

Funding Opportunity Announcement DP14-1408: "Multiple Approaches to Increase Awareness and Support among Young Women Diagnosed with Breast Cancer"

Technical Assistance Call Frequently Asked Questions (FAQs)

Tuesday, June 3, 2014 10am and 3pm

E-mailed Question:

There does not seem to be a place in the FOA where agency capabilities are requested. Is there a section where this should be included?

Response:

Your project narrative should include information about the organization's capacity.

Questions:

- a. Can you confirm when applicants should include the evaluation plan?
- b. On page 25 of the solicitation, the government reference in section 10-c Applicant Evaluation and Performance Measurement Plan, then on page 35 of the solicitation the government reference in section b. Evaluation and Performance Management (15 points), to ensure consistency in our response, will the government please clarify if the two elements are one in the same? If they are not the same, are they two separate evaluation criteria?

Responses:

- a. The evaluation plan described in page 9 and on page 35 is a component of the applicant's project narrative and serves as an initial plan that describes how applicants will identify progress in implementing program strategies, activities, and achieving program outcomes. Evaluation focus areas that should be included are: partnership function/contributions, program plan development, and implementation of interventions. As stated on page 26, awardees will be required to submit a more detailed evaluation and performance measurement plan within the first six months of the project.
 - b. Section b. includes the criteria that the objective reviewers will use to assess the merit of your grant application. Section 10-c includes the guidelines for potential applicants to use in developing their application.
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Questions:

- a. Should applicants include a (concise) work plan, or should the work plan be a chart included within the 25-page limit?
- b. Should the work plan describe only efforts for Year 01 of the project period, or the overall plan of the proposal? Should the budget reflect only YR1 activities, and align with the YR1 work plan?

Responses:

- a. Applicants should submit a concise work plan which outlines (five year) project period objectives; annual objectives, and annual activities. The work plan should describe specific program strategies for the first year of the project period (see page 16 of the FOA). The work plan should not exceed 25 pages and is a part of the Project Narrative page limit (see page 24 of the FOA: D. Application and Submission Information; #10. Project Narrative).
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- b. The work plan will outline the details of all necessary activities that will be supported through the approved budget. When developing the budget narrative, applicants must consider whether the proposed budget is reasonable and consistent with the purpose, outcomes, and program strategy outlined in the project narrative.
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Question:

Please describe what is meant by multi-component FOA?

Response:

Multi-component FOA (as noted on page 24) describes the two FOA approaches framed as program components. Applicants would address *one* of the following components when applying for this funding opportunity announcement:

- **Component 1:** Strategies and Integrated Health Communication, Marketing, and Media Approaches to Disseminating Health Messages to Young Breast Cancer Survivors (YBCS): Applicants will develop and implement a strategic and integrated multimedia health education and awareness campaign aimed at addressing the health information needs of YBCS.
- **Component 2:** Provision of Structured Support Services to YBCS from Diagnosis through Post Treatment: Applicants will enhance and implement existing services that strive to support YBCS.

The note on page 30 is an error and does not pertain to this FOA.

Question:

Regarding the Federal Funding Accountability and Transparency Act of 2006 (FFATA): Are programs required to report on funding less than \$25,000?

Response:

No, applicants should follow the instructions of the FFATA (as noted on page 43 of the FOA). Information should be collected for two elements of these mandates: 1) information on executive compensation when not already reported through SAM (the single, publicly accessible Web site), www.USASpending.gov; and 2) similar information on all sub-awards, subcontracts, or consortiums for greater than \$25,000.

Question:

What is meant by implementation of interventions for targeted populations?

Response:

Applicants should describe program need that relates to the disease burden of their targeted population i.e. young breast cancer survivors in the applicant's service area. Interventions that address the defined program need should be designed and implemented with the applicant's target population in mind.

Question: (see related e-mailed questions below)

Please define Clinical Care.

Response:

CDC defines clinical care as direct services, or one-on-one, face-to-face- services or care with a health care provider. Any billable clinical service that involves individual interaction between a patient and provider is not

allowable. As noted in the FOA (page 30), clinical care is a restricted activity under this funding opportunity announcement.

Question:

What is the due date for the Letters of Intent (LOI)?

Response:

The FOA does not state a due date for LOIs; however, applicants are encouraged to submit a letter, and also be reminded that the application submission date to www.grants.gov is July 1.

Question:

What type of organizations should apply for component 1?

