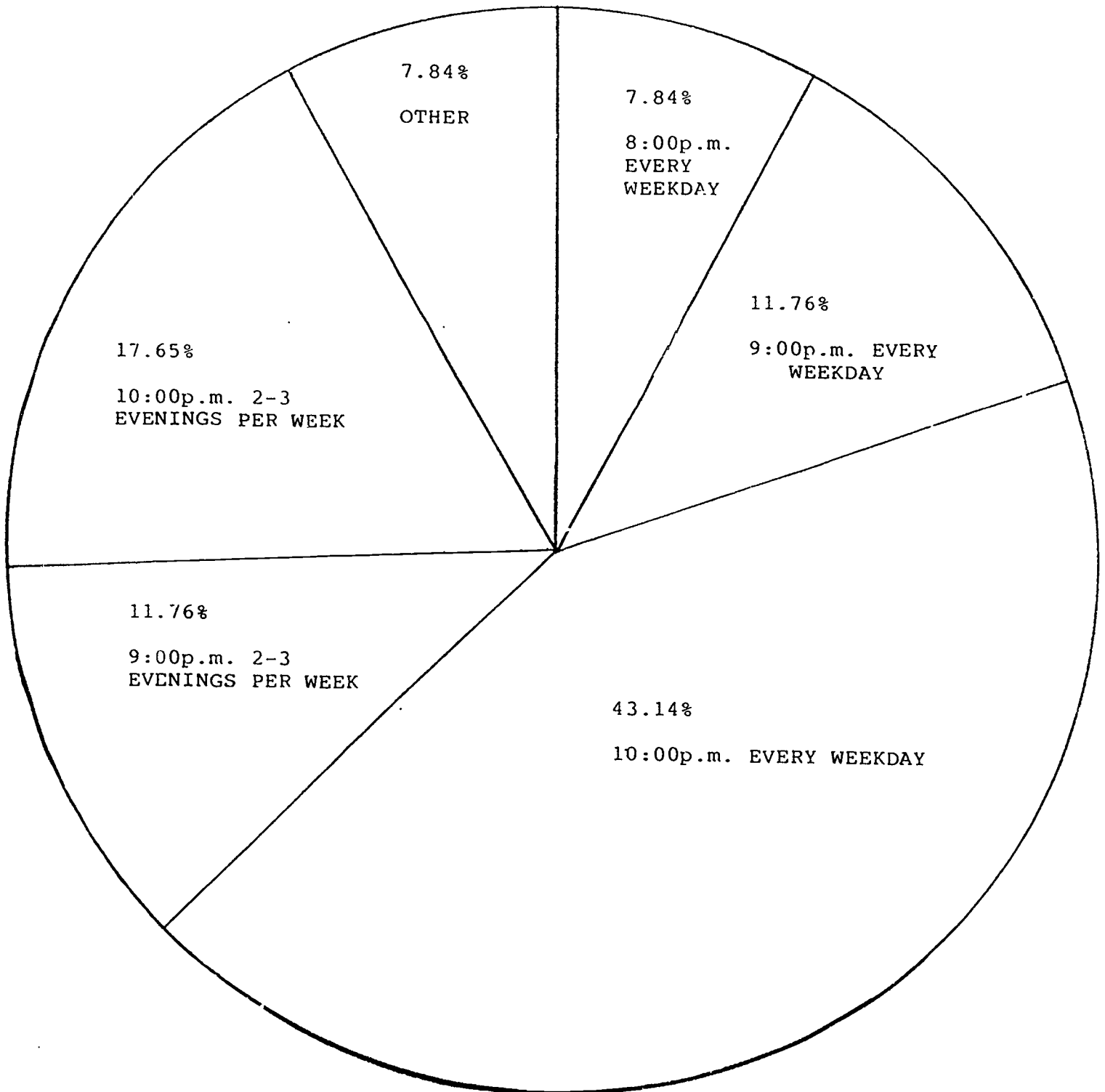
2.59% of total responses, admit to never using the library after-hours for that purpose. Within this category, twelve individuals, or 30.00%, come to the library after-hours once-a-month or more to consult reference materials, thirteen people, or 32.50%, come there once every two to three months for this purpose, five people, or 12.50%, come there once every six months after-hours to use reference materials, and 10.00%, or four individuals, use reference books after hours only once-a-year.

Respondents were queried, "If the library extended its hours and did NOT have after-hours access, how long would you like the library to remain open DURING THE WEEK?" What emerged was a fairly clear picture of the average after-hours patron wanting an expansion of library hours. Fifty-one people, or 94.44% of respondents, answered this question. The largest number, 43.14% (twenty-two people), want the library to stay open until 10:00p.m. every weekday. The fifty-one answers are rounded out by four replies, or 7.84% of responses, comprising various other answers, no one of which tallies with any other (see Figure 2).

Respondents were also asked, "If the library extended its hours and did NOT have after-hours access, how long would you like the library to remain open ON WEEKENDS?" Out of fifty-two responses to this question, by far the greatest number of people, twenty-eight, or 53.85%, had the dual response of desiring the library to stay open 8:30a.m. to 5:30p.m. Saturday, and noon to 5:00p.m. on Sunday. This

