



UNIVERSAL HEALTH CARE SYMBOLS IMPLEMENTATION PROJECT

Developing Best Practice Standards for Universal Health Care Symbols:
Supporting Implementation in Innovator Health Facilities

REQUEST FOR APPLICATION

**Hablamos Juntos seeks innovator health facilities
to implement symbol-based signage**



May 10, 2008

*A project funded by the Pioneer Portfolio of the Robert Wood Johnson Foundation
and administered by UCSF-Fresno Medical Education and Research Program*

TABLE OF CONTENTS

SECTION I: INTRODUCTION	3
SECTION II: OBJECTIVE OF RFA AND TIMELINE	4
RFA Objective	
Who Should Apply	
Timeline	
SECTION III: INNOVATOR SITE CRITERIA, PARTICIPATION REQUIREMENTS FOR FACILITIES SELECTED AND PROJECT TIMELINE	5
Innovator Site Criteria	
Benefits of Participation	
Participation Requirements for facilities selected	
Proposed Project Activities and Timeline	
SECTION IV: SUBMISSION PROCEDURE AND QUESTIONS.....	10
On-Line Submission, Mailing Address, and Deadline	
Questions Regarding RFA	
Informational Conference Call	
SECTION V: SUBMISSION FORMAT AND CONTENTS.....	11
Application Letter	
Electronic Application	
Attachments	
SECTION VI: SELECTION CRITERIA AND SELECTION PROCESS	12
SECTION VII: CONDITIONS OF RFA AND CONTRACTUAL INTENT.....	13
SAMPLE APPLICATION	14

REQUEST FOR APPLICATION

Hablamos Juntos seeks innovator health facilities to implement symbol-based signage

RFA Released: May 1, 2008

Deadline for Written Inquiries: May 30, 2008

Informational Conference Call: June 3, 2008

On Line Application Deadline: July 1, 2008

SECTION I: INTRODUCTION

"Hablamos Juntos" translates from Spanish to English as "We speak together." *Hablamos Juntos: Improving Patient-Provider Communication for Latinos* is a national program of the Robert Wood Johnson Foundation (RWJF) intended to eliminate language barriers to health care. One objective of *Hablamos Juntos* is to develop easy-to-understand ways for patients with limited English ability to navigate through health care facilities. This Request for Application (RFA) seeks health facilities, interested in using graphic symbols, pictograms and images as well as traditional signage methods to implement wayfinding programs.¹

Hablamos Juntos, in an ongoing partnership with the Society for Environmental and Graphic Design² (SEGD), and using one of the most comprehensive symbol design efforts ever successfully tested and produced known as the **Universal Health Care Symbols** (UHCS).³ Universal symbols are pictograms or images that consistently enable logical associations that help communication across languages and cultures. In our research, symbols were found to be an effective alternative to costly multilingual signs. This developmental effort was carried out with funding from RWJF's Pioneer Portfolio, which supports innovative ideas and projects that may lead to important breakthroughs in the future of health and health care. The Pioneer Portfolio has renewed its support for this second phase of the initiative, aimed at encouraging widespread adoption of these symbols by health facilities serving populations unable to read or with limited English proficiency (LEP).

Through this RFA, *Hablamos Juntos Signs That Work* (STW) initiative seeks to identify four health facilities ready to implement symbols based signage. A team of leading national experts in symbols and wayfinding signage will support selected facilities with technical assistance and evaluation support for development of award-winning wayfinding programs using graphic symbols. Implementation is also supported by the development and testing of additional symbols needed to complete wayfinding systems in selected facilities. Facilities selected will be rewarded with recognition as innovator sites with best practice application of symbols as a practical solution in health care signage for multilingual and literacy challenged populations.

For more information on *Hablamos Juntos* and on-line application please see *Signs That Work* at: www.hablamosjuntos.org

¹ *What do we mean by wayfinding?* Wayfinding is the method for providing consistent information in overt and obvious ways, to guide a person to their destination. This information can include maps and signs; overt clues in the architecture and interior design of a facility; or through the use of color, pattern and texture. Advanced wayfinding systems can also be effective information systems that support organizational identity and branding strategies.

² SEGD is an international non-profit educational organization providing resources for design specialists in the field of environmental graphic design, architecture, and landscape, interior, and industrial design. Members are leading designers of directional and attraction sign systems, destination graphics, identity programs, exhibits, and themed environments.

