Subaward Activity Report Template

This template will help you collect the information needed to enter an Activity Report into the NNLM online reporting system.

Submit one activity per report.

Fields marked with a red asterisk \* are required fields.

Documentation for completing the Subaward Activity Report form is located on our [Grant Reporting Guide](https://www.nnlm.gov/funding/reporting)

# Activity Lead and Partners

## Your Information as Activity Lead

This section will be auto-populated. If you need to make a change to this section and cannot, email the Region of NNLM you received funding from.

First Name

Last Name

Email

Organization Name

## Activity Partners

**Identify other organizations collaborating on this activity. For exhibits/health fairs, enter the name of the Organization. Example: Idaho State Dental Association

### Select a Partner

This is a data validated field: in the online form you can type in the name of any partner organizations and if they are already in the system, they will load. Otherwise, you can create a new partner organization here using the second option below.

### Organization Name

[ ]  Add additional Activity Partner?

[ ]  Partner not in the NNLM directory

# Activity Details

Please provide us with the activity’s main identifiers or characteristics

### Activity Type \*

Specify the type of activity conducted **(select only one option)**


#### Awareness and Promotion

[ ]  Demos

[ ]  Exhibits/Health Fairs

[ ]  Poster Sessions

[ ]  Other Promotional Activities

#### Career Development and Training

[ ]  Career Development

[ ]  Classes/Courses/Trainings/Workshops

[ ]  Lectures

[ ]  Panels

[ ]  Presentations

[ ]  Symposia

[ ]  Webinars

#### Persistent User Engagement & Partnerships

[ ]  Focus Groups

[ ]  Site Visits

[ ]  Technology

[ ]  User Feedback/Needs Assessment

### Activity Title, Exhibit/Health Fair Name \*

**Enter a concise, meaningful title for the activity with an external, public audience in mind. Examples:

* **Class/Course/Training/Workshop name:** Beyond an Apple a Day: Providing Consumer Health Information at Your Library
* **Exhibit/Health Fair name:** Annual Meeting & Expo

### Activity Description? \*

**Describe the activity. Include specifics about how it was conducted and its impact.

### Activity Start Date? \*

**Enter the start date for the activity.

### Activity End Date? \*

**Enter the end date for the activity. Enter the same date in both fields for an activity that begins and ends on the same day.

### Activity was Conducted? \*

**Specify whether the activity was conducted “Online” or “In Person.” Only select “Online” for activities with no in-person component. For hybrid activities which have online and in-person components, select In Person.

[ ] Online

[ ] In Person

### Training was Provided\*

**Specify whether the activity included providing training for attendees.

[ ] Yes

[ ] No

### Number Reached? \*

Report the number who attended/participated in a substantial part (at least 30%) of the activity. Do not report the number who registered for the activity.



### Activity Notes

**Use this field to record any notes your Region, Office, or Center wishes to document about the activity.

## Activity Address

**Address must be entered with complete street address so that the activity can be precisely mapped.

Example:

6707 Democracy Blvd.

Two Democracy Plaza, Suite 510

Bethesda

United States

Maryland

20817

Montgomery

Address 1 \*

Address 2

City \*

Country\*

State/District\*

ZIP Code \*

County/District \*

# NLM’s strategic objectives, core functions, and products

This section pertains to how your activity relates to the NNLM mission

### NLM Products

Select products that were taught, demoed, or featured in the activity; limit of 5.

[ ]  Assembly

[ ]  BLAST

[ ]   ChemID Plus

[ ]   ClinicalTrials.gov

[ ]   ClinVar

[ ]   Collections

[ ]   DailyMed

[ ]   dbGap

[ ]   dbSNP

[ ]   DOCLINE

[ ]   Drug Information Portal

[ ]   Emergency Access Initiative

[ ]   Exhibitions

[ ]   GenBank

[ ]   Gene

[ ]   Genome

[ ]   HMD Traveling Exhibitions

[ ]   IndexCat

[ ]   Library LinkOut

[ ]   LitCovid

[ ]   LocatorPlus

[ ]   MedGen

[ ]   MedlinePlus

[ ]   MedlinePlus Connect

[ ]   MeSH

[ ]   Nucleotide

[ ]   Open-I Multimedia Search Engine (Open-i)

[ ]   Protein

[ ]   PubChem

[ ]   PubMed

[ ]   PubMed Central

[ ]   RxNorm

[ ]   SNOMED CT

[ ]   SRA

[ ]   Wireless Information System for Emergency Responders (WISER)

[ ]   Other

### Additional Activity Content?

Select content (other than NLM Products) that was taught, demoed, or featured in the activity; no limit.

[ ]   All of Us

[ ]   Assessment & Evaluation

[ ]   Citizen Science

[ ]   Clinical Resources

[ ]   Consumer Health Resources

[ ]   Data Management

[ ]   Data Science

[ ]   Digital Literacy

[ ]   Disasters & Emergencies

[ ]   Electronic Health Information Resources

[ ]   Evaluating Health Information Resources/Websites

[ ]   Funding

[ ]   Grant & Proposal Writing

[ ]   Health Literacy

[ ]   HHS Resources

[ ]   HIV/AIDS

[ ]    NIH Resources

[ ]   NNLM

[ ]   Opioid Use Disorder/Pain Management

[ ]   Public Health Resources

[ ]   Technology Awareness

[ ]   Other

### Types of Organizations Associated with the Activity \*

Identify organizations for the following:

1. the individual who conducted the activity
2. location where activity was conducted
3. entities sponsoring the activity

#### Academic Institution

[ ]   College or University (excluding community colleges)