FIGURE 2

WEEKDAY HOURS EXPANSION
DESIRED BY PATRONS



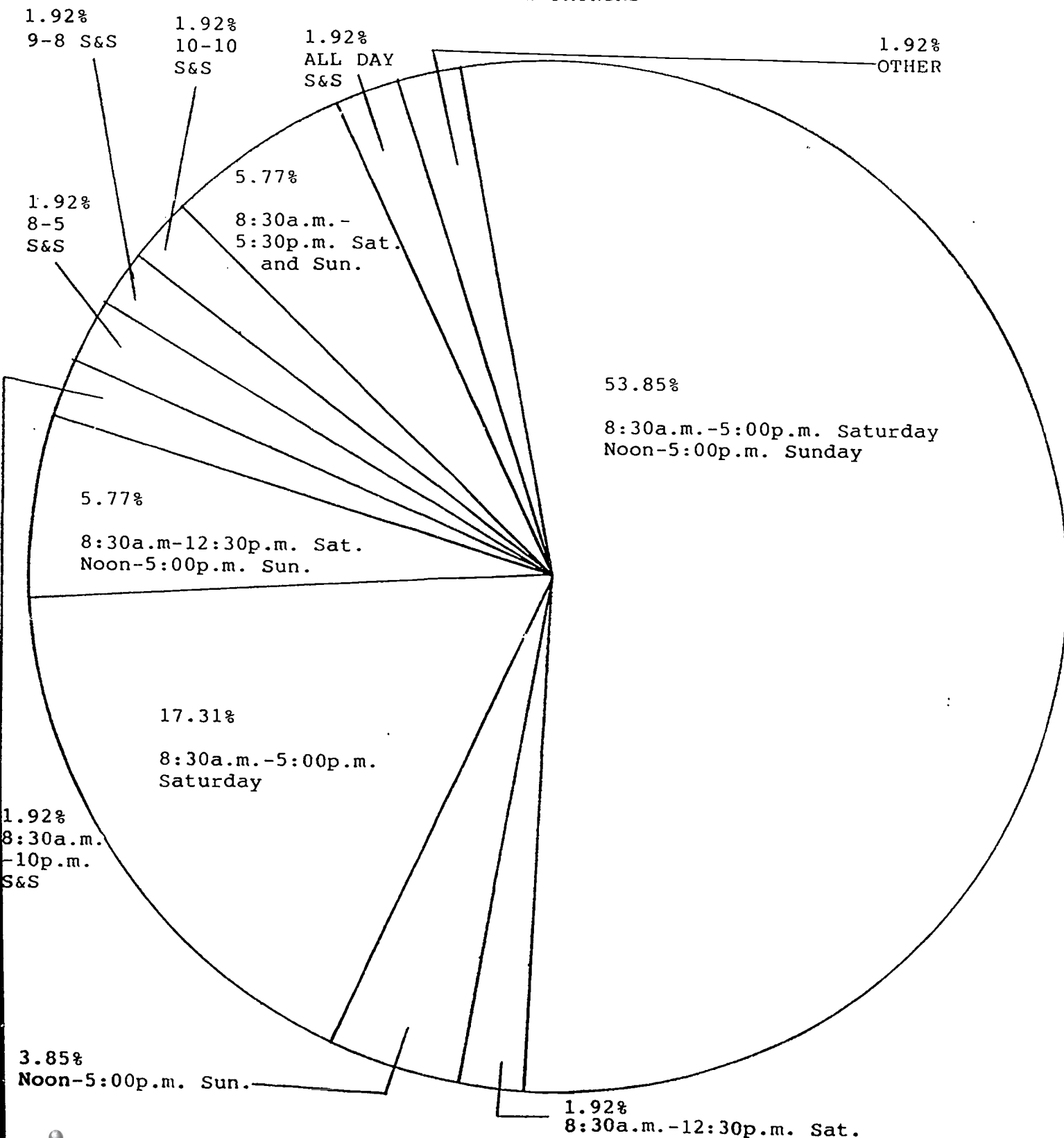
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was followed by 17.31% of after-hours patrons, or nine individuals, stating that the library need only stay open on Saturday from 8:30a.m. to 5:00p.m. A wide variety of answers comprise the remaining 28.84% (fifteen individuals) of responses (see Figure 3).

When asked what time they usually enter the library, fifty-one of fifty-four people responded (94.44%). Because it was an open-ended question, the variety of answers was quite broad-ranging (See appendix C, 5.). Thirty-three people, or 63.46%, of answers specified neither weekday, nor weekend, after-hours entry, however, 28.85% of individuals (fifteen) indicated they enter the library after-hours on weekends. This is a significantly stronger percentage of individuals than the 7.69% (four) that indicated that she/he entered the library after-hours during the week. (Certain answers to this question fall into more than one category because some respondents broke the answer down into weekday versus weekend entry times.) During weekdays, or unspecified times, 23.53% (twelve) of respondents indicated they enter the library around closing time (5:00 to 8:00p.m.). Of this same group, 31.37%, or sixteen people, enter the library after it is closed (after 8:00p.m., or later). Seventeen point sixty-five% (nine) of respondents indicated they enter the library on weekends, but specified no time. Only one person, or 1.96% of respondents, indicated a typical weekend entry time during hours the library is open. Three people, or 5.88%, indicated

FIGURE 3

WEEKEND HOURS EXPANSION
DESIRED BY PATRONS



specifically that they enter the library on weekends after it is closed.

Respondents were asked "How long do you usually have to wait after you call for the CCF Police to let you in or out of the library after-hours?" Answers ranged from less than five minutes, to up to forty-five minutes. Seventy-four percent of respondents indicated that they waited an average of fifteen minutes or less to be let into the library. Additionally, 68.52% of respondents (thirty-seven individuals) were satisfied with the CCF Police response time, 22.22% were somewhat satisfied (twelve people), and only 9.26% (five people) were completely unsatisfied with the time that it took CCF Police to let them into the library.

The questionnaire also asked "Are you aware that there is a quiet study area with two computers on the seventh floor of the Education Building (TT7) that is open twenty-four hours?" Out of fifty-two answers to this question (96.30% of the fifty-four questionnaires returned), twenty-nine people, or 55.77%, were aware of it, while twenty three people (44.23%), were not aware of it. When asked if they currently use this area, out of fifty-three responses (98.15% of a possible fifty-four answers), 26.42% did use it (fourteen people), and 73.58% did not use it (thirty-nine people). This means that of the twenty-nine people who know about this lounge area, only fourteen, or 48.28%, avail

themselves of it. This is 25.93% of the total fifty-four respondents.

The fourteen people who use the TT7 quiet study area were asked to elaborate on the purposes for which they use it. Eight of fourteen responses indicated they use it for quiet, quiet study, or study (71.43%). The following reasons for its use were indicated by one person each (singly comprising 7.14% of responses to this question): reading and writing, performance of literature searches, change of pace from the library, or to use the reference books there.

Respondents were also asked "If MEDLINE searching is available from the two computers in the seventh Floor study area, would you still need after-hours access to the library?" From a response rate of 94.44% (fifty-one people), forty-seven, or 92.16%, said yes, and four, or 7.84%, said no.