³ This symbols system (posters and print ready art) are available at no cost from *Hablamos Juntos* and SEGD websites. (<http://www.hablamosjuntos.org/signage/default.index.asp>)

SECTION II: RFA OBJECTIVE AND TIMELINE

A. RFA OBJECTIVE

The objective of this RFA is to identify up to four (4) health facilities meeting selection criteria and demonstrating readiness to implement symbols based signage and wayfinding systems. This RFA seeks volunteer inpatient or outpatient health facilities to demonstrate best practice application of symbols in wayfinding programs. Innovator facilities will incorporate symbols as a wayfinding tool in health care facilities serving diverse language communities and contribute to the development of guidelines for successful application of symbols. Participation is voluntary and at the facility's own expense. No compensation is provided.

Facilities selected as innovator sites will have a unique opportunity to develop and test implementation tools and best practices to design wayfinding systems for patients unable to read word signs in English. Through this project, selected facilities will also share implementation experiences and results (key decisions, resource requirements and technical challenges faced and how these are overcome); setting the standard for an innovative approach to signage. An on-line photo gallery will document implementation progress and final results with before and after signage applications to stimulate interest, enable widespread replication and promote adoption of symbols as a solution for multilingual environments. Leading design experts will provide technical support using best practice theories for graphic symbols and evaluation to contribute to the knowledge base needed for effective implementation and development of best practice standards for health care facilities.

The project aims to accomplish three main objectives:

1. Increase the collection of UHC Symbols adding 20-30 new symbols.
2. Support implementation of symbols based wayfinding systems using evidenced based practices in as many as four health facilities.
3. Document the implementation experience, produce tested best practices for health care facilities and promote awareness of symbols based wayfinding as a solution for multilingual environments

B. WHO SHOULD APPLY

Health facilities interested in symbols with advanced preparations for implementing new wayfinding systems are encouraged to apply. The application can be made for facilities ranging from small treatment centers and clinics, single building health care facilities and facilities part of multi-building campus. Wayfinding systems proposed can be for expansion/replacement facilities (wing or building inside a large campus) and for new and old facilities. Proposed project scopes do not need to be for an entire health care campus, or an entire facility.

C. RFA TIMELINE

RFA Release: May 10, 2008

Written Inquiry Deadline: May 30, 2008

Informational Conference Call: June 3, 2008

On-Line Application Deadline: July 1, 2008

Applications submitted on-line on or before July 1, 2008 will be considered. At the discretion of the National Program Office (NPO) late or incomplete applications will be rejected without review.

SECTION III: INNOVATOR SITE CRITERIA, PARTICIPATION REQUIREMENTS FOR SELECTED FACILITIES AND PROJECT TIMELINE

A. INNOVATOR SITE CRITERIA

Any health facilities serving diverse language communities with advanced preparations for launching a new wayfinding system and interest in using symbols can apply. Facilities can be single level or multi-story clinics, specialized treatment centers, community health centers, hospitals and full service medical centers located on a multi-building campus. Proposed projects may include a single one floor or multi story facility or a campus with multiple single floor or multi-story facilities. Wayfinding proposed systems can be for new expansion or replacement of signage for a wing, single facility or building inside a large campus. They can be new and/or old facilities.

A multilingual consumer base and advanced preparations for launching a signage initiative are minimum required selection criteria.

1. **Multi-Lingual Consumer Base (Required)** Facilities selected must serve patient populations that are limited English speaking from a minimum of four languages minorities, not including English.
2. **Readiness and Advanced Preparation (Required)** Facilities selected must demonstrate a state of readiness that includes a defined project with approved funding for a design phase and reasonable expectations for approval of an implementation budget. Executive champion and internal project leadership must be identified. Design staff or consultant may or may not be engaged at the time of application.
3. **Facility Size** A diverse set of facilities located throughout the country will be selected. Facility size will range from single or multi-story specialty treatment centers, community health centers, hospitals and full service medical centers on a multi-building campus.
4. **Signage Project Scope** Facilities with a variety of signage needs will be selected. Proposed project may include a single one floor or multi story facility or a campus with multiple single floor or multi story facilities. Wayfinding systems proposed can be for new expansion or replacement signage for a wing, single facility or building inside a large campus. They can be new and/or old facilities.
5. **Project Designer** Facilities with interested and cooperative design staff or consultants will be selected. The role of the designer is critical to meeting project objectives; facilities committed to engaging designers with a scope of work that includes full participation in this initiative will be selected. Project designers should be on board no later than November 2008.

