



ROGEL CANCER CENTER
UNIVERSITY OF MICHIGAN HEALTH

Rogel Cancer Center Community Grants to Address Health Disparities

Request for Proposals 2024

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Proposals are due January 11, 2024, by 5:00 PM EST.

Purpose:

The University of Michigan Rogel Cancer Center is a National Cancer Institute-designated Comprehensive Cancer Center. The mission of the Rogel Cancer Center Office of Community Outreach and Engagement (COE) is to address the cancer burden and reduce cancer disparities across the state of Michigan. Our programs and services include public education, a community advisory board, and support for innovative research. The COE office implements evidence-based interventions in collaboration with local communities by applying community based participatory approaches.

According to the Michigan Department of Health and Human Services, in 2020 in the state of Michigan, approximately 60,000 people were expected to be diagnosed with a form of cancer and another 20,000 were expected to die of cancer. Since 1987, the reported incidence of cancer in Michigan has decreased by 10% while cancer mortality has decreased by 25%.

While Michigan has seen a steady decline in cancer incidence and mortality, the burden of cancer is not equally shared across the state. There are significant racial and socioeconomic disparities across incidence, mortality, screening & early detection.

The Rogel Cancer Center is committed to addressing cancer related health disparities across the state of Michigan and announces this request for proposals to fund eligible community-based organizations for two funding opportunities: **Evidence Based Interventions** and **Capacity Building**. Applicants must select one of the two funding options and only one application per organization will be accepted.

- 1) **Evidence-Based Interventions (EBI)** projects: Up to \$50,000.00 (including indirect costs) total over a two-year project period to implement one or more EBI. These interventions can address one or more of the following: prevention, screening, or survivorship across the cancer continuum. A set of recommended evidence-based interventions are provided beginning on page 3. Applicants should select 1 or more from these provided resources; however, these can be tailored to respective populations or sub-populations. Up to 3 EBI projects will be funded across the state.
- 2) **Capacity Building** projects: Up to \$5,000 (including indirect-costs) total over a one-year project period to build capacity to address the local or regional cancer burden. Examples include establishing or growing a local coalition with formal agreements, procedures and processes, and associated activities, such as conducting community listening sessions to inform future programming. Up to 5 capacity building projects will be funded across the state.

Eligible Organizations:

- Non-profits organizations; 501(C)(3) including: Community-Based and Faith-Based Organizations
- Federally Qualified Health Centers
- Federally Recognized Tribes and Tribal Organizations
- Eligible hospitals that are non-federal, short-term general acute care facilities that are located in a rural area of Michigan, including faith-based hospitals.
- **AND**

- Must serve a population experiencing cancer health disparities: Rural, Low SES, African American, Native American, Hispanic/ Latino, Asian American/ Pacific Islander, Middle Eastern North African or LGBTQ+ communities.
- Serve a population across Rogel Cancer Center’s Statewide Catchment Area.

Ineligible:

- Large hospital systems with 500 or more beds.
- Universities, state, and county governments.

Rural Definitions:

A list of Rural zip codes can be found here: [..Michigan Rural Zip Codes.xlsx](#) or [forhp-eligible-zips.xlsx \(live.com\)](#)

Grant Application Process and Timeline:

A pre-application ZOOM session will be held on November 13, 2023. The ZOOM session will review each section of the RFP and cover FAQ’s. Potential applicants can [register for the ZOOM session here](#). The session will be recorded and made available for viewing on our website [Community Outreach | University of Michigan Rogel Cancer Center](#)

Capacity building grants will be funded for a 12-month term, beginning approximately April 1, 2024, through March 30, 2025.

Evidence Based Intervention grants will be funded for a 24-month term, beginning approximately April 1, 2024, through March 30, 2026.

The grant term begins once the formal agreement is signed by both parties.

Proposal Timeline:

Proposal Release	November 6, 2023
Pre-Application ZOOM Session	November 13, 2023
Proposals Due	January 11, 2024
Notifications of Awards	February 1, 2024
Project Start	April 1, 2024

Required Reporting and Technical Assistance:

Rogel Project Management Staff and Evaluation Specialist will meet with grantees to provide technical assistance during quarterly meetings. The purpose of these meetings is to provide support to ensure successful implementation and evaluation of each project. The Rogel staff will work with grantees to develop and conduct evaluation plans, tools and measures as needed.

Grantees will be required to submit quarterly narrative and evaluation reports. Reporting templates and due dates will be included in the contractual agreement.

We invite grantees to present their projects to our Rogel Community Advisory Board once during their funding period. The Rogel Project Management staff will assist in the development of presentations.

