# EXEMPLARY RFP APPLICATION SECTION EXAMPLES

## Significance

Media and technology, such as video gaming, social media, and general internet use can affect the physical, mental, and social health of youth. Negative health outcomes include obesity,3 depression,4 risky sexual behavior,5 anxiety,6 disordered eating,7 substance use,8 and even suicidal ideation.9 Conversely, it can improve various aspects of youth’s health and well-being, including social skills,10 identity development,11 mood regulation,12 prosocial behavior,13 problem-solving skills,14 and community engagement.15 At the Center of Excellence in Media for Youth which is a grant-funded, research-based group within the Pharady’s Children’s Hospital, we exist to provide evidence-based information about both the positive and negative media-related health effects on ages 0 to 24; however, the majority of our resources are aimed at two main audiences: parents, and clinicians. For parents, we provide an extensive website with health-literate appropriate information on everything from media types, health outcomes, and youth developmental stages.16 We also provide a question and answer column, where parents can ask about their media and technology concerns as they relate to the health of their children and teens.17 For pediatric clinicians, we provide our Clinician Toolkit, which includes screening tools, anticipatory guidance, and patient education material.18 The gap in our resources is clear: we are not reaching the broader health sciences research community. Furthermore, this gap is not unique just to us, as partnerships across disciplines are also lacking, further fueling the need for our proposed Media Wellness website.19

On a weekly basis, we receive reference requests from graduate students, postdoctoral students, research assistants, academics, public health researchers, investigative journalists, and others involved in research, asking for information and literature searches on specific topics related to media, health, and youth. These requests come from not only the United States but from around the world. Unfortunately, we cannot respond to these requests because of our limited capacity—nor can we direct the queries to an established and specialized research database as one does not yet exist. It is clear that there is a strong need for a freely available online website that provides researchers access to the evidence on this topic in one convenient website; we plan to meet that need with Media Wellness. The proposed work continues our ongoing efforts to increase access to research on media effects. While we have designed a prototype of a web site, the advancement of the work has stalled as a result of limited resources dedicated to this project. Additional funding is needed, therefore, to help allow us to finalize our web site development, create new content, and conduct outreach and dissemination efforts for the final website.

## Methods

In an era where pseudoscience and public opinion are pervasive, we need to provide as much access as possible to those engaging with research. Several barriers exist in locating and understanding peer-reviewed research on media effects. For one, most people are only exposed to research from studies that are sensationalized by media outlets. Secondly, media-related health effects research is published in a variety of different academic disciplines, including sociology, psychology, medicine, communication studies, and computer science, requiring knowledge of and access to many different databases.

Media Wellness will be a culmination of the larger research community’s efforts and is essentially the creation of a brand new database for this topic. Media Wellness will be composed of two main features, the Database and the Research Guides. The Database section will function as a typical bibliographic database; users will be able to perform simple or advanced searches or browse through our custom taxonomy to locate citations of scientific articles related specifically to Media Wellness and youth. Users will also be able to export citations to the citation management software of their choice. Each citation will also include a link to its corresponding record in PubMed (where applicable), promoting the NLM’s valuable resource. This functionality will be supported by a database containing a curated collection of thousands of citations for research examining the impact of media on health. Over the past 15 years, CMCH has collected citations for over 20,000 scholarly journal articles from which we are building this database. For the launch of the website, we will import 2,500 citations that represent the newest research in this area. We will continue to monitor, locate, and curate the best available evidence on media effects, and the database will house citations and summaries of this work and will be continually updated to reflect the current evidence base.

The Research Guides section of the website will house unique guides informing research on specific topics related to media and health through organized links to relevant information and resources. Following the traditional purpose and format of library research guides, we have already completed three, including “Texting and Driving” as adolescent drivers are at the highest risk of distracted driving;21 “Fake News” as school-aged children and older are engaging more with the world around them;22 and “Video Game Addiction,” a growing adolescent health concern.23

The logistics of the implementation of this project involves two simultaneous phases—the web development phase and the content phase. Tasks are assigned to the individual(s) listed in parentheses below for each phase.

Web Development Phase Development Objective 1: Design implementation**.** Thanks to many months of unfunded work, we have a comprehensive visual design for the website. Our first developmental step is to turn this design into functional templates in a Wordpress installation. To make the Media Wellness website usable on any platform, our design mockups account for screen sizes ranging from mobile devices to desktop monitors. From these, we will create responsive page templates and styles, and then we will code them to connect with the Wordpress database to dynamically populate them with content.

