# Applicant User Manual

susan G. komen® COLUMBUS

Komen Columbus

2015-2016

Version 3.0

## Contents

## Contact Information

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How to Apply for Funding: http://komencolumbus.org/grants/applying-for-community-grants/how-to-apply-for-funding/

Funding Priorities and Community Needs: http://komencolumbus.org/grants/applying-for-community-grants/funding-priorities-2/

## Grant Program Overview

Susan G. Komen Columbus - along with those who generously support us with their talent, time and resources - is working to better the lives of those facing breast cancer in our community. We join hundreds of thousands of breast cancer survivors and activists around the globe as part of the world's largest and most progressive grassroots network fighting breast cancer. Through events like the Komen Columbus Race for the Cure®, we have invested more than $20 million in local breast health and breast cancer awareness projects in 30 counties. Up to 75 percent of net proceeds generated by the Komen Columbus stays in the Central and Southeastern Ohio 30-county service area. The remaining income goes to the Susan G. Komen Research Program, which supports grants and scientific partnerships to find the cures.

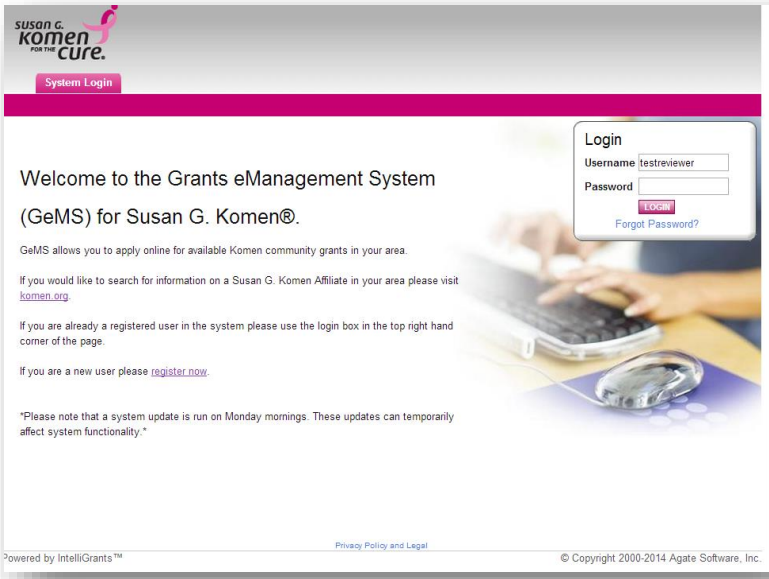
Susan G. Komen® is the world's largest breast cancer organization, funding more breast cancer research than any other nonprofit while providing real-time help to those facing the disease. Since its founding in 1982, Komen has funded more than $800 million in research and provided more than $1.7 billion in funding to screening, education, treatment and psychosocial support programs serving millions of people in more than 30 countries worldwide. Komen was founded by Nancy G. Brinker, who promised her sister, Susan G. Komen, that she would end the disease that claimed Suzy's life. Visit komen.org or call 1-877 GO KOMEN. Connect with us on Facebook at facebook.com/susangkomen and Twitter @SusanGKomen.

In 2014-2015, $1.4 million was awarded to 21 local programs. Grant recipients address breast health and breast cancer education, screening and treatment services assisting the medically underserved in the service area. Komen Columbus also contributes to cutting-edge breast cancer research through Komen's Research Grants and Awards Program. Small grant RFAs are also released on an as needed basis.

# Grants eManagement System

## Login and Registration

To access Susan G. Komen GeMS, type https://affiliategrants.komen.org into the address bar of your web browser and hit "Enter." The page you see should look like the image shown below.




## Internet Explorer Users

By default Internet Explorer 10 in Windows 8 does not run in compatibility mode. This is easily tested by logging into GeMS. If the compatibility mode is not enabled, the progress wheel in GeMS will simply *spin* without ever completing an action.

To enable the compatibility mode for Internet Explorer 10, follow these steps:
Windows 7 users start at step 2.

1. Windows 8 only - From the Windows 8 start screen select the Desktop.
2. From the Desktop launch Internet Explorer 10.
3. Press the Alt key on your keyboard to bring up the top menu.
4. Go to Tools | Compatibility View settings
5. Either

- Add https://affiliategrants.komen.org/ to the Compatibility View websites
  or
- Select Display all websites in Compatibility View

NOTE: enabling the compatibility mode using either option will *affect* all GeMS web sites.

## User Registration

Welcome to GeMS! In order to use the system you must first be granted access to it. Each person from an organization who accesses GeMS must register, create an account, and be approved before accessing the system. We recommend you take some time to think through what system roles are appropriate for the individuals in your organization. There is also an order in which registration should occur so users at your organization should plan this step first. Each project will have a project director (project's lead contact, responsible for validating new users from your organization and all administrative functions in GeMS) and an authorized signer (authority to sign legal documents on behalf of the organization, responsible for electronically signing applications and contracts).

**Helpful Hint:**
**The Project Director must be the first individual at your organization to register a new organization account.**

**The Project Direct can then approve all other users from your organization- or you can notify Komen Columbus for approval.**

## GeMS User Roles

Project Director:
The role of Project Director should be assigned to the individual at your organization that will serve as the project's lead contact. This individual is responsible for validating all new users when they register for the system under their organization. This individual will have the highest level of access in the system and will be responsible for overseeing all administrative functions available, such as application creation and completion.

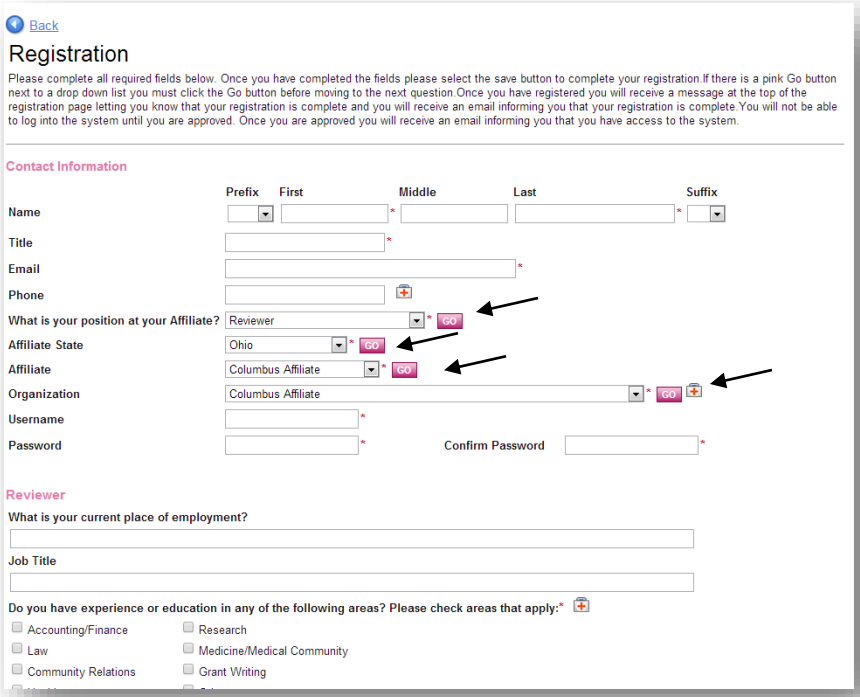
Authorized Signer:
The role of Authorized Signer should be assigned to the individual at your organization that has the authority to sign legal documents on behalf of the organization. This individual is responsible for electronically signing the application before submission and the grant contract if the organization is awarded funds.

