



Request for Application #20-10763 Cancer Plan Implementation Projects | 2021-2022

Purpose

California Department of Public Health (CDPH), Comprehensive Cancer Control Program (Comp Cancer) on behalf of the California Dialogue on Cancer (CDOC) Cancer Plan Implementation Project is looking to fund organizations in California to conduct interventions that align with the state's cancer plan strategies listed on pages 7-8 on colorectal cancer, HPV vaccination and cancer survivorship. Funding will be awarded in the form of a contract. Selected organizations will receive funding in arrears upon receipt and approval of invoices received.

Eligibility

The following organizations/entities may apply:

- IRS recognized 501(c)3 not for profit organizations
- Schools
- Health Systems (i.e. health centers, hospitals)
- Employers with services in California
- Academic Institutions
- Local health departments

Individuals are not eligible to apply.

Funding Purpose

Funds are available for projects working towards the state cancer plan objectives and strategies focused on the following: colorectal cancer screening, HPV vaccination, and improving cancer survivorship outcomes. Awards of up to \$85,000 are available for projects focusing on colorectal cancer screening and HPV vaccination, while an award of up to \$25,000 is available for projects focusing on improving cancer survivorship outcomes. Applicants wishing to receive funding for multiple topic areas shall submit separate applications under each topic area. To learn more about each topic area, please see pages 7-8.

Funding Restrictions

Funds are available for projects working towards the state cancer plan objectives and strategies. Funds are administered by CDPH, Comp Cancer on behalf of CDOC. Organizations will contract

with CDPH and submit invoices in arrears. Up to 15% of the total budget can be budgeted for indirect or administrative costs.

Funds under resulting agreements cannot be used for:

- To conduct research of any kind
- For direct services to individuals (i.e. patient navigation, vaccination delivery, FIT kits)
- To purchase equipment
- To pay for food
- To supplement salaries of existing full-time staff [Consultants or sub-contractors may be hired to deliver contract services.]
- For out of state travel
- For political lobbying
- Swag (water bottles, key chains, bags etc.)

Agreement Term and Funding Availability

1. Funding Term

- a. Up to 6 awards will be made. The term of the resulting Agreement is expected to be May 1, 2021 to June 29, 2022. The Agreement term may change if CDPH/CDOC makes the award earlier than expected or if CDPH/CDOC cannot execute the Agreement in a timely matter due to unforeseen delays.
- b. The resulting Agreement will be in no force until signed by both parties and approved by CDPH. The Awardee is cautioned not to commence performance until all approvals are obtained. Should performance commence before all approvals are obtained, said services may be considered to have been volunteered without State reimbursement.
- c. CDPH/CDOC reserve the right to modify the term of the resulting Agreement via a formal amendment process to modify the SOW or budget based on changes to further the implementation of the state's cancer plan objectives and strategies.

2. Funding Amount

The total amount to be distributed among all Awardees is anticipated to be \$280,000. The maximum to be distributed to each Awardee is anticipated to be between \$25,000 to \$85,000, depending on topic area. Contractors will be reimbursed for implementation and satisfactory completion of the Scope of Work activities in their resulting contract. CDPH/CDOC reserves the right to initiate amendments as necessary to redistribute funds between fiscal years to meet the needs of the project's success; however, Awardees should not anticipate that unspent funds will be rolled forward from one fiscal year to the next.

3. Funding Augment

CDPH/CDOC reserves the right to negotiate additional work with the successful applicant that is consistent with the CDOC Cancer Plan Strategies on Colorectal Cancer, Cancer Survivorship and HPV Vaccination outlined on pages 7-8 of the RFA, should there be a need and additional funding becomes available.

4. Funding Availability

Funding and payment for performance under the resulting contract are dependent upon availability of future appropriations by the State Legislature, Governor, and the Centers for Disease Control and Prevention (CDC). No legal liability on the part of the State for any payment may arise under the resulting contract until funds are made available through the annual appropriation in the Budget Act.

