



2010-11 Grant Cycle Request for Applications (RFA) – By Invitation Only

Funding Opportunities

The Komen Puget Sound Affiliate is offering grants for innovative programs that reduce breast cancer mortality, especially among those who are disproportionately affected by this disease. In the past, the Komen Puget Sound Affiliate provided funding for programs throughout the entire continuum of care in our 16 county service area. With our renewed promise and focus on saving lives, we revised our funding priorities to direct the majority of our grant making to programs that promote early detection of breast cancer. The remainder of grant funds will be invested in programs assisting medically underserved breast cancer patients as they access treatment. Our emphasis is on funding culturally appropriate programs targeting the following groups of women in the Puget Sound Affiliate's 16 county service area: medically-underserved, uninsured or under-insured, low-income, rural, Latina/Hispanic, Asian, Pacific Islander, African American, American Indian, lesbian and bisexual women.

Additionally, based upon the disparities identified in the Komen Puget Sound 2009-2011 Community Profile Report, we strongly encourage applications that will provide new or expanded projects in the following areas of need:

- Projects that will increase breast cancer screening, patient navigation and treatment support services offered in Grays Harbor, Lewis, Pacific and Mason counties to low-income, Hispanic and American Indian/Alaska Native women.
- Projects that will increase breast cancer screening and patient navigation in King, Snohomish and Pierce counties for low-income, African American, Hispanic, American Indian/Alaska Native and Vietnamese women.

Our 2010-11 funding areas are:

1. **Early Detection/Education:** 70% of our grant funding will support projects in this area, recognizing that breast cancers that are detected early are much more curable than those detected late. Programs of the following types encompass this target area:
 - Delivery of screening and diagnostic mammography services.
 - Outreach programs that facilitate access to breast cancer screening.
 - Education focused on the importance of breast cancer screening and early detection.

- 2. Patient Navigation:** 15% of our grant funding will support projects in this area as it is clear that culturally appropriate patient navigation reduces disparities in breast cancer outcomes among medically underserved women. Programs in this target area should provide the following:
- Culturally appropriate one-on-one patient navigation programs that aid breast cancer patients in accessing and understanding the medical system and help to ensure that they receive the best treatment possible.
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- 3. Patient Assistance/Treatment Support:** 15% of our grant funding will support projects in this area because ensuring that patients have the financial resources and support to get the best available breast cancer treatments is critical to improving breast cancer survival rates. Programs of the following types encompass this target area:
- “Safety net” funding for low-income breast cancer patients. This funding will provide financial assistance for the following: rent/mortgage; prescriptions for medications not available through pharmaceutical assistance funds; transportation; utilities; food and nutritional supplements; medical supplies such as lymphedema sleeves, dressings, etc.; COBRA insurance premiums; childcare; personal hygiene/specialty clothing items; dental care needed prior to chemotherapy.
 - Culturally-appropriate treatment support services which include, but are not limited to, the following: support groups, classes, and resources relevant to breast cancer patients and survivors.

Important Dates

Grant writing Workshops

Invited applicants are strongly encouraged to attend one of these workshops.

September 9 (SPIPA Computer Lab in Shelton)

September 17th (ACRS Computer Lab in Seattle)

Application Deadline

December 4, 2009 at 5 p.m.

Award Notification

February 19, 2010

Award Period

April 1, 2010 - March 31, 2011

Eligibility Requirements

To be considered for funding, applicants/institutions must:

- Ensure that all past and current Komen-funded grants or awards are up-to-date and in compliance with Komen requirements.
- Be an exempt non-profit organization located in or providing services to one or more of the following locations: Whatcom, Skagit, San Juan, Island, Snohomish, King, Kitsap, Clallam, Jefferson, Mason, Pierce, Thurston, Lewis, Grays Harbor, Pacific, and Wahkiakum Counties
- Have projects specific to breast health and/or breast cancer

Allowable Expenses

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

- Salaries and fringe benefits for program staff
- Consultant fees
- Clinical services or patient care costs
- Meeting Costs
- Supplies
- Travel
- Other direct program expenses
- **NEW CAP on Equipment, not to exceed \$5,000**
Funds are **rarely** allowed to be used for the following purposes:
 - Computers and laptops
 - Projectors
 - Office furniture
- Indirect costs, not to exceed 15% of direct costs

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

- Medical or scientific research
- Scholarships or fellowships
- Construction or renovation of facilities
- Political campaigns or lobbying
- Endowments
- Debt Reduction

Submission Requirements

All proposals must be type-written on plain, white, single-sided 8 ½ x 11 paper using single-spaced 12-point font. The pages should be numbered and each copy stapled in the top left corner. No special packaging (binders, plastic covers, etc.) or additional material (videotapes, annual reports, brochures, etc.) should be included. **One signed original and fourteen copies (copies can be 2-sided to save paper) should be submitted at the address below on or before December 4, 2009 at 5 p.m.**

Puget Sound Affiliate of Susan G. Komen for the Cure
1900 N. Northlake Way, Suite 135
Seattle, WA 98103
Attn: Elisa Del Rosario

No late submissions will be accepted.

In addition, please email the ABSTRACT SECTION ONLY of your cover page (in word format, not pdf) to: elisa@pskomen.org by 5 p.m. December 4, 2009.