B. BENEFITS OF PARTICIPATION

Participation as an innovator site will require a bit of work on the part of any facility selected, but the benefits are great. Benefits include:

1. **Recognition** Only four facilities will be selected to participate in this national initiative using tested health symbols as a new and innovative way to meet the signage needs of multilingual and literacy challenged populations. The products and learning from this project will be disseminated broadly among architects and environmental graphic designers as well as healthcare facility leaders.
2. **Wayfinding Audit** A pre and post design evaluation proposed for selected facilities enables the development of an evidence based design. A pre-design audit generates a comprehensive baseline of the wayfinding system in place to inform design of a new system. Results will identify strengths and weaknesses and how well the current signage meets the multilingual needs of the patient population served. Post-design evaluation enables testing of proposed solutions, prior to the commitment of implementation resources, to achieve effective design for multilingual health environments.

3. **Tested Wayfinding Solutions** With design testing and technical assistance from a nationally recognized team of graphic design and facilities experts, innovator sites will gain evidence based customized solutions to resolve wayfinding challenges prior to implementation.
4. **Leading Edge Wayfinding Systems** With globalization trends, symbols usage is fast becoming a part of public information systems for multi-lingual environments. Selected facilities will be among the nation's first to implement symbols based wayfinding systems and contribute to the development of tested best practices.

C. PARTICIPATION REQUIREMENTS FOR SELECTED FACILITIES

Participation as an innovator site is voluntary and at the expense of the facility; no compensation or reimbursement of expenses is provided. Successful candidates will meet site criteria listed above; demonstrate commitment to the development of evidenced based best practices and willingness to share their implementation story with others (including before and after photos of signage systems and sample collateral materials) and provide the resources necessary to fully participate as an innovator site.

Applicants should be willing to meet the following requirements and indicate in their application cover letter the ability and willingness to meet the following project requirements.

LEADERSHIP AND RESOURCE COMMITMENT

1. An approved wayfinding or signage project and funding for design development with reasonable assurance of funding for full implementation.
2. Leadership commitment to meet project requirements and support group learning with pledged staff support and resources for full participation.
3. Designation of a project leader to represent the facility in project activities, actively participate in on-going site specific communication with STW team and technical experts (via emails and conference calls), work closely with local project designer to direct and coordinate all the activities outlined in this RFA. The project leader should be employed by the facility, knowledgeable of the facility's operations and key staff, and responsible for project designer.
4. Staff support for the project including commitment to retain an on-staff or contract design professional to assist with design development and implementation of the symbols based wayfinding program. (Design staff can be identified after application is submitted.)
5. Project leader, project designer and other necessary staff participation in a facility pre-design audit. The audit will consist of a one-two day site visit, preceded by a teleconference call to plan the visit and a post site visit teleconference to review audit results.
6. Project leader and designer participation in a minimum of three web cast educational sessions on symbols use and wayfinding programming and in multi-site conference calls to report progress, share experiences in overcoming challenges, successes with effective solutions and lessons learned overall.
7. Project leader, designer and other necessary staff support for a two-three day site visit for a post-design evaluation of the proposed signage system.
8. Interpreter availability to enable limited English speaking visitors and patients to participate in a random on-site, in-person survey. If locally required, facilities may also need to obtain Institutional Review Board (IRB) approval for the in-person survey, and to offer incentives to encourage consumer participation in the survey. Estimated cost of survey incentives is \$1,000.
9. Facility map(s) and a short photographic and descriptive signage audit submitted as part of the application.
10. Project leader attendance at a one day orientation (Kick-off) meeting in Chicago. Travel cost will be at the expense of the facility; travel expenses will not be reimbursed by the project.

D. PROPOSED PROJECT ACTIVITIES AND TIMELINE

The STW project approaches implementation of symbols based wayfinding systems for multilingual environments through design informed by data and tested design elements. The pre-design audit and post evaluation phase of the project will consist of the following:

- Initial meeting with project technical experts and a minimum of three educational sessions on various aspects of wayfinding system planning. Selection of a design firm, or if a design firm has already been selected, coordination of the project stages between them and the project technical experts.
- Pre-design audit of existing wayfinding system and master plan
- Individualized technical expert support for local designers during design development
- Post design audit and prototype testing

In addition, selected sites are expected to designate on-staff or contract design professionals to assist with design development and implementation of the symbols based wayfinding program and provide necessary staff to carry out pre design audit and post evaluation activities. Project leaders and project designers are expected to support group learning and to actively participate in on-going site specific communication with STW team and technical experts (via emails and conference calls), web cast educational sessions and in multi-site conference calls to report progress and share lessons learned.