5. Funding Source

The source of funding is federal funds received through the CDC Cooperative Agreement 6 NU58DP006344-04-01, CFDA No. 93.898 – Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations.

Timeline

1. RFA application deadline: **December 8, 2020 by 5pm Pacific Standard Time**. Applications should be emailed to Shauntay.Davis@cdph.ca.gov subject line Application - CDOC RFA 20-10763. Applications received after the due date/time will not be accepted.

Key Action	Date (All times are in Pacific Standard Time)
RFA Release Date	November 20, 2020
Last Day to Submit Written Questions	November 30, 2020
Responses to Written Questions Posted	December 3, 2020
Applications Due	December 8, 2020
Awards Posted	December 30, 2020
Contract Document Finalization	January 29, 2021
Anticipated Contract Start Date	May 1, 2021
Contract End Date	June 29, 2022

Applicant Questions and Reporting of Errors in the RFA

CDPH/CDOC will accept questions and reporting of errors related to this RFA. Questions may include, but are not limited to, clarification of eligibility, or about instructions, requirements or RFA materials. All applicants must follow the process below to submit a questions.

1. How to submit Questions or Report and Error in the RFA

- a. Submit questions or errors by email to **Shauntay.Davis@cdph.ca.gov** with the subject line Question - CDOC RFA 20-10763. Verbal questions will not be accepted.
- b. CDPH/CDOC will send an email confirmation receipt of written questions. If confirmation is not received, Applicants may call (916) 731-2500 prior to the stated deadline for submission of written questions to confirm receipt of questions.
- c. Submit written questions by the due date specified in the Timeline section of this RFA.
- d. Errors in the RFA or its instructions may be reported up to the application due date.

2. What to Include in an Inquiry

- a. Name of inquirer, name of the organization represented, mailing address, phone number, and email address.
- b. A description of the subject, concern, or issue in question or the RFA discrepancy found.
- c. RFA section, page number or other information useful in identifying the specific problem, concern, or issue in question.
- d. Proposed remedy sought or suggested, if any.

3. Response by CDPH/CDOC

- a. CDPH/CDOC reserves the right to seek clarification of any inquiry received and to answer only questions considered relevant to this RFA. At its discretion, CDPH/CDOC may consolidate and/or paraphrase similar or related inquiries.
- b. Questions and answered will be published on the CDOC [website](#) on the date identified in the timeline.
- c. CDPH/CDOC may issue an addendum to address errors in the RFA up until the application submission deadline. Addendums, if needed, will be posted on the CDOC [website](#).

Application Format

The following items must be submitted in the Application:

1. **Applicant Information** (Attachment A) must be completed and returned as the cover page of the application.

2. **Application Narrative** (Attachment B) must be no longer than two pages (single-sided, single-spaced) with a 12pt. font size and 1-inch margins on all sides.

The Application Narrative must address the following:

- a. Problem and needs
- b. Target audience and the geographic area(s) in which the intervention will be implemented
- c. Description of specific activities, collaborations, and outcomes
- d. Evaluation
- e. Organizational Capacity
- f. Amount of request

3. **Work Plan** (Attachment C)

4. **Budget** (Attachment D)

Application Review Process

Stage One: Administrative and Completeness Screening (Pass/Fail)

Applications will be reviewed for on-time submission and compliance with the Application Format requirements. Applicants will receive a pass/fail grade for Stage One. Applicants who do not receive a pass grade in Stage One will not move on to Stage Two.

Stage Two: Application Scoring (47 points)

Each application will be evaluated and scored according to the scoring criteria by a review committee on a scale of zero to 47 points. The review committee may include representatives of CDPH, other state agencies, and non-scoring subject matter experts (non-scoring experts shall have no influence on application scores). To be eligible for funding, an application must receive a score of 32 points or more. However, scoring 32 or more does not guarantee funding or funding at the level requested. CDPH/CDOC reserves the right to not fund any of the applications received for this RFA. Funding decisions may also be made to ensure:

- No duplication or overlap of efforts with existing CDOC-funded projects.
- Adequate representation of the indicators addressed.
- Balanced representation of the types of organizations funded.

