

Because breast cancer is everywhere, **SO ARE WE.**

At Susan G. Komen, we are committed to **ENDING** breast cancer forever by **EMPOWERING PEOPLE, ENERGIZING SCIENCE** to find the cures and ensuring **QUALITY CARE** for all people, everywhere.

PROGRAM ANNOUNCEMENT

BREAST CANCER PATIENT NAVIGATION PROGRAMS: Navigation Following Abnormal Findings

Susan G. Komen
5005 LBJ Freeway, Suite 250
Dallas, Texas 75244
Website: www.komen.org

KEY DATES

Letter of Intent Deadline:	Wednesday, November 19, 2014, 1:00 p.m. Central Time
Full Application Invitation:	Rolling; applicants may start full application upon approval of LOI
Full Application Deadline:	Wednesday, December 17, 2014, 1:00p.m. Central Time
Award Notification:	By May 1, 2015

ABOUT SUSAN G. KOMEN®

Susan G. Komen is the world's largest breast cancer organization, funding more breast cancer research than any other nonprofit while providing real-time help to those facing the disease. Since its founding in 1982, Komen has funded more than \$845 million in research and provided more than \$1.8 billion in funding to screening, education, treatment and psychosocial support programs serving millions of people in more than 30 countries worldwide. Komen was founded by Nancy G. Brinker, who promised her sister, Susan G. Komen, that she would end the disease that claimed Suzy's life. Visit komen.org or call 1-877-GO-KOMEN. Connect with us on Facebook at [facebook.com/susangkomen](https://www.facebook.com/susangkomen) and Twitter @SusanGKomen.

FOCUS AREA: BREAST CANCER PATIENT NAVIGATION PROGRAMS – NAVIGATION FOLLOWING ABNORMAL FINDINGS

Breast cancer disparities are differences in breast cancer outcomes among specific population groups. These groups may include, but are not limited to, those characterized by race/ethnicity, religion or nationality, socioeconomic status, age, sexual orientation, geography, or disability.

There are many reasons for the observed disparities in breast cancer outcomes amongst these populations. However, differences in the prevalence of established breast cancer risk factors, as well as barriers to quality care are often responsible.

Barriers to quality care that may lead to disparities in breast cancer outcomes fall into a number of categories:

- Financial and economic
- Language and cultural
- Communication
- Health care system
- Transportation
- Bias based on culture/race/age/sexual orientation
- Fear

Patient navigation is a process by which an individual—a patient navigator—guides patients through and around barriers in the complex cancer care system, to help ensure timely diagnosis and treatment.

Patient navigation helps ensure that patients receive culturally competent care that is also:

- Confidential
- Respectful
- Compassionate; and
- Mindful of the patient's safety

Evidence has shown an improvement in 5-year survival rates of breast cancer patients who were navigated from screening through resolution¹. Because of this strong connection to improved outcomes, Komen is accepting applications that support, expand or create breast cancer-specific, patient navigation programs for patients who are notified of an abnormality after an initial breast imaging test, such as a screening mammogram, diagnostic mammogram, or breast ultrasound.

Specifically, programs should focus on coordinating and improving access to and timely utilization of breast health services through the Breast Cancer Continuum of Care (Figure 1.) at any point after an abnormal breast imaging test.

The Breast Cancer Continuum of Care represents how a woman typically moves through the health care system to get screened for breast cancer, and if necessary, undergo diagnostic tests and receive treatment for breast cancer. The Breast Cancer Continuum of Care has four stages: Screening, Diagnosis, Treatment, and Follow-up Care.

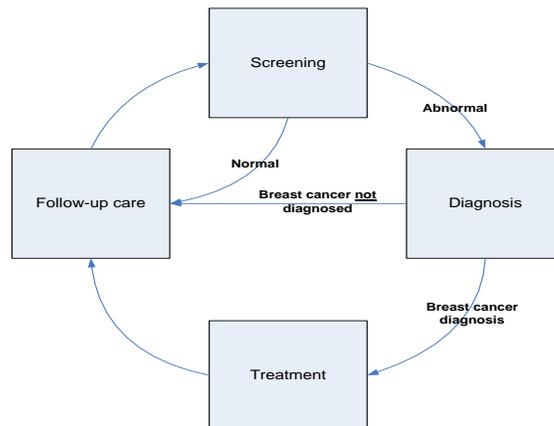


Figure 1. Breast Cancer Continuum of Care

Given the complex and highly individualized nature of navigating patients through the Breast Cancer Continuum of Care, for the purposes of this grant mechanism, proposed projects must be specific to breast health and/or breast cancer. **Proposals for general patient navigation programs will not be accepted.**

Proposed projects must focus on patient navigation that begins after an abnormal finding on a breast imaging test. **Proposals that include funding requests to provide screening, diagnostic testing, or treatment for breast cancer will not be accepted.** Examples of appropriate patient navigation programs may include, but are not limited to those that:

- Link patients with appropriate care after an abnormal finding on a breast imaging test, and assist in moving women through the healthcare system;
- Provide linkages to community resources for financial assistance, transportation, family needs, and/or translation services; or
- Provide education and psychosocial support to patients and their families as they move through the breast cancer continuum of care.
- Seek to enhance services for an identified vulnerable population, such as the hiring of culturally and/or linguistically competent patient navigators.