Tasks include:

* Create all page templates (John Doe)
* Review template designs with placeholder content (Jane Doe and John Doe)
* Revise page templates as needed (John Doe)

Development Objective 2: Finalize article import tools and website's admin interface.

To support our core database of research, we are building bespoke tools to easily import citations from the popular EndNote software onto the Media Wellness website. We are creating a streamlined interface to edit the citations as necessary and enhance them once they're in the Wordpress database. We will also be customizing the admin interface in general to simplify the task of adding and editing the website's content.

Tasks include:

* Build and customize EndNote import functions and workflow (John Doe)
* Connect page templates with database (John Doe)
* Test import process and admin interface (Jane Doe and John Doe)
* Revise page templates as needed (John Doe)

Development Objective 3: Populate the Media Wellness website with content and refine for launch.With the design, development, and content tasks approaching completion, we will migrate the website's content and making any final improvements before launch.

Tasks include:

* Migrate prepared general website content into Wordpress (John Doe)
* Migrate research guides into Wordpress (John Doe)
* Import database of research into Wordpress (Jane Doe and John Doe)
* Review and test all content (Jane Doe and John Doe)
* Make final content edits and changes as needed (John Doe)
* Launch website (John Doe)

Content Phase Content Objective 1: Research guides. First, we need to complete the Research Guides, which will be carefully curated guides covering a comprehensive array of topical subjects. Topics will be chosen based on the CMCH team’s knowledge of crucial subtopics related to Media Wellness. We will use our combination of extensive librarianship skills and media studies knowledge, to create these. As mentioned previously, we have 3 research guides complete and would like to launch with 8-10 in total.

Tasks include:

* Gather and organize salient citations and information for 5-7 more research guides (Jane Doe)
* Edit and proofread guide content (Jane Doe and John Doe)

Content Objective 2: Database of research. Second, we need to complete the core of the Media Wellness website, which will be the curated database of research citations on all topics relating to media effects on child health. Relying on our private database of citations, which includes over 20,000 citations of articles about Media Wellness and youth, we will prepare a fully up-to-date ready to export onto the website.

Tasks include:

* Organize 2,500 salient citations (Jane Doe)
* Confirm and proofread database content (Jane Doe and John Doe)

Content Objective 3: Final adjustments.Third, during our soft launch, we will share the website with a selection of individuals to test the site and provide feedback about any major issues.

Tasks include:

* Create a list of 8-10 individuals from various disciplines who are willing to review Media Wellness (Jane Doe)
* Solicit feedback via semi-structured conversations (Jane Doe)
* Make final changes to Media Wellness as needed (Jane Doe and John Doe)
* Document lessons learned from the launch process and create a best practices document for future use (Jane Doe and John Doe)

## Schedule/Timeline

We have planned for 6 months to allow us to complete the website and be ready for the launch on November 4, 2020. Jane Doe works 40 hours per week, and will dedicate 4.4 hours per week for 6 months to this project. John Doe works 20 hours per week and will dedicate 2.4 hours for 6 months to this project. Below is a more detailed breakdown of the milestones and the hours of personnel effort allocated to each one.

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| --- | --- | --- | --- | --- |
| **Milestone** | **Approximate Hours: Jane Doe** | **Approximate Hours: John Doe** | **Start Date** | **End Date** |
| Implementation of the website's design | 6 | 12 | 5/1/20 | 6/15/20 |
| Complete 5 to 7 research guides | 20 | 2 | 5/1/20 | 6/15/20 |
| Finalize the website's import tools and administrator interface | 18 | 10 | 6/15/20 | 7/15/20 |
| Finish curating and organizing 2,500 citations for the database | 40 | 22 | 6/15/20 | 9/1/20 |
| Finish populating the website with all content and polish for launch | 18 | 9 | 9/15/20 | 10/14/20 |
| Prepare for soft launch website | 8 | 5 | 10/15/20 | 10/31/20 |
| Gather insights from selected users | 8 | 5 | 11/1/20 | 11/15/20 |

