



**Susan G. Komen  
North Carolina Triangle to the Coast**

**Community Grants  
2015-2016  
Request for Applications**

**Breast Health and Breast Cancer  
Education, Screening and Treatment Programs**



## Request for Applications Community Grants Program 2015-2016

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The North Carolina Triangle to the Coast Affiliate of Susan G. Komen® —along with those who generously support us with their talent, time and resources—is working to better the lives of those facing breast cancer in our community. We join hundreds of thousands of breast cancer survivors and activists around the globe as part of the world’s largest and most progressive grassroots network fighting breast cancer. Through events like the Komen NC Triangle and the Wilmington Race for the Cure®, we have invested more than \$13.5 million in local breast health and breast cancer awareness programs in 29 counties throughout central and eastern North Carolina. Up to 75 percent of net proceeds generated by the our Komen Affiliate stay in our service area. The remaining income goes to the Susan G. Komen Research Program, which supports grants and scientific partnerships to find the cures.

### **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 \$800 million in research and provided more than \$1.7 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](http://komen.org) or call 1-877 GO KOMEN. Connect with us on Facebook at [www.facebook.com/susangkomen](http://www.facebook.com/susangkomen) and Twitter @SusanGKomen.

**The application deadline is 5:00pm on December 5, 2014.**

Applications received after this date and time will not be accepted.

**ALL APPLICATIONS MUST BE SUBMITTED ONLINE AT:**

<https://affiliategrants.komen.org>

Inquiries can be directed to Julie McQueen, CHES, Director of Community Health.

Please call 919-493-2873 or email [jmcqueen@komeennctc.org](mailto:jmcqueen@komeennctc.org).

## **2015-16 Susan G. Komen North Carolina Triangle to the Coast Statement of Need**

Susan G. Komen North Carolina Triangle to the Coast Affiliate funds programs that provide essential direct patient care services for breast cancer screening and treatment. It is also our aim to encourage ingenuity, innovation and collaboration among existing and potential new service providers. We look for outcomes that address both the longevity of life after diagnosis and the quality of care across the entire continuum of care. In considering the balance of funds awarded, we strive to minimize duplication of services and maximize the use of existing structures by encouraging partnerships and collaborations within communities.

In 2011, the Komen NC Triangle Affiliate published our Community Profile that provided a comprehensive assessment of the 20 counties in our service area. Since that publication, our service area has expanded to 29 counties, with the addition of Bladen, Brunswick, Columbus, Duplin, New Hanover, Onslow, Pender, Sampson and Wilson in 2012. However, the funding priorities revealed in 2011 continue to be our focus for the 2015-2016 grant cycle. Proposals are evaluated with respect to available funds and response to the funding priorities outlined below. For more information, the complete 2011 Community Profile can be found on our website at <http://www.komennctc.org/grants/funding-priorities/>.

### **Funding Priority Areas**

Based on the community needs assessments and the 2011 Community Profile our Komen Affiliate identified the following priority areas.

- 1. Engage communities by providing culturally appropriate education/outreach breast health activities to women in our service area, with emphasis on uninsured and under-insured minorities and individuals living in rural communities.**
  - Program should increase breast self awareness and screening mammography knowledge
  - For successful outcomes we look for measurable objectives that will not only educate the target community but connect them with some type of screening *services* (clinical breast exam, mammogram, etc.)
  - In addition to increasing education/ awareness about breast health, proposals may include education pertaining to regular screening, receiving a timely diagnosis and follow-up care, as it relates to early detection.
  - We highly encourage a partnership with your local BCCCP provider and recommend providing education about the NC BCCCP program to individuals in the community in addition to appropriate health care providers.
  - Where appropriate, programs should provide cultural, economic and privacy sensitivity training to breast health providers who serve target populations.
  
- 2. Increase and improve access to screening, diagnostic, and treatment services offered to women particularly those at high risk within our Affiliate service area.**
  - We encourage clinics, hospitals, oncology facilities and health departments to document in your proposal that you offer low-cost or subsidized services for high-need patients. These costs should reflect the current Medicaid rate wherever possible.
  - Programs should aim to detect breast cancer in its earliest stages. We are interested in programs that decrease barriers while promoting screening and diagnostic methods that

complete the breast health screening cycle, including clinical breast exams and/or mammograms.

