

RFA # 1601281136 / Grants Gateway # DOH01-CBSW1-2016

New York State Department of Health
*Center for Community Health/Division of Chronic Disease
Prevention
Bureau of Cancer Prevention and Control*

Request for Applications
Community-Based Breast Cancer Support and Wellness Services

KEY DATES

Release Date:	July 1, 2016
Letter of Interest Due:	July 26, 2016
Questions Due:	July 26, 2016
Applicant Conference Registration Deadline:	July 25, 2016
Applicant Conference:	July 26, 2016
Questions, Answers and Updates Posted (on or about):	August 5, 2016
Applications Due:	August 29, 2016 by 4:00 PM EST
DOH Contact Name & Address:	Donna Funk Bureau of Cancer Prevention & Control Riverview Center 150 Broadway, Room 350 Albany, NY 12204 canserv@health.ny.gov

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I. Introduction

A. Purpose/Intent

The purpose of this Request for Applications (RFA) is to award grants to community-based organizations for the provision of programming to address the support and wellness needs of breast cancer survivors (persons diagnosed with breast cancer, from the time of diagnosis, through treatment and beyond). Awardees will provide one or more of the ten community-based supportive, counseling, wellness or educational activities (listed in Section III) to breast cancer survivors (in treatment or post-treatment). Awardees will also conduct promotion, recruitment and evaluation activities. The Department anticipates awarding 15 contracts for a five-year period, from March 1, 2017 through February 28, 2022. Each of the 15 contracts will be valued at \$25,000, annually, for a five-year total of \$125,000 each. Awards will be made to the 15 highest scoring applicants.

B. Background

The New York State (NYS) Department of Health (Department) seeks to reduce the burden of cancer for all New Yorkers through the coordination and implementation of population-based and evidence-based or evidence-informed strategies across the cancer care continuum – from prevention, to early detection, diagnosis, and treatment, through survivorship. Department programs raise awareness about and support cancer prevention efforts such as tobacco control, reductions to exposure to harmful ultraviolet radiation, and improved access to healthy foods and opportunities for physical activity. The Department's Cancer Services Program promotes and provides access to critical breast, cervical and colorectal cancer screening and diagnostic services for eligible un and underinsured individuals, facilitates access to treatment as needed, and assists with enrollment of eligible individuals in the NYS Medicaid Cancer Treatment Program, which provides full Medicaid coverage for the duration of the treatment period for eligible individuals diagnosed with breast, cervical, colorectal or prostate cancer.

In January 2016, Governor Cuomo launched new, breast cancer programs to help more New Yorkers receive breast cancer screening and to improve access to needed services. The goal of these new programs is to achieve a 10% increase in breast cancer screening mammograms over five years. The State's comprehensive programming now includes the existing Cancer Service Program, mobile mammography vans and extended hours for mammographies at hospital-based facilities. New initiatives also include public awareness campaigns, peer education and community outreach to educate women about breast cancer and encourage screening. Another initiative is one-on-one assistance from patient navigators within health centers to help those diagnosed with breast cancer manage their care and obtain all needed services. The community-based support and wellness programming resulting from this RFA complements this comprehensive programming through the provision of supportive and wellness services to assist breast cancer survivors with the management of their diagnosis. It aims to educate them about such things as treatment options, the benefits of exercise, nutrition and other health promotion activities, patient/provider communication skills, reducing risk for recurrent or second cancers, cancer screening guidelines, understanding family risk and screening guidelines, etc. Additionally, the community-based organizations awarded funds through this RFA are trusted,

expert members in their communities, in good positions to provide general awareness about the need for breast cancer screening.

Since 2002, the Department has supported statewide programming for cancer survivors. Survivorship issues go beyond medical care and include access to quality treatment and palliative care, coping with the emotional component of the disease, and appropriate medical follow-up and monitoring for secondary cancers and the complications of treatment. These issues span the period from the moment of diagnosis to the end of life. Department-supported programs offer support groups, education, counseling and related activities which help reduce stress experienced by cancer survivors, improve their ability to cope with the uncertainties, challenges and life complications that accompany the diagnosis and enable them to make more effective use of health and supportive services.

The Department was the first state health department in the nation to offer legal assistance and support in planning for long- and short-term legal, financial and medical needs for individuals and families whose lives have been affected by diagnoses of cancer. Currently, the Department funds six organizations to provide direct, free or reduced-fee legal assistance. The services include assistance with access to and denial of entitlements, preparation of wills and living wills, designation of health care proxies, future care and custody of minor children, guardianship and stand-by guardianship, estate planning, development of advance directives, insurance and employment concerns and/or housing discrimination.

The Department is also an active member in the NYS Cancer Consortium, supporting the Consortium's goal for cancer survivorship initiatives to ensure that, "All New Yorkers will have equal access to evidence-based, evidence-informed and guideline-driven services and appropriate, high-quality follow-up care that supports cancer survivors, families and caregivers."

C. Problem/Issue Resolution

Breast cancer is the second leading cause of cancer-related death among women in NYS. NYS Cancer Registry estimates indicate that 15,000 women were diagnosed with breast cancer each year between 2008 and 2012. Research suggests that social support services can positively impact quality of life and may even positively influence health outcomes in individuals with cancer who access these services. Although rare, men can also be diagnosed with breast cancer and face the stigma associated with having a "woman's disease". The number of people living with and beyond a breast cancer diagnosis has increased markedly in the last decade, primarily due to improvements in early detection and treatment modalities. As the numbers of survivors continues to rise, so too does the need for an expanded array of support services for this cohort.

The realities of a cancer diagnosis include facing treatment side effects and other quality of life issues, managing financial hardships and, in the presence of cultural, ethnic, geographic, physical or socioeconomic disparities, confronting issues related to access to quality, timely health care. Community-based organizations awarded contracts through this grant program will provide a variety of wellness, education and supportive services, free of charge, to improve quality of life. They will promote health and wellness and support breast cancer survivors to best manage the challenges associated with this chronic disease.

Breast cancer survivors may have a myriad of clinical and psychosocial needs that can impact quality of life. Additionally, cancer survivors are at greater risk of having their first cancers recur, developing second cancers and having other chronic health conditions, due to such factors as the effects of cancer treatment, obesity, smoking, lack of exercise, or genetics. Public health programs can address the unique needs of cancer survivors through care coordination, building skills for improved patient-provider communication, facilitating linkages between community-based and health care programs, and offering support groups, exercise programs, wellness programs, counseling, education and related activities (http://www.cdc.gov/cancer/survivorship/basic_info/). These types of programs may help to reduce stress experienced by individuals diagnosed with breast cancer, improve survivors' ability to cope and deal with the uncertainties, challenges and life complications that accompany the disease and enable them to make more effective use of health services. For example, exercise and wellness programs can positively benefit the mental and physical well-being of breast cancer survivors during and after cancer treatment and can reduce fatigue, increase strength and endurance and improve mental health. Support groups are an important means for providing informational and psychosocial support to breast cancer survivors. Such groups can decrease feelings of anxiety and depression as well as enhance coping skills.

New York State is home to, and benefits from, numerous grass-roots, free-standing organizations in which breast cancer survivors hold significant decision-making responsibility. These organizations, with relatively small amounts of funding, are able to offer services to a broad range of breast cancer survivors. This funding opportunity will support implementation of programming to address the unique needs of breast cancer survivors struggling with the physical, emotional, social, spiritual, financial and other issues related to a breast cancer diagnosis, with the ultimate goal of improving quality of life for breast cancer survivors. Acknowledging the role of the community-based organizations awarded funds through this RFA as trusted members in their communities with expertise and community connections, the funding will also support provision of education to promote the need for breast cancer screening among average risk community members ages 50 to 74.