Finally, respondents were queried "What after-hours library services do you want that are currently not available?" (See Figure 1.) Fifty-one people responded to this question. Twenty-eight people, or 54.90%, said that she/he would like to see searching of the MEDLINE, CINAHL, Health, and ClinPSYC databases available after-hours. Four people, or 7.84% said they would like to search the library's catalog after-hours. Five people, or 9.80%, said they would like to be able to access a quick reference tool that outlines library services, and 14 people, or 27.45% of

respondents, gave various other disparate responses to this question.

Many of the questions employed in the questionnaire, such as numbers 2, 3, 8, and 9, provide straightforward answers which are relatively easy to tabulate. Others, such as numbers 1, 6 and 7, are of an intermediary variety. A portion of each requires straightforward, easy-to-tabulate answers. However, because they also provide for some open-ended answers, a wide variety of less easy-to-categorize answers had to be taken into account. Where such questions have invited commentary, a fair amount of correlation between individually derived answers has been looked for in attempting to perceive what are true and broad-ranging service needs, rather than random desires. However, any suggestions that appear to be constructive as well as feasible have been seriously considered. A third category of questions, represented by numbers 4, 5, 10, and 11, are the most open-ended and subjective. These have been judged by the same criteria as the second intermediary category of questions. Additionally, many questionnaires were interspersed with commentary not attached to any particular question, and many opinions were attached to questions that did not invite commentary. These comments were also seriously considered, and judged by the same standards as were the open-ended answers in questions from the second category.

There are many potential problems in providing after-hours access to library patrons. Some impact the patron, such as when a librarian is not available to answer patron queries, or provide help in the operation of equipment like photocopiers. One respondent to the questionnaire even suggested that a librarian be placed on duty overnight. While perhaps not financially feasible, it does underscore the difficulties in providing effective after-hours library access. Other problems impact library operations and budget, such as an increased loss rate for books and journals. This latter type of difficulty can become serious, and may make a library reticent to provide after-hours access to its holdings. Such is the dilemma faced by the Library Services Department of the Cleveland Clinic Foundation. However, at the Clinic it appears that staff employees such as physicians and Ph.D.'s, as well as residents and fellows, deem after-hours access to the Library Services Department collection essential to the fullest and best performance of their duties within the hospital and research institute. Individuals were queried "If the library extended its hours and did NOT have after-hours access, how long would you like the library to remain open DURING THE WEEK?" The most vociferous response to this question was "N/A - I would be extremely hostile if, as a staff M.D. I did not have access." While most others merely intimated that after-hours access was essential, or took for granted that it would always be available, or commented more

gently in asserting its importance, the overwhelming majority of individuals explicitly stated the need for after-hours library access, or were found to engage in serious activities after-hours that couldn't be performed at any other time due to their extremely busy schedules (see Figure 1).

The library collection is available for use after-hours so that Clinic employees will have access to needed information when there is a hospital emergency or critical care situation. While answers to the questionnaire demonstrate that specific patron needs are being met with after-hours library access, these activities only appear to be in support of an emergency/critical care situation 10.24% of the time. The most popular use for the library after-hours (27.11% of respondents), is research, followed by patrons being too busy to use the library at other times (18.10%), thirdly by photocopying (15.66%), fourthly by the utilization of reference books (12.65%), and fifthly for critical or emergency care situations (10.24%). Each of the other services individually accounts for less than 6% of the reasons for after-hours usage, and, in total, the desire for quiet, article/online search pick-ups, convenience, an alternative area for relaxation and casual study, and other reasons together account for only 16.26% of uses. While consultation of reference books might have its basis in a critical care need, as such consultations were not listed as answering such a need by any of these individuals, it has

not been interpreted in that way. This means that only slightly over one in ten patrons is using the library after-hours for the primary purpose it remains accessible: critical/emergency care situations. As well, 31.71% of patrons who use the library after-hours never use it in support of emergency/critical care.

One may interpret most overnight usage as being for the sake of convenience; however, it does appear to be necessary for these very busy individuals. According to questionnaire responses, the approximate average time people spend in the library after hours is 1.47 hours (based on the answers of forty-nine people, as four responses were too inexact to be tallied, and one individual did not respond to the question). (See appendix C, 6., for a complete list of responses to this query.) Staying in the library for such a long period of time underscores that its use overnight is not merely casual, but for research. At a minimum, data indicates that 65.66% of the time patrons are utilizing the library's collection in servicing their needs after-hours. (Only the obtaining of information for emergency/critical care situations, photocopying of articles, research, and the use of reference books directly infer the use of library materials, although other of the categories may necessitate their use.) Because MEDLINE, and the Library Services Department catalog of holdings are unavailable for searching after the library is closed, it is apparent that patrons are coming into the library armed with information on the names

and locations of books and articles from previous literature and catalog searches. It appears as if people are accessing the library judiciously after-hours (see Table 2). Only 26.72% of these patrons are entering the library once-a-month or more overnight for quiet study, emergency/critical care, photocopying, research, prepared materials pick-up, or the consultation of reference books, 28.88% are entering once every two to three months, 13.36% are entering once every six months, and 9.05% are entering only once a year. The remaining 21.98% never use the library for one of these six stated reasons, but do nevertheless utilize the premises overnight. These numbers indicate sparing library entrance and relatively high collection utilization supporting the assumption that overnight use of the premises is not casual, but purposeful, even if it is not in line with Library Services' desire to provide overnight collection access only in emergency/critical care situations.