Viewer:
The role of viewer should be assigned to any individual at your organization who needs access to view the organization's information, but does not need the functionality to save, add, edit, or change anything within the organization's information.

Writer:
The role of writer should be assigned to any individual who needs access to an organization's application process to help complete the application but does not have the authority to complete the submission process. This individual cannot change the status of an application and will not have administrative function availability.

## To create a new user account:

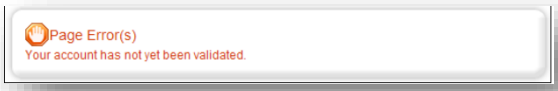
From the Susan G. Komen GeMS system homepage click the "register now" link located towards the bottom of the homepage.




1. Complete the user form in its entirety. Once any user has created a user account and gained access to the system, they will never have to request access again. There is no need for multiple accounts within GeMS.
2. Fill in all information as required. All items marked with an '*' are required to create your account.
3. If a question has a pink "GO" button next to it, complete the question and then select the "GO" button and wait 5 seconds before advancing to the next question.
4. Always select "applicant" in the "What is your position at your Affiliate" question. Once you select "applicant" and click the pink "GO" button, after a few seconds more questions should appear at the bottom of the page.
5. For "Organization", select the Affiliate for which you are reviewing grants.
6. The "Username" field must consist of all letters and numbers, minimum length 5 characters, maximum length 20 characters
7. The "Password" field must consist of all letters and numbers, minimum length 7 characters, maximum length 20 characters
8. The fields "Password" and "Confirm Password" must be the same.
9. Click "Save" in the upper right hand corner to save the data.

**Helpful Hint:**
**Make sure you choose the exact correct name of your organization.**

Next, your account must be approved before you can access the system. If you attempt to access the system prior to getting approved/validated you will receive the following message:



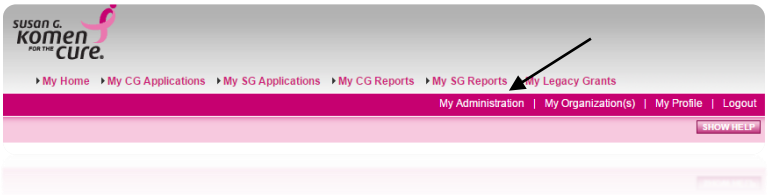
You will receive notification that your registration has been submitted for approval and when access has been granted, you will receive an email message confirming that your account has been validated.

Record your account information below for reference. If you ever become locked out or forget your password, you can retrieve your password with your e-mail on the home page, or contact Komen Columbus. Your account will freeze after too many unsuccessful log-in attempts, but will re-set after 15 minutes.

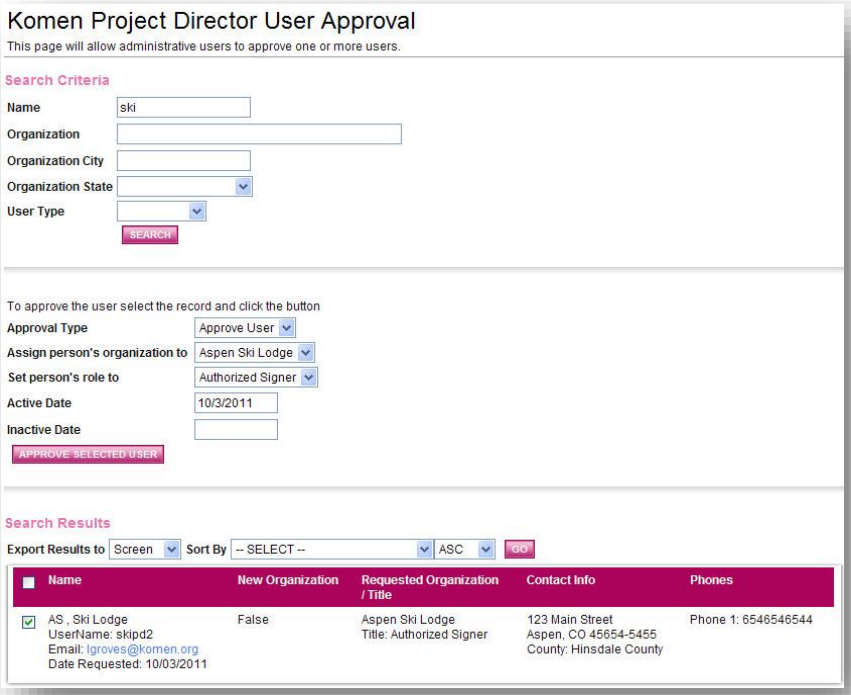
GeMS username: _____ GeMS password: _____

## User Approval

After the Project Director is registered, they can approve all other organization users by following the steps below.




1. The Project Director will receive an email when a user within their organization has registered and needs to be validated.
2. The Project Director logs in to GeMS and will select the "My Administration" tab at the top of the User Homepage.
3. Select the "User Approval for Project Directors" link within the My Administration section.
4. Once on the Komen Project Director User Approval Page (above), enter the new registrants name in the search criteria. You could also search the system for "new users" in the User Type field to perform a broader search.

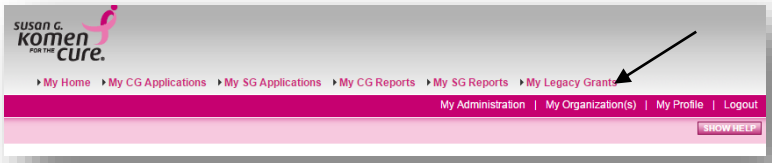


5. Select the pink “Search” button.
6. Select the checkbox next to the users name in the Search Results section.
7. Select “Approval Type” to Approve User or Deny.
8. Assign the person’s organization to the exact same organization listed as the Project Director’s.
9. Select a role for the user – Authorized Signer, Writer, or Viewer.
10. The current date will appear in the “Active Date” field. You do not have to enter anything into the “Inactive Date” field unless you know the date you would like the user’s access to be inactivated.
11. Select the “Approve Selected User” button to complete the user’s validation/approval.
12. The new user will receive an email notification when they have been approved and can now access GeMS.

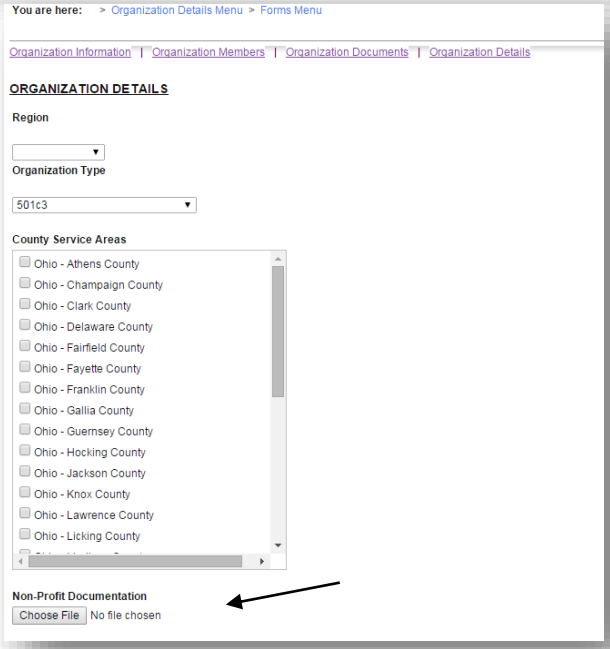
**Helpful Hint:**
**Instead of approving new users yourself, the Project Director or new users can contact affiliate staff to request approval.**

## Organization Information

Project Directors must keep their organization information updated for all applications. In the menu, choose “My Organization”, and make sure all Organization Information, Organization Members and Organization Details are updated.