D. Available Funding and Anticipated Awards

A total of \$1,875,000 is estimated to be available to support these initiatives over the five-year grant period. The Department anticipates awarding 15 contracts for a five-year period, with an expected term of March 1, 2017 through February 28, 2022. Each of the 15 contracts will be valued at \$25,000, annually, for a five-year total of \$125,000 each, subject to state appropriation authority, acceptable performance and compliance with all contract requirements. Awards will be made to the 15 highest scoring applicants.

II. Who May Apply

A. Minimum Eligibility Requirements

Eligible applicants are:

- Grass roots, free-standing, not-for-profit organizations located in NYS which offer a

broad range of breast cancer education, support and wellness services free of charge. For purposes of this RFA, grass roots, free-standing organization is defined as a community-based organization which is neither part of nor affiliated with a statewide, national or international organization or a major medical or academic institution, as demonstrated by 501(c)(3) status and financial and functional independence of another state, national or international organization, despite having the right to use the name of such other organization.

- Organizations that include breast cancer survivors with significant decision-making responsibilities within the organization – as demonstrated by board membership and/or executive staff (e.g., Executive Director, Authorizing Fiscal Signatory, etc.).
- In Document Vault Prequalified status at the time of application submission within the New York State Grants Gateway. To obtain access to the Grants Gateway, applicants should submit a registration form on the New York State Grants Reform website (<http://grantsreform.ny.gov/Grantees>). See IV Administrative Requirements, M. Vendor Prequalification for Not-for-Profits for additional information.

Only one application will be accepted per grantee/organization.

B. Preferred Eligibility Requirements

Organizations that can demonstrate they have developed extensive community collaborations with organizations and agencies representing breast cancer survivors, and their intent to use such collaborations as a means to expand the reach of this application's scope of work will be given preference.

III. Project Narrative/Work Plan Outcomes

Required applicant activities include: A) provision of one or more services (listed below in Section III A); B) promotion and recruitment of the proposed services, as described in Section III B; and C) program monitoring and evaluation of the proposed services, as described in Section III C.

A. Provision of Services

Successful applicants will propose to provide one or more of the following community-based supportive, counseling, wellness or educational activities to breast cancer survivors¹ (in treatment or post-treatment):

1. Ongoing or repeating, time-limited yoga classes facilitated by trained yoga instructors.
2. Ongoing or repeating, time-limited exercise classes, facilitated by professional fitness training staff.

¹ Activity 11 is intended to educate the general population of average risk community members ages 50 to 74 with the goal of increasing the numbers of community members that receive routine breast cancer screening according to clinical guidelines. Unlike the other activities, it does not solely target breast cancer survivors. Rather, it acknowledges the expertise of eligible organizations to provide this education within their communities.

3. Ongoing or repeating, time-limited classes for stress management (e.g., meditation classes) led by individuals with documented experience and training in the proposed area/s.
4. Nutritional education programs led by nutritionists or others with appropriate credentials (e.g., Certified Nutritional Specialist, Certified Clinical Nutritionist, Registered Dietitian, Certified Nutritional Consultant, Certified Nutritionist, etc.).
5. Educational activities (seminars, conferences, educational sessions) relating to such topics as: treatment options, the benefits of exercise and/or wellness and health promotion activities, promotion of patient/provider communication skills, use of written care plans, reducing risk for recurrent or second cancers, cancer screening guidelines, understanding family risk for breast cancer and screening guidelines, and/or other aspects of maintaining health after a breast cancer diagnosis. Educational sessions should be led by those with documented experience and training in the content areas.
6. Ongoing or repeating, time-limited professionally facilitated¹ support groups (in-person or web-based services).
7. Ongoing or repeating, time-limited support groups led by trained peers.
8. Professionally-facilitated¹ individual (one-on-one) counseling in-person or via telephone.
9. Hotline or web-based services dedicated to assisting callers to access supportive services, referrals to counseling, education, outreach, and health promotion programs, and resources related to breast cancer survivorship issues. Such services can be provided to individuals or groups, via web, phone, at the applicant or other community site, or in the survivor's home.
10. Provision and/or promotion of the six-week Stanford University's "Thriving and Surviving" internet programs led by a licensed trainer (<http://patienteducation.stanford.edu/internet/cancerol.html>), or other evidence-based cancer survivorship program (see National Cancer Survivorship Research Center at <http://www.cancer.org/treatment/survivorshipduringandaftertreatment/nationalcancersurvivorshipresourcecenter/>).
11. Education and promotional activities about the need for breast cancer screening among the general population of average risk community members ages 50 to 74. Such education and promotion should be consistent with current clinical guidelines and include information to address common barriers to screening; to include identification of screening locations, transportation resources, insurance coverage, and referrals to the New York State of Health and/or the New York State Department of Health Cancer Services Program.²

B. Promotion and Recruitment

Successful applicants will conduct promotion and recruitment activities to promote the services to individuals who have been diagnosed with breast cancer and enlist them into the proposed service/s selected from Section III A. Strategies should employ a variety of different methods

¹ Professionally-facilitated means that a trained professional is present and/or available to work with, train and/or intervene as appropriate to assist individual or group members to effectively address the array of issues and situations that might arise.

² Activity 11 is intended to educate the general population of average risk community members ages 50 to 74 with the goal of increasing the numbers of community members that receive routine breast cancer screening according to clinical guidelines. Unlike the other activities, it does not solely target breast cancer survivors. Rather, it acknowledges the expertise of eligible organizations to provide this education within their communities.

and partners to maximize reach to those with breast cancer. Promotion and recruitment activities may include collaborations with clinical providers/organizations/systems to ensure that staff in clinical settings is familiar with, and encourages the use of, community resources available to breast cancer survivors.

C. Program Monitoring and Evaluation

Successful applicants will be required to participate in program monitoring and evaluation activities as outlined by the Department. Program monitoring will include tracking and reporting on performance measures related to strategies and activities identified in work plans, such as the type and number of services provided and reach of services provided. Program evaluation will include activities to document outcomes associated with promotional and recruitment efforts and provision of services and may include assessments of program participant satisfaction and assessments of program impact on participants' knowledge, behavior and/or other aspects of physical, social and emotional well-being. Department staff will provide training and technical assistance related to performance monitoring and evaluation. Applicants will work with Department staff to design and implement appropriate assessment tools.

Applicants may subcontract components of the scope of work. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Please note that contractual services are considered an eligible expense when setting an M/WBE Utilization Plan goal (Attachment 2) for the application. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors, and will be the primary contact for the Department. All subcontractors should be approved by the Department of Health prior to seeking contractual service reimbursement for payments to subcontractors and/or consultants. Please refer to the Master Grant Contract, Section IV., B. Subcontractors.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health (Department), Division of Chronic Disease Prevention, Bureau of Cancer Prevention and Control. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

All substantive questions must be submitted in writing or via email to:

Bureau of Cancer Prevention and Control
Riverview Center
150 Broadway, Room 350
Albany, New York 12204

Email: canserv@health.ny.gov

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFA. This includes Minority and Women Owned Business Enterprise (MWBE) questions and questions pertaining to the MWBE forms.