Some questions concern an area on the seventh floor of the Cleveland Clinic's Education building which is available for quiet study and computer use. Currently, this room contains two computers with little beyond word processing capabilities. They are to be replaced with two previously-used 386sx computers by late November or early December 1994. After their installation users will then be able to search the MEDLINE, Cinahl, Health, and ClinPSYC databases via a CCF network connection. The Library Services Department is on the fourth floor of this same building, so

the two are quite convenient to one another. Fifty-five and seventy-seven hundredths of the respondents are aware of this room, however; only 48.28% of the individuals who know about it actually use it. This is a total usage of 26.42% of all respondents (one individual did not answer this question). While 54.90% of respondents want MEDLINE searching to be available after-hours in the library (by far the most-desired, but currently unobtainable, service), when asked if they were able to search MEDLINE on the seventh floor of the Education building as a substitute for its use in the library after-hours, an overwhelming 92.16% of respondents unequivocally stated that they would need continued after-hours access to the Library Services Department, whether MEDLINE was available there or not. One person explicitly stated "I wouldn't have access to journals there," in reference to the seventh floor study area. Twelve of the fourteen people (85.71%) who indicated that they use this area stated they used it for studying, quiet, or quiet study. While one used this space for its reference books, this data verifies that the library and the study area are utilized for primarily different purposes. The study area is just that, a study area, while the library is not used merely for study, but most specifically for the utilization of its collection, and sometimes, but not always, in conjunction with other activities.

What is apparent from the study results is that patrons feel a distinct need for a quiet area to study within the

library itself. While the seventh floor area exists to provide an area where such quiet study is possible, it is seemingly inadequate to the needs of the vast majority of respondents.

One person suggested the placement of quiet signs in the library. Unfortunately, in the present library location quiet signs would not be an appropriate response, as such a strict requirement might impinge on normal daily activities. Even more simply, there is no wall space on which to place such signs. It was also suggested that any phones be placed in non-study areas. While lack of space prohibits this in the present library location, concerns such as this have certainly been addressed during the planning of the new library location.

The desire for a quiet study area is expressed by only 5.42% of respondents when queried as to why they used the library after-hours (see Figure 1). However, when asked to comment freely in regard to the same question, five of fourteen additional comments (35.71%) expressed the need for a quiet study area within the Library Services Department. Additionally, eight of fourteen (57.14%) respondents stated that the primary reason they utilized the study area on the seventh floor of the education building was because it is provisioned specifically as an area in which one can engage in quiet study. This does not mean that providing an area for quiet study can exist in a vacuum, apart from the general library collection. When asked "If Medline

searching is available from the 2 computers in the 7th Floor study area, would you still need after-hours access to the library?," an overwhelming forty-seven of fifty-one individuals (92.16%) said they would still need access to the library after-hours. While there is apparently a distinct need for a quiet study area within the library itself, while still providing patrons access to the collection, there is not space for such an area in the present library location. However, this study does add weight to the solicitation of more space for this purpose in the new library facility. Additionally, the blueprint of the new library shows a facility that will lend itself much more to the provision of a quiet study area. It will be two floors, and the Library Services Department work-space will be in a separate area from the holdings, assuring that the noise of librarians going about their daily activities will not intrude on designated quiet study areas.

It might help to advertise the seventh floor study area. Certain individuals that are unaware of its existence might find that it serves their study needs fully as well as the library, and thereby cut down on after-hours library usage. However, excessive advertisement might mar its primary purpose for existence: provision of quiet study.

One concern that may be more easily solved in the present library facility is the respondents' expressed need for shorter waits in copying materials. Photocopying is shown to be the third most common reason for individuals to

enter the library after-hours. Comments were very explicit, such as "Copy machine lines are shorter," and "No waiting at the photocopier." When asked to elaborate or comment on their reasons for using the library after-hours, five of fourteen comments, or 35.71%, were regarding the long waits endured at the copy machines during regular library hours. If space and power supply permit, perhaps an additional copier could be installed.

Unfortunately, at least three people appear to be under the false assumption that copy machines are not available for use after-hours. This is easily rectified by placing signs over the machines stating that they may be used while the library is closed. Simply turn them on.

The questionnaire asks for individuals' perceptions of the adequacy (or lack thereof) of existing hours the Library Services Department is open (see Figures 2 and 3). It also asks when they enter after-hours, and how long they stay. (See appendix C, 5. and 6. for a full list of comments.) It appears that many of the respondents are under the false impression that the purpose of this questionnaire is to determine how best to make the library more accessible after-hours. To the contrary, its purpose is to discover how existing services might be altered, improved, or defined in order that after-hours services might run more smoothly and productively, while at the same time effecting a lower level of after-hours use.

When asked "If the library extended its hours and did NOT have after-hours access, how long would you like the library to remain open DURING THE WEEK? (Check ONE)" (see Figure 2). An overwhelming 43.14% of respondents stated that the library should stay open until 10:00 p.m. every weekday. The next closest response was 17.65% of respondents feeling that it would be sufficient for the library to stay open until 10:00 p.m. only two to three evenings per week. When asked "If the library extended its hours and did NOT have after-hours access, how long would you like the library to remain open ON WEEKENDS? (Check all that apply)," (see Figure 3), the majority of answers, at 53.85%, indicated a preference for the dual response of 8:30a.m.-5:00p.m. Saturday and Noon-5:00p.m. on Sunday. The second closest response, at 17.31%, was a preference for keeping the library open only on Saturdays from 8:30a.m. until 5:30p.m. No other response came close. No one indicated in the comments area of either question that present library hours are sufficient. Only one respondent was openly hostile to the suggestion of increasing hours and cutting off after-hours access to the library, although one ancillary comment was telling; "I think an academic institution with lots of people in residency/fellowship research should have 24 hour access."

When queried, "What times do you usually enter the library after-hours?," the answers seem to tally with the generally expressed desire for longer hours. On weekdays,

23.53% stated they entered the library from 5:00p.m. until just before 8:00p.m. With an average stay in the library being 1.47 hours, a large number of these people would be apt to stay after the library's doors are closed. The largest number of people (31.37%) perceived their average weekday entry time to be after the library closes, from 8:00-10:00 p.m. Those who indicated weekend entry totalled 34.78% of all respondents. Of this group, 43.75% indicated a weekend entry time that would either be classified as after-hours, or was on Sunday when the library is closed. From a total of fifty-one responses, only fourteen people, or 27.45%, indicated an entry time of 9:00p.m. or later on weekdays, and 3:30p.m. or later on weekends. Even with patrons stating an approximate average library stay of 1 and 1/2 hours, extension of hours potentially stands to cut down considerably on after-hours usage.

