

## QUESTIONS, ANSWERS AND **MODIFICATIONS** TO RFA 0812160859

New York State Department of Health Wadsworth Center  
and  
Health Research Science Board

Patricia S. Brown Breast Cancer Education Community Based Demonstration Projects

**NOTE: These questions & answers and **modifications** supersede any previously received written or verbal responses.**

### **General**

- Q1. I applied for the Patricia S. Brown Breast Cancer Education Community-Based Demonstration Projects RFA during the last issuance, but awards were never made. Do I need to reapply or can I use my previous application for the current RFA?
- A1. The application will need to be resubmitted. Because the RFA changed significantly from the last issuance, pay careful attention to the instructions.
- Q2. When will the Board vote on these applications?
- A2. It is anticipated that the Board will vote on the applications in October 2009. Following the Board vote, the recommendations are forwarded to the Commissioner of the Department of Health for final approval.
- Q3. Will we be informed of the date and time of the Board meeting during which award recommendations will be made?
- A3. No. However, upcoming meeting agendas are posted under the “Events” link on the website <http://www.wadsworth.org/extramural/breastcancer/>. To be automatically notified of upcoming meetings, click on the “e-Alerts” link and fill in the appropriate information; approximately two weeks prior to a meeting an e-mail notification will be sent. For additional information regarding the award process, see Section V.B. of the RFA.
- Q4. Our organization works with a low-literacy population, and we want to create educational tools with content that is experiential or graphic. Is that appropriate?
- A4. That could be appropriate, provided the plan meets the goals of the RFA as stated in Section I.C.

- Q5. Many of our clients will not fill out questionnaires because of low literacy. Is it scientifically acceptable to follow-up with these clients orally?
- A5. The assessment plan should be clear to justify the process by which this will occur, citing the basis for that approach in the published, peer-reviewed literature. See Section III.A. of the RFA for more information.
- Q6. The previous Patricia S. Brown RFA considered the Letters of Community Support to be of higher importance than this RFA. Are the Letters of Community Support mandatory?
- A6. No, the Letters of Community Support are not mandatory, but note that community interest is a scored merit review criterion and is weighted as 10% of the overall score. See Section V.C of the RFA.
- Q7. How are literature references cited, by the use of footnotes? What references need to be cited?
- A7. Literature references should be cited in the Work Plan itself and will not be included in the 15 page limitation. **Form 10 has been modified to add Section D., Literature Citations (see Modifications below).** Literature citations do not count against the page limits for the Work Plan.
- As a rule of thumb, the source for references that support the proposal should be cited. A full citation should be listed if it supports the proposal. If the statement is widely considered to be general knowledge, no citation is needed.
- Q8. Where is the assessment evaluation included in the Merit Review Criteria?
- A8. The assessment evaluation is included as part of the Education Plan. See Section V.C of the RFA.
- Q9. How do I determine our organization's DUNS number?
- A9. Check with your fiscal/business office.
- Q10. The collaborators listed on the Letter of Intent may change by the time we submit the application. Is that acceptable?
- A10. Yes.
- Q11. What if key staff are not entirely identified by the time we submit our application? Is that acceptable?
- A11. Yes. However, only the information provided in the application will be considered by the peer reviewers in determining the ability of the applicant to perform the work.

- Q12. How do I determine our DHHS Facilities and Administrative rate?
- A12. Check with your fiscal office or accountant. If the organization does not have a rate established DHHS, information must be provided to substantiate the rate. See Section V.A., Budget, Form 5.
- Q13. Can those who are part of a focus group be part of the trial implementation?
- A13. It depends on the structure of the application. Seek the input of the consultants to the project. In general, the RFA (Section III.A.) requires that trial implementation be employed in four or more breast cancer education presentations with a combined total of at least 100 individuals who have not been previously educated.
- Q14. If the collaborator is from a hospital, must it be a teaching hospital?
- A14. Yes, the collaborator (i.e., content or assessment consultant) must be from an accredited academic institution.
- Q15. Are professors or educators who distribute the material to their students, but who are otherwise not involved in the project considered key personnel? Are biosketch forms needed for them?
- A15. If the professors or other educators are serving to distribute the material, but are not involved in developing or evaluating the material, then they would not be considered key personnel and thus biosketch forms are not needed for them. Those who assist in developing or evaluating the material or results from the study are considered key personnel.
- Q16. If key personnel are not receiving other program support for similar projects, do Other Program Support forms need to be completed and submitted for each person?
- A16. Yes, the form must include all key personnel (note that the instructions for Form 9 do not limit the details to "similar projects"), regardless of whether they receive other support. If an individual has no other support, this should be indicated on the form.
- Q17. Most key personnel may be working on multiple projects at once, which may be supported by many different funding sources. Is a separate Other Program Support form needed for each key personnel? These projects and funding most likely will be different at the start of the contract.
- A17. All information for all key personnel should be included using the format provided on Form 9. Separate forms for each key personnel are not necessary. Contractors will be required to note any changes to other support as part of the periodic progress reports.