Questions of a technical nature can be addressed in writing or via telephone by calling Donna Funk at (518) 474-1222. **Questions are of a technical nature if they are limited to how to prepare your application (e.g., uploading attachments) rather than relating to the substance of the application.**

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this RFA.

- <http://grantsreform.ny.gov/grantees>
- Grants Reform Videos (includes a document vault tutorial and an application tutorial) on YouTube: <http://www.youtube.com/channel/UCYnWskVc7B3ajjOVfOHL6UA>
<https://grantsgateway.ny.gov>
- Grants Team Email: Grantsreform@its.ny.gov
Phone: 518-474-5595
Hours: Monday thru Friday 8am to 4:30pm
(Application Completion, Policy, and Registration questions)
- Agate Technical Support Help Desk
Phone: 1-800-820-1890
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@agatesoftware.com
(Technical questions)

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the NYS Grants Gateway website at: https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx and a link provided on the Department's public website at: <http://www.health.ny.gov/funding/>. Questions and answers, as well as any updates and/or modifications, will also be posted on these websites. All such updates will be posted by the date identified on the cover of this RFA.

C. Letter of Interest

Prospective applicants are strongly encouraged to complete and submit a letter of interest (see

Attachment 1). Prospective applicants may also use the letter of interest to receive notification when updates/modifications are posted; including responses to written questions. If submitting a letter of interest, prospective applicants must email the letter to canserv@health.ny.gov.

Letters of interest should also be uploaded into the Grants Gateway under the Pre-Submission Uploads section of the online application.

Submission of a letter of interest is not a requirement or obligation upon the applicant to submit an application in response to this RFA. Applications may be submitted without first having submitted a letter of interest.

D. Applicant Conference

An applicant conference will be held for this project. This conference will be held via Webinar on the date and time posted on the cover sheet of this RFA. The Department requests that potential applicants register for this conference no later than July 25, 2016 by following this link: <https://meetny.webex.com/meetny/k2/j.php?MTID=tf1bfb83d2dd6d6bce0a2f3ffb7d612f6> to insure that adequate accommodations be made for the number of prospective attendees. The reservation deadline is posted on the cover page of this RFA. Failure to attend the applicant conference will not preclude the submission of an application.

E. How to file an application

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this RFA. Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Reform website at the following web address: <http://grantsreform.ny.gov/Grantees> and select the “Grantee Quick Start Guide Applications” from the menu on the left. There is also a more detailed “Grantee User Guide” available on this page as well. Training webinars are also provided by the Grants Reform Team. Dates and times for webinar instruction can be located at the following web address: <http://grantsreform.ny.gov/training-calendar>.

To apply for this opportunity:

1. Log into the Grants Gateway as either a “Grantee” or “Grantee Contract Signatory”.
2. Click on the “View Opportunities” button under “View Available Opportunities”.
3. In the Search Criteria, enter the Grant Opportunity name Community-Based Breast Cancer Support and Wellness Services and select the Department of Health as the Funding Agency.
4. Click on “Search” button to initiate the search.
5. Click on the name of the Grant Opportunity from the search results grid and then select the “APPLY FOR GRANT OPPORTUNITY” button located bottom left of the Main page of the Grant Opportunity.

Once the application is complete, prospective grantees are **strongly encouraged** to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient

opportunity for the applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. Both DOH and Grants Reform staff are available to answer applicant's technical questions and provide technical assistance prior to the application due date and time. Contact information for the Grants Reform Team is available under Section IV. B. of this RFA.

PLEASE NOTE: Although DOH and the Grants Reform staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding.

The Grants Gateway will always notify applicants of successful submission. If a prospective grantee does not get a successful submission message assigning their application a unique ID number, it has not successfully submitted an application. During the application process, please pay particular attention to the following:

- Not-for-profit applicants must be prequalified on the due date for this application submission. Be sure to maintain prequalification status between funding opportunities. Three of a not-for-profit's essential financial documents - the IRS990, Financial Statement and Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit's prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles "Grantee Contract Signatory" or "Grantee System Administrator" can submit an application.
- Prior to submission, the system will automatically initiate a global error checking process to protect against incomplete applications. An applicant may need to attend to certain parts of the application prior to being able to submit the application successfully. Be sure to allow time after pressing the submit button to clean up any global errors that may arise. You can also run the global error check at any time in the application process. (see p.66 of the Grantee User Guide).
- Grantees should use numbers, letters and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also be aware of the restriction on file size (10 MB) when uploading documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

Role	Create and Maintain User Roles	Initiate Application	Complete Application	Submit Application	Only View the Application
Delegated Admin	X				
Grantee		X	X		
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

Late applications will **not** be accepted. **Applications will not be accepted via fax, e-mail, hard copy or hand delivery.**

F. Department of Health's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department's sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of applications.
6. Use application information obtained through site visits, management interviews and the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.

8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.
13. Utilize any and all ideas submitted with the applications received.
14. Unless otherwise specified in the RFA, every offer is firm and not revocable for a period of 60 days from the bid opening.
15. Waive or modify minor irregularities in applications received after prior notification to the applicant.
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's application and/or to determine an offerer's compliance with the requirements of the RFA.
17. Negotiate with successful applicants within the scope of the RFA in the best interests of the State.
18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the state.

G. Term of Contract

Any contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period: March 1, 2017 to February 28, 2022.

Continued funding throughout this five-year period is contingent upon availability of funding, state budget appropriations and contractor performance. DOH also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Grant Contract for this funding opportunity can be found in the Forms Menu once an application to this funding opportunity is started.

H. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to not-for-profit grant contractors in an amount not to exceed 25 percent.
2. The grant contractor will be required to submit MONTHLY invoices and required reports of expenditures through the Grants Gateway (in the future) to the State's designated payment office:

Division of Chronic Disease Prevention
Fiscal Management Unit
NYS Department of Health
*Empire State Plaza, Corning Tower – Room 1025
Albany NY 12237*

Grant contractors must provide complete and accurate billing invoices in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Workplan.

The Department reserves the right to request additional backup documentation at its discretion.

3. The grant contractor will be required to submit through the Grants Gateway (in the future) the following periodic reports:

Semi-annual Reports are required to be submitted by the 30th day after the end of each six-month grant period. The Department will provide contractors with reporting formats for this purpose.

All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Grant Contract.

I. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health (“DOH”) recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" (“Disparity Study”). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of 30 % as follows:

- 1) For Not-for Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the budget in total.

The goal on the eligible portion of this contract will be 15% for Minority-Owned Business Enterprises (“MBE”) participation and 15% for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold

payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at:

<https://ny.newnycontracts.com>. The directory is found in the upper right hand side of the webpage under “Search for Certified Firms” and accessed by clicking on the link entitled “MWBE Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting an application, a grantee agrees to complete an MWBE Utilization plan as directed in **Attachment 2** of this RFA. DOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, DOH may issue a notice of deficiency. If a notice of deficiency is issued, Grantee agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. DOH may disqualify a Grantee as being non-responsive under the following circumstances:

- 1) If a Grantee fails to submit a MWBE Utilization Plan;
- 2) If a Grantee fails to submit a written remedy to a notice of deficiency;
- 3) If a Grantee fails to submit a request for waiver (if applicable); or
- 4) If DOH determines that the Grantee has failed to document good-faith efforts to meet the established DOH MWBE participation goals for the procurement.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

J. Limits on Administrative Expenses and Executive Compensation

On July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo’s Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR – Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to the Executive Order #38 website at: <http://executiveorder38.ny.gov>.

K. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please include the Vendor Identification number on the application cover sheet. If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at:

http://www.osc.state.ny.us/vendor_management/issues_guidance.htm.

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

L. Vendor Responsibility Questionnaire

The New York State Department of Health recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at http://www.osc.state.ny.us/vendrep/vendor_index.htm or go directly to the VendRep system online at <https://portal.osc.state.ny.us>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at ciohelpdesk@osc.state.ny.us.

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website at: http://www.osc.state.ny.us/vendrep/forms_vendor.htm or may contact the Office of the State Comptroller's Help Desk for a copy of the paper form.

Applicants should complete and submit the Vendor Responsibility Attestation (Attachment 3).

M. Vendor Prequalification for Not-for-Profits

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the [Grants Reform Website](#).

Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date listed on the cover of this RFA cannot be evaluated. Such applications will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Reform Website details the requirements and an [online tutorial](#) are available to walk users through the process.

1) Register for the Grants Gateway

- On the Grants Reform Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.
- If you have previously registered and do not know your Username, please email grantsreform@its.ny.gov. If you do not know your Password, please click the [Forgot Password](#) link from the main log in page and follow the prompts.

2) Complete your Prequalification Application

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at grantsreform@its.ny.gov.

3) Submit Your Prequalification Application

- After completing your Prequalification Application, click the **Submit Document Vault Link** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.

- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.

Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Applicants are strongly encouraged to begin the process as soon as possible in order to participate in this funding opportunity.

N. General Specifications

- 1) By submitting the "Application Form" each applicant attests to its express authority to sign on behalf of the applicant.
- 2) Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.
- 3) Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter attached to the application.
- 4) An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.
- 5) Provisions Upon Default
 - a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.
 - b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.
 - c. If, in the judgement of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of

such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

O. Healthy Meeting Guidelines

Contractors will certify that they will comply with the Department's requirements for healthy meetings when the State is reimbursing for all or a portion of the meeting costs. The Department reserves the right to review the site, menu and agenda so that the State can ensure the nutrition, physical activity, sustainability and tobacco-free guidelines are met. The Healthy Meeting Guidelines can be accessed at:

https://www.health.ny.gov/prevention/healthy_lifestyles/guidelines.htm

V. Completing the Application

A. Application Format/Content

Please refer to the Quick Start Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Reform website at:

www.grantsreform.ny.gov/Grantees. In addition, Section IV. Administrative Requirements, E. How to file an application provides important guidance.

Community-Based Breast Cancer Support and Wellness Services Application Content and Grading

1. Pre-submission Uploads (Grants Gateway/Forms Menu)

- *Letter of Interest Format - optional*
- *Application Cover Sheet - required*
- *Vendor Responsibility Attestation - required*
- *M/WBE Requirement Forms - required*
- *Organization Chart - required*
- *Board of Directors List-required*
- *Resume and/or job descriptions and draft subcontractor and/or consultant agreements, as applicable*
- *Administrative and Fringe Workbook and/or Federally Approved Rate Agreement if applicable*

- 2. Program Specific Questions:** Please complete the "Project Title" using the following text:
Community-Based Breast Cancer Support and Wellness Services.

a. Program Summary (Maximum Score: 35 points)

- i. Describe the activities to be provided from among the list in RFA Section III, A, Required Activities/Scope of Work, Provision of Services. For each of the activities you propose to conduct from the list in Section III, A, pg. 7, describe the following:
 - which service and how many sessions will be offered? (e.g., eight, four-week sessions of one-hour yoga classes);
 - where will the program/activity take place? (e.g., half (4) of the sessions will be offered at the X County YWCA and half (4) will be offered in the high school of the X city school district. These locations ensure access by breast cancer survivors in two communities/neighborhoods in which there are no current programs.);
 - who will conduct/present/facilitate the service/s? Specify subcontractors and/or consultants if applicable and describe their qualifications. Upload resume, job description, consultant agreement, etc. to Pre-Submission Uploads section of the Grants Gateway prior to submission of the application. If facilitators are to be determined, please include the desired qualifications (e.g., facilitator to be determined will have five years of experience with small groups facilitation verifiable with references or Susan White, licensed yoga instructor, will provide all instruction, see resume and consultant agreement in Pre-submission Uploads.); and
 - how many people will be served? (e.g., Up to 20 breast cancer survivors will participate in each of the eight (8) sessions for a total of 160 participants from April 1, 2017 to January 31, 2018.)
- ii. Describe how promotion and recruitment will occur to promote the services to breast cancer survivors and enlist them in the proposed service/s. Describe the strategies you will use to conduct promotion and recruitment, how often and where these will be conducted (e.g., Twelve in-service presentations will be conducted at diagnostic and treatment centers between March 1, 2017 and February 28, 2018). Describe the partners used to reach survivors and the roles partners will play in promotion and recruitment (e.g., five community organizations will include referrals to the yoga classes to all of their clients that participate in their breast cancer survivor support groups.)
- iii. Describe how the agency will participate in program monitoring evaluation and evaluation activities, including what tools will be used, how the tools will inform program planning and what staff will implement these efforts. (e.g., The project manager, Susan White, will complete all routine reporting as required by the Department. The project manager will oversee implementation and analysis of pre- and post-course surveys to assess impact on participant quality of life indicators and to inform future course planning, e.g., locations, scheduling, etc.)

b. Statement of Need (Maximum Score: 15 points)

- i. Describe why there is a need in your community for the services you selected from RFA Section III.
- ii. Describe the population that will benefit from the services; to whom and where (in what

- service area) will services be provided and why.
- iii. Clearly document the need with data; include how you determined there is a need for these services, directed at this population in the proposed service area.

c. Applicant Organization (Maximum Score: 10 points)

- i. Describe your agency, its overall mission and the types and number of services it provides.
- ii. Describe your agency's technical, fiscal and administrative expertise to implement the scope of work of this RFA. Include the agency's experience managing state and/or other grant contracts. If you plan on subcontracting with vendors or consultants for any of the scope of work, describe your experience and ability to do so. Please include draft subcontractors and/or consultant agreements in the Pre-Submission Uploads of the Grants Gateway if you do plan to subcontract or enter into a consultant agreement for any of the scope of work.
- iii. Provide a list of the agency's board of directors with names and contact information. Please also include the number of current board members that are breast cancer survivors; note there is no need to provide identifying information for those members, the number is sufficient. Please include a Board of Director list in the Pre-Submission Uploads of the Grants Gateway. If no board members are breast cancer survivors, indicate which Executive Staff (e.g., Executive Director, Authorizing Fiscal Signatory, etc.) are breast cancer survivors.
- iv. Describe the agency's experience providing breast cancer support and/or survivorship programs, listing all such activities provided by the agency, including: type of services provided, length of time services have been provided, number of clients and family members served annually, demographics of populations being served and location/s where services are provided.
- v. Describe the community organizations and clinical provider/organizations/systems that the agency collaborates with to implement programming for breast cancer survivors.

d. Program Objectives – Work Plan (Maximum Score: 15 points)

Complete the Work Plan in the Grants Gateway online application using the sample work plan attached to this RFA as an example. The work plan should include objectives, tasks and performance measures to implement the full scope of work (provision of one or more of the services, promotion and recruitment, and evaluation, listed in RFA Sections III A, B and C, respectively). The work plan should only list objectives, tasks and performance measures for the initial year of the contract, from March 1, 2017 through February 28, 2018. Applicants will be responsible for inserting their Objectives (at least 3), Tasks and Performance Measures into the Grants Gateway Work Plan online application.

