Hospital Library Awards: Demonstrating the Value of the Hospital Library
Proposal Instructions

I. Statement of Work
Your proposal should contain the following information as appropriate and as it applies to your project. Some of this information will also be included in the project table (Appendix C).

A. The Hospital
Describe the hospital environment. Consider including the following:
- Mission
- Size
- Specialties
- Health information resources currently available
- Health information services currently available

B. Question
What question or problem does your project address? Include:
- Why this question/problem exists
- How you determined that the problem exists
- How addressing this question/problem will help achieve the library’s long range goals

C. Objectives
What are the objectives of your project? Include the following information as applicable:
- Who will benefit as a result of your project?
- What will change as a result of your project?
- How will the situation change as a result of your project?
- How will this change be measured?
- When will the situation change or over what time period will the situation change?

D. Methodology/Action Plan
How will you accomplish the objectives of your project?
- For each objective please provide a methodology/action plan for reaching the objective.
Include a timeline for your project.

E. Personnel
Describe the people who will be carrying out the project. Provide:
- Name
- Title
- Role in carrying out the project
- Qualifications for their project responsibilities
• Time to be spent on the project for each person named as a percentage of a 40 hour a week (Ex: 20 hours a week would be 50% time)
• Provide resume/CV for professional personnel

If you will be hiring someone, include the job description and requirements for the job.

F. Outcome
Discuss how you will know whether your project is a success.
• How will you know whether your objectives have been achieved?
• How will you bring the project and results of the project to the attention of your administrator or others who have a stake in the success of your project?

II. Budget and Budget Narrative
Complete the budget form Appendix D. Indirect costs (IDC), also known as Overhead, is allowable. However, the total on your budget sheet including IDC cannot exceed $5,000. Librarians are encouraged to discuss wavering or reducing the IDC with their institution. Furniture and food cannot be included in your request.

A budget narrative should be included providing a brief explanation of each budget item.

III. Copies to be submitted
Submit one original of the proposal. An electronic version (Microsoft Word) must also be e-mailed to the NN/LM MidContinental Region.
Appendix B Cover Sheet

Name of Principal Investigator:

Name of Institution:

Address:

Phone number:

Fax number:

Email Address:

LIBID:

Date:

Abstract: (One paragraph summary describing the project.)
**Appendix C Project Table**
Complete the table, providing information appropriate for your proposed project. Add as many rows as needed.

**Organization:**

<table>
<thead>
<tr>
<th>Question/Problem</th>
<th>Objective</th>
<th>Methodology/Action Plan</th>
<th>Outcome</th>
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<tbody>
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<td>Outcome</td>
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<tr>
<td>The library is not able to send or receive ILL’s in digital format and this slows down delivery.</td>
<td>Install a system that will receive digital ILLs.</td>
<td>Work with IT department to open needed ports</td>
<td>Needed ports are open for use of Ariel</td>
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<tr>
<td></td>
<td></td>
<td>Purchase Ariel Receive software</td>
<td>Software is purchased &amp; received</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Purchase hardware</td>
<td>Hardware is purchased &amp; received</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Install software</td>
<td>Ariel is able to receive &amp; send documents</td>
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<td></td>
<td>Begin digital ILL service</td>
<td>Change DOCLINE institutional record to indicate new capability</td>
<td>DOCLINE requests are filled digitally</td>
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<td></td>
<td>Promote new service to hospital staff</td>
<td>Flyers are produced</td>
<td>For 50% of ILL requests received, the staff members ask that the document be sent to their workstation</td>
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<td>New service is announced in staff meeting</td>
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<td>Notices are attached to articles announcing new service</td>
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<td></td>
<td>ILL delivery is improved</td>
<td>Collect feedback from hospital staff on benefits of service</td>
<td>Hospital staff indicate that they find the digital delivery of ILL’s to be an improved/faster service</td>
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<tr>
<td>Action</td>
<td>Result</td>
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<td>----------------------------------------------------------------------</td>
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<tr>
<td>Library collects statistics on the time it takes to deliver ILLs to hospital staff</td>
<td>Statistics indicate that digital ILLs reduce the delivery time</td>
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</tbody>
</table>
| Meet with hospital administrator to report and discuss benefits of new service | Hospital administrator better understands the value of the library. Increased understanding is demonstrated by the following actions (these are examples only):  
  • Acknowledges value of new service, announces new service at senior staff meeting  
  • Compliments library and asks what other services can be improved  
  • Appoints librarian to key committee(s) |
Appendix D

Organization:
Date Submitted:
Period Covered:

<table>
<thead>
<tr>
<th>EXPENDITURE CATEGORY</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROFESSIONAL PERSONNEL</td>
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<tr>
<td>SUPPORT PERSONNEL</td>
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<tr>
<td>FRINGE BENEFITS</td>
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<tr>
<td>EQUIPMENT</td>
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<td>SUPPLIES</td>
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<td>TRAVEL</td>
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<tr>
<td>COMMUNICATIONS</td>
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<tr>
<td>REPRODUCTION</td>
<td></td>
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<tr>
<td>CONSULTANTS</td>
<td></td>
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<tr>
<td>OTHER COSTS (SPECIFY)</td>
<td></td>
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<tr>
<td>TOTAL DIRECT COST</td>
<td></td>
</tr>
</tbody>
</table>

[MODIFIED TOTAL DIRECT COST]

IDC/OVERHEAD (___% * Modified Total Direct Cost)

TOTAL

NOTE: The above categories are examples only and are not meant to be all-inclusive.
Modified Total Direct Cost = Total Direct Cost – Equipment
Total = Total Direct Cost + IDC
Appendix A
Checklist
The proposal contents should be submitted in the following order. This checklist is for your use only and does not need to be submitted with your proposal

☐ Cover Sheet (Appendix B)

☐ Statement of Work
  ☐ Narrative
  ☐ Project Table (Appendix C)
  ☐ Timeline

☐ Budget (Appendix D)

☐ Budget Narrative

☐ Resumes/CV’s for professional personnel

☐ Letters of Support and Supporting Material

Please send one original and one electronic (Word) copy of your proposal to:

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NN/LM MidContinental Region
Spencer S. Eccles Health Sciences Library
University of Utah
10 North 1900 East Bldg 589
Salt Lake City, UT 84112-5890
chamasu@RML4.UTAH.EDU

Deadline: July 30, 2004 5pm MDT