Submission Information:

Proposals are limited to a total of 10 pages for an EBI proposal and 5 pages for Capacity Building proposals. All proposals should use a 12-point font with single spacing. The work plan is included in the page limit; however, the **budget and letters of support are considered attachments, and not part of the page limit**. Work plan and budget templates are provided in attachments A and B respectively.

Applications will be submitted electronically via the info-ready platform ([Info-ready](#)). Note that Applicants will need to create an account and password prior to submission, so please consider completing this first step prior to the application due date. This will be covered during the pre-application ZOOM session.

Selection Criteria:

Proposals will be reviewed by an internal review committee with expertise on disparate populations and cancer specific evidence-based interventions. Proposals will be scored based on specific criteria detailed in the **Proposal Format** section, beginning on page 5. Only 1 application per organization will be accepted. Applicants are asked to describe:

EBI Projects:

- Need: Priority population served, geographic region, and use of relevant health data.
- Selected EBI(s): How does the EBI selected align with the needs of the priority population.
- Capacity: How well equipped is the applicant to carry out the EBI(s) with fidelity and ability to engage the priority populations.
- Potential Impact: How well defined are the evaluation measures and data sources.
- Sustainability: How well does the applicant describe plans to sustain the program beyond the life of the grant.
- Work Plan and Timeline: Use of SMART objectives aligned with timeline and process measures see template (A) attached.
- Budget: Does the budget align with the proposed work plan.
 - See template (B) attached.

Capacity Building Grants:

- Need: Priority Population served, geographic region, and use of relevant health data.
- Capacity of lead organization: History of the organization, ability to organize and implement the project, examples of past success and capacity of staff.
- Project Focus: Purpose and activity to build capacity to better address the cancer burden (community input, partnerships and roles, priority populations or sub-populations)
- Budget Does the budget align with proposed activities.
 - See template (B) attached.

Supporting Documentation:

All applicants are required to attach:

1. A copy of your 501 (C)(3) status or proof of exempt tax status from the Internal Revenue Service.
2. Organizational Chart
3. Federal Negotiated Indirect Cost Rate Agreement
4. Most current operating budget, i.e. annual financial statement or report.
5. Letters of support or Memorandum of Understanding from collaborating organizations.
6. Most recent annual report, if available.

Evidence Based Interventions:

Evidence Based Interventions must address one or more of the following: Prevention (i.e. physical activity, nutrition, obesity, alcohol), Cancer Screening (Breast, Cervical Colon, Prostate or Lung), Survivorship, and target adults ages 18 and over. Applicants should choose 1 or more interventions for the following tables and lists in this section. These may be tailored to unique needs of populations or sub-populations.

- 1) EBI's from the **U.S. Preventive Services Task Force Community Guide Recommendations** are eligible EBI's under this funding announcement: [The Guide to Community Preventive Services \(The Community Guide\)](#) EBI's focused on adults and tobacco, nutrition, physical activity, obesity, cancer prevention, screening or survivorship are eligible.

Focus Area	Link to interventions
Prevention - Nutrition and Obesity	Obesity Prevention and Control The Community Guide
Prevention - Excessive Alcohol Consumption	Preventing Excessive Alcohol Use The Community Guide
Prevention – Nutrition	Promoting Good Nutrition The Community Guide
Prevention – Physical Activity	Increasing Physical Activity The Community Guide
Prevention – Tobacco	Reducing Tobacco Use The Community Guide
Cancer Screening	Cancer Prevention and Control The Community Guide

- 2) Selected EBIs from the National Cancer Institute are also eligible under this funding opportunity and are highlighted in this table.

Program Focus Area	Link to Resource
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Prevention/ Nutrition/ Obesity	Complete Health Improvement Program (CHIP) Evidence-Based Cancer Control Programs (EBCCP)
Prevention/ Nutrition/ Obesity	SIPsmartER Evidence-Based Cancer Control Programs (EBCCP)
Prevention/ Nutrition/ Obesity	StrongPeople Living Well Evidence-Based Cancer Control Programs (EBCCP)
Prevention/ Physical Activity/ Obesity	THE COACH APPROACH Evidence-Based Cancer Control Programs (EBCCP)
Cervical Cancer Screening	De Casa en Casa: Cervical Cancer Screening Program Evidence-Based Cancer Control Programs (EBCCP)
Cervical Cancer Screening	Tailored Communication for Cervical Cancer Risk Evidence-Based Cancer Control Programs (EBCCP)
Project SAFE – Mammography screening follow up	Project SAFe (Screening Adherence Follow-Up Program) Evidence-Based Cancer Control Programs (EBCCP)
Survivorship – Prostate Cancer	Dyadic Support for Men with Prostate Cancer Evidence-Based Cancer Control Programs (EBCCP)
Survivorship	Exercise and Nutrition to Enhance Recovery and Good Health for You (ENERGY) Evidence-Based Cancer Control Programs (EBCCP)