## Project Promotion

To promote the Media Wellness website to health sciences researchers, which includes academics, healthcare professionals, medical librarians, university students, and investigative journalists, we will draw upon the collective knowledge and resources available via my colleagues at the Center on Media and Child Health. The varied backgrounds of CMCH personnel (e.g. pediatrician, child psychiatrist, social scientist, child development specialist, research professional, and more) give us insight and access to a broad set of disciplines to target as audiences for this tool. Furthermore, our position within the adolescent medicine division of a world-class children’s hospital affords us numerous opportunities to reach students, personnel, and library professionals at Boston Children’s Hospital, Harvard Medical School, Harvard University, and the Harvard T. H. Chan School of Public Health. We will promote the website in a variety of ways, including, but not limited to:

* **Mainstream press:** Team members Jane and John Doe will regularly do interview requests with popular media outlets like the New York Times, the Wall Street Journal, and the Washington Post, as well as with niche technology news websites like Mashable and The Verge. If a relevant press request arises, they commit to discussing the Media Wellness website. Additionally, these news publishers often agree to link to our resources, which provides us with another outlet for linking to the Media Wellness website. You can see a full list of our press from the past 20 years here: [www.cmch.tv/press](http://www.cmch.tv/press)
* **Internal announcements**: Via the Division of Adolescent and Young Adult Medicine, the Boston Pharady Hospital intranet, the Pharady Children’s Hospital Medical Library, and the Pharady Medical School.
* **Annual meetings/conferences:** Society for Adolescent Health and Medicine Annual Meeting, International Communications Association Annual Conference, American Public Health Association Annual Meeting, Society for Research in Child Development Biennial Meeting, Medical Library Association Annual Meeting
* **LISTSERVS:** MEDLIB-L; CANMEDLIB; MAHSLIN; Commlist/ECREA; COGDEVSOC; AAP listserv
* **Scholarly literature**: Articles and/or abstracts about the database in journals from the library science and social sciences fields
* **Social Media:** Child-Computer Interaction Research Facebook group, Children and Media Professionals Facebook group, LinkedIn, Center on Media and Child Health’s various social media accounts (Facebook, Twitter, Instagram page)

## Continuation Plan

As a grant-funded research center, the Center of Excellence in Media for Youth is well-versed in the importance of diversified funding, and our work is supported through a combination of foundation grants, federal grants, corporate pledges, and individual donations. Once complete, the Media Health Effects website will be included in our annual strategic plan, allowing funding to be funneled from these sources to support our role in the maintenance of the website. Additionally, we will continue to seek funding during this grant period building from the success of a fully-functional website to build interest among potential funders and stakeholders. Lastly, the project outlined in this proposal requires significant upfront personnel time; however, once the website has launched, the costs associated with its long-term continuation and maintenance will drop dramatically. While websites are not static and we will regularly add new citations and research guides, the processes developed in this grant will help ensure that the effort and cost to maintain and update the website will be manageable.

# Evaluation

*This represents an evaluation plan that would receive the highest allowable score for a larger award. Smaller awards are not expected to be as robust; evaluation activities should be proportional to award amounts and institutional capacity. Evaluation plans can also be in narrative form as long as the criteria in the scorecard are met*.

### Logic Model

**Bright Country Healthcare Library: Services Across a Rural 4-Hospital Affiliation**

**Project Goal:** *To maintain and enhance the quality of health care in North Carolina by providing health professionals at the Bright Country Healthcare hospitals timely access to reliable health information resources*