1. **Project Kick-off Meeting** (Chicago) – An in person meeting for project leaders from selected sites, their designer (if known) and the STW team is planned September 5, 2008 to launch the initiative. This meeting is an opportunity to meet counterparts in participating facilities, participate in educational sessions on wayfinding; and to match technical assistance needs with members of the STW team and testing/evaluation consultants. Participants will learn from design leaders in the field about basic principles for design of symbols based wayfinding and advances in wayfinding in health as well as other fields. This is also an opportunity to coordinate press releases between the RWJF foundation, UCSF Fresno, SEGD and selected sites.
2. **Project Designer** Each selected facility will need a staff or consultant designer for the project by November 2008, with a scope of work that includes project requirements. (See Recommendations for Designer SOW, page 10). Facilities may apply and attend the Kick Off meeting without a designer for the project. STW team can also assist with specifications for a Request for Qualifications to select a designer after the Kick-off meeting.
3. **Technical Assistance and Wayfinding Education** Developing evidence based signage implementation plans for each of the selected facilities is a key objective of this project. Technical assistance is available to project leaders and designers in the form of webcast educational sessions, a pre-design audit, and evaluation and testing of proposed design, as well as individualized technical support. During the design phase, individualized technical support may include:
 - Analysis of symbols issues during the design process
 - Discussion of challenges posed in design of symbols based wayfinding systems.
 - Review of symbols integration into the wayfinding process beyond signs.

3.1 Educational Sessions A minimum of three webcast educational sessions are planned during the design development phase for all facility project leaders and their designers; broader participation is encouraged. These sessions, led by STW technical experts are designed to bring attention to symbols use and wayfinding programming with special focus on implementation considerations identified through the pre-design audit and post-design evaluation. Webcast sessions will also be conducted on testing approaches to challenges identified in the pre-design audit. In addition, though not as the main focus, exterior wayfinding and multi-level wayfinding can also be tested to some extent.

3.2 Pre-Design Audit Selected facilities will participate in a pre-design audit of existing facility signage to identify how various types of users experience the signage system (including patients with limited English reading ability and staff) and to design a signage system grounded in these results. Early in the design phase, the STW team will work with project leaders, facility staff and local designer at each selected facility to plan and execute a pre design audit; the results of this audit can be used to inform the design of a new wayfinding system.

The audit is also designed to collect the materials needed to enable STW technical experts to provide technical assistance and recommendations during the design process. The audit consists of a one-two day site visit and teleconferences with experts in use of Symbols in Wayfinding; Experience Design; Legibility Analysis; Ethnographic testing and Design Guidelines Development.

Elements of the pre-design audit will include:

- A survey of destinations where symbols will be needed
- A visual analysis and review of the healthcare facility.
- A set of recommendations developed by the STW team and the facility design firm on how symbols can be implemented as part of the design process.
- An visitor experience analysis for the healthcare facility

Facility management staff and other key staff members (e.g., nursing, physician, marketing, public relations staff and human resources) play an important role in the facility audit by supporting testing and participating in focus groups. Focus groups will also include staff members in public contact roles (e.g., receptionist, business office staff, volunteers etc.) and patient/visitor users. Interpreter support is also needed to enable participation of LEP patients in focus groups and testing process.

3.3 Design Process Technical Support Facility specific wayfinding system design is the responsibility of the designer employed by selected facilities. The designer will develop a wayfinding sign design in the conceptual stage; in accordance with facility requirements and specifications for sign development, prototype signs, final review, message schedule/destinations and implementation worksheet. The element of *print support* is encouraged, but not required. Following the design plans proposed for each facility, in collaboration with local designers, STW technical experts, following design specifications, will develop a prototype signage plan for use in testing the proposed design.

3.4 Post-Design Evaluation The final design developed for each selected facility will be part of a final post-design prototype test. Evaluation of proposed design plans use a sample of the wayfinding approach developed by the design firm to determine how well the new symbols work in the proposed wayfinding system. The post-design evaluation and testing involves a planning conference call and a two-three day site visit which will include:

- **360-Degree Focus Group** of all the participants involved in the design process; designers, facilities manager and technical experts provided by the national program office.
- **Prototype Survey** of 25-30 pre-selected users to provide opinions of the new implemented signage system.
- **Random Wayfinding Survey** using 20-25 randomly selected people who will attest to how they found the locations outlined by facilities managers and technical design experts.