In the Organization Details, be sure to upload your most recent documentation of non-profit or tax-exempt status. That documentation should be uploaded here, not on your Project Budget Summary Page. It does not need updated every year unless a change has occurred in your status.



## User Homepage

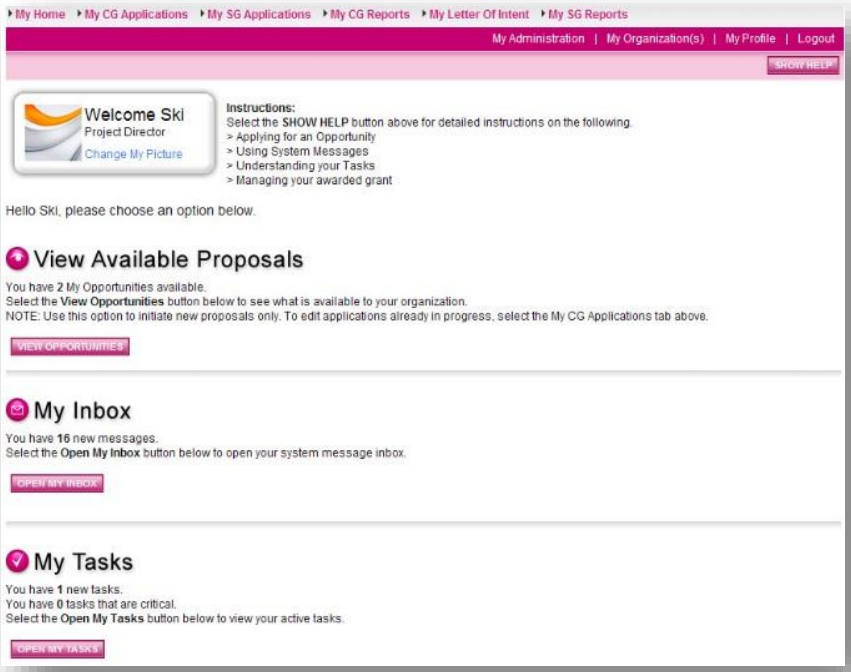
When a user logs into GeMS, they will land on the User Homepage. The content of the page and links across the top of the screen are described below.

> **Helpful Hint:**
>
> **To view/edit/complete applications that are already in progress, go to your "My CG Applications" tab. To initiate a new or additional application, click on the "View Available Proposals" button.**

My Home: Brings the user back to their homepage
My CG Applications: Access to all community grant applications already in progress
My SG Applications: Access to all small grant applications already in progress
My CG Reports: Access to all community grant progress and final reports already in progress
My SG Reports: Access to all small grant final reports already in progress

My Administration: Administrator functions, user approval; this tab will only appear for authorized users
My Organization: Current information about your organization (this information can be updated at any time by authorized users)
My Profile: Individual user information (this information can be updated at any time)
Logout: Logout of the system

View Available Proposals: Initiate a new grant application offered by the Affiliate
My Inbox: System notifications regarding system users and application status
My Tasks: List of current tasks you must complete



## Automatic E-Mail Notifications

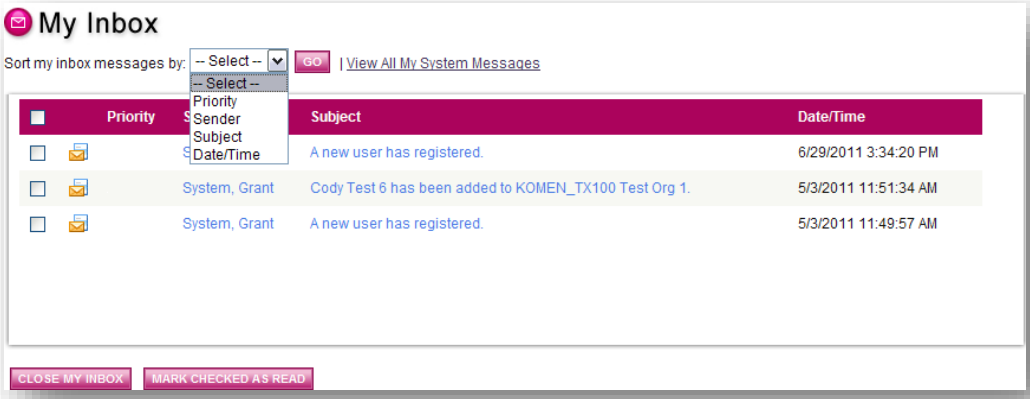
Automatic email notifications may be sent to you periodically throughout the grant year. These messages will be sent by the system according to an automatic process or as the result of a user triggered event. These messages might be triggered by the submission of an application, an application being sent for modifications, or when a pending due-date is approaching. These messages are intended to help you know what is occurring in the system that pertains to you or your Organization. These messages may also be sent by Komen GeMS Affiliate personnel. These messages are designed to help keep you up to date with the progress of your application while also serving as reminders when action is required on your part.

In order to receive these messages it is important you include an active, frequently used email address when creating your profile in the system. If you provide an incorrect email address or an address to an account that is either inactive or full, you will not be able to receive these important messages.

## System Messages

In addition to the automatic email notifications, there is an area referred to as System Messages that manages messages sent to you, either from the system itself or from Komen GeMS Affiliate personnel. You can view or edit your System Messages by following these steps:

Click the "Open My Inbox" button under the "View My Inbox" section on the main menu.



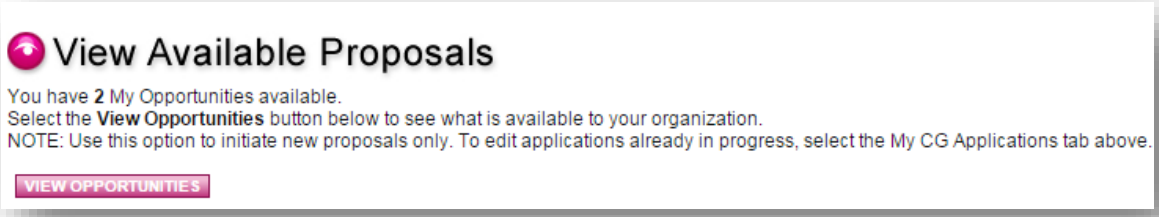

You can read the message from that screen and may then perform any of the following actions:

Click the "Reply" button to reply to the system message
Click the "Close" button to close the system message
Click the name of the sender to send an email to the sender of the message

# Starting an Application

The Project Director, Authorized Signer, and Writer roles are permitted to initiate applications through the local Affiliate. In order to create an application, follow these steps:

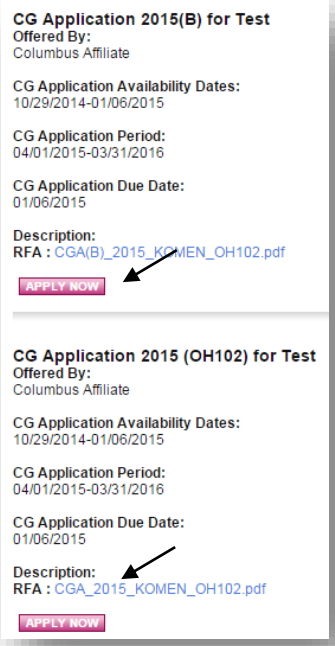
1. From the User Homepage, click the "View Opportunities" button under the "View Available Opportunities" section on the main menu. This section will show you all of the grant program types where you may apply for a new grant.