If the library were to extend hours, it appears that the most logical choices based on these questionnaire results and nothing else (i.e. budgetary and staffing constraints) would be to stay open until 10:00p.m. on weekdays and 5:00p.m. on Saturday and Sunday. One cautionary note: the library was previously open until 10:00p.m. weekdays, and a lack of patrons during those extra hours made it an ineffective use of staff time and money.

While it should not be concluded that people would necessarily discontinue overnight use of the library services collection just because of extended hours, such

usage might very well decline. If hours were to be extended, this would have to be monitored.

Extension of hours would necessitate the hiring of at least one new employee. Within present CCF budget constraints, however, it is difficult to add employees. Including benefits, the increased cost would be for slightly over 1/2 of a full-time employee, with the decision to staff a paraprofessional or professional to be determined. Most probably, any decision in this regard would be postponed until the opening of the new health sciences library facility in 1996 or 1997.

It is suspected by the Library Services Department that most materials are lost overnight. In spite of that, the amount of material lost on a yearly basis is not costly enough to warrant the extension of library hours on the supposition that after-hours library usage will decrease. One apparent justification is the need for longer hours expressed by the respondents in this survey, but this clearly holds less weight than desirable if the extension of hours is ever deemed a priority by CCF Library Services. One possible median solution between the need expressed by patrons for increased hours, and the high cost of meeting that need, might be to increase weekend hours. This might prove an adequate solution for over 1/3 of respondents. It might also be a boon to the large numbers of weekend-only nurses who might not take full advantage of the library with its present hours.

Busy patrons also need to know all of the ways in which they can access the information in the CCF Library Services Department. Services may be requested not only in person, but by phone, phone answering machine, fax, and E-Mail. Perhaps it may help to publicize that information may be obtained in these various ways.

The need to find out what percentage of total patronage after-hours library users represent is obvious when discussing the extension of library hours. Employees scheduled for evening, overnight, and weekend shifts, are the individuals most likely to use the facilities from 8:00-10:00p.m., and on weekends. However, a more general potential patron pool is composed of professional staff (including physicians and senior professionals), residents/fellows, nurses, and dieticians. The Cleveland Clinic Foundation Human Resources Division designates this pool of potential patrons to be approximately 4,037 people (see Table 4). (The vast majority of the collection is geared towards the service needs of these types of hospital professionals.) In tallying overnight library user sign-in sheets from January one through August 22nd, 1994, (the same individuals to whom this questionnaire was sent) an average total of 28.88 individuals per month utilized the Library Services Department collection after-hours (see Tables 5 and 6). Using these numbers as a baseline, after-hours users of the library constitute an average of 7/10 of 1% of probable library patrons. This is quite a small amount. An attempt

TABLE 4
 ADDITIONAL DESIRED
 AFTER-HOURS LIBRARY SERVICES

DESIRED SERVICE	f*	%
MEDLINE, CINAHL, Health, and ClinPSYC SEARCHING	28	54.90%
SEARCHING LIBRARY'S ONLINE CATALOG	4	7.84%
QUICK REFERENCE TOOL OUTLINING LIBRARY SERVICES	5	9.80%
OTHER	14	27.45%
TOTAL	51	100.00%

