



Susan G. Komen Michigan  
West Michigan Service Area  
**Request for Applications  
Community Grants 2016-2017**



Application deadline is **5:00pm EST Friday October 16, 2015** through the online Grants eManagement System (GeMS) at <http://affiliategrants.komen.org>

Applications must be started in GeMS no later than **5:00pm EST Friday October 9, 2015**.

Inquiries can be directed to Megan Smith, Mission Director, at 616.752.8262 x2016, or [msmith@komenmichigan.org](mailto:msmith@komenmichigan.org)

## **Komen West Michigan Community Grants Key Dates 2016-2017**

### **Request for Application Released**

August 17<sup>th</sup>, 2015

### **Mandatory Applicant Training Webinar**

Tuesday September 1, 2015 1:00pm-3:00pm

Wednesday September 2, 2015 10:00am-12:00pm

### **Anticipated Award Notification**

February 2016

### **Contract Due Date**

March 2016 in GeMS, within 30 days of being notified it is available for acceptance in GeMS.

### **Grant Term**

April 1, 2016 to March 31, 2017

### **Mandatory Orientation for Grant Recipients**

April 2016

### **Race for the Cure Series (Grantees must exhibit at their local Race)**

Mid-Michigan - April 2016

Southwest Michigan – May 2016

West Michigan – September 2016

### **Grantee Recognition event**

Tentatively scheduled for December 2016

### **Related Documents:**

Sample Community Grant Contract

GeMS Applicant Manual

2015 Community Profile, Quantitative Data Narrative

2015 Community Profile, Health System and Public Policy Analysis

### **About Susan G. Komen Michigan**

Susan G. Komen® Michigan—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. In January 2015, three Komen Affiliates joined together to become Komen Michigan. Funds raised locally remain in each of our service areas: Mid-Michigan, Southwest Michigan, and West Michigan. Through events like the Komen Michigan Race for the Cure® Series in Lansing, Grand Rapids, and Kalamazoo, we have invested \$8 million in local breast health and breast cancer awareness programs in 20 counties. Up to 75 percent of net proceeds generated by Komen® Michigan stay in the local area through the Community Grants program to support education, screening, navigation, diagnostics, and survivor support services. 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 \$847 million in research and provided more than \$1.8 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.

### **Notice of Funding Opportunity and Statement of Need**

Komen Michigan will award community grants to local non-profit organizations that will provide breast health and breast cancer projects between April 1, 2016 and March 31, 2017.

Applicants may request funding from \$10,000 up to \$75,000 (combined direct and indirect costs) for one year. Applicants seeking less than \$10,000 should refer to the Komen Michigan Small Grants RFA available at

<http://www.komenmichigan.org/grants/how-to-apply-for-community-grants/>

Komen Michigan has identified the following funding priority areas, in order of importance. Funding priorities were selected based on data from completed sections of the 2015 Komen Michigan Community Profile Report including the Qualitative Data Narrative and the Health System and Public Policy Analysis sections. The 2015 Community Profile sections can be found on our website at

<http://www.komenmichigan.org/grants/community-profile/>

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1. **Screening Access.** Increase access to breast cancer screening and diagnostics by reducing financial, individual, and other barriers to timely and complete access to the Continuum of Care. Priority populations include (in no particular order): low-income, uninsured and underinsured, African American, Hispanic/Latino, rural, high-risk women under 40 years old. Applications must address how the program will connect those who qualify to existing programs like Breast and Cervical Cancer Control and Navigation Program and Healthy Michigan Plan.
2. **Culturally Appropriate Education and Community Navigation.** Support strong community education, outreach, and community navigation programs focused on dispelling myths, reducing fears, and providing support services related to breast cancer, including navigation and barrier-reduction programs (e.g. co-pays, deductibles, transportation, child care etc.) to connect clients to screening services. Priority populations include (in no particular order): African American, Hispanic/Latino, rural.
3. **Survivorship Programs.** Increase availability of programs serving survivors with a focus on social and emotional wellbeing, wellness programs, and lifestyle intervention strategies.