- In order to remove barriers to care for the uninsured and under-insured, we encourage programs to creatively address issues that may include: transportation, language, financial burdens, family responsibilities, disabilities, scheduling issues and/or availability of services.
- Programs should promote proactive and ongoing behaviors related to breast health, including consecutive annual screening procedures and appropriate follow-up and/or treatment.
- We do fund programs that address the needs of persons who are undocumented.

**3. Reduce and remove barriers to provide timely follow-up care for individuals needing diagnosis after screening and/or individuals undergoing treatment**

- In order to remove barriers to care for the uninsured and under-insured, we encourage programs to creatively address issues that will allow breast cancer patients to effectively participate in all parts of their treatment plan. This may include: transportation, language, financial burdens, family responsibilities, disabilities, scheduling issues and/or availability of services.
- We are looking for proposals dealing with any aspect of breast cancer treatment, including but not limited to diagnostics and staging, chemotherapy, radiation, complementary therapies and other follow-up care in a medical setting.
- Increase post-diagnosis support and assistance to survivors/co-survivors.
- We are interested in proposals that address quality of life issues and/or support after a breast cancer diagnosis for breast cancer patients and/or their families. Some examples include, support groups, counseling, complementary therapies, and side-effects management (i.e. wigs, prosthesis, lymphedema sleeves), angel care funds, and continued screening after treatment ends.

## **Required Elements**

**1. Address at least one of the following: education, screening, diagnosis, treatment, post-diagnosis services/ issues, AND include appropriate referral plans to ensure a seamless continuum of care.**

- Our top priority is to fund programs that identify and serve people who are not getting access to education, screening, diagnosis, treatment, and post-diagnosis (both social/psychological and physical) services.
- In cases where the proposal focuses on one element of the continuum of care, we expect programs to articulate a clear and measurable continuum-of-care referral and follow-up process (example: patient education must lead to appropriate screening).
- Recognizing that breast health is an ongoing process, preference is given to programs that demonstrate a long-term impact on any given individual.

**2. Fill gaps and address disparities in your community.**

- Programs should address gaps in the continuum of care within a particular community. Programs must offer innovative approaches that supplement or support existing education, screening, diagnosis, treatment and post-diagnosis options in a community.
- We encourage programs that address demographic, social or geographic disparities that impact the breast cancer incidence and mortality rates in a given community.

- We encourage programs that address informational gaps in regards to knowledge of resources available in the continuum of care and implement culturally-appropriate health communication mechanisms as a component of the program.
- 3. Utilize evidence based strategies and contains a strong evaluation component.**
    - Your program must include at least one evidence-based strategy. The use of emerging best practices in your program plan will also be accepted.
    - All proposals must include a well-developed evaluation plan with clearly defined and S.M.A.R.T (Specific, Measurable, Achievable, Realistic, and Time) objectives.
  - 4. Include uninsured and under-insured populations in your program’s target audience.**
    - Our service area is demographically and geographically diverse. Higher disparities in breast cancer mortality, access and quality of care are especially evident in rural communities, among minorities, people living at or below federal poverty guidelines and those without health insurance. As such, these are our highest priorities and your program should include one or more of these populations.
  - 5. Reduce/Remove cultural and linguistic barriers to breast health services.**
    - In being culturally responsive, programs should demonstrate as appropriate, protocols for providing effective communication and services to diverse populations. Strategies might include offering multi-lingual, low-literacy and/or culturally appropriate outreach and services.
  - 6. Serve individuals within our 29 County Service area.**
    - Komen North Carolina Triangle to the Coast Affiliate serves the counties of Bladen, Brunswick, Caswell, Chatham, Columbus, Duplin, Durham, Edgecombe, Franklin, Granville, Halifax, Harnett, Johnston, Lee, Moore, Nash, New Hanover, Northampton, Onslow, Orange, Pender, Person, Pitt, Sampson, Scotland, Vance, Wake, Warren and Wilson. Grant funds can **only** be used in these counties.

