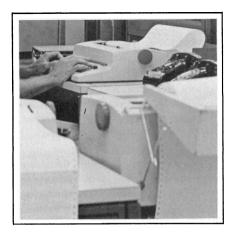
The National Health Planning Information Center



FRANK MORRONE

THE NEED for a central resource for information on health planning has increased as the planning processes and programs have become more complex and the health planning literature has proliferated. To compound the problem, much of the information on planning processes and methods that would aid the health planning community is not available because the material prepared by planning agencies for their own use often does not become part of the published literature. The multidisciplinary nature of health planning, coupled with the inaccessibility of significant information, has made it extremely difficult for the health planner to locate the information that he needs. As a result, scarce resources are frequently allocated to developing health planning procedures and processes that others have already brought to fruition.

Congress, in its deliberations on the National Health Planning and Resources Development Act of 1974 (Public Law 93-641), recognized the need for health planning information and included in the technical assistance segment of the law some provisions to assure improved access to such information. Section 1533c of the act reads: "In order to facilitate the exchange of information concerning health services, health resources and health planning and resources development practice and methodology, the Secretary shall establish a National Health Planning Information Cen-

☐ Mr. Morrone is chief of the National Health Planning Information Center, Bureau of Health Planning and Resources Development, Health Resources Administration. Tearsheet requests to Frank Morrone, National Planning Information Center, P.O. Box 31, Rockville, Md. 20850. ter to support the health planning and resources development programs of health systems agencies, State agencies, and other entities concerned with health planning and resources development; to provide access to current information on health planning and resources development and to provide information for use in the analysis of issues and problems related to health planning and resources development."

The House Committee on Interstate and Foreign Commerce, in its report on the hearings related to this section of the law, went further in developing its concept of the Center, as the following quote from that report indicates: "The committee would be pleased if this Center could include a computerized library of health planning and resources development information which could serve operating agencies relative to the subject of their concern. Were this to be done, an agency concerned, for example, with emergency medical services could retrieve from the library, references to model approaches to planning and development of emergency medical service systems and examples of approaches and programs used by other agencies."

This statement plainly indicates that a clearinghouse function is desired in addition to a computerized library. Further, a broad concept emerges in the language in the law that refers to subjects of concern to the planning agencies: The realm of health planning is to be expanded to include the broad range of issues with which planning agencies will be confronted. In order to handle effectively the full range of topics that might be encompassed within the scope of health planning, the focus of the Center's activities is to be on the planning functions of the health systems agencies and of the State health planning and development agencies. The intent was to establish an information base that would allow those planning agencies to explore the many aspects of the

Purposes and Objectives

The National Health Planning Information Center (NHPIC), established under the Health Resources Administration in response to this legislation, is now operational. As the Center has been envisioned, it is ultimately to accomplish two major objectives. The first is to establish a hard core of health planning information-an information base for health planning that does not exist today. The second is to facilitate access to this information base through a variety of products and services and thereby meet the intent of the legislation.

To attain the first objective, the Center will have to draw upon the experiences of many diverse disciplines, some of which may not be specifically identified with health planning but which can contribute to the solution of the problems with which planning agencies are likely to be confronted. Such disciplines include medicine, demography, sociology, statistics, economics, and many others. In addition to accumulating information that already is a part of the formal literature of health planning and other disciplines, the Center will also seek to obtain the large body of studies and documents which planning agencies have produced that focus on specific health planning problems. The aim is to assemble studies not currently a part of the formal literature that would be useful to other planning agencies dealing with similar problems. Such "fugitive" documents are expected to constitute as much as 25 to 40 percent of the information base that will eventually be established through the Center's program (based on current estimates derived from the Center's initial acquisition activities). The core of health planning information that will be acquired will allow the Center, for example, in fulfilling the needs of the health planning agencies, to respond to inquiries, announce new

information processes and procedures, prepare state-of-the-art monographs, conduct literature reviews, and issue specialized bibliographies.