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| --- | --- | --- | --- |
| **Inputs** | **Activities** | **Outputs** | **Outcome** |
| **Objective #1:** Assess the information needs of the staff at each of the Bright Country Healthcare hospitals involved in this outreach project. | | | |
| * Cloud Medical Library staff (Project Manager) * Affiliated Hospital staff * Focus group questions * NLM products (PubMed, LinkOut) NNLM Evaluation Office Needs Assessment Resources * Sign-in sheets | * Identify key informants at each location to attend focus group. * Conduct focus groups at the three Bright Country Healthcare locations: * Good Medical Center * Healthy Valley Hospital * ABC Valley Hospital * Educate key informants/staff attending focus groups about the types of information resources available, identify site liaisons. | * # of key informants identified * Report summarizing results of focus groups * # of key informants attending focus groups and % of those identified * List of information needs /resources /products * # of site liaisons identified by site | * Enhanced knowledge of information needs among stakeholders. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Inputs** | **Activities** | | **Outputs** | **Outcome** |
| **Objective#2:** Design and implement an electronic library to meet the needs of staff at the three outreach locations. | | | | |
| * Bright Medical Library staff (Project Manager) Finance Departments @ each location * CFO, Bright Country Healthcare * Report summarizing results of focus groups Library resource vendors Web designer | | * Review existing license agreements @ LRH * Identify agreements which can be expanded to include all 4 hospitals; identify those that are new * Negotiate license agreements Design library web site for partner sites, determine host location for Website | * Budget figures for library resources (based on a formula\*\* -for FY2018 budgets) * \*\*get from Bright Country Healthcare CFO * Electronic resource list Affiliation library website | * Increased access to library resources among affiliated hospitals |
| **Objective#3:** Provide PubMed training, utilizing LinkOut utility to display library’s holdings. | | | | |
| * Bright Medical Library staff * NLM staff * Key staff @ affiliated hospitals sign-in sheets Laptop, projector Vendors * Web page developer * Training evaluation forms available at <https://nnlm.gov/evaluation> * NNLM Training Activity online form | | * Operationalize LinkOut utility (work with NLM) * Publicize project, trainings Provide PubMed/LinkOut training * Provide training on use of newly created website * Provide trainings on licensed products * Administer training evaluation forms at <https://nnlm.gov/evaluation> * Submit NNLM Training Activity form online (after each training) | * Successful test of LinkOut utility * Logs of attendees at each location * Feedback re: trainings | * Increased understanding of and usage of knowledge resources available through the affiliation e-library * Increased information-seeking practices at outreach sites |

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| --- | --- | --- | --- |
| **Inputs** | **Activities** | **Outputs** | **Outcome** |
| **Objective#4:** Devise a project sustainability plan. | | | |
| * Survey instruments to distribute to recipients of the library services outreach * Final focus group dialogue | * Obtain feedback from initial, final focus groups * Feedback from quarterly site visits/training session * Develop Survey to use to obtain feedback from instances in which outreach librarian/project manager provided services remotely | * Feedback from initial, final focus groups, * Feedback from quarterly site visits/training session * Feedback from instances in which outreach librarian/project manager provided services remotely * Sustainability plan | Continuation of Bright Country Healthcare Library Services project across this rural 4-hospital affiliation into the future. |

**Project Evaluation - Process Assessment**

| **Process Questions** | **Information to collect** | **Methods / Tools** | **Responsibility** | **Timeline** |
| --- | --- | --- | --- | --- |
| 1 To what extent was the project implemented as planned? | * How well did the outreach sites cooperate in following the plan? * What factors increased or decreased the quality of delivery? | * Qualitative reporting to answer all questions * Fidelity Checklist | Project Manager | Quarterly updates |
| 2 To what extent were specific activities conducted as planned? | * Review Project Timeline to determine if activities followed the timeline | * Project timeline review to compare activities completed with planned activities * Note variances in following the timeline, perform an analysis to determine why | Project Manager | Quarterly updates |
| 3 How much activity did the project generate? | * How many health professionals attended the training sessions? * How many times did staff from outreach sites contact the LRH library staff? | * Attendance counts for training sessions from training sign-in sheets or # who logged in * Log of staff contacting LRH for assistance | Project Manager | * After each training session * Review log monthly |
| 4 How effective were the promotional activities in recruiting staff to attend training sessions? | * What strategies worked well to attract health professionals to attend the trainings? | Post-training survey item | Trainers | After each training session |
| 5 What situational factors in the environment or organizations affected project implementation? | * What influenced the ability to implement the project? * What influenced staff’s reactions to their ability to participate? | * Focus groups with key informants (either in person and/or phone and/or videoconference) * Survey of remote participants | Project manager | 6 weeks before project end date |