Review Process

Each grant application will be reviewed by a committee of independent reviewers. They will consider each of the following selection criteria:

Impact: Will the program have a substantial positive impact on breast cancer disparities and the priority area(s) selected?

Feasibility: How likely is it that the objectives and activities will be achieved within the scope of the funded program?

Capacity: Does the organization, Program 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?

Collaboration: Does this program enhance collaboration among organizations with similar or complementary goals?

Outcomes: What outcomes will be measured and how will success be defined?

Sustainability: Is the program likely to be sustained? Is the impact likely to be long-term?

The grant application process is competitive. Previous Komen funding does not guarantee funding in subsequent years.

Support for Prospective Applicants: Questions should be directed to:

Elisa Del Rosario, Program Manager
206-633-0303 x105
elisa@pskomen.org

Please allow adequate time before deadline for response to any inquiry.

Application Instructions

Cover Page: (form attached)

Complete the cover page including an abstract (project summary). The abstract should be limited to 1,200 characters, including spaces and punctuation (approximately 225 words). The abstract should provide a brief description of the proposal including the following: 1) the purpose of the program; 2) what population(s) will be served; 3) a description of key activities and the numbers of women served by each activity; 4) a summary of evaluation methods; and 5) the projected impact of the program. The signature of approving institutional personnel, other than the project director, is required. Please be sure to email the abstract section of your cover page in word format to elisa@pskomen.org.

Organizational Capacity: (form attached or update the form submitted with your LOI)

Summarize the organization's history, mission, and goals as well as current programs and recent accomplishments. (DO NOT resubmit the attachments requested during the LOI process: proof of exempt status, most recent financial statement; current organizational budget are already on file).

Program Description: (limit – 10 pages)

1. **Statement of Need/Problem:** Describe why the proposed project is needed. Describe the population to be served. Review comparable programs offered in this service area and explain how this program is unique. (1 page maximum)

2. **Goals and Objectives:** State the program goals and measurable objectives. Explain how the goals and objectives appropriately address the needs of your selected priority population(s). State the number of people to be served by population (e.g., by race/ethnicity, socio-demographic characteristic, etc.) including a table similar to the example below. If the program covers more than one county, also provide a breakdown of women served by county. (2 pages maximum)

Population	# of people served through activity ____	# of people served through activity ____	# of people served through activity ____
African American			
Asian Pacific Am			
Latina/Hispanic			
Native American			
Low income			
Rural			
LBT			
Total			

3. **Activities and Timeline:** Describe the activities that will be conducted to accomplish the above goals and objectives. Priority will be given to programs that use evidence-based methods, so describe knowledge regarding the efficacy of the activities proposed. Describe your history and experience with conducting these activities successfully, or how the skills necessary to conduct these activities will be developed. Provide a realistic, month-by-month timeline for implementing the program. (3 pages maximum)

4. **Evaluation Plan:** Describe how you will measure that you are achieving your goals and objectives and how you will assess the impact of the program on the priority area selected. Your evaluation plan must be closely tied to your goals and objectives. Describe what specific measures and program outcomes will be reported to Komen. (1 page maximum)

5. **Collaboration:** Describe the other organizations or entities, if any, participating in the Program. Letters of collaboration from community partners crucial to the proposed project are required (see Attachments section) (1 page maximum)
6. **Organizational Experience:** Describe the organization's experience serving the target population. Explain why your organization is best-suited to carry out the program. (1 page maximum)
7. **Sustainability:** Explain how this program and its impact will be sustained long-term. What resources (financial, personnel, partnerships, etc.) will be needed to sustain this effort over time? How will those resources be secured? Applicants should demonstrate that other sources of funding will be sought and used to support this project. (1 page maximum)
8. **Previous Komen Grantees:** Please provide a one page summary of previous Komen support, including number of years your organization has received Komen funding, a description of the last funded project with accomplishments, and a chart of number of women served. (1 page maximum, not included in the 10 page limit for responses to items 1-7.)

Budget: (form attached)

Provide a detailed total program budget. All funding for this program, including other grants and general funds should be included in the budget. Please note that indirect costs may not exceed 15% of direct costs and equipment costs may not exceed \$5,000.

Budget Justification

For each line item in the budget, provide a brief description of how the funds will be used and why they are programmatically necessary. List all other committed and pending sources of support for the program.

Attachments:

1. **Information regarding Key Personnel** – For key personnel that are currently employed by the applicant, provide a resume or curriculum vitae. For new or vacant positions, provide job descriptions (*Two page limit per individual*).
2. **Letters of Collaboration** - To document support from organizations participating in the program, please include a letter from each partner summarizing their contributions and/or involvement in the proposed project.
3. **Names and Affiliations of Board of Directors**

Applicant Checklist:

- Cover Page with signatures. Please also email abstract section in word format (not pdf) to elisa@pskomen.org
- Organizational Capacity Form (update or resubmit form from LOI submission; no attachments needed other than the ones noted below)
- Program Description (limit 10 pages)
- Budget form and Budget Justification
- Key Personnel Information
- Letters of Collaboration
- Names and Affiliations of members of the Board of Directors
- 15 copies of entire application (signed original and 14 copies)