## Suggested Elements

Addressing the funding priorities may increase the likelihood of grant funding.

- 1. Forge meaningful organizational partnerships to maximize resources and impact.**
  - To support our goal of catalyzing creativity and ingenuity, we give priority to programs that are collaborative, integrative and coordinated with other service providers, not necessarily limited to health care providers.
  - Examples of innovative partnerships include, but are not limited to: transportation services, NC BCCCP providers, public housing developments, faith-based organizations, local worksites, multi-cultural and community organizations, senior centers, local hospitals/clinics and university-based health care systems.
- 2. Extend targeted outreach activities beyond your existing institutional community.**
  - We strongly encourage programs that innovatively and strategically bring services (including education) to where the target community resides or works. This may include reaching out to neighboring counties, regions and/or communities.

- Some programs limit outreach and marketing to “easy-to-reach” individuals, specifically those in the institution’s database/ mailing list or who live or work nearby. We encourage programs to reach deeper into the community by developing innovative communication and outreach strategies to engage harder-to-reach populations.

## Important Dates

- Grant Writing Workshops           Late September – Early October 2014 (exact dates TBD)
- **Letter of Intent Due**               **October 31, 2014 by 5:00 PM**
- **Application Deadline**           **December 5, 2014 by 5:00 PM**
- Award Notification                 March 2015
- Award Period                         April 1, 2015 – March 31, 2016

## Eligibility

Applicants must meet the following eligibility criteria to be considered for funding:

- Program must be specific to breast health and/or breast cancer. If a program includes other health issues along with breast cancer, such as a breast and cervical cancer program, funding may only be requested for the breast cancer portion.
- All past and current Komen-funded grantees must be in compliance with Komen requirements.
- Applicant has current tax exempt status under the Internal Revenue Service code.
- Applicant must be a non-profit organization located in or providing services to one or more of the following locations:  
Bladen, Brunswick, Caswell, Chatham, Columbus, Duplin, Durham, Edgecombe, Franklin, Granville, Halifax, Harnett, Johnston, Lee, Moore, Nash, New Hanover, Northampton, Onslow, Orange, Pender, Person, Pitt, Sampson, Scotland, Vance, Wake, Warren, Wilson.
- 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 in the 12 months prior to the submission deadline for the application, then applicant is not eligible to apply for a grant until 12 months after the conviction. After such 12 month period, applicant must demonstrate in its application that appropriate remedial measures have been taken to ensure that any criminal misconduct does not recur.

## Funding Limits and Allowable Expenses

Applicants may request from \$10,000 up to \$50,000 in funds for one year. This should be a combined amount for both direct and indirect costs.

- Programs that provide education and/or social support including survivorship and angel funds may be funded up to \$25,000.
- Programs that provide direct patient care costs and services such as screening and treatment may be funded up to \$50,000.

Funds may be used for the following types of expenses provided they are directly attributable to the program:

- Salaries and fringe benefits for program staff
- Consultant fees
- Clinical services or patient care costs
- Meeting costs
- Supplies
- Reasonable travel costs related to the execution of the program
- Other direct program expenses
- Equipment, essential to the breast health-related program to be conducted, not to exceed \$5,000
- Indirect costs, not to exceed 10% of direct costs

Funds may **not** be used for the following purposes:

- Research, 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
- Development of educational materials or resources
- 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
- Individuals
- Reimbursement for specific individuals' direct services
- Building/renovation
- Capital campaigns
- Employee matching gifts
- Land acquisition
- Program-related investments/loans
- Scholarships
- Education regarding breast self exams/use of breast models
- Thermography

## Important Granting Policies

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

- No expenses may be accrued against the grant until the agreement is fully executed.
- Any unspent funds greater than \$1.00 must be returned to our Komen Affiliate.
- Grantee will be required to submit one semi-annual progress report and one final report that includes an accounting of expenditures. Additional reports may be requested.
- At the discretion of Komen North Carolina Triangle to the Coast Affiliate, the grantee may request one no cost extension of no more than 6 months for each grant.
- Certain insurance coverage must be demonstrated at the execution of the grant agreement, if awarded. 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 employers liability insurance with limits of not less than \$500,000; 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 program, \$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. Grantees are also required to name the Affiliate as an Additional Insured on the above policies.