Principles Followed

In establishing this information resource, four principles have been followed to the extent possible. First, the system has been designed to meet the needs of local planning agencies. Given the Center's orientation to its users, the user community needed to have input into the design and development of the Center's program. This need was filled by setting up a panel of users. Second, the system is being constructed on existing health information systems. The intent has been to build on the experience of people who have established and operated clearinghouses. Use of the available resources has permitted the Center to be activated fairly rapidly. Third, existing information storage or retrieval software has been used, and fourth, mechanisms have been built into the information system to enable it to handle urgent requests whenever they are received without disrupting routine work processing.

Users of System

The system was designed to meet the needs of the State and local planning agencies and their governing bodies that will be established under Public Law 93-641in other words, the agencies that will be responsible for planning for the allocation of health care resources across the country. These agencies will number approximately 250, including areawide and State agencies. A large number of other organizations and individuals, however, will in all probability use the evolving system rather extensively. These include regional and State planning organizations (other than health), health professional organizations and associations, and educational and training institutions. Educational institutions, for example, could well become the most extensive users of all. In any case, the potential user community is large if one considers the number of organizations and individuals that have a legitimate interest in such an information resource.

Structure of the Center

The National Health Planning Information Center has three major components. The first is the Federal staff of the Center, which is primarily responsible for coordinating the activities within the Center and for setting policy with respect to the products and services to be offered. In addition, this staff has the primary responsibility for responding to requests for sources of data to support the health planning process. The second major component is the Aspen Systems Corporation, which is under contract to implement document acquisition, document surrogation and related processing, and selected syntheses of the health planning collection. It is responsible for processing inquiries, preparing monographs, issuing special publications such as bibliographies and literature reviews, and conducting seminars and other training activities for users. The third major component is the National Technical Information Service (NTIS) of the Department of Commerce. The NTIS is viewed as the documentation center for the NHPIC collection. In collaboration with the NHPIC, it issues the "Weekly Government Abstracts: Health Planning," which are based on newly acquired health planning documents. NTIS prepares and stores the microfiche masters for all documents entered into its system and will process routine requests for a microfiche or paper copy of such documents.

Scope of Subject Matter

What areas of information are of priority concern to the Center? This question has been difficult to answer because the Center's mandate is broad and planning agency functions are many and varied. In defining the broad parameters of the information that the Center should acquire, the functions of planning agencies were used as a basis. These functions might be viewed as health plan development, health plan implementation, health resources development, project review, health systems review, agency organization and management, coordination of planning activities, information gathering and processing, and health systems operations. The information base is constructed so that it will support planning agencies in performing the tasks that these functions entail. The actual organization of information will be such that if a requester is interested in the availability, for example, of information on health plan development, that term will be accessible in the system. and therefore everything in the system on health plan development can be collected. Independently of these major subject areas, an information classification scheme has been devised, consisting of approximately 500 health planning concepts. The scheme will allow for the assignment to documents of codes, which will be used in retrieving information from the computerbased system. For information retrieval, as many codes as are necessary to describe appropriately the content of a document will be assigned to the computer-based record for that document.

Sources of Information

A number of sources of information are to be used in acquiring documents of potential relevance to the Center's data base. First are the core journals, that is, those journals most likely to yield information of use to health planners. They will be scanned routinely for articles that should become a part of the health planning data base. Among the core journals are the American Institute for Planning Journal, American Journal of Public Health, Health Education Monographs. International Journal of Health Services, Journal of Allied Health,

Journal of the American Medical Association, Milbank Memorial Fund Quarterly, Public Health Reports, and Urban Health.

The second source consists of the existing machine-readable data bases that carry information from a number of sources that would be of interest to health planning agencies. Use of such data bases avoids duplicating the work that has already been done by abstracting and indexing services. The Center will run computerized searches against such data bases as MED-LINE, ERIC, NTIS, the Smithsonian Science Information Ex-CATLINE. SOILINE. change. SciSearch, Social SciSearch, and other data bases that are likely to carry information of importance to the Center.

A third source consists of secondary publications such as abstracts. journals. indexes, and current awareness services. These publications include Abstracts of Hospital Management Studies, Emergency Health Digest, Environment Index, Excerpts Medica (Health Economics and Public Health). Health Care Research Index, Hospital Abstracts. Hospital Literature Index. Housing and Planning References, Medical Socioeconomic Research Sources, and the KWIC index of the Parklawn Health Library of the Public Health Service in Rockville, Md. Other publications are being identified and evaluated to determine their coverage of information that would be useful to the planning community.