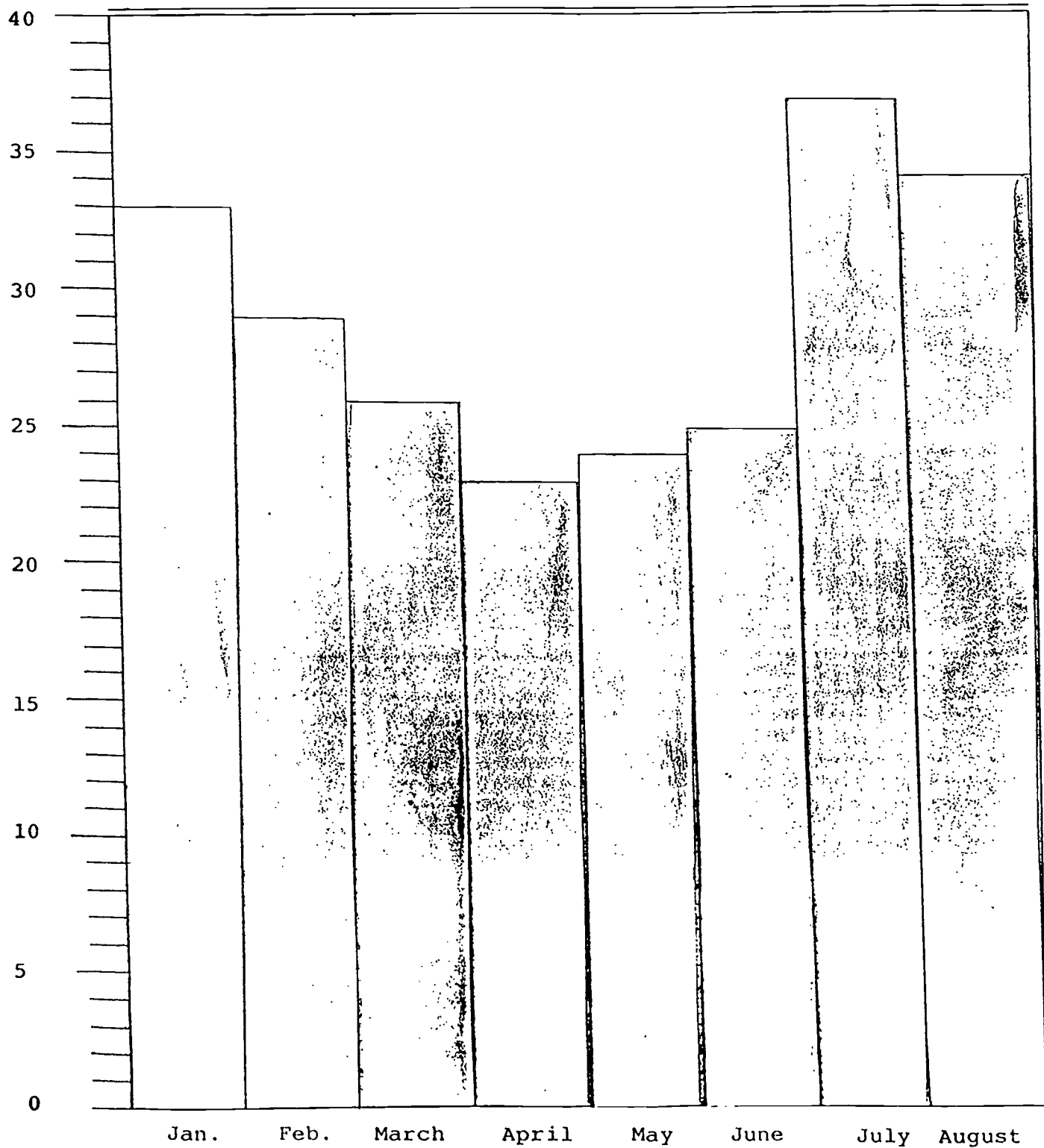
* frequency

TABLE 5
 POOL OF POTENTIAL LIBRARY PATRONS
 BY POSITION

Position	frequency	%
Professional Staff (includes physicians and senior profession- als):	778	19.27
Residents/Fellows:	957	23.71
Nurses:	2,293	56.80
Dieticians:	99	.22
Total:	4,037	100.00

TABLE 6

AFTER-HOURS PATRON USE
of CCF LIBRARY SERVICES
JANUARY-AUGUST 1994



BEST COPY AVAILABLE

to corroborate these numbers might be made by installing a counting mechanism on the entrance turnstile. Numbers derived from such a mechanism must be interpreted carefully however. The numbers would be reflecting true library patrons, not casual walk-ins, as would be the likely case in a public library, because there won't be people coming in merely to use the phone or bathroom. However, in this particular library the workers constantly go in and out of this turnstile because one entrance to their work area is via the hallway to which the exit of it leads. Such traffic would falsely skew patron counts towards day usage, to a much lesser extent the evening hours, and not at all after hours, presenting it as a smaller percentage of total usage than it actually is. This can be rectified in several ways, such as forbidding workers to utilize the turnstile (perhaps the most effective after they become used to the ban), or, less effectively, requiring them to tally each entrance through the turnstile.

When queried, 68.52% of respondents were satisfied with the job that CCF Police is doing in letting them in and out of the library; 22.22% were somewhat satisfied, and 9.26% were not satisfied. Luckily a fairly positive response, as the library has no control over how well the system functions. In four cases where the respondent was either equivocal or negative in the view of police response time it was due to needing to leave the library quickly in an emergency. Signs in the library do warn that if you are in

a situation such as being on-call you should not use the library after-hours because you may not be able to leave quickly enough. Police response time appears to vary from five to forty-five minutes.

A couple of people suggested using their magnetic I.D. cards to enter the library after-hours, as they are able to do in other buildings around the clinic. This would not be feasible for a number of reasons. Right now the police can make sure that users exit through the turnstile, causing activation of the alarm system if any items are being taken. Because the turnstile is set back from the entrance, people exiting via magnetic cards could simply smuggle materials around the turnstile's alarm system without checking them out, making increased unauthorized borrowing or theft of materials a virtual certainty. (In the new facility turnstiles will be placed directly at entrances and exits, not set back as they are now.) Additionally, use of magnetic cards does not guarantee that the person actually using the card is the person to whom that card was issued, nor does it guarantee that merely one person will be entering at a time. These affairs are impossible to monitor.

V. SUMMARY AND CONCLUSIONS

It was chosen to enact this study to find out whether or not the needs of after-hours patrons of the CCF Library Service Department are being adequately met. Do patrons know what services are, and are not, available after-hours, and why? Can anything be done to address concerns these individuals might have expressed during this study? Might these concerns be addressed in the present facility, or would it be more feasible to keep them in mind while planning and building the proposed new health sciences library facility? While this is a small group of individuals (.07% of 1% of all potential library patrons), meeting their needs is important to the library.

By using the questionnaire format, both fact-based answers, as well as commentary, have provided for a well-rounded bank of information. The questionnaire was mailed to the categories Resident/Fellow, Professional Staff, Nurses and Other (which would include Dietitians). Out of a total population of one hundred and thirteen individuals, fifty-four questionnaires were returned, for a response rate of 47.79%.

The Cleveland Clinic Foundation Library Services Department provides twenty-four-hour access to its holdings, primarily in answer to any emergency/critical care situations that might pop up around the hospital. However, according to data gathered through this study, only 10.24%

of individuals who access the library overnight actually come there for this purpose. While off-site locations, such as the quiet study lounge on the seventh floor of CCF's Education Building, have been promoted in an attempt to provide after-hours alternatives to the library, it appears that no other place can adequately substitute for the library. After-hours patrons are adamant about needing access to the library's collection for the work they are engaging in.

Expansion of library hours may cut down on after-hours use of the facility. According to data gleaned in this study, the most efficient use of time, labor, and money, might be to expand weekend hours. Potentially, one-third of after-hours patrons would no longer need to use the facilities after-hours if this expansion were established.

A few of the service problems brought up by respondents in this study, the library can address immediately. For example, signs could be placed by the photocopy machines notifying patrons that they may be turned on, and used, after-hours. Uncertainty in this regard would hopefully disappear. However, many other service concerns upon which this study has shed light, have led to conclusions in this paper that may have the most profound impact on the planned CCF Health Sciences Library facility (slated to open in 1996 or 1997). These concerns would include possible expansion of hours, or the provision of quiet study areas.

This study has provided extremely valuable data, as well as unique insights into the dilemma of providing optimal service to a patron population which uses the library when librarians are not there to provide assistance. Its drawback is in that it is difficult to extrapolate this data into a representation of the entire user population. It would be extremely valuable to engage in a follow-up survey which would query a representative sample of all CCF Library Services patrons regarding their ideas on the import of providing after-hours library access, and the efficacy of the present system.

As various comments suggest, many patrons view CCF Library Services as they would an academic library. Academic libraries do not provide after-hours collection access; CCF does. While Library Services can and does attempt to provide the finest level of service possible, it can't be all things to all people. The suggestions in this paper attempt to wade through desires and possibilities, fishing out the potentially feasible. These questionnaire results constitute a promising beginning.