## Educational Materials and Messages

Susan G. Komen is a source of information about breast health and breast cancer for people all over the world. To reduce confusion and reinforce learning, we only fund programs that involve 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. 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 education programs that teach or endorse the use of 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](http://www.shopkomen.com).

## Submission Requirements

All proposals **must be submitted online** through the Komen Grants e-Management System (GeMS): <https://affiliategrants.komen.org>. Hard copy, fax and electronic submissions will not be accepted under any circumstances.

Completed applications must be received on or before December 5, 2014 at 5:00 PM. No late submissions will be accepted.

## **Review Process**

Each grant application will be reviewed by at least three independent reviewers. They will consider each of the following selection criteria:

**Impact:** Will the program have a substantial positive impact on increasing the percentage of people who enter, stay in, or progress through the continuum of care? Will the program have a substantial impact on the priority selected? How closely does the program align with the funding priorities stated in the RFA? Does the program have a sufficient and documented plan to evaluate its impact? Is the impact likely to be long-term?

**Feasibility:** How likely is it that the objectives and activities will be achieved within the scope of the funded program? Is the program well planned? Is the budget appropriate and realistic? Does the budget justification explain in detail the reasoning and need for the costs associated with the program?

**Capacity:** Does the applicant organization, Project Director and his/her team have the expertise to effectively implement all aspects of the program? Is the organization respected and valued by the target population? Is it culturally competent?

**Collaboration:** Does this program enhance collaboration among organizations with similar or complementary goals? Are the roles of the partners appropriate and relevant?

**Sustainability:** Is the program likely to be sustained? Are collaborations (if proposed) likely to be sustained beyond program period? Does the application organization have other sources of funding sufficient to continue the program beyond the Komen grant term (if awarded)?

**County Tier Designation:** What tier designation has been assigned to the county in 2014 by the North Carolina Department of Commerce? Tier rankings take into consideration four factors: *adjusted property tax base per capita* for the most recent taxable year, *percentage growth in population* for the most recent 36 months for which data are available, *median household income* for the most recent 12 months for which data are available, and *average unemployment rate* for the most recent 12 months for which data are available. Counties designated as Tier 1 or Tier 2 will be given extra points in the review process. For more information on how tier designations are determined see <http://www.nccommerce.com/research-publications/incentive-reports/county-tier-designations>.

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

## **Application Contents**

The application will be completed and submitted via GeMS, <https://affiliategrants.komen.org> For an application instruction manual, please visit the Affiliate's Grants webpage, [www.komennctc.org](http://www.komennctc.org) or contact Julie McQueen at [jmcqueen@komennctc.org](mailto:jmcqueen@komennctc.org) or 919-493-CURE.

When initiating an application on GeMS, please make sure it is a **Community Grants** application, designated “CG”, and not a Small Grants (“SG”) application to apply to this RFA. The application summary is provided below to help you plan your responses before entering them in Komen’s online system.