Please note that when entering information into the Grants Gateway Work Plan, the following should be observed:

- Objective Name can be no more than 75 characters.
- Objective Description can be no more than 250 characters.
- Multiple tasks can be added however, each task is limited to 250 characters.

- Performance Measure data is limited to 250 characters.

A sample work plan with guidance about how to develop objectives, tasks and performance measures is included as Attachment 6. Please reference this Attachment prior to developing work plan objectives, tasks and performance measures. Use the prescribed format for development of objectives, as noted in Attachment 6 to be sure that all objectives are measurable, include the specific number of clients to be reached and services to be offered.

Please complete the “Project Summary” section using the following text:

This grant program provides programming to address the unique needs of breast cancer survivors struggling with the physical, emotional, social, spiritual, financial and other issues related to a breast cancer diagnosis, with the ultimate goal of improving quality of life for breast cancer survivors. Required contractor activities include: 1) provision of one or more pre-determined community-based supportive, counseling, wellness or educational activities for breast cancer survivors (in treatment or post-treatment) and/or breast cancer screening education, 2) promotion and recruitment for the pre-determined services, and 3) evaluation of the services.

e. Budget (Maximum Score: 25 points)

Complete a budget for the first program year (Year 1 – March 1, 2017 to February 28, 2018) within the Grants Gateway application. Please read and refer to Attachment 5 Budget Instructions. **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.** Budgets would total as close to \$25,000 as possible.

Applicants may subcontract components of the scope of work. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors and/or consultants, and will be the primary contact for the DOH. All subcontractors and/or consultants should be approved by the Department of Health.

Administrative costs will be limited to a maximum of 10% of total direct costs.

It is the applicant’s responsibility to ensure that all materials to be included in the application have been properly prepared and submitted. **Applications must be submitted via the Grants Gateway by the date and time posted on the cover of this RFA.** The value assigned to each section is an indication of the relative weight that will be given when scoring your application.

Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.

B. Freedom of Information Law

All applications may be disclosed or used by DOH to the extent permitted by law. DOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the application.** If DOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

Applications meeting the guidelines set forth above will be reviewed and evaluated competitively by the *NYSDOH, Division of Chronic Disease Prevention, Bureau of Cancer Prevention and Control*.

The following will result in rejected applications:

- Failure to submit the application by the date and time noted in the Key Events on the cover of this RFA.
- Applicant is not a NYS grass roots, free-standing, not-for-profit organization as defined in Section II, A.
- Applicant does not include breast cancer survivors with significant decision-making responsibilities within the organization, as demonstrated by provision of board membership or Executive Staff.
- Applicant is not prequalified in the New York State Grants Gateway on the date and time the application is due, as noted in the Key Events on the cover of this RFA.

The 15 highest scoring applications will receive grant awards, not to exceed \$25,000, annually, for a five-year total of \$125,000 each, subject to state appropriation authority. In the event of a tie score, the applicant with the highest total score on the Program Summary section will receive the award. Applications will be deemed to fall in one of four categories: 1) not approved for funding, 2) approved for funding, 3) approved for funding with modifications, or 4) approved and not funded.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

Once an award has been made, applicants may request a debriefing of their application. Please note the debriefing will be limited only to the strengths and weaknesses of the subject application and will not include any discussion of other applications. Requests must be received no later

than fifteen (15) business days from date of award or non-award announcement.

To request a debriefing, please send an email to the Bureau of Cancer Prevention and Control at canserv@health.ny.gov. In the subject line, please write: Debriefing Request - Community-Based Breast Cancer Support and Wellness Services RFA

In the event unsuccessful applicants wish to protest the award resulting from this RFA, applicants should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at <http://www.osc.state.ny.us/agencies/guide/MyWebHelp>.

VI. Attachments

Please note that certain attachments can be accessed in the “Pre-Submission Uploads” section of an online application. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

- Attachment 1: Letter of Interest Format*
- Attachment 2: Minority & Women-Owned Business Enterprise (MWBE) Requirement Forms*
- Attachment 3: Vendor Responsibility Attestation*
- Attachment 4: Application Cover Sheet *
- Attachment 5: Budget Instructions-*Completion of Expenditure Budget Section in the Grants Gateway*
- Attachment 6: Sample Work Plan and Instructions
- Attachment 7: Administrative Cost Guidelines
- Attachment 8: Administrative/Fringe Workbook*

*These attachments are located/included in the Pre-Submission Upload section of the Grants Gateway on line application.

ATTACHMENT 5

Budget Instructions: Completion of Expenditure Budget Section in the Grants Gateway

This document is intended as a companion document for completion of the Expenditure Budget in the Grants Gateway. Instructions provided are in budget category order as they appear in the Forms Menu.

- All costs should directly relate to the provision of services outlined in this funding opportunity, be consistent with the scope of services, reasonable, and cost effective. Failure to provide complete, clear, and concise information may result in a reduced score.
- All reported funds (Grant Funds or Other Funds) should be directly related to the proposed project and justified in detail regardless of the source of funding.
- Complete all required fields marked with a red asterisk (*). Failure to do so will result in an error message.
- Equipment purchases for major items, such as computers and printers, which will depreciate in a very short period of time (e.g. one to three years) will only be considered when supported by a strong justification. (Sample: A printer is requested to replace one that is no longer functioning and out of warranty and repairing would be cost prohibitive. Printer is needed for copying of Save the Date flyers for annual workshop which is a work plan activity.)
- Expenses that are not included in personal services (salary and fringe costs), such as contractual, supplies, and travel costs, should include sufficient detail to justify the need and appropriateness of the expense to the proposed grant project.
- Applicants are encouraged to review the specified character limits prior to beginning data entry. It may be beneficial to complete justifications/narratives in a word processing document and cut and paste into Expenditure Budget sections. Character limits are based on letters and spaces.
- **“Match Funds” are not required for this contract. Please do not enter information in the match sections of the budget.**
- “Other Funds” is a section of each budget category for the applicant to detail all other voluntary contributions to the proposed contract, also referred to as in-kind contributions. This information may be left blank. This section of the budget is not scored because it is not contractually required.

1. Personal Services - Salary

a. Salary Detail

- *Position/Title (Character Limit 55)* - provide title of position and name of staff (if known). If the position does not currently exist or is vacant indicate that the

position is to be hired (TBH). It may be necessary to enter a position more than once if changes to salary, hours, percent of effort, and/or number of months is expected to change. (e.g. Position is expected to receive a salary increase after six months. First entry: \$20,000 100% 6 months. Second entry: \$25,000 100% 6 months).

- *Role/Responsibility (Character Limit 500)* - provide a brief description of how each position contributes to the proposed project. If applicable, anticipated start dates for their work on the proposed project (e.g. new hires will not begin until month 3 because recruitment will take place in months 1 and 2).
- *Annualized Salary per Position* - provide the employee's annualized salary as paid by the Organization. This figure should *NOT* be adjusted for values not supported on this grant.
- *STD Work Week (hrs.)* - provide the standard (STD) hours worked each week by the incumbent for the organization (e.g. 35 hours, 40 hours). Do not adjust this figure for hours not supported by the proposed project. For example, a staff member's STD work week is 40 hours but only 10 hours will be devoted weekly towards this project. Provide 40 hours as the STD Work Week.
- *% Funded* - provide only the percentage of time which will be supported on this grant. Do not include the percentage of time supported by other funding sources even if directly related to this proposed grant project.
- *# Months Funded* - indicate the total estimated number of months the position will work on this grant. If existing staff will begin immediately, indicate 12 months, if staff are new hires, indicate the anticipated number of months based on the anticipated hire date.