### **Eligibility**

Individuals are not eligible for funding. Grants will be awarded only to eligible organizations. 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 grants or awards to Applicant are up-to-date and in compliance with Komen requirements.
- Applicant has documentation of 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:
  - Kent
  - Ottawa
  - Muskegon
  - Montcalm
  - Newaygo
- 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.

### **Allowable Expenses**

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
- Indirect costs, not to exceed 15 percent 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
- Education regarding breast self-exams/use of breast models
- Outreach models that primarily rely upon health fairs
- Development of educational materials or resources
- Construction or renovation of facilities
- Political campaigns or lobbying
- General operating funds (in excess of allowable indirect costs)
- Debt reduction
- Fundraising (e.g. endowments, annual campaigns, capital campaigns, employee matching gifts, events)
- Education via mass media (e.g. television, radio, newspapers, billboards)
- Event sponsorships
- Projects completed before the date of grant approval
- Payments/reimbursement made directly to individuals

- Land acquisition
- Program-related investments/loans
- Scholarships
- 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 over \$1.00 must be returned to Komen [Affiliate Name].
- Grantee will be required to submit a minimum of one semi-annual progress report and one final report that will include, among other things, an accounting of expenditures. Additional reports may be requested.
- At the discretion of Komen Michigan, the grantee may request one no cost extension of no more than six months for each grant.
- Certain insurance coverage must be demonstrated through a certificate of insurance 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 "Susan G. Komen Breast Cancer Foundation, Inc., Susan G. Komen Michigan, its officers, employees and agents" as Additional Insured on the above policies.

### **Submission Requirements**

All proposals must be submitted online through the Komen Grants e-Management System (GeMS): <https://affiliategrants.komen.org>.

Applications must be received on or before **5:00pm October 16, 2015**. No late submissions will be accepted.

### **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. The consistent and repeated use of the same messages will improve retention and the adoption of the actions we think are important. 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>.

#### *Breast Self-Exam*

According to studies, teaching breast self-exam (BSE) has not been shown to be effective at reducing mortality from breast cancer and therefore **Komen will not fund education programs that teach or endorse the use of monthly breast self-exams or use breast models**. As an evidence-based organization, engaging in activities that are not supported by scientific evidence pose a threat to Komen's credibility as a reliable source of information on the topic of breast cancer.

#### *Creation and Distribution of Educational Materials and Resources*

Komen Affiliate Grantees must use/distribute only Komen-developed or Komen-approved educational resources, including messages, materials, toolkits or online content during their grant period. This is to ensure that all breast cancer messaging associated with the Komen name or brand are safe, accurate, based on evidence and consistent and to avoid expense associated with the duplication of effort to develop educational resources. If applicants/grantees intend to develop educational materials that are otherwise not provided by Komen, they must be approved by the Affiliate and Komen Headquarters prior to development.

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).

#### *Use of Komen's Breast Cancer Education Toolkit for Hispanic/Latina Communities and Other Resources*

Susan G. Komen has developed a Breast Cancer Education Toolkit for Hispanic/Latina communities. It is designed for educators and organizations to use in order to meet the needs of these communities. Applications to this mechanism may seek funding for such implementation. Demonstrated need for educational outreach for Hispanic populations in the Affiliate service area may be key to a successful application, but is not necessary for access to the toolkit which is free online. This tool is available in both English and Spanish versions. To access the Toolkit, please visit <http://komentoolkits.org/>. Komen has additional educational toolkits and resources, including [komen.org](http://komen.org), that may be used in community outreach and education programs. Check with your local Komen Affiliate for resources that may be used in programming.

**Contract Requirements**

The fully executed grant contract, including required insurance documentation, must be submitted in GeMS within 30 days of notification it is available in GeMS. Please alert your legal department to this requirement and forward them the sample contract provided. Please review the contract requirements before submitting an application.