Project leader, designer and other staff support will be needed to conduct the on-site evaluation. Support of interpreters for the top four languages spoken by patients will be needed to ensure LEP patient participation in a random on-site, in-person survey. Facilities are responsible for obtaining IRB approval for the in-person survey if necessary and to offer incentives to encourage

survey participation. The STW Team will coordinate the audit process with the designer and facility and SEDG will provide prototype signs needed for testing.

4. **Pre and Post Photos** Selected facilities will permit photos taken during the pre-design audit to be posted on a project website designed to show the development process through pictures of challenges and solutions addressed through the initiative. Photos collected from selected facilities through this RFA may also be used for the photo gallery. Selected facilities will also need to provide photos after implementation to show how design challenges were addressed.
5. **Implementation** After the testing phases are complete the healthcare facility is responsible for implementation of the final signage program. Selected facilities will permit photos to be taken of the final implemented signage program to be placed on the project website. SEDG will provide final fabrication support in the implementation stage with recommendations of fabricators and sample fabrication RFP's. The healthcare facility is responsible for financing final installation of the finished system.
6. **Implementation Tools** Innovator sites will benefit and contribute to improvements of a set of prototype implementation tools designed to assist health facilities with implementation of symbols based signage. These include:
 - Request for Qualifications (RFQ) to engage environmental graphic designers and architects in healthcare wayfinding projects if needed.
 - Wayfinding system evaluation and needs assessment criteria - Symbols technical experts will assist in the evaluation of the wayfinding programs and provide evaluation metrics and criteria for the facility.
 - Sample model patient education collateral materials - Documentation and guidance will be provided for educating patients on the wayfinding program through print publications and interpreter guidance.
 - Signage master plan case studies - Health care master plan case studies with elements specific to selected facility will be made available.

7. Project Timeline (Subject to Change)

5/10/08	Innovator Facilities RFA Available
5/30/08	Deadline for Written Inquiries
6/3/08	Informational Conference Call
7/1/08	Deadline to Respond to RFA
7/15/08	Identify Symbol Referents to be Developed
8/1/08	Selected Sites Announced
9/1/08	Deadline for Recommended Terminology Candidates for New Symbol Developed
9/5/08	Kick-off Meeting in Chicago
9/15/08	Pre-Implementation Audit Completed (6 weeks)
10/1/08	Deadline Photos of Existing Signage
10/15/08	STW Virtual Learning Lab Website Launched
10/15/08	Schedule of Design Process Completed
11/1/2008	Selection of Designer Confirmed
3/1/09	Symbol Design Completed
4/15/09	Post Design Evaluations Completed
9/1/09	Implementation Begins
1/15/10	Post Implementation Photos Deadline

8. Recommended Scope of Work for Project Designer

- Facilitate site visit and support data gathering for pre-design audit to help identify known challenges with existing signage system.
- Participate in STW wayfinding educational sessions and multi-site conference call.
- Provide STW team with design details of proposed signage system to enable evaluation.
- Participate in 360-degree focus group process, prototype survey and random wayfinding survey, and help identify key faculty staff and user participants.

SECTION IV: SUBMISSION PROCEDURE AND QUESTIONS

A. ON-LINE SUBMISSION, MAILING ADDRESS, AND DEADLINE

The applicant must complete an **On-Line Application no later than Tuesday, July 1, 2008**. The application process will require completing an on-line application and uploading various documents: application letter, facility map(s) and photographs for a pre-design audit of existing signage as described in this RFA.

To submit an application, go to www.hablamosjuntos.org - Signs That Work, Innovator Sites RFA. A hard copy of the application letter with the On-Line Application receipt confirming successful completion of the On-Line Application must be mailed to the following address:

Attention: Innovator Site Application Review Committee
Hablamos Juntos
UCSF Fresno Medical Education Program
550 E. Shaw Ave, Suite 210
Fresno, CA 93710

Hablamos Juntos in its sole and absolute discretion may reject submissions after the deadline. See below for questions about the on-line submission process.