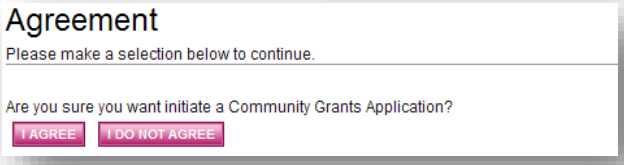



2. For those grant programs where you are eligible to apply, you will see an "Apply Now" button under the description of the grant. Click the "Apply Now" button.

3. Take care to select the correct opportunity for the RFA you intend to apply for. There will be two Community Grant application opportunities: one for Access applications and one for Education applications.

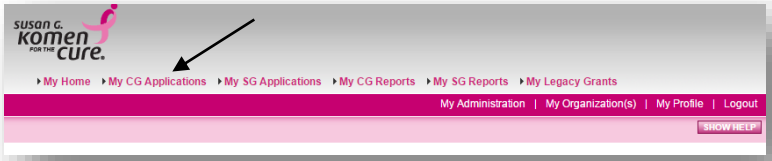
4. A confirmation page will appear. By clicking the "I Agree" button, you will initiate a new application. An application will be created and you will be taken to the "CG Application Menu" where you can begin filling out the various sections of the application.



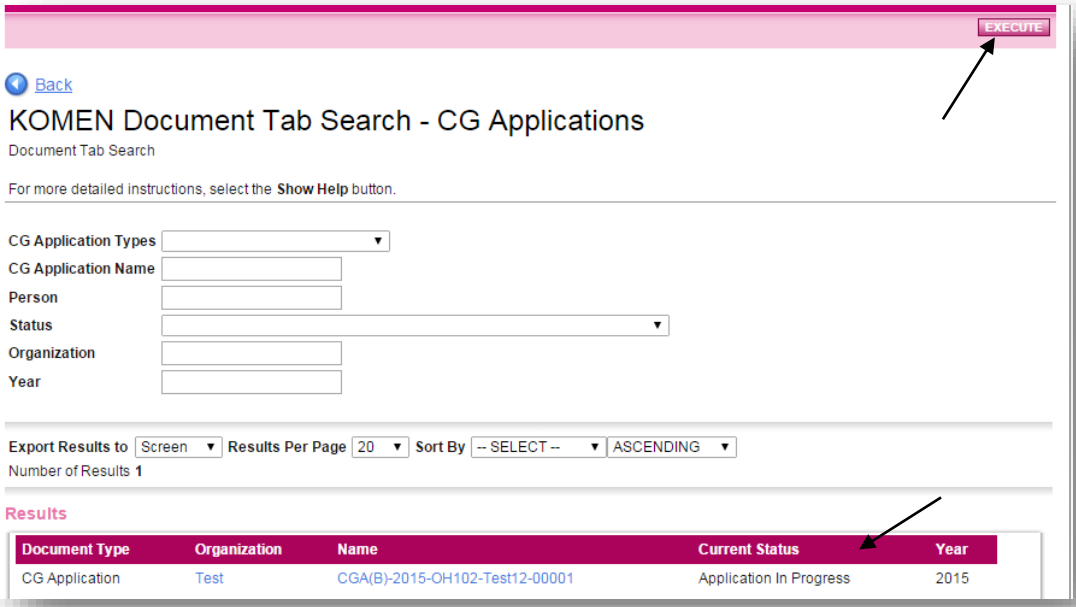



## Getting to Your Application

After your application is created, you will access your application by going to My CG Applications in your menu bar.




The easiest way to get to the correct application most quickly is to leave all the search fields blank and click Execute. This will search for all your applications in the system. Then you can look in the Results for the correct application, noted by the status "Application in Progress" and the year 2015.

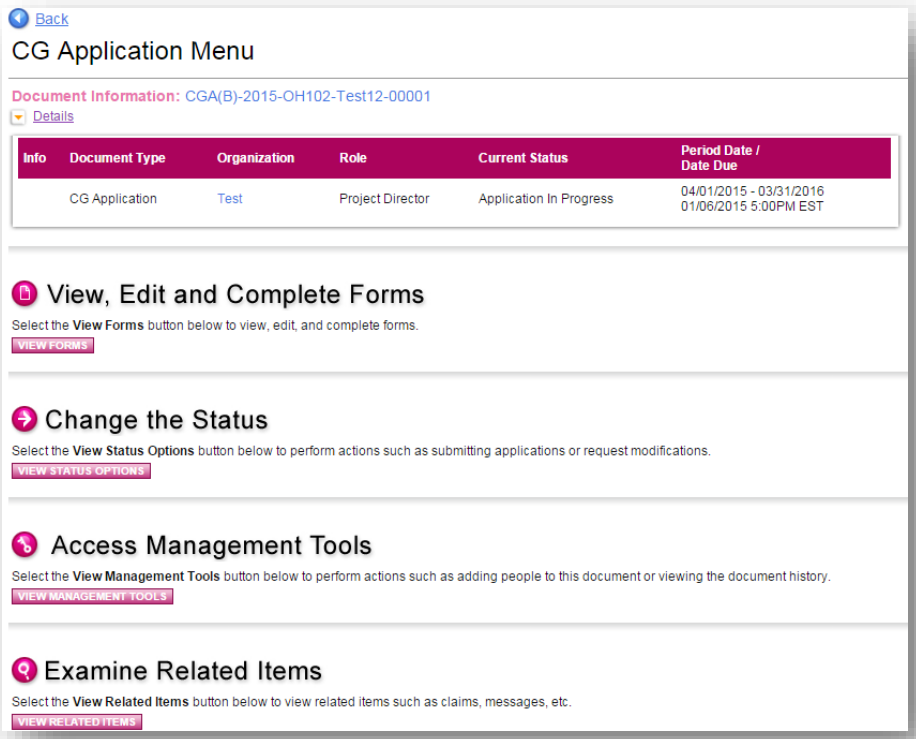



Click the Application Name to enter your Application.

You can also access your application through My Tasks in the main menu.

## The CG Application Menu

The CG Application Menu is divided into various sections to help organize the application tasks and information. These sections are displayed and described below.