An aggressive outreach program constitutes the fourth source. Through it organizations that are likely to be producing documents and publications of use to the planning community are to be contacted. Such documents are, or will be, produced by health systems agencies, comprehensive health planning agencies, regional medical programs, and experimental health care delivery systems. To obtain them, letters will be sent requesting specific documents; also, research notices, newsletter items, and the like will be followed up. The outreach program was initiated with a request that the comprehensive health planning "a" and "b" agencies, regional medical programs, experimental health care delivery systems, and Hill-Burton programs send documents to the Center for inclusion in its information base.

Health clearinghouses constitute the fifth source of information. Examples are the National Center for Health Statistics, Clearinghouse on Health Status Indices. National Clearinghouse for Drug Abuse Information, National Clearinghouse for Mental Health Information, National Clearinghouse for Alcohol Information, and National Emergency Medical Services Information Center. The information will be acquired through cooperative arrangements established between the Center and the clearinghouses. The Center's policy is to avoid duplication of what is being covered by others. For example, the Clearinghouse on Health Status of the National Center for Health Statistics has a well-established information storage and retrieval system and carries all the information that the NHPIC staff have been able to identify on health status indices. This NCHS information is not carried in the NHPIC system, and all inquiries related to health status indices are processed for the NHPIC by the NCHS clearinghouse.

Computer Systems

The computer system used for processing the information in the Center is located at the National Institutes of Health, Division of Computer Research and Technology, Bethesda, Md. Contractors processing the Center's information use the programs that already exist in the NIH Computer Center; the data are entered into the NHPIC data files through remote terminals located in the contractor's offices. Once the data base has been established, queries can be executed, again using the remote terminals. In processing a query, the

entire data base can be searched according to any of the characteristics of the records in the system. For example, any component of the record may be searched, such as author, title, index terms, publisher, or date of publication. Also, simultaneously the full text of the abstract can be scanned for any word or group of words that might be used to represent a concept about which information is desired.

Use of these processing techniques improves the efficiency of the search strategy and results in more relevant responses from the system to the questions posed. Output (bibliographic material, abstracts, or both) can be transmitted immediately to the remote terminal or printed at the computer center and returned to the originator the day following the request. The data files are processed at the National Institutes of Health for input into the NTIS data base, from which they become available to the general public through the DIALOG system (operated by Lockheed Svstems, Inc., for NTIS). The most important point about the systems being used is that they are operational. The Center has been processing about 100 requests a week since services were initiated in May 1975.

Document Screening

Depending on the results of screening, documents will be archived in different places. If (a) a document (or article) is of good enough physical quality that it can be stored on microfiche and blown back into a paper copy in conformance with NTIS standards, (b) it is not confidential, (c) it is in the public domain (not copyrighted), and (d)its contents are reasonably sound, the NTIS processes and makes a microfiche of it. That microfiche is then available for reproduction as a microfiche or as a paper copy upon demand by any requester. All records containing computer-based data relating to documents in the NTIS are in the NHPIC data base

and can be searched on line through DIALOG or NHPIC. On the othe hand, a document with sound contents but of poor physical quality and for which a good copy is unavailable will be archived in the National Health Planning Information Center. Such a document will be abstracted, and the bibliographic information in it will be made a part of the data file. Its physical quality will be described, and NTIS will announce that it is available only through NHPIC.

The usual requester is likely to want only references that are highly relevant and highly specific to his particular problem. Therefore, exclusion of documents of questionable content in response to such an inquiry is desirable. On the other hand, if a requester desires complete information on a subject from the system, all the references in the file can be obtained. The requester, however, will be informed that many of them are of marginal quality. Documents that do not meet even the marginal quality criteria (that is, do not contribute any useful information) are excluded from the basic data files and are only listed and filed alphabetically. Such documents are not searched nor made a part of any set of references prepared by the Center staff.