B. QUESTIONS REGARDING RFA

Inquiries concerning any aspect of this RFA should be submitted in writing, either by fax or electronic mail. Telephone inquiries will not be accepted. **All written questions received by May 30, 2008 will receive a reply.**

Fax: To submit questions by fax indicate on fax cover subject line **RE: QUESTION FROM RFA RESPONDENT.** Fax to 559.241-6532

Email: Submit questions via electronic mail with subject line **RE: QUESTION FROM RFA RESPONDENT.** to: info@hablamosjuntos.org

C. INFORMATIONAL CONFERENCE CALL

Respondents are encouraged to participate in a scheduled conference call to review RFA requirements and respond to questions. Reservations can be made on-line to participate on this informational conference call.

Date: June 3, 2008

Time: 10 AM (PST)/1 PM (EST)

To register go to www.hablamosjuntos.org - Signs That Work, Innovator Sites RFA.

SECTION V: SUBMISSION FORMAT AND CONTENTS

Your submission should consist of: a) application letter signed by the applicant facility's chief executive or board of trustee president, b) completed on-line application, with facility map(s) and photographic and descriptive pre-design audit. Optional brochures, promotional materials, or other supplemental material will be accepted. Pages shall be 8½ x 11 inches in size and portrait format, on white paper with black ink.

A. APPLICATION LETTER

The application letter will represent the willingness a facility's leadership to commit staff resources in support of the audit at their own expense and demonstrate advance readiness to launch an approved signage initiative. Application letters should be written on facility letterhead and signed by the chief executive or board of trustee president authorized to make binding decisions for the facility. The letter should declare:

- Leadership commitment to participate on a voluntary basis, without compensation, and willingness to engage a local designer for the project, sponsor project related travel, interpreter and translator expenses and incentives to encourage participation in a user survey.
- Designation of a project leader and their availability to attend a one-day orientation/Kick-off meeting in Chicago, September 5, 2008.
- Commitment of staff participation to support activities outlined in the RFA including a two site visits for Pre Design Audit and Post Design Evaluation.
- Commitment of staff and designer resources to engage in best practice testing

B. ELECTRONIC APPLICATION. Applications responding to this RFA must be completed on-line.

The content of the application is provided as an attachment to this RFA to assist in preparing the on-line submission and to be used for submission purposes only. The following information is requested.

1. **Multi-Lingual Consumer Base** – The top four languages, other than English, spoken by patients seen in the facility, whether interpreter services are provided for these languages and local data on local limited English Proficient population residing in the facilities service area/community⁴.
2. **Readiness and Advanced Preparation** – List proposed project name, estimated project budget and timelines, internal reviews completed and approval dates and status of project designer selection. The selection or non-selection of a design firm for the project will have no bearing on the application approval process. Indicate whether word signage currently exists in your facility for each of the listed destinations.
3. **Project Description** – Proposed project name, a description of proposed signage project, design planning budget and whether this has been approved and desired goals.
4. **Planning Tools Available** – Check list of planning tools currently available.
5. **Facility Summary Form** – List the name, location, type, size (in square feet) of the proposed facility and primary contact. Ideally the Project Leader and primary contact is the same person.

⁴U.S. Census defines limited English proficient (LEP) population as anyone who answers less than "very well" to the question: "How well do you speak English?" [Possible answers: very well, well, not well, not at all].

5.1 Project Leader. List the name and contact information for the person who will be the project leader and primary contact (if different from project leader) and the percent of time available for the proposed project. Ideally this person has the following attributes:

- Located on the premise and will attend the orientation/Kick-off meeting
- Member of the facilities department, is involved with capital projects development, or is a marketing person focused on facilities renovation and development.
- Has contact with facility staff involved in the focus group.

6. Attachments. The following materials considered part of the application will need to be uploaded.

6.1 Facility map. All applicants, single facilities or one of several on a campus must submit a floor plan or a site plan showing the target areas. This can include a plan of the main floor of the healthcare facility, a floor plan of the primary floors, a site plan for the facility or a site plan of the campus, if the facility is part of a campus.

6.2 Photographic and Sign Audit. All applicants must submit at least one picture of the following and note their location on the facility plan submitted with the application:

- An exterior directional sign at your facility.
- An interior overhead or wall mounted directional sign at your facility.
- An interior door identification sign at your facility.
- An interior directory (Multi-destination listing) at your facility.
- An interior wall directional sign at your facility if existing
- A map sign at your facility if existing
- A sample paper map if existing

7. Date Reservation Form. List of participants attending the Kick Off meeting in Chicago.

SECTION VI: SELECTION CRITERIA AND SELECTION PROCESS

A review team comprised of *Hablamos Juntos*, SEGD and RWJF Pioneer Team members will evaluate and rank submissions according to the evaluation criteria in this section. Based upon this evaluation and ranking a final selection will be made. *Hablamos Juntos* may or may not request an interview or additional information from applicants in order to make a selection.