**Project Evaluation – Outcome Evaluation**

| **Outcome** | **Indicators** | **Data source** | **Data Collection Method** | | **Responsible** | **Timeline** |
| --- | --- | --- | --- | --- | --- | --- |
| 1 Enhanced knowledge of information needs among stakeholders | * Number of key informants and focus group participants reached for formative assessment * Report generated of key findings of interviews | Participants of focus group interviews and key informant interviews | Interviews | Project Manager | | 6 weeks after project start date |
| 2. Increased access to library resources among affiliated hospitals | * Number of library resources being offered on website * Number of LRH staff contacting BCH for assistance | * Website * Bright Country Hospital staff | * Record review * Log of LRH staff contacting BCH for assistance | Project Assistant | | 12 weeks after project initiation |
| 3 Increased understanding of and usage of knowledge resources available through the affiliation e-library | Number and percentage of outreach site staff accessing resources through the affiliation e-library | Outreach site staff | Survey | Project Manager | | 4 weeks before project close |
| 4 Increased information-seeking practices at outreach sites | Number and percentage of participants at outreach site who report information-seeking practices | Outreach site staff | Survey | Project Manager | | 2 weeks before project close |
| 5 Continuation of Bright Country Healthcare Library Services project across this rural 4-hospital affiliation into the future | * Number of findings from focus group discussions and surveys incorporated into sustainability plan for BCH * Resources allocated to sustainability plan | * Focus group discussions reports and surveys * Hospital budget | * Survey, focus group discussions * Budget review | Project Assistant | | End of project |

**Data Analysis**:

Participant surveys will be designed and administered using REDCap. Data will be downloaded from REDCap and analyzed by the Program Manager using SPSS version 26.0 for univariate analysis. Qualitative data will be collected using standardized Key Informant Questionnaires and Focus Group Discussion Guides. Qualitative data will be analyzed by the Program Manager using Atlas Ti.

**Data Use and Dissemination of Results**:

Needs assessment findings will be used to inform the development of the trainings and resources selected for use on the resource website. Key informants and focus group participants will receive electronic copies of the needs assessment. The needs assessment report and sustainability plan will be disseminated to BCH leadership electronically. Program results and strategies for sustainability will be presented in the form of a powerpoint presentation to mid-level and senior managers at the conclusion of the project.

## Project Staff

Two Center of Excellence in Media for Youth team members will work on Media Health Effects: Jane Doe, Librarian and John Doe, Web Developer and UX Designer. Jane has over 9 years of experience in health sciences librarianship with a background in media and technology studies. John is a meticulous web developer with over 18 years of experience dedicating his career to designing web products and services for a variety of non-profits. Both have extensive experience writing, editing, and developing a wide variety of content for different audiences, and they have successfully co-managed grant-funded projects in the past. For more information on project staff qualifications, please see Appendix 1: Project Staff CVs.

As Jane is an embedded librarian withing the Pharady Medical System, she has the supportive partnerships of the team of Center of Excellence in Media for Youth, Division of Adolescent and Young Adult Medicine, Pharday Children’s Hospital, Pharady Medical School, and the ABC School of Public Health. With the assets of these institutions, she has the needed support to complete this project and the reach to disseminate our final product to a large and diverse audience. Jane and John will also be able to use editing equipment that is available from the Pharady Medical School to complete this project.

## Diversity, Equity, and Inclusion

*This is an example of a project that highlights an underserved/underrepresented population. As noted in the scorecard, to receive DEI points the applicant can also identify inequities and disparities and suggest appropriate approaches to enhance diversity, equity, and inclusion.*

###### Goals and Objectives of Healthy Haitian-Americans Project:

* Engage a team of key stakeholders in the Hatian-American community to guide the planning and implementation of the project and ensure resources are culturally responsive and reflective of community needs
* Visit 20 different businesses, high schools, community and faith-based organizations, that serve the Haitian-American population providing culturally-specific health education and resources.
* Refer to the implementation section of this proposal for further details
* Provide health education to the Haitian-American communities regarding:
* Behaviors that lead to hypertension (e.g diet, lack of exercise)
* Importance of medication adherence in relation to hypertension management
* Importance of obesity prevention and management
* Stroke awareness, management, and medication adherence through short video with storyline of Haitian patient refusing rehabilitation services (refer to implementation section for further details)
* Assess information retention by using a post-presentation survey
* Raise awareness about Haitian Creole health information available on medlineplus.gov
* Provide medlineplus.gov materials at each tour appointment
* Provide step-by-step written instructions on how to access medlineplus.gov on a smartphone and/or desktop (handouts will be available in French, and Haitian Creole language)
* Promote HHA Project by building continued collaborations and new connections with our Haitian community
* Provide health information to the Haitian community via this tour
* Provide health tour presentations in the Haitian Creole language
* Identify ways we can continue to build collaborative work post completion of this project