Response:

Eligibility Information can be found on page 19–20 of the FOA. Applicants should apply for either component based on their organization’s capacity and ability to reach the intended population.

Questions:

- a. Organization Capacity: Is CDC looking for applicants that can provide efforts statewide or on a national level?
- b. What is meant by “Scope of Project”? Are you looking for national or state capacity?

Responses:

- a. Applicants should describe their organization’s capacity to reach the target population. This can be at the national or state level.
 - b. Applicants should review the Organizational Capacity Section of the FOA on page 14. Applicants should define their target population and consider their organization’s ability to network across diverse groups and implement partnerships that will expand organizational reach to the target population.
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Question:

Is indirect cost separate of the funding available?

Response:

No, the available funding includes both direct and indirect costs.

Question:

Regarding the target audience/population for component 1, how does CDC define young women with breast cancer, as opposed to young breast cancer survivors?

Response:

Under Target Population (page 7 of the FOA), young breast cancer survivors (YBCS), or women diagnosed with

breast cancer, are between the ages of 15 and 44 and are the identified population. These terms are used interchangeably.

Question:

Please explain or define the population and reach or geographic area that applicants should address; if plans are to use social media and/or mobile apps.?

Response:

Applicants should describe in their applications (for component 1) how their organization is uniquely positioned to implement a campaign. Applicants must have a documented history of working with and delivering health messages to YBCS, demonstrated ability to reach the target population using multimedia tools and resources, and the expertise necessary to develop and implement a campaign that uses novel media tools (including social networking media) to disseminate health messages (see FOA page 4).

Question:

Please explain the timeframes of the early activities under the logic model.

Response:

The early activities should be addressed or implemented during the first year of the project period and continued through years 2–5. How quickly an awardee advances from early activities to late activities also depends on the organization's capacity, meaning that certain awardees may begin conducting late activities as early as 6 months after the budget period. Late activities are related to intervention implementation and product dissemination.

Question:

If an organization's focus is on breast cancer, but not young women at risk for breast cancer, can they still apply?

Response:

Yes, the FOA is an open competitive announcement. Applicants should determine if their organization has the capacity to reach the target population.

Question:

Is the amount of available funds (\$1.8 million) for one year or the 5-year project?

Response:

The available funds (\$1.8 million) are available for the first budget year. All other years' funding is based on availability of funds.

Question:

Under the Application Review Information Section; Review and Selection Process: is the work plan 10 points or 15 points?

Response:

The work plan is worth 10 points, as noted on page 35 of the FOA.

Question:

What is meant by collaborations with CDC, and who would applicants collaborate with?

Response:

Page 6 of the FOA outlines a list of CDC-funded programs who would serve as collaborators for intended applicants.

Question:

Can applications begin the validation process now in Grants.gov?

Response:

No, the validation process is a part of the submission process in Grants.gov that provides applicants electronic confirmation that their application was submitted and uploaded successfully. However, we do encourage applicants to begin the application submission process early to avoid any submission errors.

Questions:

- a. If the award ceiling is \$550,000 and the Component 1 range is \$200,000 to \$450,000 and Component 2 ranges from \$150,000 to \$350,000. Can you provide a little more context around the math for these two items? If we submit a \$550,000 request will our request get kick backed because it's not in the specified range?
- b. We would like to clarify the maximum grant requests, as indicated in the FOA.
 - o On pages 3 and 4, the CDC states that the award range for Component 1 will go up to \$450,000, and that it will go up to \$350,000 for Component 2.
 - o Elsewhere, the FOA states that the average award will be \$360,000, and that the total ceiling for individual awards will be \$550,000.

What is the maximum grant amount per applicant? Does it differ between component one and component two?

Response:

- a. The funding average for each award is approximately \$360,000. The ceiling of an individual award could be funded up to \$550,000. All funding requests will be reviewed, and funding is subject to availability of funds.
 - b. The ceiling for component 1 is \$450,000 per year; the ceiling for component 2 is \$350,000 per year. Please use these numbers in your consideration.
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E-mailed Question:

Is it correct that the response to the current FOA should be 25 pages, single-spaced?

Response:

Yes, you have 25 pages to make your program case. Keep in mind that this includes the narrative, work plan, etc. as stated in the FOA.

E-mailed Question:

Can food costs be included in the budget for this FOA? Are there any specific considerations or allowances for including food in the budget (meeting health and nutrition standards, etc.)?