Applicants must be able to demonstrate that they can identify, measure, and report on:

- Number of patients entering the Breast Health Continuum of Care through this program, after an abnormal finding on a breast imaging test.
- Number of patients that receive recommended diagnostic follow-up within 30, 60, and 90 days of an abnormal finding on a breast imaging test.
- Number of patients that did not receive recommended diagnostic follow-up within 90 days.
- Reasons why and/or barriers experienced by patients that did not receive recommended diagnostic follow-up within 90 days.
- Number of patients that initiated treatment within 30, 60, and 90 days of a breast cancer diagnosis.
- Number of patients that did not initiate recommended treatment within 90 days.
- Reasons why and/or barriers experienced by patients that did not initiate treatment within 90 days.
- Number of patients that self-report fully understanding their treatment recommendation.
- Number of patients that complete the entire recommended treatment within the grant term.
- Number of patients that are currently adhering to the recommended treatment, but will not complete treatment within the grant term.
- Number of patients who receive a survivorship care plan.
- Number of patients whose breast cancer records were provided to their primary care provider (e.g., private physicians, public clinics).

ELIGIBLE APPLICANTS/DESIGNATED RECIPIENTS

Applicants must meet the following eligibility criteria:

- Applicant organizations/institutions must be based in the United States, Guam, Puerto Rico, or the U.S. Virgin Islands.
- Applicant organizations/institutions must hold Federal non-profit status. Proof of non-profit status is required.
- Only one application can be submitted per organization/institution. If multiple departments within an organization/institution are interested in applying, please work collaboratively to submit one application.
- Must agree to adhere to Komen's Policies and Procedures.
- Any past and current Komen-funded grants to the applicant must be up-to-date and in compliance with Komen requirements. This includes both National Komen grants and local Komen Affiliate grants.
- If the organization/institution is currently Komen-funded, applicant must delineate how the proposal is different from, or expands upon, the existing grant in the budget justification section.
- If applicant, or any of its key employees, directors, officers, or agents is convicted of fraud or a crime involving any other financial or administrative impropriety, then applicant is not eligible to apply for a grant during this current cycle and will not be eligible to apply for a new grant until the later of 12 months after the conviction or until applicant can demonstrate that appropriate remedial measures have been taken to ensure that any criminal misconduct does not recur.
- Susan G. Komen encourages applicants to facilitate partnerships that support the success of breast health programs through active community cooperation and collaborations.
 - To ensure that patients are properly navigated throughout the Breast Cancer Continuum of Care, organizations must demonstrate that they will collaborate with medical institutions/facilities who can provide patient access to appropriate breast cancer diagnostic, treatment, and follow-up care.

Komen Affiliate Network:

- Susan G. Komen maintains a strong presence in the breast cancer world globally, nationally through our Headquarter offices, as well as locally through our Komen Affiliate Network.
- The Komen Affiliate Network is comprised of over 100 local offices across the nation, in various cities and communities.
- Each individual Affiliate is responsible for raising breast cancer awareness in their community by energizing local education and outreach, conducting local advocacy, contributing to research,

developing community grants, and working in collaboration with outside organizations on public policy and related issues.

- Affiliates also engage with local breast cancer advocates from volunteers to grantees, fundraisers to sponsors, and women in need to their physicians, in their goals to fulfill Komen's mission of empowering others, ensuring quality care for all, and energizing science to find the cures.
- We encourage all applicants to contact their local Komen Affiliate, and learn more about how the Affiliate may be able to support the proposed program.
 - Applicants may find their local Affiliates here: [<http://ww5.komen.org/Affiliates.aspx>].
 - Please note that not all areas will have a local Komen Affiliate.

FUNDING INFORMATION AND GRANT TERM

- Organizations/Institutions applying may request up to \$200,000 over two years.
- The project period must be two years.