2. Personal Services - Salary Narrative (*Character Limit 4000*)

Provide a brief job description for each Position/Title entered on the Salary Detail section. It is not necessary to include the calculations in the narrative as this can be found in the Salary Detail. You may include any information that will assist in understanding other elements of the calculation (e.g. part-time staff). Additional information can be provided as necessary.

Sample: The *Program Coordinator* will oversee day to day operations of all funded project staff to include supervision, training, review of client files, preparation of monthly narratives to funders, etc. The coordinator will be expected to begin in the sixth month of a twelve month budget period.

3. Personal Services – Fringe

a. Fringe Details

- *Type/Description (Character Limit 125)*- provide the requested fringe rate. (Sample: Fringe Rate requested @ 15%.)

- **Justification (Character Limit 1,000)** – The requested rate should be based on either the completed Fringe Detail Sheet or a Federally Approved Rate Agreement. (Sample: “Fringe Rate is based upon uploaded Fringe Detail Sheet/Federally Approved Rate, see narrative for further details”.) All other fringe detail should appear in the Fringe Narrative section. The Fringe Detail Sheet is available in the Pre-Submission Uploads. **The applicant is responsible for uploading either the completed Fringe Rate Detail Sheet or the Federally Approved Rate Agreement to the Pre-Submission Uploads.**

b. Financial

- *Total Grant Funds* – enter the amount of fringe requested
- *Total Match Funds* – leave blank
- *Total Other Funds* – leave blank

4. Personal Services - Fringe Narrative (Character limit – 4,000)

- If the proposed positions require the use of more than one fringe benefit rate, provide a breakdown of the base salary amount and respective rate for each. The total requested amount would then be based on a blend of each of the rates. (e.g., FT Staff fringe rate is calculated at 35% of total FT salaries; PT Staff fringe rate is calculated at 15% of total PT salaries. FT Salaries \$25,000 x 35% = \$8,750; PT Salaries \$20,000 x 15% = \$3,000. Requested fringe is \$11,750).
- If the rate is based on a federally approved fringe rate agreement, provide the rate and the “current as of” date.
- Indicate whether the Fringe Detail Sheet/Federally Approved Rate Agreement has been uploaded to Pre-Submission Uploads section.

5. Contractual

Use the following definitions of categories to determine which items to list in the contractual budget line. Successful applicants will be required to upload a dually signed subcontractor and/or consultant agreement(s) signed by both parties to the Grantee Document Folder upon contract award.

- **Subcontractor / Consultant – letters of intent should be uploaded to the Pre-Submission Uploads as instructed in the Pre-Submission section of this this RFA.**

Definition: performs a portion of the scope of work of the lead contractor’s work plan, often off-site and under the direction of a third party. The subcontractor and/or consultants’ performance has a direct impact on the overall contract performance, which is measured by the contracted organization. For example, a local YWCA will hold ongoing or repeating, time-limited exercise classes, facilitated by professional fitness training staff.

- **Vendor**

Definition: includes those persons or organizations that provide the same or similar services to any customer without altering its product. (e.g., massage therapist, nutritionist, holistic health coach).

Contractual Detail

The budget line for each should include all proposed costs related to that vendor, for example, per diem rates for subcontracted services, travel costs related to provision of services, supplies needed to perform services, etc.

- **Type/Description (Character Limit 125)** - for each line item, please provide the name of the organization, company, or individual and a brief description of the type of service they will provide. If the “who” is unknown please indicate is to be determined by writing “TBD” in place of the subcontractor name (Sample: YWCA of Albany County).
- **Justification (Character Limit 1,000)** - elaborate on the service provided, provide a calculation explaining how the expense is allocated to the proposed project. A separate budget line should be used for each subcontractor, consultant, or vendor. Note: all expenses associated with each should be included in the justification. (Sample: YWCA of Albany County will conduct weekly yoga classes lasting 45 minute in length, provided by a certified yoga instructor. 52 classes x \$150 (flat rate per class regardless of participation) = \$7,800. ***Please note, the Contractual budget category does not have an additional Narrative section, all details will need to be provided in the justification.***

6. Travel

Travel estimates should be prepared following either the written standard travel policy of the contractor, the Office of the State Comptroller (OSC) guidelines or United States General Services Administration (USGSA) rates. Approved travel expenses shall be reimbursed at the lesser of these rates. No out-of-state travel costs shall be permitted unless pre-approved by the State prior to the date of travel.

OCS Guidelines: <http://www.osc.state.ny.us/agencies/travel/manual.pdf>

USGSA: <http://www.gsa.gov/portal/category/21283>

Travel Detail

- **Type/Description (Character Limit 125)** - for each category of travel (e.g. Client Travel; Staff Mileage; Out-of-State Conference) please enter a separate budget line and the requested amount. (Sample – Staff mileage for local travel)
- **Justification (Character Limit 1,000)** – briefly describe the nature of the expense, identify who will travel, provide a calculation explaining how the expense is allocated to the proposed project, and when the travel would occur if known. (As noted above, subcontractor and vendor travel should be included on the Contractual Services budget line.) (Sample: Local travel to and from support groups and events will be reimbursed, one staff member per meeting/event, at the

allowable rate per OSC guidelines. Support groups meet monthly (100 miles x 12 months x .575 = \$690). Six wellness events will be conducted (100 miles x 6 events x .575 = \$345)

7. Equipment

Equipment is defined as items such as computers, printers, phones, apparatus or fixed asset (other than land or a building) that are tangible personal property having a useful life of more than one year and a purchase price equal or exceeding \$5,000. This also includes a grouping of like items which equals or exceeds \$5,000 (for example, computers and laptops). Item(s) not falling under this definition should not be included here, they should be included under Operating Expenses. The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards Section § 200.33 definition of equipment can be found at the following link: http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl

Equipment Detail

- **Type/Description (Character Limit 125)** - for each item of equipment, provide the type of equipment and quantity. (Sample: HP Desktop Computers (2))
- **Justification (Character Limit 1,000)** – Only type, “See Narrative for further detail”.
- **Purchase/Rent** – for each item of equipment budgeted, select purchased or rented

8. Equipment Narrative (Character Limit – 4,000)

- Name the staff that will use the equipment and provide a calculation explaining how the expense is allocated to the proposed project. It is important to consider staff effort when determining appropriate allocation of the purchase cost to the contract. (Sample: Two desktop computers, keyboards, towers and mouse for two staff. Computers will be used to conduct day-to-day work plan objectives. Computers will be used by Executive Director and Program Coordinator, both staff funded at 100% on this grant. (2 computers @\$834.50 = \$1,669)
- DOH recognizes that contractors may classify items as equipment within their own accounting system that do not fall under the above definition of equipment and may be included in this budget category with the justification being provided in the Narrative. Additional information can be provided as necessary.

9. Space/Property: Rent

For each property/space rental, enter a separate budget line.

Space/Property: Rent Detail

- **Type/Description (Character Limit 125)** – The physical address of the property should be included. (Sample: 111 Any Street, Suite 123, Albany, NY 12345)

- **Justification (Character Limit 1,000)** – Only type, “See Narrative for further detail”.