## **Review Process**

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

**Statement of Need:** Does the program provide services to one or more of the target populations described in the Affiliate's Community Profile? Does the application provide specific data to justify the program's target population selection? How closely does the program align with the funding priorities stated in the RFA?

**Program Design:** Is the program culturally competent? Is the program evidence-based and does it provide citations justifying the selected interventions? 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? If the proposed program includes collaboration with other organizations, are the roles of the partners appropriate, relevant and clearly defined? Does the program connect those who qualify with programs like the Breast and Cervical Cancer Control and Navigation Program and Healthy Michigan Plan so that Komen funds are not used for services covered by state and federal programs?

**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 need described in the funding priority selected? Is the impact likely to be long-term?

**Organization Capacity:** Does the applicant organization, Project Director and his/her team have the expertise to effectively implement all aspects of the program? Is there evidence of success in delivering services to the target population? Is the organization fiscally capable of managing the grant program, including having appropriate financial controls in place? Does the applicant organization have the equipment, resources, tools, space, etc., to implement all aspects of the program? Does the organization or staff have appropriate licenses, certifications, accreditations, etc. to deliver the proposed services? Does the organization have a plan to obtain the resources (financial, personnel, partnerships, etc.) needed to sustain the program beyond the grant term (if awarded)? Are collaborations (if proposed) likely to be sustained beyond the grant term? Does the applicant organization have long-term support from organizational leadership? Did the organization identify program improvements or process changes to increase performance or efficiency?

Prior Performance: For current or past grantees, grant reviewers will be provided the two most recent reports from GeMS. For any objectives that were not completed, please describe program improvements or process changes.

**Monitoring and Evaluation:** Is there a documented plan to measure progress against the stated program goal and objectives, and the resulting outputs and outcomes? Is there sufficient monitoring and evaluation (M&E) expertise for the program? Are there sufficient resources in place for M&E efforts?

**Collaboration:** Did the organization describe a strong relationship with the Michigan Breast and Cervical Cancer Control and Navigation Program and Healthy Michigan Plan? Did the organization identify supportive stakeholders, non-traditional partners, and collaborators?

**Continuum of Care:** Did the applicant organization address how its program or partnerships connect a patient to all elements in the Continuum of Care (CoC) (education, screening, diagnostics, treatment, support)? If the applicant organization is requesting funds for screening or diagnostic services, did it have a high percentage of clients get a definitive diagnosis within 60 days of an abnormal result?

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.

**Applicant Support:** Questions should be directed to:

Megan E. Smith

Mission Director

[msmith@komenmichigan.org](mailto:msmith@komenmichigan.org)

616.752.8262 x2016

## Application Instructions

The application will be completed and submitted via the Komen Grants e-Management System (GeMS), <https://affiliategrants.komen.org>. The required sections/pages in GeMS are listed in ALL CAPS and described below. For an application instruction manual, please visit the Affiliate's Grants webpage, <http://www.komenmichigan.org>, or contact Megan Smith, Mission Director, [msmith@komenmichigan.org](mailto:msmith@komenmichigan.org), 616.752.8262 x2016. 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.

### PROJECT PROFILE

This section collects basic organization and project information, including the title of the project, contact information and partner organizations.

Attachments for the Project Profile page (if applicable):

- **Letters of support or memoranda of understanding from proposed collaborators**– To describe the nature of the collaboration and the services/expertise/personnel to be provided through the collaboration.

### ORGANIZATION SUMMARY

This section collects detailed information regarding your organization's history, mission, programs, staff/volunteers, budget, and social media.

### PROJECT PRIORITIES AND ABSTRACT (limit – 1,000 characters)

This section collects important information to classify the focus of the project, the priorities to be addressed and a summary of the project (abstract). This abstract should include the target communities to be served, the need to be addressed, a description of activities, the expected number of individuals served and the expected change your program will likely bring in your community. The abstract is typically used by the Affiliate in public communications about funded projects.