- **Project Profile**
  - \* Note: Please attach scanned copies of signed letters of agreement between partnering organizations.
- **Organization Summary**
  - \* This section collects detailed information regarding your organization, including your organization’s background, structure and mission statement.
- **Project Abstract**
  - \* This section collects important information regarding the main focus for your project as well as the abstract. This abstract should be detailed and address the reason for the program, important project activities, methods for evaluation, and the impact your program will make on breast cancer in your community.
- **Project Narrative:** *On the Project Narrative page of the application, please address the requests below for each section.*
  1. **Organization Capacity** (Limit: 3,500 characters)
    - Explain why the applicant organization is best-suited to lead the program and accomplish the goals and objectives set forth in this application.
    - Describe evidence of success in delivering breast health/cancer services to the proposed population.
    - Describe fiscal capability to manage the delivery of the proposed goals and objectives and ensure adequate measures for internal control of grant dollars.
    - Describe the organization’s current financial state. Has your organizational budget increased or decreased from last year? Please explain why.
  2. **Statement of Need** (Limit: 3,500 characters)
    - Describe the population served by this program/project.
    - Describe the need for this project.
    - Provide population characteristics (race, ethnicity, economic status, and breast cancer statistics) specific to the target population.
  3. **Project Description** (Limit: 3,500 characters)
    - Explain how the program’s goals and objectives, as outlined in your Project Work Plan addresses one or more of the priorities outlined in the Affiliate’s Community Profile/Statement of Need.
    - Explain how the program will increase the percentage of people who enter, stay in, or progress through the continuum of care.
  4. **Collaboration** (Limit: 3,500 characters)
    - Describe the roles and responsibilities of all organizations or entities participating in the program.
    - Explain how the collaboration strengthens the program and why these organizations are best suited to implement the program and accomplish the goals and objectives set forth in this application.
  5. **Sustainability** (Limit: 3,500 characters)
    - Describe the plan to secure and allocate resources (financial, personnel, partnerships, etc.) to sustain the program at the conclusion of the grant period. What are your

organization's plans to support the project director to implement, manage and oversee all aspects of the proposed program?

- What efforts will you take to communicate this program to your organizational leadership to ensure buy-in?

#### 6. *Evaluation*

- \* Describe in detail how the organization(s) will measure progress against the stated program goals and objectives.
- \* Describe how the organization(s) will assess the impact of the program on the selected priority.
- \* Describe how the organization(s) will assess program delivery.
- \* Describe the monitoring and evaluation expertise that will be available for this purpose.
- \* Describe the resources available for monitoring and evaluation during the course of the program. Specify if these resources are requested as part of this grant, or if they are existing organizational resources.
- \* **Note:** Please attach any sample evaluation documentation including templates, logic models or surveys under the "Project Work Plan" section.
- \* **Project Target Demographics**
  - \* This section collects information regarding the various demographic groups you intend to target with your program. This does not include every demographic group your program will serve but should be based on the individuals you plan to focus your program's attention on.
- \* **Key Personnel**
  - \* **Note:** Please attach resumes for each person. Resumes must be limited to 2 pages per person.
- **Project Work Plan**
  - \* In this section of the application, you are required to submit goals and objectives. Goals are high level statements that provide overall context for what the program is trying to achieve. Objectives are low level concrete statements that describe what the program is trying to achieve per each Goal. An objective can be evaluated at the end of the program to establish if the objective was met or not met.
  - \* Each project goal should have at least one objective but can have an unlimited number of objectives. Please ensure that your objectives are SMART objectives:  
**Specific**  
**Measurable**  
**Attainable**  
**Realistic**  
**Timely**
  - \* You will also be required to submit the timelines, intended interventions to be utilized (choose from the list provided), names of individual/s responsible for completion of each objective, the anticipated number of individuals to be served and the evaluation methods and techniques that will be utilized for each objective.
  - \* **Note:** Each item included in your Project Work Plan must be accounted for during progress reporting. The Project Work Plan should only include items goals that will be accomplished with funds requested from Komen North Carolina Triangle to the Coast. Goals funded by other means should not be reported here, but instead, can be included in your overall program description.
  - \* **Note:** Please attach any sample evaluation documentation including templates, logic models or surveys in this section.

- **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.
- \* Note: Please attach a copy of your organization's IRS tax-exempt letter. Evidence of state or local exemption will not be accepted. Please do not attach your Federal tax return.

**All Correspondence should be directed to:**

Susan G. Komen North Carolina Triangle to the Coast Affiliate  
600 Airport Blvd., Suite 100  
Morrisville, NC 27560  
Phone: 919-493-CURE Fax: 919-378-9565  
ATTN: Julie R. McQueen, CHES  
Director of Community Health  
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[www.komeennctc.org](http://www.komeennctc.org)