The table below describes the maximum point value for each RFA scoring criteria.

Scoring Criteria	Points Possible
1. Establishes a compelling need for the project.	2
2. Describes an appropriate target audience.	2
3. Provides a clear overview of activities, collaborations, and outcomes.	10

4. Describes the project's alignment with the CRC, survivorship, or HPV cancer plan strategies.	10
5. Demonstrates how the project is an effective use of funds.	5
6. Clearly outlines appropriate plans for measuring and evaluating accomplishments.	5
7. Clearly describes how personnel will be used.	2
8. Budget follows funding restriction guidance, and is complete with reasonable and justified costs.	10
9. Is project sustainable after the grant period?	1
Total Points Possible	47

CDOC Cancer Plan Strategies on Colorectal Cancer, Cancer Survivorship and HPV Vaccination

Colorectal Cancer

Amount available: Up to \$85,000

There is up to \$85,000 available for projects related to the colorectal cancer strategies. All interventions must align with the following strategies:

- Promote the increased use of annual fecal immunochemical testing (FIT) for average-risk screening in settings that serve patients with limited health care coverage, and for patients who prefer less expensive, noninvasive testing.
- Implement [FLU/FIT programs](#) in California's FQHCs.
- Implement evidence-based strategies in California's FQHCs as outlined in [Steps For Increasing Colorectal Cancer Screening Rates: A Manual For Community Health Centers](#) and the [National Cancer Institute's Research-Tested Intervention Programs \(RTIPS\) website](#).

Cancer Survivorship

Amount available: Up to \$25,000

There is up to \$25,000 available for projects related to the cancer survivorship strategies. All interventions must align with the following strategies:

- Partner with hospitals, regional and community cancer centers, and nonprofit organizations to promote dissemination of survivorship resources and services.
- Educate healthcare providers on the value of exercise for cancer patients and survivors.
- Support CME courses, conferences, and education material for oncology providers.
- Develop opportunities for cancer survivors to be involved in educating the public, health care providers, and policymakers about their post-treatment needs and the impact of cancer.

HPV Vaccination

Amount available: Up to \$85,000

There is up to \$85,000 available for projects related to the HPV vaccination strategies. All interventions must align with the following strategies:

- Incorporate evidence-based strategies to improve HPV vaccination in clinics serving adolescents, including:
 1. Issuing standing orders
 2. Using electronic health record (EHR) prompts for providers,
 3. Scheduling next appointment, the same day as the first dose is given,
 4. Offering vaccine-only appointments,
 5. Implementing patient reminder/recall systems,
 6. Ensuring a pro-vaccine office culture,

7. Making presumptive recommendations for HPV vaccine, and
8. Educating providers and staff on HPV disease and prevention through vaccination. Resources available to support interventions include [Clinician and Health Systems Action Guides](#) available through the American Cancer Society.

- Increase the number of medical facilities, clinicians, school health centers, and pharmacies contributing HPV immunization data to the California Immunization Registry.
- Increase parent, caregiver, and adolescent acceptance of the HPV vaccine as a tool to prevent multiple cancers.
- Increase the number of clinicians strongly recommending the HPV vaccine at the same time they administer meningococcal conjugate and tetanus-diphtheria-acellular pertussis (Tdap) vaccines.
- Support improved access to HPV vaccine through school-based clinics, pharmacies, local health departments, and other vaccination clinics (e.g., vaccine-only appointments).

Attachments

Attachment A - Application
Information Attachment B –
Application Narrative Attachment C –
Work Plan Attachment D – Budget
Attachment E – Sample Contract