### PROJECT NARRATIVE

This section is the core piece of the application. On the Project Narrative page of the application on GeMS, please address the requests below for each section.

#### **Statement of Need (limit- 5,000 characters)**

- Describe the population to be served.
- Describe evidence of the risk/need within that population, using the RFA funding priorities and the 2015 Community Profile as a guide.
- Provide population characteristics (race, ethnicity, economic status, and breast cancer statistics) specific to the target population.
- Describe how this program aligns with Komen Michigan target populations and/or RFA funding priorities.
- Provide specific data to justify the program's target population selection.

### **Program Design (limit- 5,000 characters)**

- Explain the program's goal and objectives, as outlined in your Project Work Plan.
- Explain how the program will increase the percentage of people who enter, stay in, or progress through the continuum of care.
- Explain how the program is culturally competent.
- Explain how the program is evidence-based and/or uses promising practices (please cite references). Provide justification for choosing the selected intervention(s).
- Describe program collaboration and the roles and responsibilities of all organizations or entities participating in the program. Summarize collaborations in your work plan and provide further information as part of the Collaboration page.
- Explain how the collaboration strengthens the program and why partnering organizations are best suited to assist in carrying out the program and accomplishing the goal and objectives set forth in this application.
- Explain how your program will connect those who qualify with programs like the Breast and Cervical Cancer Control and Navigation Program and Healthy Michigan Plan so that Komen funds are not used for services covered by state and federal programs.

### **Organization Capacity (limit- 5,000 characters)**

- Explain why the applicant organization, Project Director and staff are best-suited to lead the program and accomplish the goals and objectives set forth in this application. Please include appropriate organization or staff licenses, certifications and/or accreditations.
- Describe evidence of success in delivering breast health/cancer services to the proposed population. If the breast health/cancer program is newly proposed, describe relevant success with other programs.
- Describe the equipment, resources, tools, space, etc., that the applicant organization possesses or will utilize to implement all aspects of the program.
- 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. How has your organizational budget changed over the last three years? Please explain increase or decrease.
- Describe the plan to secure and allocate resources (financial, personnel, partnerships, etc.) to sustain the program at the conclusion of the grant period.
- Describe the efforts you will take to communicate this program to your organizational leadership to ensure long-term support/buy-in.
- Describe program improvements or process changes to increase performance or efficiency. Address any issues with prior performance (grant reviewers will be provided the two most recent GeMS reports).

### **Monitoring and Evaluation (limit- 5,000 characters)**

Grantees will be required to report on the following outputs and outcomes in the progress and final reports: successes and accomplishments, challenges, lessons learned, best practice example, stories from individuals that were served with the

funding (2 anonymous, 2 with full releases) and number of individuals served for each objective (county, race and ethnicity, age and population group).

- Describe in detail how the organization(s) will measure progress against the stated program goal and objectives. Please include any templates, logic models, or surveys as attachments in the Project Work Plan – Objectives page.
- Describe how the organization(s) will assess how the program had an effect on the selected priority. Please include any templates, logic models, or surveys as attachments in the Project Work Plan – Objectives page.
- Describe how the organization(s) will assess program delivery. Please include any templates, logic models, or surveys as attachments in the Project Work Plan – Objectives page.
- Describe the monitoring and evaluation (M&E) expertise that will be available for this purpose.
- Describe the resources available for M&E during the course of the program. Specify if these resources are requested as part of this grant, or if they are existing organizational resources.

#### **Collaboration (limit 5,000 characters)**

- Describe the organization's present relationship with other sources for breast health services including the Michigan Breast and Cervical Cancer Control and Navigation Program and the Healthy Michigan Plan.
- Please describe how your program design will connect those who qualify with those programs.
- Identify stakeholders, non-traditional partners, and collaborators that connect clients with or otherwise support the program (i.e. a breast focused coalition that strengthens partnerships, beauty salons that provide educational materials to clients to encourage screening, migrant organizations that refer clients for services, partnerships with transportation or child care providers to reduce barriers to accessing care, etc.). If possible, attach letters of support to the Project Profile page.