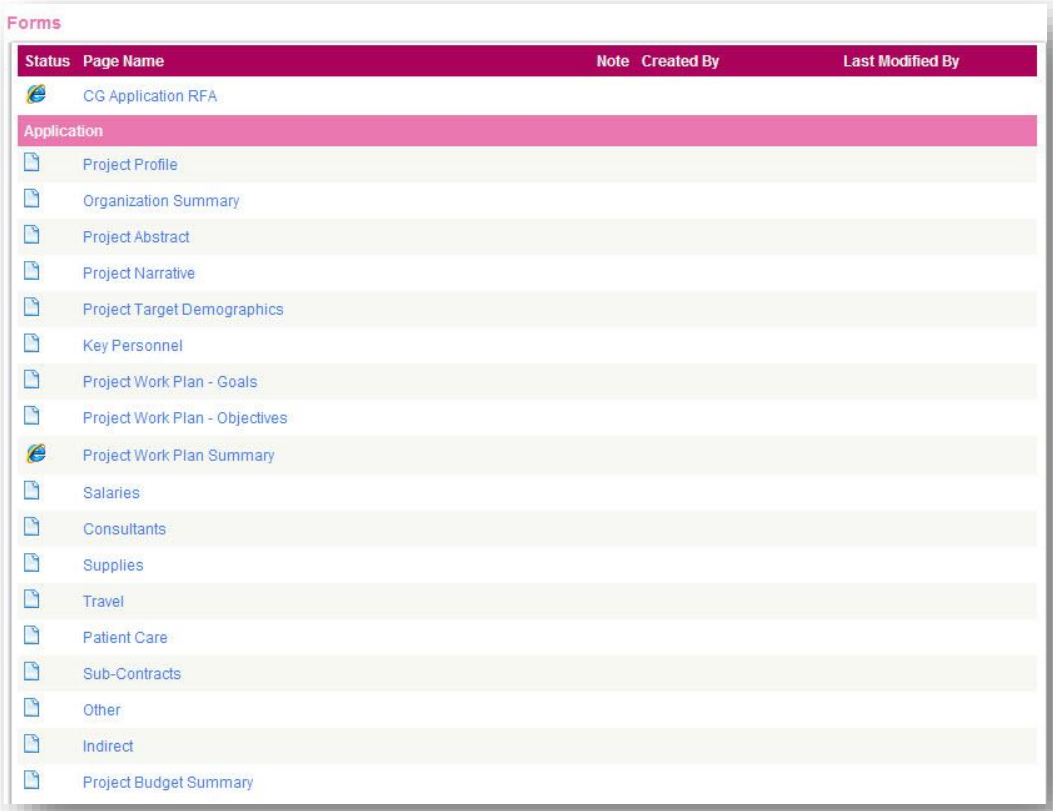



**Helpful Hint:**
**The CG Application Menu allows you to access:**

- **All sections of the application, including project plan and budget summary.**
- **Status change options.**
- **The CG Application Menu is home base for the majority of forms and pages you will need to complete the 2015-2016 Grant Application.**

## View, Edit and Complete Forms

This section contains all of the forms associated with your application. To view the application forms, simply click the "View Forms" button and then click on the name of the form you wish to view.

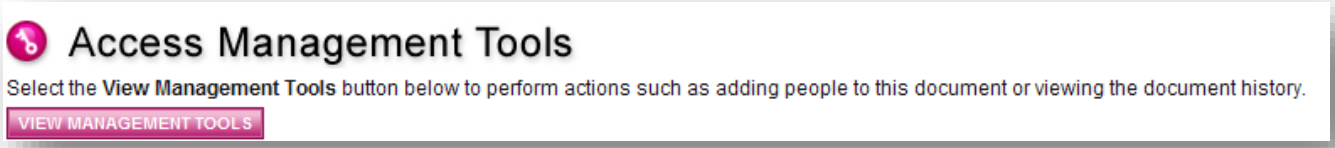

**Helpful Hint:**

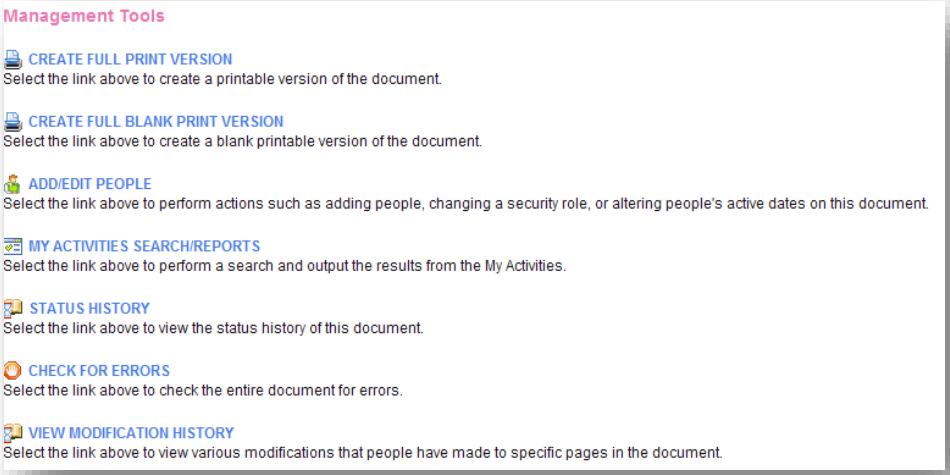
**The View Forms Menu contains all the forms of your application.**

**Refer to the Completing your Application section of this manual and the RFA for more detail on the information required in each form.**

## Access Management Tools

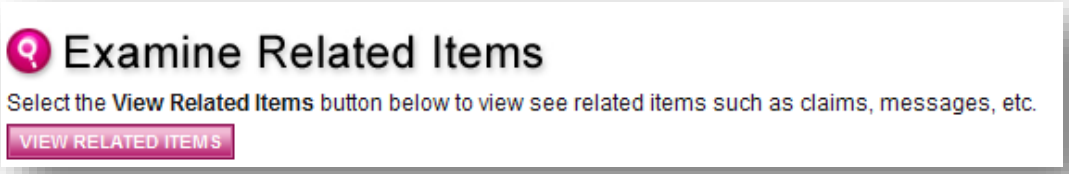
The Access Management Tools section allows certain administrative responsibilities, such as the ability to add/edit people from the application and view the status history of the application. Functionality is based on your user role.




## Examine Related Items

The Examine Related Items section is where you will find items related to an application or grant. An example of a related item would be a Progress Report. This function is not usually utilized during the application process.



# Application Completion

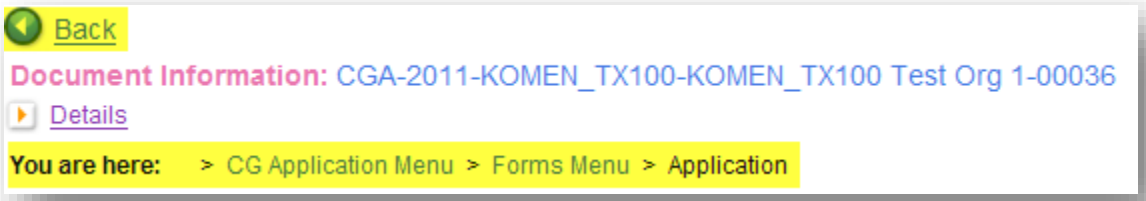
If you click on the “View Forms” button of the View, Edit and Complete Forms section on the CG Application Menu, the various pages of the application are displayed. These are the forms you MUST complete before the application can be submitted. The following will lead you through the necessary steps for accomplishing this goal.

## Forms Navigation

There are three basic methods for navigating through the forms of your application. You may either use the “Back” link at the top of any page within the application, the breadcrumb links just below the “Back” link, or the links listed in the “Forms” section at the bottom of the page.

The image shown below is the “Back” link with the “You are here” breadcrumb trail below it. These two tools will be commonly used when navigating through the various pages of your application.