## **Application Delivery**

Q18. I'm concerned that my application will take too long to get through the DOH mail system, causing it to be delivered late. Can the applications be delivered by hand? Is there a phone number to call to make arrangements?

A18. Yes, applications may be hand delivered, provided they are received by the due date and time. Be sure to call (518) 474-7002 ahead of time so that someone from the program is available to receive the application.

Wadsworth mail is handled separately from the DOH mail system (see the correct mailing addresses in Section IV.E. of the RFA). To make sure the application is delivered on time, send it prior to the due date using a service that will provide a guarantee that the application will be delivered on time.

Q19. The US Postal Service has an "express delivery". Is that considered "Express Mail Service" as stated in the RFA, Section IV.E.?

A19. No, any mail service by the US Postal Service (USPS) is considered "Regular Mail Service". "Express Mail Service" is considered to be the delivery service used by non-USPS carriers.

## **Consultants, Collaborators and Subcontractors**

Q20. Should the Assessment Consultant or the Content Consultant be consultants or subcontractors?

A20. Either is acceptable. However, face pages are needed for the Assessment Consultant and the Content Consultant if money is exchanging hands. To access the institution's Institutional Review Board, a subcontract arrangement may be necessary.

Q21. Does the application need to include a face page for the Content Consultant and the Assessment Consultant?

A21. If consultants will be paid, a face page is needed.

Q22. Can there be a legal consulting agreement with the Consultants instead of a subcontract?

A22. Yes. The contractor applicant is obligated to make sure all requirements are met by the consultants regardless of the type of agreement/contract.

Q23. Should the Consultants' curriculum vitae (CV) be attached to their letter of commitment?

A23. Yes.

Q24. We learned that our Assessment Consultant will be different than the person listed on the Letter of Intent. The Assessment Consultant's name will be included in our application, but do you need to know their name prior to the application due date?

A24. No, but please notify the Program as soon as possible as this information will be used to establish the peer review panel.

### **Eligibility**

Q25. Is it appropriate to submit an application from the Multidisciplinary Breast Cancer Program at a University Hospital? We are committed to engaging the community and have so many resources to offer, but wonder if this grant specifically wants non-medical applicants who "partner" with medical programs. Ours would be based at the medical center and reach out to the community.

A25. It is the Health Research Science Board's intention to have the smaller community partner (the CBO) be the lead applicant, so the hospital could partner with a community based organization (CBO). Please see the text from the RFA:

“The applicant must be a not-for-profit 501 (c) (3) CBO in New York State serving one or more New York communities. A CBO offers several services to a community and its governance staff and volunteers are drawn from that community. CBOs providing breast cancer programs often involve breast cancer survivors. While more than one application per CBO will be accepted for review, only one award will be made for any application involving that CBO.”

“The purpose of this Request for Applications is to invite applications from CBOs in collaboration with researchers from accredited academic institutions, including medical centers, medical schools, teaching hospitals, universities and schools of public health, for planning and assessment of new and innovative breast cancer education programs and materials. Replication of existing programs, approaches and materials are not permitted under this RFA. It is intended that programs developed with funds from this RFA will be promoted as models and that collaborations fostered by this program of funding between CBOs and academic institutions will be sustained.”

Q26. If a CBO applies as a lead, can they also be a collaborator on another grant with a different investigator?

A26. The applications would both be accepted; however, of the applications involving that CBO, **only the application with the best score could be awarded**. Section II of the RFA states:

“While more than one application per CBO will be accepted for review, only one award will be made for any application involving that CBO.”