[ ]   Community College

[ ]   K-12

[ ]   Vocational or Training Program

[ ]   Other Academic Institution

#### Library

[ ]   Academic Health Sciences Library (Higher Education)

[ ]   College or University Library (excluding community colleges)

[ ]   Community College Library

[ ]   Hospital Library

[ ]   K-12 Library

[ ]   Public Library

[ ]   Vocational or Training Program Library

[ ]   Other Library

#### Organization

[ ]   Community Based Organization

[ ]   Faith Based or Other Religious Organization

[ ]   HIV Services

[ ]   Other Organization

#### Association

[ ]   Professional Society

[ ]   Other Association

#### Government

[ ]   Department of Public Health

[ ]   Federal Government

[ ]   Local Government

[ ]   Tribal Government

[ ]   Other Government Agency/Initiative

#### Health/Healthcare

[ ]   Hospital

[ ]   Medical Office/Clinic

[ ]   Other Health/Healthcare

#### Other

[ ]   Other Organization Type Not Listed

#### Unknown

[ ]   Unknown Organization Type

[ ]   Public Health Organization (Non-Government)

[ ]   State or County/Regional Government

# Demographics

Specify the demographic group(s) this activity planned to reach/benefit. If no specific demographic group(s) were identified during planning, leave this field blank.

Do not list all demographic groups which may have attended, participated, or benefited from the activity; only report groups that were identified during planning.

#### Age Group

[ ]  Children (0-12 yrs.)

[ ]  Teens (13-18 yrs.)

[ ]  Adults (19-64 yrs.)

[ ]  Seniors (65+ yrs.)

#### Sexual & Gender Minorities

[ ]  LGBTQIA+

[ ]  Women

#### Geographic Type

[ ]  International

[ ]  Medically Underserved Areas/Populations

[ ]   Rural

[ ]  Suburban

[ ]  Urban

#### Issues & Interests

[ ]  Behavioral/Social Determinants of Health

[ ]  HIV/AIDS

[ ]   Maternal Health

[ ]  NIH Helping to End Addiction Long-Term (HEAL) Initiative

[ ]  Opioids

[ ]  Socioeconomically Disadvantaged Populations

[ ]  Vaping

#### Race & Ethnicity

[ ]  Alaska Natives

[ ]   American Indians

[ ]  Asians/Asian Americans

[ ]  Blacks/African Americans

[ ]  Hispanics/Latin Americans

[ ]   Native Hawaiians

[ ]   Other Pacific Islanders

# Role of Activity Participants? \*

Identify roles of attendees/followers/participants/subscribers who benefited from/were reached by this activity

 [ ]  Data Scientist

 [ ]  Educator - College & Post-grad

 [ ]  Educator - K-12

 [ ]  Emergency Preparedness and First Responder

 [ ]  General Public

 [ ]  Government Staff - Federal

 [ ]  Government Staff - Local & Municipal

 [ ]  Government Staff - State

 [ ]  Government Staff - Tribal

 [ ]  Health Professional

 [ ]  Historian

 [ ]  Library or Information Professional

 [ ]  Library Staff - Community College

 [ ]  Library Staff - Health Sciences

 [ ]  Library Staff - Public

 [ ]  Library Staff - Other

 [ ]  Organization Staff - Community Based

 [ ]  Organization Staff - Faith Based

 [ ]  Public Health Professional

 [ ]  Researcher

 [ ]  Student - College & Post-grad

 [ ]  Student - K-12

 [ ]  Other

# Evaluation

## What were the goals of this activity in terms of the impact on its participants? \*

**Select all the activity aimed to address.

#### Awareness

[ ]   Awareness of NLM

[ ]   Awareness of NLM Resources

[ ]   Awareness of NLM programs and services

#### Career Impact

[ ]   Professional performance (ability to perform novel tasks at work, or ability to perform old tasks more efficiently)

[ ]   Career growth and advancement

#### Community Building

[ ]   Opportunity for knowledge exchange and collaboration

#### Health Behavior

[ ]   Health behavior (e.g., wellness habits)

#### Knowledge & Skills

[ ]   General information evaluation skills

[ ]   General information seeking skills

[ ]   Professional data services skills

[ ]   Professional evidence-based practice & research skills

[ ]   Professional information management skills

[ ]   Proficiency with specific NLM resources or tools (ability to perform specific tasks beyond the awareness of the existence of the resources)

[ ]   Specific health-related content knowledge

[ ]   Technology and Internet proficiency (skills impacting the digital divide)

#### Self-Efficacy, Values, & Trust

[ ]   Self-efficacy in interacting with health information and health information resources (feeling confident about one’s ability to use resources and find information)

[ ]   Perception of health information/health information access as valuable

[ ]   Trust in NLM as a reliable health information source

[ ]   Trust in NLM as a partner in programs, activities, and initiatives

#### Use of NLM Resources

[ ]   Use of NLM resources in personal life (e.g., to look up information about a personal health concern)

[ ]   Use of NLM resources in professional settings (e.g., in the context of working with clients or patients, or in research)

[ ]   Other

## What participant-level survey data were collected? \*

[ ]   NNLM training survey

[ ]   NNLM outreach activity survey

[ ]   Other

[ ]   None

## Achievements \*

Evaluation data must be accurate, complete, and written formally, in third person. Write achievements so the text could be copied into a formal report, or included in publicity (blog, news item) with little or no modification. The achievements should be able to stand alone in describing the activity and its outcomes.



## Was participant data collected?

[ ]  Yes

[ ]  No

On the online form, selecting “Yes” will allow you to enter participant data. If you have used the Participant Information Template, this will be helpful for filling out this section.

At the end of the online form, you will have the option to save as a draft, or submit the report.