By clicking the “Back” button, you will be taken back to the Forms Menu and you can click on the next page you wish to complete. You do not have to complete the pages of the application in any particular order. Note that the “Back” button in the system is different than your internet browser back button. Be sure you are using the system button and not your browsers. The “Forms” navigation tool can be found at the bottom of the page. To access the form, simply click on the page name.



**Helpful Hint:**
**Please refer to the 2015-2016 Request for Applications (RFA) and the Additional Support Tools on Komen Columbus's website for specific information related to the various forms and required information associated with the 2015-2016 Grant Application.**

## Project Profile

In this section, contact information for your program's primary contact for the affiliate, your program's community contact for referral, and financial contact for payments will be listed. You will list all partnering organizations, the services they will provide, years of partnership and supporting letters of support, memorandums of understanding, etc. For Education RFAs, this section should include any sources you plan to refer and link clients to, as well as any mobile mammography partnerships. Previous support form Komen will auto-populate here.

## Organization Summary

This section collects detailed information regarding your organization, including in-depth information regarding your organization background and structure. Provide a brief description of:

- the organization's history. If your program is part of a larger organization, briefly explain the mission of the larger entity and your relationship to it;
- the mission of the organization;
- current programs and accomplishments;
- how your organization seeks to be diverse and inclusive; and
- the number of paid full time staff, volunteers and total annual organization budget.

## Project Abstract

This section collects important information regarding the main focus for your project as well as the abstract. This abstract should be detailed and address the reason for the program, important project activities, methods for evaluation, and the impact your program will make on breast cancer in your community.

This section will require you to choose the priorities your program will address from the RFA. Any priority you select must be addressed with objectives directly in your proposal workplan.

## Project Narrative

The Project Abstract should provide a brief description of the proposal including the purpose of the program, a description of key activities, a summary of evaluation

methods and the expected or resulting change(s) your program will likely bring in your community.

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

Organization Capacity (limit- 3,500 characters)

- Explain why the applicant organization is best-suited to lead the project and accomplish the goals and objectives set forth in this application
- Describe evidence of success in delivering breast health/cancer services to the proposed population
- Describe fiscal capability to manage the delivery of the proposed goals and objectives and ensure adequate measures for internal control of grant dollars.

Statement of Need (limit- 3,500 characters)

- Describe the population to be served
- Describe evidence of the risk/need within that population
- Provide population characteristics (race, ethnicity, economic status, and breast cancer statistics) specific to the target population

Project Description (limit- 3,500 characters)

- Explain how the project's goals and objectives, as outlined in your Project Work Plan addresses one or more of the priorities outlined in the Affiliate's Community Profile/Statement of Need.
- Explain how the project will increase the percentage of people who enter, stay in, or progress through the continuum of care in context of the priorities of the Access RFA.
- Please provide an estimate of the overall cost per woman served by your grant, including your calculation for this figure (i.e. total budget dedicated to patient service divided by number of women served by the project).
- Clearly state eligibility criteria for who the program will serve, and how you will recruit audience and participants. Reviewers want to see a very targeted approach for identifying the appropriate gaps and target audience, and a plan for reaching them.

Collaboration (limit- 3,500 characters)

- Describe the roles and responsibilities of all organizations or entities participating in the project.
- Explain how the collaboration strengthens the project and why these organizations are best suited to carry out the project and accomplish the goals and objectives set forth in this application.

Sustainability (limit- 3,500 characters)

- What resources (financial, personnel, partnerships, etc.) will be needed to sustain the effort over time? How will those resources be secured by the end of the funded project period?

- What are your organization's plans to support the project lead to implement, manage and oversee all aspects of the proposed project?
- What efforts will you take to communicate this project to leadership to ensure buy-in?
- Describe the organization's current financial state. Has your organizational budget increased or decreased from last year? Please explain why.

Evaluation

- Describe in detail how the organization (s) will measure achieving project goals and objectives and how will the impact of the project on the priority selected will be assessed.
- Describe the evaluation expertise that will be available for this purpose.
- What resources are allocated for evaluation in the project budget?
- A strong evaluation plan measures both the quantity and quality of strategy implementation and outcomes.
- Impact Evaluation: Assesses the changes that can be attributed to a particular intervention, such as a project, program or policy. Impact Evaluation helps us to answer key questions such as, what works, what doesn't, where, why and for how much?
- Process Evaluation: Assesses the delivery of programs. Process evaluation verifies what the program is and whether it is being implemented as designed. It answers the questions of what is delivered in reality and where are the gaps between program design and delivery?
- Applicants to the Education RFA should be able to demonstrate that they can identify, measure and report on:
    - Number of interventions conducted
    - Number of people participating in each intervention
    - Demographics of people attending each intervention
    - Of those participants that indicated they intended to take a specific action, the number of people that acted on their intention within 30 days, 31-60 days, 61-90 days, and 91+ days.
- Applicants to the Access RFA should be able to demonstrate that they can identify, measure and report on:
    - Appropriate quality indicators or participant evaluations
    - Number of interventions conducted
    - Number of people participating in each intervention
    - Demographics of people attending each intervention
    - Of those participants that indicated they intended to take a specific action, the number of people that acted on their intention within 30 days, 31-60 days, 61-90 days, and 91+ days.
    - Appropriate quality indicators or participant evaluations

Evidence-base

- A clear explanation of how the program will lead to action or intent to act should be included. Evidence-based practices refer to an intervention/activity that has been tested and shown to be effective through repeated, rigorous, quantitative/ empirical data collection and analysis. The following websites are examples of resources of evidence-based interventions:
    - National Cancer Institute: (http://rtips.cancer.gov/rtips/index.do) RTIPs is a searchable database of cancer control interventions and program materials, and is designed to provide program planners and public health practitioners'' easy and immediate access to research-tested materials.
    - NACCHO Model Practices: (http://www.naccho.org/topics/modelpractices/) Online, searchable database of innovative best practices across public health areas. These practices allow an individual to benefit from other professionals' experiences, to learn what works, get strategies on how to re-implement effective programs with good results, and save time and resources.
    - AHRQ Innovation Exchange: (http://www.innovations.ahrq.gov/index/aspx) The Exchange helps to solve problems, improve health care quality and reduce disparities as being a resource to find evidence-based innovations and quality tools, view new innovations and tools published and learn from experts through events and articles.
    - The Guide to Community Preventive Services: (www.thecommunityguide.org) The Guide is a resource to assist organizations in selecting programs and policies to improve health and prevent disease in the community. Systematic reviews are used to answer the following questions: Which program and policy interventions have been proven effective? Are there effective interventions that are right for the community of interest? What might effective interventions cost; what is the likely return on investment?
    - Cancer Control P.L.A.N.E.T (Plan, Link, Act, Network with Evidence-based Tools): (http://cancercontrolplanet.cancer.gov/index.html): Web-based resource that can assist in assessing cancer and/or risk factor burden within a given state; identifying potential partners that may already be working with high-risk populations; understanding current research findings and recommendations; assessing and downloading evidence-based programs and products; and finding guidelines for planning and evaluation.
    - The Community Tool Box: (http://ctb.ku.edu) This comprehensive resource offers more than 7000 pages of practical guidance on a wide range of skills essential for promoting community health. Tool kits (under the "Do Work" tab) provide outlines, examples, and links to tools for topics such as community assessment and evaluation.