Funds may be used for the following types of program expenses:

- Salaries and fringe benefits for program staff
- Consultant fees
- Meeting costs
- Supplies
- Reasonable travel costs related to the execution of the program
- Other direct program expenses including;
 - Transportation assistance
 - Childcare assistance
 - Translation services
 - Genetic testing to inform treatment decisions
- Patient Navigation certification/training, for up to 2 staff members
- Equipment, not to exceed \$5,000
- Indirect costs, not to exceed 20% of direct costs

Funds may not be used for the following purposes:

- Screening or Diagnostic Services, including;
 - Clinical breast exams
 - Screening mammograms
 - Diagnostic mammograms
 - Breast ultrasounds
 - Breast biopsies
 - MRI's
 - Breast thermography

- Treatment, including:
 - Surgery
 - Chemotherapy
 - Radiation therapy
 - Targeted therapy
 - Hormonal therapy
- Support services, including:
 - Wigs or scarves
 - Mastectomy bras
 - Financial assistance for food, housing, and/or medical insurance
- Research, which is defined as any project or program with the primary goal of gathering and analyzing data or information.
 - Specific examples include, but are not limited to, projects or programs designed to:
 - Understand the biology and/or causes of breast cancer
 - Improve existing or develop new screening or diagnostic methods
 - Identify approaches to breast cancer prevention or risk reduction
 - Improve existing or develop new treatments for breast cancer or to overcome treatment resistance, or to understand post-treatment effects
 - Investigate or validate methods of patient navigation
- Organizational/Institutional liability coverage
- Provider education
- Education regarding breast self-exams/use of breast models
- Construction or renovation of facilities
- Political campaigns or lobbying
- Endowments
- General operating funds (except indirect cost)
- Debt reduction
- Annual fund-raising campaigns
- Event sponsorships
- Projects completed before the date of grant approval
- Building/renovation
- Capital campaigns
- Employee matching gifts
- Land acquisition
- Program-related investments/loans
- Scholarships

Important Granting Policies

Please note these policies before submitting a proposal. These guidelines are non-negotiable.

- No expenses may be accrued against the grant until the agreement is fully executed.
- Any unspent funds over \$1.00 must be returned to Komen.
- Grant payments will be made in installments pending receipt of satisfactory progress reports.
- Grantee will be required to submit regular progress reports and a final report to include final expenditures.
- Grantee is required at minimum to hold commercial general liability insurance with combined limits of not less than \$1,000,000 per occurrence and \$2,000,000 in the aggregate for bodily injury, including death, and property damage; workers' compensation insurance in the amount required by the law in the state(s) in which its workers are located and professional liability insurance with limits of not less than \$1,000,000; and excess/umbrella insurance with a limit of not less than \$5,000,000. In the event any transportation services are provided in connection with project, \$1,000,000 combined single limit of automobile liability coverage will be required. If any medical services (other than referrals) are provided or facilitated, medical malpractice coverage with combined limits of not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate will be required.

Educational Materials and Messages

Susan G. Komen is a source of information about breast cancer for people all over the world. To reduce confusion and reinforce learning, we require that grantees provide educational messages and materials that are consistent with those promoted by Komen, including promoting the messages of breast self-awareness-- know your risk, get screened, know what is normal for you and make healthy lifestyle choices. The consistent and repeated use of the same messages will improve retention and the adoption of the actions we think are important. Please visit the following webpage before completing your application and be sure that your organization can agree to promote these messages:

<http://ww5.komen.org/BreastCancer/BreastSelfAwareness.html>.

We do not recommend monthly breast self-exams and therefore will not fund programs that teach monthly breast self-exams or use breast models.

Komen grantees are eligible to receive preferred pricing for Komen educational materials. Komen materials should be used and displayed whenever possible. To view our educational materials, visit www.shopkomen.com.

Applicants may find other Komen Educational Materials useful in the planning and development of programming including the Breast Cancer Toolkit for Hispanic/Latino Communities and are encouraged to utilize resources as applicable. To access the Toolkit, please visit komentoolkits.org.

LETTER OF INTENT AND APPLICATION PROCESS

Susan G. Komen utilizes a multi-step approach to application and review that requires submission of a Letter of Intent (LOI) and Full Application upon invitation only. Letters of Intent must be submitted by email, and will be administratively reviewed for eligibility and responsiveness to the focus specified in this RFA.

Applicants with an LOI deemed responsive and aligned with Komen's mission will be invited to submit full applications. Applicants will be notified of the LOI review decisions via email. Applicants invited to submit a full application will then be granted access to the full application site in Komen's Grants eManagement System (GeMS). **NOTE: Access to the full application site will begin as soon as the LOI is reviewed and approved.** The sooner the LOI is submitted, the earlier access to the full application may be granted. However, **there will be no Letters of Intent reviewed after the deadline of November 19th.**

The grant application process is competitive. Regardless of whether or not an organization has received a Komen grant in the past, funding in subsequent years is never guaranteed.

LETTER OF INTENT INSTRUCTIONS

Administrative Requirements

The LOI must be submitted as a PDF attachment and sent via email to helpdesk@komengrantsaccess.org. All information should be contained within the attachment.