Hablamos Juntos requests that applicants do not contact *Hablamos Juntos*, SEGD or RWJF staff regarding the evaluation of specific submissions during the RFA selection process. Applicants not selected will be notified by letter within four weeks.

Evaluation Factors

The project is looking for facilities with approved signage projects and funding for the design phase committed to full participation in this project. The evaluation factors will be based on, but are not limited to, the criteria stated below:

- **Application letter**
- **Completed application and attachments**
- **Multi-lingual consumer base and local LEP population demographics**
- **Proposed project and scope**
- **Ability to respond and state commitment to project requirements**

SECTION VII: CONDITIONS OF RFA AND CONTRACTUAL INTENT

A. RFA PROVISIONS

Hablamos Juntos reserves the right to determine, in its sole and absolute discretion, whether any aspect of the submission satisfactorily meets the criteria established in this RFA; the right to seek clarification from any applicant(s); the right to reject any or all submissions with or without cause; and the right to cancel and/or amend, in part or entirely, the RFA. The RFA does not commit *Hablamos Juntos* either to select a facility or to pay for any costs incurred in the preparation of a submission. Responding to this RFA provided herein shall neither obligate nor entitle an applicant to be selected as an innovator site.

It is understood that participation is voluntary and that no compensation will be made for staff support required to meet the requirements of the audit.

It is the intention of *Hablamos Juntos* to select applicant(s) which will support the goals of the audit process as defined by the STW team and technical experts.

B. REJECTION OF SUBMISSIONS

Hablamos Juntos, in its sole and absolute discretion, may reject any submission based on the format and submission requirements in Section V, or based on any other requirements in this document. *Hablamos Juntos'* rights in rejecting or retaining any and all submissions are broad and are at the sole discretion of *Hablamos Juntos*.

C. CANCELLATION OR AMENDMENT OF RFA

Hablamos Juntos reserves the right to cancel or amend this RFA at any time and will notify all known RFA recipients in writing.

D. EXTENSION OF TIME

In its sole and absolute discretion *Hablamos Juntos* reserves the right to extend the RFA due date. If an applicant needs an extension of time to prepare the submission, a written request via email request should be submitted no later than seven (7) days prior to the due date of this RFA. The request should be directed to info@hablamosjuntos.org. The applicant will be notified of *Hablamos Juntos'* decision to accept or reject the request by letter or email.

E. APPLICANT INCURRED COSTS

Hablamos Juntos shall not be responsible for any costs incurred by applicants in connection with this RFA. Applicants shall bear all costs associated with submission preparation, submission, and attendance at presentation interviews, or any other activity associated with this RFA or otherwise.

Applications responding to this RFA must be completed on-line

SAMPLE APPLICATION

This sample application is provided to assist in preparation for on line submission.
For more information on Hablamos Juntos, the Signs That Work project and on-line application,
please see www.hablamosjuntos.org.

Applications responding to this RFA must be completed on-line

Facility Summary Form

Proposed Facility Information			
Facility Name _____		Facility Size (sq.ft)	
Address (if different) _____			
City _____	State _____	Zip _____	
Facility Type	<input type="checkbox"/> Hospital	<input type="checkbox"/> Health Center/Clinic	Other facility (describe): _____
	<input type="checkbox"/> Outpatient facility		

On a scale of 1 to 10 how effective is your current signage system? 1 = "not good", 10 = "very good".

Check one: 1.....2.....3.....4.....5.....6.....7.....8.....9.....10

Project Description and Scope

Please provide a description of the proposed signage project and the motivation for undertaking this project at this time.

Scope	Goals	Motivation
-------	-------	------------

What do you consider to be the greatest weakness of your current signage program?

Estimated or Proposed Project Completion Date	
Estimated or Proposed Design Phase Completion Date	
Estimated or Proposed Design Budget	\$ _____

Multi-Lingual Consumer Base

Language Groups and Interpreter Availability

- A. List the top four languages spoken within the community and by patients seen in this facility, other than English.
- B. Indicate whether you are able to provide interpreters in the preferred language of your patients.
- C. Language spoken in your community and the % of the population these represent.