THE CLEVELAND CLINIC FOUNDATION

A National Referral Center An International Health Resource

Re: After Hours Access to the Cleveland Clinic Library
Services Department: An Examination of Services

Date

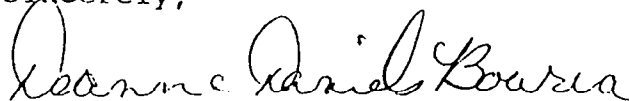
Dear Library Services Department Patron:

I am a graduate student in the School of Library and Information Science at Kent State University. I am conducting a study which will attempt to discern whether or not patron service needs are being met during overnight use of the materials and services provided by the CCF Library Services Department. I would like you to take part in this project. If you do participate, your assistance will be of tremendous help to the Library Services Department in its mission to provide the most effective and appropriate access to materials and services at all times. Additionally, you will help me to complete requirements for obtaining my Master of Library Science degree. However, taking part in this project is entirely up to you, and no one will hold it against you if you decide not to participate. If you do take part, you may rescind the information provided at any time. Confidentiality and anonymity are guaranteed, as inclusion of your name on the questionnaire is purely optional. Only I, and those in the Library Services Department participating in the investigation, will have access to the survey data. A copy of the results of the study will be available upon request.

If you want to know more about this research project, please call me, Deanne Daniels Bouria, at 444-8713. You may also contact Marion Dorner, at 445-7334, or my Kent State University research advisor, Dr. Lois Buttlar, at (216)672-2782. The project has been approved by Kent State University. If you have questions about Kent State University's rules for research, please call Dr. Eugene Wenninger, telephone (216)672-2851.

Thank you very much for your cooperation; it is much appreciated. You may return the questionnaire in the enclosed pre-addressed envelope via CCF mail.

Sincerely,



Deanne Daniels Bouria,
Research Library Assistant, Graduate Student, K.S.U.

APPENDIX B

CCF Library Services Department
After-Hours Library Access Questionnaire

Name (optional): _____
 Department: _____
 Status: (Check one): Resident/Fellow Professional Staff Nurse
 Other (Please specify) _____

1. Why did you use the Library after-hours? (Check all that apply)
- For quiet study
 - To obtain information for an emergency or critical care situation
 - Photocopy articles
 - Research--use library materials for project/paper in preparation
 - Pick up computer searches/articles prepared by Library Staff
 - Use reference books
 - Too busy during the day
 - More convenient to utilize the library after hours--Please elaborate: _____
 - Used as an alternative to relaxing or studying in the on-call rooms or cafeteria
 - Other--Please specify: _____

2. How often do you use the following services after-hours?
(Check all that apply)

Service	Once a month	Once every 2-3 months	Once every 6 months	Once a year	Never
Quiet study					
Search for information for emergency care					
Photocopying					
Research--use library materials for project/paper					
Pick up materials prepared by Library Staff					
Reference books-- read, consult					

3. If the Library extended its hours and did NOT have after-hours access, how long would you like the Library to remain open DURING THE WEEK?
(Check ONE)
 8:00 PM Every weekday
 9:00 PM Every weekday
 10:00 PM Every weekday
 9:00 PM 2-3 Evenings per week
 10:00 PM 2-3 Evenings per week
 Other (Weekdays): _____
4. If the Library extended its hours and did NOT have after-hours access, how long would you like the Library to remain open ON WEEKENDS?
(Check all that apply)
 8:30-12:30 Saturday
 8:30-5:00 Saturday
 Noon-5:00 Sunday
 Other (Weekends): _____
5. What times do you usually enter the Library after-hours?

6. How long do you usually stay? _____
7. How long do you usually have to wait after you call for the CCF Police to let you in or out of the Library after-hours? _____
8. Are you satisfied with the response from the CCF Police? (Check one)
 Yes Somewhat--could respond more quickly No
9. Are you aware that there is a quiet study area with 2 computers on the seventh floor of the Education Bldg. (TT7) that is open 24 hrs.?
 Yes No
10. Do you currently use the 7th Floor area? Yes No
11. If you answered yes to question 10, for what purpose(s) do you use the study area?

12. If Medline searching is available from the 2 computers in the 7th Floor study area, would you still need after-hours access to the Library?
 Yes No
13. What after-hours Library services do you want that are currently not available? (Check all that apply)
 MEDLINE, CINAHL, Health, and ClinPSYC searching in the Library
 Search the Library's online catalog for books
 Quick reference tool that outlines Library services
 Other--Please specify: _____

PLEASE RETURN TO: DEANNE DANIELS BOURIA, FF5-08

THANK YOU

APPENDIX C

COMMENTS

1. For quiet study:
 - *Nobody talk at that hour
 - Research...:
 - *for projects/talks
 - Photocopy articles:
 - *not available
 - More convenient...please elaborate:
 - *quieter, no lines for copier
 - *Its my most free time and the most efficient time to use it, i.e. least disturbances from pages and phone calls. Copy machine lines are shorter.
 - *Quiet
 - *That's only time I can get to read
 - *Nobody talk at that hour
 - *Difficult to use due to patient care responsibilities during day hours
 - *b/c (because? or, referring to photocopy article and research--... because they fall in the b and c slots?) of above - is too crowded/noisy during the day, copiers always busy if have a lot to do.
 - *sometimes have more time on-call
 - *Unable to stay late, so weekends are better (especially sunday)
 - *Photocopying machines not in use
 - Other:
 - *No waiting at the photocopier - I can actually find a desk and spread out my papers
2. Search for...: *CDRom (MEDLINE) not available at night
Photocopying: *not available - machines turned off
 - *more than once a monthResearch.....: *more than once a month
3. Other: *midnight
 - *12 midnight every night
 - *It needs to open early by 6 a.m. at least
 - *9 a.m. to 8 p.m.
 - *N/A - I would be extremely hostile if, as a staff M.D., I did NOT have access
4. Other (Weekends): *8:30-10:00 p.m. sat. and sun.
 - *all day
 - *one shift sat. and sun. (8-5)
 - *sat./sun. 10-10
 - *8:30-5
 - *sat. and sun. 8:30-5:00
 - *8:30-5 sunday --- 2 people indicated this
 - *9 a.m. to 8 p.m.