Applicants must follow the LOI submission instructions, including formatting requirements and page limits. The LOI must be written in English. **Failure to adhere to these instructions will result in LOIs being administratively withdrawn from consideration, without appeal.**

Letter of Intent Submission Deadline

LOIs must be received on or before **Wednesday, November 19, 2014 at 1:00pm Central Time** via email to helpdesk@komengrantsaccess.org.

Applicants are strongly encouraged to complete, review and submit their LOI as early as possible, to receive timely access to the full application, as well as to allow for technical difficulties, varying time zones, human error, loss of power/internet, sickness, travel, etc.

Extensions to the submission deadline will not be granted to allow for lateness, corrections or submissions of missing information, with the rare exception made for severe extenuating circumstances at the sole discretion of Komen.

Applicants will be notified of LOI review decisions via email **within 5 business days**. Once notifications are sent, invited applicants will then be granted access to the full application site in Komen's Grants eManagement System (GeMS).

LETTER OF INTENT REQUIREMENTS

Applicant Information

In the LOI, Applicants will need to specify the following:

- Applicant Organization name and address
- Federal Tax ID Number
- Organization type
 - 501c3
 - Federally Qualified Health Clinic
 - Government Agency
 - Hospital
 - Religious Organization
 - School
 - University
 - Other
- Project Director name and contact information; E-mail is required
- Primary Contact, if not Project Director, name and contact information; E-mail is required
- Project Title
- Target population and statement of need (recommended ~ 200 words)
- Brief Project Description (recommended ~200 words)
 - Please describe the project's goals and objectives, and how they address the RFA focus area.

The LOI is limited to no more than 2 pages.

Document Format

Please follow the formatting requirements below. Applications not adhering to these format requirements will be administratively withdrawn prior to review.

- Must be in PDF file format.
- No more than 2 pages in length.
- Font Size: 12 point or larger.
- Font Type: Times New Roman.
- Spacing: No more than six lines of type within a vertical inch (2.54 cm).
- Page Size: No larger than 8.5 inches x 11.0 inches (21.59 cm x 27.94 cm).
- Margins: At least 0.5 inch (1.27 cm) in all directions.
- Print Area: 7.5 inches x 10.0 inches (19.05 cm x 25.40 cm).

FULL APPLICATION SUBMISSION

Further instructions on how to submit a full application will be provided upon the review and approval of the LOI, as listed above under "Letter of Intent and Application Process."

Full Application may include, but is not limited to, the following:

Project Abstract

The Project Abstract should provide a brief description of the proposal including the purpose of the program, a description of key activities, a summary of evaluation methods and the expected or resulting change(s) your program will likely bring in your community.

Project Narrative

Statement of Need

- Describe the population to be served.
- Provide population characteristics (race, ethnicity, economic status, and breast cancer statistics) specific to the target population.
- Describe evidence of the risk/need within that population.

Project Description

- Describe the project's goals and objectives, and how they address the RFA focus area.
- Explain how the project will increase the percentage of people who enter, stay in, or progress through the continuum of care.

Organization Capacity/Collaboration

- Explain why the applicant organization is best-suited to lead the project and accomplish the goals and objectives set forth in this application.
- Describe collaborations, the roles and responsibilities of all organizations or entities participating in the project, and why these organizations are best suited to carry out the project and accomplish the goals and objectives set forth in this application.

Sustainability

- Describe whether the project is designed to meet a one-time or short-term need that will be completed during the grant term, or whether this is a long term project.
- If this is a long-term project, detail the plan to secure and allocate resources (financial, personnel, partnerships, etc.) to sustain the program at the conclusion of the grant period.
- If applicable, describe methods for disseminating lessons learned and successful projects to other partners or communities.

Evaluation

- Provide a monitoring and evaluation plan.
- The monitoring and evaluation expertise that will be available for this purpose.
- The resources available for monitoring and evaluation during the course of the project.

Project Work Plan

In the Project Work Plan component of the application on GeMS, you will be required to submit goals and objectives. Goals are high level statements that provide overall context for what the project is trying to achieve. Objectives are low level, concrete statements that describe what the project is trying to achieve per each Goal. An objective can be evaluated at the end of the project to establish if the goal was met or not met.

Budget

Provide a detailed total program budget. For each line item in the budget, provide a brief justification for how the funds will be used, and why they are programmatically necessary.

QUESTIONS?

Type of Inquiry	Contact
All programmatic and technical inquiries (including questions related to eligibility, program requirements, Komen policies and procedures, GeMS system access and application submissions, etc.)	Komen Community Health Programs Help Desk Email: helpdesk@komengrantsaccess.org Phone: 1-866-921-9678 (Toll-free within the United States and Canada)

REFERENCES

¹ Freeman, H. Patient Navigation: A Community Centered Approach to Reducing Cancer Mortality. J Cancer Educ; 21(Suppl): S11-S14, 2006.