

Survey of information needs of CDHB Contracted Providers – March 2007

So that we can look at options to meet your information needs are met could you please answer the following questions and return the form to us. We will let you know the results of your feedback.

Name:

Phone No:

Position:

Address:

Your information needs

1. Do you currently have easy access to a library or an information service? Yes No
2. Do you have easy access to a computer and to the Internet? Yes No
3. Can you give us any specific examples of information do you need for your practice needs and for solving work problems? E.g. do you need information on drugs and medications, clinical treatments, care guidelines, etc.
4. Can you give us any examples of other kinds of information you may require? E.g. for your educational, research and professional development needs?
5. Are there any specific books, journals or online resources that you need, that are not currently available to you? Any examples?

Preferred ways of getting information Tick the options to indicate how do you prefer to request or receive information

- Phone
- Mail through the Post
- Email
- Access online
- Other (please specify)

Training Needs What training do you need?

- Searching the Internet
- Searching PubMed on the Internet
- Locating information a topic
- Assessing the accuracy of information
- Other (please specify)

Training Preferences What kind of training session do you prefer?

- Training - Short 1-2 hour session
- Training - Half Day session
- Other (please specify)

Other Comments: Do you have any comments, questions or requests in relation to your information needs? Have you had any problems in obtaining information? Please provide brief details below, overleaf, or on a separate sheet of paper.

Please fax your completed form to the library at 03-364-034 or return it by mail to:

Marg Walker, Canterbury Medical Library, PO Box 4345, CHRISTCHURCH