10. Space Property: Rent Narrative (Character Limit 4,000)

- Provide additional details such as which program operates out of the space, the total cost, a calculation explaining how the expense has been allocated to the proposed project. (Sample: Monthly rent for Suite 123 is \$4,501.00. Suite houses the Capital District Health Programs and Promotion and the Capital District Wellness Coalition. Rent for each program is calculated based on percentage of square footage occupied by staff for each project and same percentage for common area usage. For this grant project, staff occupy 15% of the space; rent is \$675 a month x 12 months= \$8,100).

11. Space/Property: Own

For each property/space that is owned, enter a separate budget line.

Space/Property: Own Detail

- **Type/Description (Character Limit 125)** – The physical address of the property should be included. (Sample: 111 Any Street, Albany, NY 12345)
- **Justification (Character Limit 1,000)** – Only type “See Narrative for further detail”.

12. Space Property: Own Narrative (Character Limit 4,000)

- Provide additional details such as which program operates out of the space, the total cost, a calculation explaining how the expense has been allocated to the proposed project. (Sample Capital District Wellness Coalition owns its office building at 111 Any Street, Albany, NY 12345. Expenses for building maintenance include cleaning, pest control, insurance, security, and supplies. These costs total \$17,420 and are charged at 33% to the food hub operations = \$5,749.)

13. Utilities

For each category of expense (e.g. utilities, telephone, mobile, etc.) enter a separate budget line.

Utilities Detail

- **Type/Description (Character Limit 125)** – Enter the category of expense and include the property address.
- **Justification (Character Limit 1,000)** – Only type, “See Narrative for further details”.

14. Utilities Narrative (Character Limit 4,000)

- Provide additional details such as the total cost, a calculation explaining how the expense is allocated to the proposed project. Mobile/Cellular costs should include the title of the staff and can only be allocated based upon their percent of effort. Additional information can be provided as necessary. (Sample: Electric/Gas - Capital District Coalition at 111 Any Street, Albany, NY 12345 is calculated 33% of the organization's total utility bill of \$18,000 = \$5,940.)

15. Operating Expenses

All miscellaneous expenses not falling in any of the other budget categories (e.g. postage, printing, mailings, office supplies, program supplies) should be budgeted under this section, with the exception of “indirect costs/administrative costs”, which will fall under “Other”. Indicate the title of the budget category as well as a calculation explaining how the expense is allocated to the proposed project).

Operating Expenses Detail

- *Type/Description (Character Limit 125)* - Indicate the title of the budget category categories (e.g. postage, printing, mailings, office supplies, program supplies).
- *Justification (Character Limit 1,000)* – Only indicate “See Narrative for further details”.

16. Operating Expenses Narrative (Character Limit 4,000)

- Provide a detailed justification for each of the proposed budget item(s) and a calculation explaining how the expense has been allocated to the proposed project. Additional information can be provided as necessary. (Sample: Save The Date postcard for wellness conference sent to full mailing list, Postage rate of .28/piece (bulk rate) for 1000 cards = \$280.)

17. Other Expenses Detail

Only indirect costs/administrative costs are to be budgeted under this section. Administrative costs will be limited to a maximum of 10% of total direct costs. The requested rate should be based on either the completed Administrative Detail Sheet or a Federally Approved Rate Agreement. The Administrative Detail Sheet is available in the Pre-Submission Uploads . **The applicant is responsible for uploading either the completed Administrative Detail Sheet or the Federally Approved Rate Agreement to the Pre-Submission Uploads section.**

- ***Type/Description (Character Limit 125)*** – provide the indirect rate request (Sample: Indirect Rate requested at 10%)
- ***Justification (Character Limit 1,000)***: Type “See Narrative for further detail”.
- ***Type/Description (Character Limit 125)*** – provide the indirect rate request (Sample: Indirect Rate requested at 10%)
- ***Justification (Character Limit 1,000)***: Type “See Narrative for further detail”.

18. Other Narrative (Character Limit 4,000)

- Only indirect costs/administrative costs are to be budgeted under this section. If the rate is based on a federally approved administrative rate agreement indicate the rate and the current as of date.
- Indicate whether the Administrative Detail Sheet or the Federally Approved Rate Agreement has been uploaded to Pre-Submission Uploads section.
- Sample: General Overhead-4.76%, of the organization's administrative costs indirectly related to the program is requested. See the Administrative Detail Sheet or Federally Approved Rate Agreement in the upload section for further details.

ATTACHMENT 6

Sample Work Plan and Instructions

Complete the Work Plan in the Grants Gateway online application using these instructions and sample work plan. The work plan should describe how you will implement the full scope of work as stated in the RFA, Section III, A, B and C.

Instructions

- Please complete the “Project Summary” section using the following text: This grant program provides programming to address the unique needs of breast cancer survivors struggling with the physical, emotional, social, spiritual, financial and other issues related to a breast cancer diagnosis, with the ultimate goal of improving quality of life for breast cancer survivors. Required contractor activities include 1) provision of one or more pre-determined community-based supportive, counseling, wellness or educational activities for breast cancer survivors (in treatment or post-treatment) and/or breast cancer screening education, 2) promotion and recruitment for the pre-determined services, and 3) evaluation of the services.
- Develop objective descriptions, tasks and performance measures for the initial year of the contract only (March 1, 2017 through February 28, 2018) for each of the three required activities as listed in the RFA, Section III A, B and C. Specific criteria and information for each of the work plan fields is described below.

Objective Name:

- All application work plans should include the following three required “objective names”:
 - 1. Support, Wellness and Education Services**
 - 2. Promotion and Recruitment**
 - 3. Program Monitoring and Evaluation**These align with the three areas in the required scope of work as listed in the RFA Section III A, B and C and should be included in all application work plans.
- Contractors should develop and complete their own objective descriptions under each of the three (3) objective names, completing at least one (1) objective description for each objective name.
- Objective Descriptions, Tasks and Performance Measures for *Objective Name 1: Support, Wellness and Education Services* should clearly describe one or more of the eleven (11) services listed in Section III A of the RFA.

Objective Descriptions:

- Objective Descriptions should be measureable, for example, wherever possible, they should include the anticipated number of events to take place, number of people to reach, and/or number of calls to make, etc.
- Objective descriptions should also include the timeframe in which the objective will be implemented or completed.
- There can be more than one objective description for each objective name. But, there must be a minimum of three objective descriptions, one for each objective name.

- Objective descriptions should also be reflected in the performance measures.
- Each objective description is limited to 250 characters.

Tasks:

- Add the discreet tasks or activities that will be implemented to meet the stated objectives (titled Objective Descriptions as listed above).
- There can be multiple tasks for each objective (Objective Description).
- Each task is limited to 250 characters.

Performance Measures:

- These are the standards that you set to measure progress achieving the stated objectives. These allow you to assess how well you meet your stated objectives (objective descriptions), and help to identify areas in need of improvement or change.
- There can be multiple performance measures, but, each is limited to 250 characters.

Sample Work Plan Text for the Grants Gateway Online Application

Objective Name: Support, Wellness and Education Services

Objective Description 1: Offer 8, 4 week sessions of 1 hour, 2x/week yoga classes for up to 160 breast cancer survivors by February 28, 2018.

Tasks:

- Recruit licensed yoga instructor/s to provide the sessions.
- Enter into consultant agreements with licensed yoga instructors for provision of sessions.
- Project Coordinator reviews participant evaluations of yoga instructor/s at end of each four-week session to assess need for improvement/additional recruitment.
- Reimburse consultants for the provision of the sessions.