if, as a staff M.D., I did NOT have access

5. *7-8:00 p.m. --- 2 people indicated this entry time
 *7-10 p.m.
 *9-10:00 p.m. weekdays, 5-7:00 p.m. weekends
 *6:00 p.m.
 *Early evening, weekends
 *Weekdays-9:00 p.m.
 *1-2 times per month
 *6-8 p.m. ---. 2 people indicated this entry time
 *Before closing
 *8:00 p.m. --- 2 people indicated this entry time
 *variable --- 2 people indicated this entry time
 *after 9:00 p.m.
 *early evening
 *evening
 *evenings/weekends
 *weekends
 *not fixed - usually late night
 *8:30 p.m. --- 2 people indicated this entry time
 *at around 5:30 or 6:00
 *weekdays: 7-7:30 p.m. and saturday: 9:00 a.m.
 *11:00 a.m. - 3:00 p.m. saturday
 *usually on weekends
 *sat./sun.
 *9:00 a.m.
 *depends upon need
 *6:30 p.m.
 *early a.m.
 *weekends - day/evening and weekdays - evenings
 *5 p.m. - 11 p.m.
 *9 p.m. - 11 p.m.
 *10 p.m. --- 2 people indicated this entry time
 *After 5 p.m.
 *On weekends --- 3 people indicated this entry time
 *6-7 p.m.
 *9 p.m.
 *8-10 p.m. --- 3 people indicated this entry time
 *9-10 p.m.
 *Weekend afternoons and about 7 p.m. on weekends
 *Usually on sundays and afternoon on saturday
 *Weekday nights/weekends
 *Weekends, after 9 or 10 on weekdays. (Can't remember...)
6. *20 min. --- 2 people indicated this amount of time
 *30-45 min.
 *30 min. --- 3 people indicated this amount of time
 *1-2 hours --- 18 people indicated this amount of time
 *1 hour --- 5 people indicated this amount of time
 *10:00 p.m. or 11:00 p.m. (this answer was given by an individual who stated they always come in just before closing)

- *variable 1/2 hour to 2-4 hours
 - *1/2 to 1 hour --- 3 people indicated this amount of time
 - *Less than 1 hour --- 3 people indicated this amount of time
 - *2-3 hours --- 5 people indicated this amount of time
 - *2-4 hours
 - *1-5 hours
 - *usually till 9 but I've stayed till midnight too
 - *3 hours
 - *several hours --- 2 people indicated this amount of time
 - *approximately 30 min.
 - *2 hours --- 2 people indicated this amount of time
 - *1-3 hours --- 2 people indicated this amount of time
7. *10 min., plus or minus 5
- *10 min. --- 6 people indicated this amount of time
 - *15 min. --- 9 people indicated this amount of time
 - *15-45 min.
 - *30 min.
 - *20 min. --- 4 people indicated this amount of time
 - *10-20 min. --- 2 people indicated this amount of time
 - *5-10 min. --- 6 people indicated this amount of time
 - *10-15 min. --- 8 people indicated this amount of time
 - *Up to 15-20 min.
 - *15-20 min. --- 2 people indicated this amount of time
 - *Less than 5 min. --- 2 people indicated this amount of time
- time
- *Approximately 5 min.
 - *Less than 10 min.
 - *Varies a lot. One time I've waited 30 min. Usually 5-10 min.
 - *5 min. --- 3 people indicated this amount of time
 - *5-15 min.
 - *5-35 min.
 - *5-20 min.
8. *In response to being somewhat satisfied, one respondent stated "though there is usually valid reason (and personal at times of utilization)." I think they might mean that they would not like the police to ask them their reasons for entering the library. What are your thoughts on this statement? Are those entering the library required to state a reason why they want in?
- *One person stated that they were satisfied with CCF Police performance "unless there is an emergency."
 - *A person who was somewhat satisfied stated "Sometimes great, sometimes slow."
 - *Someone who answered yes stated "Usually. Sometimes there are other emergencies in the bldg."
9. *No software or decent printers
- *N/A have my own staff office computers

*Someone who stated yes wanted to know "Do these have MEDLINE access?"

10. *Someone who answered no to this question stated "I wouldn't have access to journals there."

11. *quiet study
 *quiet study
 *quiet study
 *quiet study
 *quiet study during the day
 *study
 *study
 *study!
 *quiet area
 *reading, writing
 *To read in quiet place as our library is too noisy
 *I use the phone (port)? and perform literature searches; also quiet study
 *Sometimes just for change of place from library, and on weekends
 *Reference books

12. *abstract alone may be insufficient (this comment came from an individual who said yes to this question)
 *Someone who stated yes also said "Not as often."
 *talking about MEDLINE searching, one person stated "This is very important after hours."

13. Other--Please specify:

*Research!! It is very frustating to have to wait for someone to let you in and then to be locked in - you can't come and go as needed in a convenient fashion. I strongly believe that more people would make use of library services if allowed convenient after hours access!!
 *Reference books, stacks of recent publications to utilize MEDLINE searches
 *xerox
 *Photocopies - Library often needed for reference. Easy to copy reference source quickly however key access for copies is off after hours.
 *access to books plus photocopy machine without waiting in line.
 *I think one should be able to open library by sliding our cards. This would make it faster and easier to access, and reduce burden on CCF police.
 *Photocopy of articles
 *Quiet signs! (Not just for use after hours!) Placing of telephones in non-study areas.
 *System works well as is
 *And reference journal availability
 *I need access to reference books ; for questions that arise on call.
 *Librarian

*An open door. When I'm on call, I occasionally have to leave the library immediately (i.e. crisis in the Hospital) - and this fact discourages me from using Library on call.

GENERAL COMMENTS NOT ASSOCIATED WITH ANY ONE QUESTION:

*I think an academic institution with lots of people in residency/fellowship research should have 24 hour access "real" hours as above. I think the 24 hour access 's best.

*Why can't the library have after hour card access, at least for staff.

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