#### **Continuum of Care (limit 5,000 characters)**

- Describe how your program or partnerships connect a client to all elements in the Continuum of Care (CoC) (education, screening, diagnostics, treatment, support)?
- If your organization is requesting funds for screening or diagnostic services, what percentage of clients get a definitive diagnosis within 60 days of an abnormal result?

#### **PROJECT TARGET DEMOGRAPHICS**

This section collects information regarding the various 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 groups on which you plan to focus your program's attention.

## PROJECT WORK PLAN

In the Project Work Plan component of the application on GeMS, you will be required to submit the goal and objectives:

- **Goals** are high level statements that provide overall context for what the program is trying to achieve.
- **Objectives** are specific statements that describe what the program is trying to achieve to meet the Goal. An objective should be evaluated at the end of the program to establish if it was met or not met.

The project goal should have at least one objective; there is no limit to the number of objectives. Please ensure that all objectives are SMART objectives:

Specific  
Measurable  
Attainable  
Realistic  
Time-bound

**NOTE!** Objectives not following the SMART criteria will be rejected as part of compliance review. Applicants will have a single opportunity to correct objectives to match SMART criteria within 48 hours of being notified of the rejection. Search for “smart goal worksheet” for helpful resources.

You will also be required to submit the timelines, the anticipated number of individuals to be served, and the evaluation method you will utilize for each objective.

Write your Project Work Plan with the understanding that each item must be accounted for during progress reporting. The Project Work Plan should **only** include a goal that will be accomplished with funds requested from Komen Michigan. Objectives that will be funded by other means should **not** be reported here, but instead, can be included in your overall program description.

### Example Work Plan

GOAL: Provide patient navigation to women with screening abnormalities in order to reduce delays in and barriers to diagnostic care.

OBJECTIVE 1: During grant period, patient navigator will contact all women with an abnormal screening within three business days to schedule follow-up appointment.

OBJECTIVE 2: By end of grant period, provide 30 uninsured/underinsured women free/reduced cost diagnostic procedures.

Attachments for the Project Work Plan page:

- **Monitoring and Evaluation forms, surveys, logic model, etc.** – To monitor progress and determine the effectiveness of the proposed program.

## BUDGET

Provide a detailed total program budget for the entire requested grant term. Budget sections include Key Personnel/Salaries, Consultants, Supplies, Travel, Patient Care, Sub-Contracts, Indirect and Other. For each line item in the budget, provide a brief justification for how the funds will be used and why they are programmatically necessary.

**Attachments Needed for Key Personnel/Salaries Section:**

- **Resume/Job Description** – For key personnel that are currently employed by the applicant organization, provide a resume or *curriculum vitae*. For new or vacant positions, provide a job description (*Two page limit per individual*).

**Attachments Needed for the Project Budget Summary Section:**

- **Proof of Tax Exempt Status** – To document your federal tax-exempt status, attach your determination letter from the Internal Revenue Service. Evidence of state or local exemption will not be accepted. Please do not attach your Federal tax return. To request verification of your organization's tax-determination status, visit the following page on the IRS Web site:

<http://www.irs.gov/Charities-&-Non-Profits/EO-Operational-Requirements:-Obtaining-Copies-of-Exemption-Determination-Letter-from-IRS>

## **Appendix A:** Community Health Metrics - Examples

Based on your program design, please report on the following applicable metrics. For each metric, please collect race/ethnicity, age and county or zip code. These metrics provide impact measures that can be shared with our communities to demonstrate the success of programs in improving breast health. Tracking these metrics is strongly encouraged and will be considered as part of application scoring; however, it is not required for 2016-2017.

### **EDUCATION**

This includes one-on-one and group educational sessions and trainings.