Q27. Can a hospital apply as the lead if it collaborates with two CBOs?

A27. No, one of the CBOs must be the lead applicant. See Section II of the RFA.

Q28. We envision the development of a multi-session, multi-topic program. Does the RFA mandate that the trial implementation be single sessions only of the same program to at least 100 different individuals? Or can we do something that is multi-session?

A28. Section III.A. requires that "four or more breast cancer education presentations with a combined total of at least 100 individuals, total, who have not been previously educated." As such, the program would be repeated four or more times with at least 100 individuals who have not been previously educated.

Q29. Is the Revision phase of the contract expected to be a trial with revisions post-assessment or must we do a full implementation using the revised program and materials?

A29. Section III.A. describes the Revision phase as follows: "Depending on the assessment results, the final phase of the project could involve refining or revising the program and materials in preparation for full implementation." This allows for the revision of materials and an opportunity to refine the use of those materials. It is not intended that the contract will support ongoing implementation of the program.

### **Budgets and Expenditures**

Q30. How will disbursements be made to the community breast cancer group enabling them to carry out their fiscal responsibilities? Is it appropriate to have a university as a subcontractor?

A30. Please see Appendix C of the RFA regarding disbursements. It is appropriate to have a university as a subcontractor to the community-based organization (CBO), provided the terms of the contract are met.

Q31. Can the university act as "fiscal agent" for the CBO?

A31. No. The contract will be with the CBO directly so that it has control of the program and its development, including the fiscal component.

Q32. Are indirect costs capped at 20%, and is that included in the budget?

A32. Section I.D. of the RFA states:

"Each contract term will be up to 24 months. Total direct costs for the two year project period will not exceed \$150,000. Facilities and Administrative costs are limited to 20 percent of modified total direct costs (see III.B.)"

Section III.B. states

"Facilities and Administrative costs are allowed but are limited to a maximum of 20 percent of modified total direct costs. Modified total direct costs consist of all salaries and wages, fringe benefits, materials and supplies, services, travel, and subgrants and subcontracts up to the first \$25,000 of each subgrant or

subcontract (regardless of the period covered by the subgrant or subcontract). Equipment, capital expenditures, charges for patient care and tuition remission, rental costs, scholarships and fellowships, as well as the portion of each subgrant and subcontract in excess of \$25,000 shall be excluded from modified total direct costs."

The F&A must be added to the budget. See Form 5, line 13.

Q33. What direct costs are allowed?

A33. Section III.B. of the RFA states:  
"All costs must be related to the provision of planning and assessment of new breast cancer education programs and materials. This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities.

Funds may be used to support salaries, fringe benefits, stipends, supplies, equipment, subcontractors, consultants, travel, registration fees, publication costs, human subjects and related research costs (see budget instructions in section V.A. Form 5, Budget). Funds should be budgeted for travel to present project results to the HRSB."

Q34. It is very difficult to get people to participate in a study. Can we use the stipend to pay for participants' time or for things such as metrocards and refreshments?

A34. The RFA does not prohibit such expenses. However, this issue is likely to require clearance through the IRB to make sure there is no "excessive inducement" to participation.

Q35. Is travel to a major academic breast cancer meeting to present data or to learn the latest developments in the field a legitimate expense?

A35. The RFA does not prohibit such expenses if they can be justified.

Q36. If I am eligible for an advance payment, will it be issued timely?

A36. Prompt payment legislation requires that payments are made quickly. Payments will be timely, provided all necessary documentation is provided. Please see Appendix C of the RFA.

### **MODIFICATIONS TO THE RFA**

1. Section II, Who May Apply? Is modified to add the following after "While more than one application per CBO will be accepted for review, only one award will be made for any application involving that CBO.":
  - Of the applications involving that CBO, only the application with the best score could be awarded.

2. Section V.A. Application Content and Format is modified to add the following:

- Work Plan – Form 10, D. LITERATURE CITED

References included in this Section D are not counted against Work Plan page limitations, nor is the number of references restricted. However, applicants are urged to select references that reflect the relevant literature. Provide complete citations to references.

3. Attachment 1, Form 10 is modified to add the following section heading:

- D. Literature Cited