Response:

Food costs are not allowed as a component of programs funded by this FOA.

E-mailed Question:

Is there a maximum percentage of the budget that can be allocated towards staffing versus direct services and other costs? Does this differ between staffing related to programming and staffing related to administrative or project oversight support?

Response:

No, however you should be mindful that costs included in your budget should be relevant to the proposed program and sufficient to meet the program's objectives.

E-mailed Question:

Is there a prescribed structure for the MOUs that will be included with the response?

Response:

No. These may vary by organization.

E-mailed Question:

In a previous FOA, the CDC asked only for the CVs of staff members who were directly related to the proposed programming. Is that the case for the current proposal, as well, or are additional qualification details required?

Response:

CV/resumes are sufficient.

E-mailed Question:

During the call there was conflicting information regarding the work plan—at one point the work plan was mentioned as a document separate from the narrative that should be included in the 25 page limit (as described in the FOA), but at another time it was mentioned that components of the work plan (the work plan template) should be included in the main project narrative document. Is there clarification on where the work plan should be included in the application?

Response:

The work plan (which describes year 1 activities/work) should be included in the 25-page limit.

E-mailed Question:

Evaluation: Page 26 of the FOA specifies that “awardees will be required to submit a more detailed evaluation and performance measurement plan within the first six months of the project”. Can applicants request funding to support collaboration between the applicant and public health researchers who would design and conduct the evaluation?

Response:

Yes, applicants can submit a budget narrative requesting funding for an external evaluator. When requesting support for evaluation, please provide adequate justification and include relevant program activities within the work plan.

E-mailed Question:

Work plan: On the information call held by CDC, applicants were instructed to submit a Work plan that describes the activities necessary in only year one of the project. However, on page 15 of the FOA, applicants are instructed to “provide a work plan consisting of five year project period objectives, annual objectives, and annual activities.” Does this mean that the CDC wants objectives for both the overall project (“five year project period”) and year one, and specific program activities for only year one?

Response:

The work plan is primarily focused on activities and objectives to be achieved during year one; however, applicants should ensure that these work plan elements are linked to five-year project period objectives which may be included in your Project Narrative. The work plan should include activities that are needed to achieve year one objectives which should be linked to five-year project period objectives that are aligned with the long-term outcomes identified in the FOA.

E-mailed Question:

Sustainability of Efforts: In furtherance of the short-term objective to “increase the sustainability of efforts that ensure continuity of services” (see p. 1 of FOA), can an applicant not-for-profit organization request funding for a consultant to work with its staff and Board of Directors to develop or enhance the organization’s Strategic Plan?

Response:

Applicants can submit a budget narrative requesting funding for a consultant to work with staff on sustainability activities. When requesting support for this work, please provide adequate justification and include relevant program activities within the work plan.

E-mailed Question:

Short Term Outcomes: If our proposal addresses Component 2, does our Work plan need to address the short term outcome of “Increased use of YBCS-tailored, evidence-based public health messages and strategies” outlined on page 2 of the FOA? Or does this short term outcome only apply to proposals addressing Component 1?

Response:

This short-term outcomes are specific to component 1.

E-mailed Questions:

- a. Clinical Care Definition: a) How does CDC define “clinical care”? and b) Is one-on-one patient navigation by a trained professional considered “clinical care”?
- b. On page 30 under “Funding Restrictions” it states “Awardees may not use funds for clinical care.” I’m assuming this means providing actual medical care to a patient correct? We have services that include psychosocial and psychological services that would fall under planned activities in a group setting for the target population. Also, we would like to involve our network of oncologists to provide these resources to their young breast cancer patients... Would these types of activities be restricted?

Responses:

- a. CDC defines clinical care as direct services, or one-on-one, face-to-face- services or care with a health care provider. Any billable clinical service that involves individual interaction between a patient and provider is not allowable. As noted in the FOA (page 30), clinical care is a restricted activity under this funding opportunity announcement.
 - b. Yes, we mean actual medical care to individual patients. These services cannot be paid for by the cooperative agreement. If the provider network activities include medical care (e.g., billable care that is paid for by the co-op), they are prohibited.
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E-mailed Question:

Does the 25 page limit include letter of support, CVs, references/citations, and other attachments other than the work plan?

Response:

No. The 25-page limit does not include the attachments. Please remember that the work plan is included in the 25-page limit.