	Act	ivity Tracker
Project Information		Contact Information
Project Name		
Funded Amount		Project Lead
Project Lead Organization		Project Partners
Project Workspace Link		
Time Zone		NAPC Award Liaison

About this Dashboard					
Dashboard Tabs	Activity Tracker Fields				
Project Info (this tab!) - General information and links					
Pre-Activity Tracker: Share details about your upcoming activities.	■ACtivity Name  ■Activity Description - Include how All of Us will be involved.  ■Start and End Dates  ■Start and End Time and Time Zone (ex. 3 PM PT)  *Online, In-person, or Hybrid?  ■Activity Location Name and Address  ■Activity Partner Organization(s)  *Intended Demographics - Who are you intending to reach?  ■Activity Language(s)				
Post-Activity Tracker: Report on event metrics and any accomplishments during your activities. This should be updated no later than 2 weeks after an activity is completed.	Number of People Reached Nathievements Challenges Blow was All of Us involved in this activity? Did you upload All of Us Survey data in your Project Workspace? If no All of Us survey data available, please explain why not.				

Important Links - add more as needed!						
Monthly Progress Update Form	NNLM Technology Report Form					
NAPC Funded Projects Guide	Invoice Template					
Engagement Resources Library						
NNLM All of Us website						

Contact Information						
Name	Email					
TBD						

NAPC Staff Use Only
Confluence Project Profile Link: [URL]

This dashboard is adapted from NNLM's Middle Atlantic Regional Medical Library (2016-2021).

This project is funded by the Notional Library of Medicine, Notional Institutes of Health. Department of Health and Human Services, under Cooperative Agreement Number UZ4LM014070 with the University of lowe, Hardin Library for the Health Sciences, and the University of Pittsburgh, Health Sciences Library System.

Template last updated: 11 September 2023

	Pre-event Activity Information			
Project Name				
Organization				
Have an upcoming public event or staff training for your project? Please share details here as soon as they're available! This information will help us promote your work and inform final project reporting, which is available to the NIH and the All of Us Research Program. Add more rows as needed.				

Activity Name	Activity Description - 2-3 sentences	Start Date	End Date	Start Time and	End Time	Online, In-person,	or Activity	Location Street	Location City	Location	Location State	Location 7ID	Activity Partner Organization(s)	Intended Demographics (Race, Age,	Activity Language(s) (English
Activity Name	describing planned activity. Include how		Liid Date	Time Zone (ex. 3		Hybrid?	Location Name		Location City	County		Code	Activity Farther Organization(s)	Income, Gender, Geography, People	
						Hybria:	Location Ivallie	Address		County		code			
	All of Us will be involved.			PM PT)										with Disabilities, Other) - who are you	
														intending to reach with this activity?	Sign Language, Other-describe)
Event 1		Date 1		Time 1		Select one									
Event 2		Date 2		Time 2		Select one									
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Post-event Activity Information					
Project Name					
Organization					
Share the results	and outcomes of your project activities here! Please upload any evaluation data/results to your Evaluation folder in the Project Workspace. Add more rows as needed.				

Activity Name	Date of event
Event 1	Date 1
Event 2	Date 2

Number of People	Achievements - What went	Challenges - What barriers were there to complete	How was All of Us involved in this activity?	Did you upload All of Us Survey data in	If no All of Us survey data available
Reached	well or what did you	the activity or make it successful, if any?	(Print materials, Digital materials, Presentation,	your Project Workspace? Provide this	please explain why not.
	accomplish in this activity?		Guest Speaker, Tabling, Other-describe)	information no later than 2 weeks after	
	Write achievements so the			the event.	
	text could be copied into a				
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## **Awards Monthly Progress Update**Preview Only

NNLM All of Us Program Center

Fill out the following form to share with the NNLM All of Us Program Center (NAPC) any significant progress, challenges, or changes to your funded project. Your project team should submit an update by the 15th of each month.

This is a required reporting component for your award and should take no more than 5-10 minutes.

If any questions or issues come up, you can always contact your assigned NAPC liaison or email us at LIB-NAPCengage@uiowa.edu.

- Name
- Email
- Organization
- Month of Update
- What significant progress has your project made since last month?
- What support can NAPC provide to move your project forward?
- What else would you like to share or ask about your project to the NAPC?
- Have you updated your Activity Tracker with any pre or post-event information since
  your last progress update? Pre-event information must be shared as soon as possible,
  and post-event information must be shared no later than 2 weeks after the last event.
  - o Yes, we have updated the Activity Tracker since last month.
  - No, but we will update the Activity Tracker.
  - No, we do not have any new events or trainings scheduled.
  - Other, please describe.
- Did you submit a project invoice this month? All invoices must be sent to our office email (lib-NAPCengage@uiowa.edu) with your award liaison cc'd.
  - Yes, I did submit a project invoice this month to my award liaison and the NAPC Engagement office.
  - o No, but I will send a project invoice this month.
  - o No, I will not submit an invoice this month.
  - I am not sure.



### **Final Retrospective**

NNLM All of Us Program Center (NAPC): Partnership Project Award

**Purpose**: The Final Retrospective is a brief, evidence-focused reflection on the impact of your project activities in your community. Parts of your Retrospective will also be shared in a publicly available Final Report, to highlight your activities and impact.

**Instructions**: Use the following prompts to reflect on your project. Share lessons learned, obstacles encountered, planned partnerships, promotional materials, developed web resources, and more. You may want to refer to your activity tracker and evaluation results to respond to these questions.

respond to these questions.					
Organization Name					
Project Goal and Objectives  How did your project activities meet your proposed project goal and objectives?  Word limit: 250					

<b>Project Impact</b> Describe what other potential impacts your project had in your community. How did your project support <i>All of Us</i> enrollment and retention? Word Limit: 250	
Barriers and Challenges	
What major issues or barriers did you encounter while designing, implementing, and/or evaluating your project? What challenges did you have in supporting <i>All of Us</i> enrollment a retention? Word Limit: 250	ınd



#### **Building on Project Results**

findings. Word	ot, or revise this wo I Limit: 250	rk in your commur	nity based on your	project's evaluation
What recomm	Recomme endations would you ity? Word Limit: 25	ou have for someo	ne who wants to co	onduct a similar project ir

# **Created Online Resources** Please list URLs to project resource material that are publicly available (e.g., promotional material, slide presentations, websites.) If you do not have URLs, please add materials to your Project Workspace or share them directly with your award liaison. All of Us Partnership Experience Tell us about your experience partnering with your local All of Us healthcare provider organization (HPO). How likely would you be willing to partner with All of Us again in the future? This response will not be shared with your All of Us partner and may inform future NAPC partnership management strategies.

Funding Acknowledgement

This award is funded by the National Library of Medicine, National Institutes of Health, Department of Health and Human Services, under Cooperative Agreement Number U24LM014070 with the University of Iowa, Hardin Library for the Health Sciences and University of Pittsburgh, Health Sciences Library System.

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