## Project Target Demographics

This section collects information regarding the various demographic groups you intend to target with your program. This does not include every demographic group your program will serve but should be based on the individuals you plan to focus your program's attention on. You can select between 1-4 target populations and unlimited target locations. If you are not targeting any populations, please do not check a target population.

## Key Personnel

This section collects information regarding the personnel that will be needed to complete the previously described project. Any individual playing a key role in the project should be included in this section.

If a patient navigator is listed, please be sure to include documentation of their training and qualifications. Throughout the award period, this area should be kept updated with any staffing changes.

## Project Workplan

In the Project Workplan component of the application on GeMS, you will be required to submit goals (*high level statements that provide overall context for what the project is trying to achieve. E.g. improve the quality of breast care*) and objectives (*low level concrete statements that describe what the project is trying to achieve. An objective can be evaluated at the end of the project to establish if the objective was met or not met. E.g. reduce the time from screening to diagnosis by two days*).

- As you write your workplan, consider that each item must be accounted for in progress and final reporting, and that your workplan should only include items goals that will be accomplished with funds requested from Komen Columbus.
- Objectives that will be funded by other means should not be reported here, but instead, in your overall program description.
- Your workplan will be evaluated by the reviewers and compared against your proposed budget. Please select only one intervention type per objective, so that your later reports will match your workplan.

**Helpful Hint:**

**Workplan drafts may be submitted during the question period for staff feedback. Insufficient workplans will be returned for revision during compliance review.**

**You are encouraged to use the workplan template in Appendix E to draft your workplan, and then to enter it into GeMS.**

## Recommended Workplan for Access RFA

| Goals | Objectives/ Interventions | Outcomes you'll be expeted to report if awarded: |
|---|---|---|
| • Remove barriers to the continuum of care for women experiencing financial hardship and other barriers by directly providing free or low-cost services (screening mammograms, diagnostics and treatment) to women experiencing financial barriers.<br>• Provide patient assistance with barriers to diagnostics and treatment, including transportation, childcare, and medication costs. | Reminder systems directed at patients | Other |
| | Reminder systems directed at providers | Number of individuals who were referred for a low cost clinical breast exams |
| | Outreach programs (that result in new appointments, new patients) | Number of individuals who were referred for a low cost clinical breast exams |
| | In-reach programs (that result in getting existing patients to get a mammogram) | Number of individuals who were referred for a low cost clinical breast exams |
| | Reduce costs to patient for mammography (e.g. free or low cost mammography) | Number of individuals who completed low-cost clinical breast exams with your Komen funds, whether stationary or mobile |
| | Expand hours for breast health services to evenings and weekends | Other |
| | Reduce other barriers to mammography (e.g. transportation, childcare) | Number of individuals who received childcare assistance for a screening and/or diagnostic appointment, Number of individuals who received rides/ gas cards/ bus passes/ taxi vouchers to or from screening and/or diagnostic appointments |
| | Provide translation/ interpretation services | Number of individuals who received translation/ interpretation throughout screening and/or diagnostics |

| | | |
|---|---|---|
| | Accessible facilities for screening | Other |
| | Reduce costs to patient for diagnostic services (ultrasound, biopsies) | Number of individuals who completed diagnostic services with Komen funds (e.g. ultrasounds, biopsies) |
| | Reduce other barriers to diagnostic services (transportation, childcare) | Number of individuals who received childcare assistance for a screening and/or diagnostic appointment, Number of individuals who received rides/ gas cards/ bus passes/ taxi vouchers to or from screening and/or diagnostic appointments |
| • Provide evidence-based activities throughout the continuum of care, including patient navigation, patient/provider communication, education about diagnostic and treatment options (refer to patient navigation description in appendix)<br>• Implement quality improvement strategies to improve quality of screening, diagnostics and/or treatment | Genetic testing | Number of individuals who completed genetic testing with Komen funds, Number of individuals who were referred for genetic testing services, Number of individuals who received genetic counseling with Komen funds |
| | Patient navigation | Number of individuals who received navigation services throughout the duration of their treatment, Number of individuals who received navigation services through screening and diagnostic procedures, Please see appendix for patient navigation service definitions |
| | Clinical trials education | Number of individuals who were educated about clinical trials, number of individuals who were enrolled in a clinical trial study |
| | Reduce other barriers to treatment (transportation, childcare) | Number of individuals who received ride/ gas cards/ bus passes/ taxi vouchers to or from treatment appointments, Number of individuals who received childcare assistance for a treatment related appointment |
| | One-on-one education (specific to treatment and diagnostic options) | Number of family units who received caregiver support while their loved one was actively undergoing treatment |

| | | |
|---|---|---|
| | Interventions to increase the quality of health care delivery | Other |
| | Process improvement strategies | Other |
| • Directly provide side-effect management services associated with late effects or sequelae resulting from breast cancer treatment (e.g, treatment and therapy for lymphedema)<br>• Implement quality improvement strategies to improve quality of survivorship care<br>• Provide wellness programs that improve health outcomes through quality of life and/or psychosocial focus, especially in underserved populations<br>• Provide individual counseling, psychotherapy | Individual counseling/ psychotherapy | Number of survivors who participated in individual, professional counseling |
| | Exercise/nutrition programs | Number of survivors who participated in complementary therapies (e.g. meditation, yoga, acupuncture, art therapy) |
| | Complementary therapies | Number of survivors who participated in complementary therapies (e.g. meditation, yoga, acupuncture, art therapy) |
| | Side-effect management | Number of individuals who received support related to managing treatment side effects (e.g. prosthetics, lymphedema therapy) |
| | Interventions to increase the quality of health care delivery | Other |
| | Process improvement strategies | Other |

Recommended Workplan for Education RFA

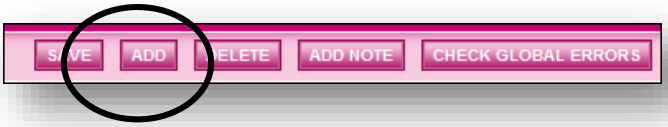
| Goals | Objectives/ Interventions | Outcomes you'll be expected to report if awarded: |
|---|---|---|
| • Provide evidence-based and targeted outreach and education programs to increase the number of women who enter the continuum of care, that document linkage of project participants to breast cancer services, including culturally competent outreach for groups experiencing mortality or screening disparities (African Americans and Hispanics and persons with disabilities)<br>• Reduce patient recidivism using evidence-based approaches; increase percentage of returning patients adhering to screening recommendations.<br>• Provide medical provider education for primary care physicians and OB/GYNs about screening recommendations, risk assessment for high-risk women (family history, BRCA1/2) and/or available resources for women | Public education (e.g. radio, television, newspaper, e-communications, social networking) | Number of public education messages you released through small and mass media outlets such as radio, television, newspaper, e-communications, social networking |
| | Group education (e.g. lectures, workshops, seminars, webinars) | Number of individuals who participated in an educational lecture, workshop, seminar or webinar |
| | One-on-one education | Number of individuals you reached through one-on-one education contacts |
| | Events (e.g. health fairs) in accessible venues | Number of events you hosted (e.g. free screening days, hosting a mammography van, etc.- does not include group education events) |
| | Health care professional training and provider education | Number of health care providers you educated |
| | Outreach programs (that result in new appointments, new patients) | Referrals for free or low-cost clinical breast exams, referrals for free or low-cost screening mammograms |
| | In-reach programs (result in getting existing patients to get a mammogram) | Referrals for free or low-cost clinical breast exams, referrals for free or low-cost screening mammograms |