Performance Measures:

- Project Coordinator recruits appropriately licensed/credentialed yoga instructors by April 15, 2017.
- Project Coordinator reviews participant evaluations completed, after each four-week session, and prior to implementation of new sessions.
- Consultant agreements signed and provided to State contract manager by April 31, 2017.
- Monthly vouchers submitted to the state to request reimbursement for consultant work beginning July 31, 2017 for sessions offered in June 2017.

Tasks:

- Identify, meet with, and acquire commitment from two community locations (YWCA, health and fitness gym, school, etc.) in which to offer yoga sessions; one in X city on a bus route and a second in X town in which there is a lack of such services.

Performance Measure:

- Agreements with two organizations, one in X City and one in X town, are signed and submitted to the State contract manager by April 31, 2017.

Tasks:

- f. Implement four, four-week yoga sessions, 2 x per week in X city for up to 80 breast cancer survivors.
- g. Implement four, four-week yoga sessions, 2 x per week in X town for up to 80 breast cancer survivors.

Performance Measures:

- i. Schedule for sessions is finalized by April 15, 2017.
- ii. Up to 160 breast cancer survivors register for the sessions.
- iii. Session sign-in sheets document participation by up to 20 participants at each, four-week session.

Objective Name: Promotion and Recruitment

Objective Description 2: Provide twelve in-service presentations to promote the yoga sessions to up to 60 health care providers, case managers and office/intake staff at diagnostic and treatment centers between June 1, 2017 and December 31, 2017.

Task:

- a. Develop one-page fact sheet describing the need for the yoga sessions and providing the yoga class schedule, location, times, and instructor information.

Performance Measures:

- i: Fact sheet is printed and available for distribution by July 15, 2017.
- ii. Fact sheet is posted on organization website by July 31, 2017.

Task:

- b: Schedule two, in-service presentations a month.

Performance Measure:

- i. In-service presentation agendas and sign-in sheets document provision of two presentations per month with a minimum of 5 attendees between June 1, 2017 and December 31, 2017 for a total of twelve presentations and 60 attendees.

Task:

- c. Acquire agreements from centers for provision of client referrals to yoga sessions.

Performance Measure:

- I. Up to 80 yoga class participants are referred by diagnostic and treatment centers.

Objective Description 3: Conduct promotion and recruitment activities to acquire up to 60 participant referrals to yoga sessions December 31, 2017.

Tasks:

- a. Schedule calls/meetings with 20 community organizations (community centers, libraries, continuing education programs, etc.) and with 5 organizations that provide supportive services to breast cancer survivors (ACS, Komen, etc.).
- b. Monthly email blasts to organizations to provide fact sheet, notices, reminders and link to organization website.
- c. Issue press releases, ads in free community calendars, local papers, PSAs, etc.
- d. Maintain and improve upon contact database used for electronic promotion.

Performance Measures:

- i. Up to 60 yoga class participants are referred by community organizations that provide supportive services to breast cancer survivors.
- ii. Up to 20 yoga class participants are referred via paid and earned media.
- iii. Six print ads are placed in community publications from June 2017 through December 2017.
- iv. Monthly email blasts to all database contacts with fact sheet and yoga session schedule.

Objective Name: Program Monitoring and Evaluation

Objective Description 4: Complete all required evaluation activities, ensuring performance measures are met by February 28, 2017.

Tasks:

- a. Conduct pre- and post-assessments of each of the eight yoga sessions, compile, analyze and report results, revise sessions as needed between August 2017 and March 2018.
- b. Conduct in-service assessment, adjust sessions as indicated.

Performance Measures:

- i. 100% of participants at each of the 8 yoga sessions complete pre and post assessments.
- ii. Monthly meetings with coordinator and yoga instructors to assess course schedule, plans, student needs, etc. based on the assessments.

Tasks:

- c. Assess referral sources and adjust promotion and recruitment as needed.

Performance Measures:

- i. Monthly meetings with project coordinator and public affairs staff to review participant assessments to identify the referral source and adjust promotion/recruitment activities as necessary.

Tasks:

- d. Provide reports and participate in calls/meetings with State contract manager as required to ensure compliance with contract work plan.

Performance Measure:

- i. Required reports submitted accurately and on time.

ATTACHMENT 7

Administrative Costs Guidelines

Administrative costs for the purposes of this document may also be referred to as overhead or indirect costs, more commonly known as those expenses which are *indirectly* related to the implementation of program services. As stated in OMB Circular A-122, indirect costs are defined as those costs that have been incurred for common or joint objectives and cannot be readily identified with a particular final cost objective.

This guidance covers commonly asked questions about administrative costs:

- I. What are the maximum allowable administrative costs supported by the Division of Chronic Disease Prevention (DCDP)?**
- II. Administrative cost guidance for a contract is usually delineated in the Request For Application (RFA) from which it was procured. The amount of administrative costs that a contractor may request from DCDP will vary by program initiative. What are the acceptable methods for budgeting administrative costs?**

Administrative costs can be budgeted in one of two ways on a DCDP Contract: (a) as a rate or (b) directly.

- A. As a rate** under the “Other” cost category, specifically labeled as the “Administrative” budget line:
 - 1. With** a federally approved administrative cost rate:
 - The rate must be applied to the same base costs as used in the federally approved rate agreement;
 - A copy of the federally approved rate agreement must be submitted with the contract each year;
 - If the RFA limits the contractors to specific rate, regardless of the federally approved rate, the contractor may **ONLY** request up to the rate stated in the RFA, not to exceed the federally approved rate.
 - 2. Without** a federally approved administrative cost rate:
 - Contractors may request up to the maximum rate stipulated by the RFA as funding permits;
 - Upon audit the organization must be able to substantiate the rate requested;
 - Costs being reimbursed from the administrative cost line cannot be budgeted on any other line of the contract;
 - A method of allocating administrative costs is required from contractors requesting a rate without a federally approved rate. Contractors should complete the Administrative Cost Detail Worksheet provided to demonstrate the need for the rate. *(See How to Complete the Administrative Cost Detail Worksheet in Section III)*

B. Directly as expenses in other budget categories:

Examples:

- A bookkeeper's salary billed under Personal Services
- Payroll processing or General Liability Insurance

Together, the rate requested and items directly billed as expenses should not exceed the maximum allowable administrative costs on the contract.

III. How do I complete the administrative cost detail worksheet to support an administrative cost rate?

Instructions: Refer to the following one page worksheet and complete all parts of the form. The worksheet is available in Excel as a separate workbook.

Part I

Include all staff that are not supported directly or completely by this or other grant programs, but provide institutional support necessary to run this program. In the line to the right of each of the staff, indicate the amount of the staff's annual salary that is not supported by grant contracts.

Part II

Include all expenses that are not supported directly or completely by this or other grant programs. In the line to the right of each item, indicate the amount of the annual expense that is not supported by grant contracts.

Part III

Total cost from Part I and II. **This is the grand total of administrative costs.**

Part IV

Subtract the amount calculated in Part III from the organization's total budget. **This is the total direct cost.**

Part V

Divide the amount calculated in **Part III** by the amount calculated in **Part IV**. This is the maximum **Administrative Cost Rate** that could be supported by the DCDP contract (up to the allowable rate provided for in the RFA). The rate should be applied to the direct costs funded by the contract. If requesting 10 percent administrative cost, calculate the amount to budget by using the following formula:

$$\text{Total Budget} / (1 + \text{Administrative Rate}) = \text{Total Direct Costs i.e. } \$100,000 / (1 + .10) = \$90,909$$

As shown in the above example, \$9,901 (10 percent of 90,909) can be reserved for administrative costs.