Setting up criteria for screening is complex, and considerable difficulty was experienced in reaching binding decisions on screening rules. Care must be taken to avoid cluttering the system with inappropriate and marginally useful material. Yet steps need to be taken to assure that the information requirements of the health planning community can be met in as broad a context as possible. The criteria set by the Center are flexible and will be changed as the staff gains more experience. Some documents currently considered irrelevant to the system and the program may eventually become valuable as the planning system evolves; hence a number of documents of this kind are listed and filed.

Health Planning

Currently, the National Health Planning Information Center has an information base of approximately 10,000 items. Its ultimate goal, which it expects to reach by the end of 1976, is 20,000 documents.

Products and Services

Several products and services are currently being developed to aid health planning agencies in addressing the issues of health planning.

Announcement of relevant documents. As mentioned in the section, "Structure of the Center," documents processed into the NHPIC system are announced in the "Weekly Government Abstracts: Health Planning." Most of these documents can be purchased in paper copy or microfiche.

Special reference services. Persons and organizations desiring information about health planning can request special searches of the NHPIC data files and other sources and will receive citations and abstracts of documents pertaining to the subject of their concern.

Referral services. The Center staff has established working relationships with a number of information centers, clearinghouses, and data resource centers and can refer requesters to the information services with the greatest potential for supplying answers to questions that are peripheral to the mission of NHPIC.

Topical bibliographies. Based on recommendations of the users panel, on the judgment of the BHPRD staff, and on the frequency of inquiries on specific topics, bibliographies on specialized subjects will be prepared and distributed, or otherwise made available, to the health planning community. In addition, bibliographies will periodically be prepared that contain information on all references in the data bases.

Reference room. A reference room

at the Center's premises in Rockville, Md., permits health planners to browse through the collection of documents and consult with the Center's specialists on references.

Health Planner's Newsletter. A monthly "Health Planner's Newsletter" is designed to communicate with the health planning community about current happenings in such areas as health planning research and development, to inform the community about procedures for interfacing with NHPIC, to publish reviews of outstanding publications on various aspects of health planning, and to publicly announce training programs for NHPIC users.

Panel of users. In planning for the National Health Planning Information Center, a panel of 12 users, primarily representatives of planning agencies, was appointed. These representatives include staff from DHEW Regional Offices. State comprehensive health planning agencies, areawide planning agencies, regional medical programs, Hill-Burton programs, universities providing technical assistance in health planning, and from other Federal offices. Both the advice that this panel imparted when various aspects of the Center's services were being designed and the perspective that it afforded when the information system was being established have proved invaluable. The panel's guidance will continue to be sought as the Center progresses and initiates evaluation procedures, since the users are the ones who will benefit from the Center, and its success will in large part be measured by its ability to meet their needs. Concurrent with meeting the needs of health planning agencies, the needs of other users will also be met.

Instruction and assistance for users.

Since users of the information system require guidance and assistance if they are to make optimal use of it, training meetings have been initiated on a regional basis, and users' manuals and guidelines are being prepared, along with materials designed to assist the user in gaining access to the system and acquiring information that is specific and highly relevant to his or her needs.

State-of-the-art monographs. Monographs will be prepared periodically by experts on topics of current interest that will range from basic planning methods to use of data. These monographs will synthesize the literature carried in the NHPIC system and will contain an authoritative bibliography on the subject of the monograph should readers require more indepth knowledge of the topic.

Health planning study monitoring. The Center has devised and implemented procedures by which health planning research and development activities, whether sponsored by government or privately sponsored, can be identified and announced and their progress followed to completion. One purpose in tracking these activities is to provide health planning agencies and individuals with advance knowledge of innovations or emerging methods and techniques in health planning. A second is to alert planners to the studies underway and thereby avoid the duplication and waste of manpower and financial resources that result from the initiation of multiple, simultaneous studies on the same subject. Once the research and development work is completed and documented through published sources, it will be disseminated as routine acquisitions of the Center.

Using the Center

To use any of the services of the Center, obtain further information about the program, or submit documents for inclusion in the Center's information base, write or call the National Health Planning Information Center, P.O. Box 31, Rockville, Md. 20850, or phone 301-881-5075.