A. List Languages Spoken by Your Patient Population**		B Interpreters Available**	
		Yes	No
1			
2			
3			
4			

** Indicate interpreter use for each of the patient population languages

C. Languages Spoken Within Your Community *		% of Total Population*
1		
2		
3		
4		

*Use US Census data to calculate

Applications responding to this RFA must be completed on-line

Readiness and Advanced Preparation

Signage Project Approved

Project Name _____ Estimated Project Budget \$ _____
 Project Leader _____ Title _____

Has your facility approved a signage project?

Yes	No
-----	----

 Has a designer or design firm been selected?

Yes	No
-----	----

List the steps required (by your organization) to obtain approval of capital projects, include name and title of person or committee and the date the signage project was presented. Also indicate whether the project received approval at each step listed.

Approval Steps Required for Signage Project	Date Presented	Approval Yes/No
1.		
2.		
3.		
4.		
5.		

Destinations Matching UHC SYMBOLS

Please check each box for word signage that now exists in your facility for these destinations

<input type="checkbox"/> Ambulance Entrance	<input type="checkbox"/> Intensive Care	<input type="checkbox"/> Pediatrics
<input type="checkbox"/> Billing Department	<input type="checkbox"/> Internal Medicine	<input type="checkbox"/> Pharmacy
<input type="checkbox"/> Cardiology	<input type="checkbox"/> Interpreter Services	<input type="checkbox"/> Physical Therapy
<input type="checkbox"/> Care Staff Area	<input type="checkbox"/> Laboratory	<input type="checkbox"/> Radiology
<input type="checkbox"/> Chapel	<input type="checkbox"/> Mammography	<input type="checkbox"/> Registration
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Medical Records	<input type="checkbox"/> Social Services
<input type="checkbox"/> Emergency	<input type="checkbox"/> OB Clinic	<input type="checkbox"/> Surgery
<input type="checkbox"/> Family Practice Clinic	<input type="checkbox"/> OB/GYN	<input type="checkbox"/> Waiting Areas
<input type="checkbox"/> Immunizations	<input type="checkbox"/> Oncology	
<input type="checkbox"/> Infectious Diseases	<input type="checkbox"/> Outpatient	

Planning Tools Available

Please indicate a) whether you need prototypes of the following tools or b) whether you are willing to share them with others or c) whether you are **not** willing to share them with others.

Need	Will share	Will not share	Item
			Sample Request for Qualifications (RFQ) to select a designer
			Request for Proposals (RFP) with project specifications and suggested performance standards
			Wayfinding system evaluation and needs assessment criteria
			Sample model patient education collateral materials
			Signage master plan elements and recommended processes of development

Applications responding to this RFA must be completed on-line

Contact Information

Project Leader

First Name _____ Last Name _____ % Time Available
for Project _____
Title _____
Mail Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

Primary Contact (if different from above)

First Name _____ Last Name _____ % Time Available
for Project _____
Title _____
Mail Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

Chief Executive Officer

First Name _____ Last Name _____ % Time Available
for Project _____
Title _____
Mail Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

Project Designer (if known)

First Name _____ Last Name _____ % Time Available
for Project _____
Title _____
Mail Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

Kick Off Meeting Reservation

Day-Long Orientation Meeting: September 5, 2008 Chicago, IL

A day long orientation meeting is planned with all sites. List who will attend on behalf of this site.

First Name _____	Last Name _____	Telephone _____
Title _____		Email _____
First Name _____	Last Name _____	Telephone _____
Telephone _____		Email _____
First Name _____	Last Name _____	Telephone _____
Telephone _____		Email _____

Applications responding to this RFA must be completed on-line

Attachments

Facility Map

Submit one floor or a site plan showing the target areas. This can include a plan of the main floor of the healthcare facility, a floor plan of the primary floors, a site plan for the facility or a site plan of the campus, if the facility is part of a campus.

Upload Here	Item
	Submit one floor or a site plan showing the target areas.

Photographic Sign Audit

Submit at least one picture of the following and note their location on the facility plan submitted. If any one of these sign types does not exist in the facility note this in the listing.

Not Available	Upload Here	Item
		picture of an exterior directional sign at your facility
		picture of an interior overhead directional sign at your facility
		picture of an interior door identification sign at your facility
		picture of an interior directory (Multi-destination listing) at your facility
		picture of an interior wall directional sign at your facility
		picture of a map sign at your facility
		picture of a paper map