3) Other EBI Resources:

[Rural Health Clinic Colorectal Cancer Screening Toolkit \(arcgis.com\)](http://arcgis.com)

Useful health data sources:

- 2021 Michigan Behavioral Risk Factor Surveillance Survey Report [Michigan BRFs Annual Reports](#)
- 2021 Michigan Behavioral Risk Factor Surveillance Survey by Race/ Ethnicity [Michigan BRFs Tables by Race/Ethnicity](#)
- Cancer Incidence and Mortality: [Cancer Statistics \(michigan.gov\)](http://michigan.gov)
- <https://www.cancer-rates.info/mi/> United States incidence and mortality: United
- MDHHS Cancer Epidemiology: [Cancer Epidemiology \(michigan.gov\)](http://michigan.gov)

- Local Hospital’s Community Health Needs Assessment Data – see local hospital or county health department websites.
- Clinic or Hospital Electronic Health Information Systems Reports

Application Format:

Evidence Based Intervention Proposals

Narrative: (10 page maximum), **22 total points possible.**

1. **Executive Summary:** (0.5 pages) Introduce your agency, proposed project, title, and population served and anticipated outcomes. Not scored.
2. **Need:** (1 pages maximum) Describe the specific cancer related health disparities experienced by the population of focus, include demographic, geographic and relevant health data to describe the need to be addressed by your proposed project. Maximum 5 points.
3. **Project Description:** (5 page maximum) Include your selected evidence-based intervention(s) and how they meet the unique needs of the population described in the need section. Include a detailed work plan with goals, SMART objectives, activities, timelines, and deliverables. You may use the work plan template in attachment A. Maximum 10 points.
4. **Evaluation and sustainability:** (2.5 pages) Present your plan to track and measure progress. Outline your process and outcome measures, and data sources. Discuss any training and technical assistance needs. Present long-term plans for project sustainability. Maximum 5 points.
5. **Capacity:** (1 page) Describe the history of your organization and evidence of past successes with similar projects or strengths of staff and key partners to carry out this work successfully. Maximum 2 points.
6. **Budget and Budget Justification:** (not scored) Utilize the budget template (Attachment B) and provide a separate budget narrative (1 page not counted in page limit) that justifies how funds in each line item was calculated. Not scored.

Attachments:

- A copy of your 501 (C)(3) status or proof of exempt tax status from the Internal Revenue Service.
- Organizational chart
- Federal Negotiated Indirect Cost Rate Agreement
- Most current operating budget, i.e. annual financial statement or report.
- Letters of support or Memorandum of Understanding from collaborating organizations.
- Most recent annual report, if available.

Capacity Building Proposals

Narrative: (5 page maximum) **20 total points possible.**

1. **Executive Summary:** (0.5 pages) Introduce your agency, proposed project, title, and population served and anticipated outcomes. Not scored.
2. **Need:** (1 page) Provide an overview of the cancer disparities and population of focus, use demographics or relative health data. Maximum 5 points.

3. **Project Description:** (2.5 pages) Describe your project, goals, and SMART objectives with a timeline and benchmark measurements. Describe any key partners and their roles. Use the work plan template in the attachments. Maximum 10 points.
4. **Capacity of lead organization:** (1 page) History of the organization, ability to organize and implement the project, examples of past success and capacity of staff. Maximum 5 points.
5. **Budget and Budget Justification:** (not scored) Utilize the budget template and provide a separate budget narrative (1 page not counted in page limit) that justifies how funds in each line item was calculated. Not Scored.

Attachments:

- A copy of your 501 (C)(3) status or proof of exempt tax status from the Internal Revenue Service.
- Organizational chart
- Federal negotiated indirect cost rate agreement
- Most current operating budget, i.e. annual financial statement or report.
- Letters of support or Memorandum of Understanding from collaborating organizations.
- Most recent annual report, if available.

Budget:

Proposals must include a detailed line-item budget and accompanying justification detailing the calculations for each line item. Line items include salary and fringe, travel, supplies, and other miscellaneous costs. Indirect costs are included in the total budget. Examples of allowable items include staff time to implement an intervention or activity and evaluation activities, associated training and travel costs, i.e., patient navigation, purchase of E.H.R./ E.M.R. upgrades to support interventions, i.e., screening, assessment and referrals, and tracking, as well as patient centered technology needed for identified interventions and related activities, i.e., text messaging services. Miscellaneous costs may include space, meeting room rental, audio-visual support, and technology. Please note that food is not allowable under this opportunity unless it is directly related to nutrition education activities.

Contact and Resources:

Contact: Noel Pingatore, Administrative Director for Community Outreach and Engagement at pingaton@umich.edu. You can also find information on our website at [Community Outreach | University of Michigan Rogel Cancer Center](#)