- Number of educational/training sessions conducted.
- Number of participants that attended the educational/training sessions.
- Number and type of Komen breast health and breast cancer educational materials distributed to participants.
- Number/Percentage of participants that demonstrated an increase in breast cancer knowledge after the educational/training sessions. This data would be gathered by the participant completing a pre-test and post-test.
  - Average percentage increase in knowledge reported by participants that attended the educational/training sessions. This data would be gathered by the participant completing a pre-test and post-test.
- Number/Percentage of participants that reported that they intended to take appropriate breast self-awareness action after attending the educational/training session. This data would be gathered by the participant answering an “intent to take breast self-awareness action” question on a survey or post-test.
  - Number/Percentage of individuals that had intended to take action that completed the action within 3, 6 and/or 9 months after the educational/training session. This data would be gathered by contacting the participant to determine if they completed their intended action.
- Number/Percentage of participants that attended the educational/training session and reported they intend to share the information with someone else in their network. This data would be gathered by the participant answering an “intent to share information” question on a survey or post-test.
  - Number/Percentage of participants that intended to share the information that did share the information within 3, 6 and/or 9 months after the educational/training session. This data would be gathered by contacting the participant to determine if they shared the information.



Additional educational measures could include the number/percentage that indicated the information was new, information is pertinent to their job, training developed a new skill and new skill practiced within 3, 6 and/or 9 months after training.

## **GRANTS PROVIDING SCREENING, DIAGNOSTIC AND TREATMENT SUPPORT SERVICES**

This would include grants that provide funding for the following breast cancer services:

- Screening- including, but not limited to, clinical breast exams and mammograms
- Diagnostics- including, but not limited to, diagnostic mammograms, ultrasounds and biopsies
- Treatment Support- including, but not limited to, childcare, transportation and complementary/integrative therapy

### Screening and Diagnostic Services

- Number of individuals that received a (insert service).
  - Number/Percentage of individuals that received (insert service) within 30 days or less from referral date.
  - Number/Percentage of individuals that received (insert service) 31-60 days from referral date.
  - Number/Percentage of individuals that received (insert service) 61-90 days from referral date.
  - Number/Percentage of individuals that received (insert service) 91 or more days from referral date.
- Of the individuals that received a (insert service), the number of individuals that had an abnormal result.
  - Of those with an abnormal result, the number of individuals that completed the referred diagnostic services.

### **For Biopsy Only:**

- Of the individuals that received a diagnostic biopsy, the number of individuals that were diagnosed with breast cancer.
  - Of the individuals diagnosed with breast cancer, the number of individuals referred onto treatment.
    - Of the individuals diagnosed with breast cancer and referred for treatment, the number that initiated treatment.

### Treatment Support Services

- Number/Percentage of individuals that self-reported that the service provided assisted them in completing their recommended treatment plan. This data would be gathered by the individual completing a survey after they received the service.
- Number/Percentage of individuals that self-report an improvement in quality of life (i.e. physical, social/family, emotional and functional) after receiving the

assistance. This data would be gathered by the individual completing a survey after they received the service or a comparison between a pre/post survey about quality of life.

## **PATIENT NAVIGATION**

Patient navigation is a process by which an individual—a patient navigator—guides patients through and around barriers in the continuum of care, to help ensure access to timely screening, diagnosis, treatment and survivorship services.

- Number of individuals that were navigated to a health care provider/facility for a (insert service).
  - Number of navigated individuals that received/initiated a (insert service) within 30 days.
  - Number of navigated individuals that received/initiated a (insert service) in 31-60 days.
  - Number of navigated individuals that received/initiated a (insert service) in 61-90 days.
  - Number of navigated individuals that received/initiated a (insert service) in 91 days or more.
- Number of navigated individuals that completed a (screening/diagnostic) service and had an abnormal result.
- Number of navigated individuals that had an abnormal result that were navigated to diagnostic services.
- Number of navigated individuals that were diagnosed with breast cancer that were navigated to treatment services.
- Number of navigated individuals that were diagnosed with breast cancer that were navigated to survivorship support services.