

The Winship Cancer Institute of Emory University and its Community Outreach and Engagement (COE) component are pleased to release the Summer 2024 Request for Pilot Grant Proposals for its *Community Cancer Mini-Grants* pilot project program. The COE's *Community Cancer Mini-Grants* is a peer-reviewed program that provides pilot funding for projects that implement and evaluate evidence-based interventions to improve community assessment, access, and/or outcomes related to cancer. Winship Cancer Institute of Emory University is Georgia's only National Cancer Institute-designated Comprehensive Cancer Center. This program enables Georgia-based community organizations to obtain funding to implement and evaluate an evidence-based intervention that may focus on cancer prevention, risk reduction, access to screening or treatment, survivorship, or policy that has the potential to impact the community. *Winship COE Community Cancer Mini-Grants* provide two funding opportunities every year. Successful applications are supported by funds from the Winship's NCI Cancer Center Support Grant (CCSG), with additional support from philanthropy.

Proposals with a budget of up to \$10,000 for one year (12 months) may be considered for *Winship COE Community Cancer Mini-Grants* if they are:

a) submitted by Georgia-based community or civic non-profit organizations with 501(c)(3) nonprofit status, faithbased organizations, sororities and fraternities, colleges or universities, or public health and healthcare organizations b) feasible to be completed within a 12-month project period

c) designed to implement and test an evidence-based intervention

d) focus exclusively on Georgia residents (may serve more than one county or have potential for broader application beyond Georgia)

e) have potential to impact a known/documented cancer-related problem for the targeted community or groups. Community organizations may submit only one proposal as lead Principal Investigator to the *Winship COE Community Cancer Mini-Grant* Request for Pilot Grant Proposals (RFP) per funding cycle.

Areas of Interest for Funding – Pilot Projects that Address:

- 1. Cancers with increased incidence, disparities, vulnerable populations and/or risk factors in Georgia. These cancers include, but are not limited to: lung, breast, prostate, colorectal, pancreatic, multiple myeloma
- 2. Risk Factors: Obesity, Low Cancer Screening Rates, HPV vaccination, UV exposure, tobacco use, poverty
- 3. Vulnerable Populations: Black/African American, rural, low socioeconomic status, people living with HIV, uninsured populations, low health literacy/numeracy
- 4. Cancer Survivorship, including treatment related symptoms or side effects, quality of life
- 5. Quality of Cancer Care, such as interventions that might facilitate increased quality of care, access to quality care, or access to Centers of Excellence or High-Volume Cancer Centers
- 6. Policy relevant to cancer and reducing the cancer burden, e.g., tobacco control, tobacco tax, coverage of costs of care
- 7. Social Determinants of Health in Georgia transportation, poverty, housing, neighborhood and environment, nutrition, physical activity, healthcare access, education.
- 8. Cancer Health Equity, or Prevention or Reduction of Cancer Disparities

An applicant may submit one grant proposal to implement one Evidence-based Cancer Control Program (EBCCP) that is endorsed by the National Cancer Institute on its website: *Evidence-based Cancer Control Programs – Transforming Research into Clinical and Community Practice*.

The National Cancer Institute (NCI) evaluates research-tested cancer control programs and encourages best practices by promoting these programs through its website – a searchable database of evidence-based cancer control programs designed to provide program planners and public health practitioners easy and immediate access to program materials. Detailed descriptions of programs meeting NCI's standards for research integrity, intervention impact, and dissemination capability, as well as implementation guides and materials are available through the website. **Only applications that propose implementing one of the EBCCPs from the NCI website will be considered for funding**. Based on the applicant's

assessment of cancer mortality for a specific county or other geographic area, the applicant should select an NCI-endorsed EBCCP that meets the needs of the geographic area and its population. When selecting an EBCCP, applicants should consider the audience for which the EBCCP was developed, the applicant's history of reaching that audience, and the resources available to implement the program as it was designed. If the applicant has implemented the selected EBCCP in the past, the proposed project should focus on a different audience or geographic location.

The EBCCP is found here: https://ebccp.cancercontrol.cancer.gov/index.do

Proposals will undergo peer review for funding based on the following criteria:

- a. Utilization of evidence-based interventions to address a priority problem in the community
- b. Feasibility of completing the project within the stated time frame and budget
- c. Potential impact on community and targeted population

Projects that involve more than one community organization are acceptable so long as one organization is the lead for the project and can receive and disburse the funding.

Community organizations may seek to partner with an investigator from the Winship Cancer Institute, or request consultation with the Community Outreach and Engagement staff. Please contact: Emily J. Burns, MS, Clinical Research Coordinator III, <u>emily.j.burns@emory.edu</u>

Proposal Format:

- 1. Cover Sheet (1 page)
 - a. Title of Project
 - b. Name of Lead Community Organization
 - c. Name of Lead Community Investigator(s)
 - d. Any additional Partners from other organizations
 - e. Area of focus (e.g., cancer type, survivorship, risk factor, etc.) with Name of Evidence-Based Intervention from EBCCP site
 - f. Date of Proposal
 - g. Contact information for the Lead Community Investigator (phone number, email, address)
 - h. Contact information for Business Official who will handle the finances if different from Lead Investigator
 - i. Signature of Lead Community Investigator
- 2. Project Plan and Evaluation (3-5 pages)
 - a. Goals for implementation of evidence-based intervention
 - b. Background (based on published data or your own assessment of priorities for your community)
 - c. Reasons why the project focus important to your community
 - d. Describe how the proposed project different or new in terms of addressing the cancer problem in the targeted community
 - e. Demonstrate how the project be designed and implemented in your own community (Provide details including data collection, methods, and analysis)
 - f. Describe the target population/sample from the community in terms of demographics, geographic residence, social determinants of health, and/or any other pertinent characteristics
 - g. Compare the target audience to the audience for which the EBCP was designed and research-tested
 - h. If the applicant has completed the selected EBCCP in the past, describe how the proposed project will reach a different audience or geographic area
 - i. Describe the evidence-based intervention from EBCCP to be used and any accompanying materials
 - j. Describe how the progress towards the goals of the project will be evaluated
 - k. Give examples of how the results of the project will be shared with others within your organization, community, and state of Georgia
 - 1. Provide a timeline for milestones to be achieved in order to have the project completed within 12 months
 - m. Describe plans for sustaining the program after the grant period ends
- 3. Budget and Budget Justification (1 page)
 - a. Provide a spreadsheet that lists personnel, supplies, and other costs associated with the project

- b. Describe the justification for the budget costs
- c. Budget should reflect the scope of work, including salaries, subcontracts (if applicable), and other direct costs and indirect costs.
- d. Direct and indirect costs must not exceed \$10,000. Indirect costs are limited to 10% of the direct costs. Equipment and/or software costs should not exceed 20% of direct costs. Grant funds may not be used for medical tests or other medical services. Applicants are encouraged to partner with organizations that provide these services at no cost or low cost for uninsured program participants.
- e. Budget justification should be written in narrative form, describing each of the budget line items and how the amounts were calculated.
- f. Under Personnel, list key staff responsible for implementing and evaluating the project, their roles, qualifications, and level of effort charged to the grant.
- g. Estimate travel based on the current U.S. government mileage rate and indicate how mileage was calculated.
- h. Patient care costs for cancer screening, drugs, or treatment are not allowed
- i. A budget template is provided for the applicant's convenience, but other similar templates will be accepted.
- 4. Submit full project as one pdf file to Emily J. Burns, MS, Winship COE: emily.j.burns@emory.edu

Deliverables after funding

a. Brief progress report is to be submitted six months after funding and at end of 12-month project period (Template to be provided)

<u>Timeline:</u>	<u>Date:</u>
RFP Announcement:	5/1/2024
Deadline of Proposal Submission	8/9/2024
Notification of Funding Decision	10/11/2024
Anticipated Project Start Date	1/10/2025

Sample Data Sources:

- CDC's Data Visualization Tools at https://www.cdc.gov/cancer/uscs/index.htm
- NCI/CDC State Cancer Profiles at <u>https://statecancerprofiles.cancer.gov/index.html</u>
- Georgia Rural Health Innovation Center Georgia Health Data Hub at https://www.georgiaruralhealth.org/rural-health-information/health-indicators-report
- U.S. Census at <u>https://www.census.gov</u>
- Winship Cancer Institute's Catchment Area Assessment data at
 <u>https://winshipcancer.emory.edu/research/community-outreach-and-engagement/index.html</u>

Budget Template Example

Expense Category	Budget Amount
Personnel	
Salaries	
Benefits	
Consultants	
Personnel Subtotal	
Other Direct Expenses	
Office Supplies	
Conferences and Meetings	
Publicity and Promotion	
Copying and Printing	
Equipment	
Local Travel	
Contracted Services	
Other (describe)	
Direct Expenses Subtotal	
Indirect Costs (10%)	
Total (Maximum \$10,000)	