## Project Workplan Goals

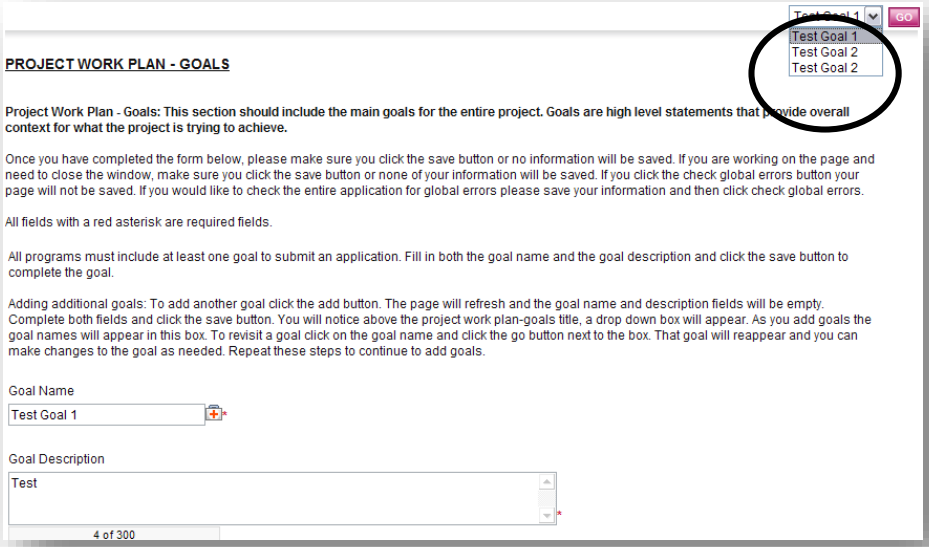
Goals are higher level statements about what the objectives are trying to achieve.
Example Goals:

- Reduce barriers to women in obtaining screening mammography.
- Increase quality and utilization of patient navigation

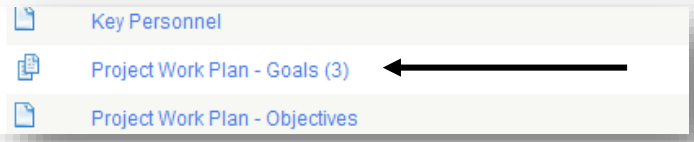
In the creation of the goals and objective forms, the "Add" button is used to create additional fields so the applicant can list each item that falls under a particular category. Project Work Plan - Goals, for example, will typically consist of more than one item. Any form that has an "Add" button allows you to have multiple instances of that particular form. The following picture shows the available "Add" button on a page where multiple pages can be created.




When multiple pages have been created for a particular form, you can choose between them. A dropdown menu will appear on the far right of the button toolbar. Select the Item and hit the "Go" button and it will take you to that item's page.




When additional pages have been created, a number in parentheses will appear after the form name to indicate the number of pages connected with the particular link.



## Project Workplan Objectives

Follow the process as above to add each objective under each goal in your plan, following the workplan you have drafted.

Objectives are specific, obtainable, measurable, and concrete items you will use to work toward the goal.

For each objective, you will enter:

- timelines,
- the intended intervention to be utilized (choose ONE PER OBJECTIVE from the priorities listed),
- the individual responsible for completion of each objective,
- the anticipated number of individuals to be served,
- and the evaluation method you will utilize.

**Helpful Hint:**
**If you are a previous grantee, use your data evaluation report from last years' grant to inform this years' application.**

**Choose only one intervention per objective.**

**Use the Appendix E to develop your workplan.**

At your six month and final reports, it is expected that each objective will be reported on with the number of individuals served by that objective, and demographics describing those served individuals.

## Project Work Plan Summary

You can use the project work plan summary to see an overview of all your goals and objectives in one place. No information needs to be entered here.

## Budget

### Salaries, Consultants, Supplies, Travel, Patient Care, Sub-contracts, Other Forms

For each form, provide a detailed total program budget. For each line item in the budget, provide a brief justification for how the funds will be used and why they are programmatically necessary. Make sure that the budget, especially the patient care budget, match the interventions/objectives of your workplan. For example, if one objective is to provide 100 free screening mammograms, be sure that your budget in patient care reflects that.

## Automatic Calculations

When possible, GeMS will automatically calculate totals for you. Click the "Save" button to perform calculations – calculations will not occur until the "Save" button is selected.

| Name of Consultant | Agency Affiliation if Applicable | Hourly Rate | # of Hours | Total |
|---|---|---|---|---|
| Joe Smith | Test Affiliate | 25 | 40 | |
| John Doe | Test Affiliate | 30 | 35 | |
| Amy Joe | Test Affiliate | 40 | 31 | |
| | | | | Totals: |

| Name of Consultant | Agency Affiliation if Applicable | Hourly Rate | # of Hours | Total |
|---|---|---|---|---|
| Joe Smith | Test Affiliate | $25 | 40 | **$1,000** |
| John Doe | Test Affiliate | $30 | 35 | **$1,050** |
| Amy Joe | Test Affiliate | $40 | 31 | **$1,240** |
| | | | | |
| | | | | |
| | | | | |
| | | | | Totals: **$3,290** |

The "Budget Summary" page is another example of automatic calculations. When the Budget Summary is opened, the system will take the values you have entered in the Budget pages and display the information in the Budget Summary.

| | | From Other Sources | | |
|---|---|---|---|---|
| | Requested from Komen | Cash | In Kind | Total Required |
| **Salaries and Fringe** | $11,075 | | | $11,075 |
| **Consultant Costs** | $3,290 | | | $3,290 |
| **Supplies** | $0 | | | $0 |
| **Travel** | $5,000 | $200 | | $5,200 |
| **Patient Care Costs** | | | | |
| Screening | $735 | | | $735 |
| Diagnostics | $15,812 | | | $15,812 |
| Treatment | $1,558 | | | $1,558 |
| Transportation | $113 | | | $113 |
| **Subcontracts** | $6,715 | | | $6,715 |
| **Other** | $2,500 | | | $2,500 |
| **Subtotal – Direct Costs** | **$46,798** | **$200** | **$0** | **$46,998** |
| **Indirect Costs** | $0 | | | $0 |
| **Total:** | **$46,798** | **$200** | **$0** | **$46,998** |

Finally, be sure to enter any in-kind your organization will be contributing to your work. This is used by the reviewers, and is often overlooked by applicants. Take credit for what your organization is contributing!

## Attachments

1. Information regarding Key Personnel on Key Personnel Form– For key personnel that are currently employed by the applicant, provide a resume or curriculum vitae. For new or vacant positions, provide job descriptions *(Two page limit per individual)*.
2. Proof of Non-Profit Status on My Organization, Organization Details page– To document you federal tax-exempt status, attach your determination letter from the Internal Revenue Service. Evidence of state or local exemption will not be accepted. Please do not attach your Federal tax return.
3. Letters of support or memoranda of understanding from proposed collaborators (if applicable) on Project Profile page– To describe the nature of the collaboration, MOUs, etc. demonstrating your partnerships and the services/expertise/personnel to be provided through the collaboration.
4. Evaluation forms, surveys, logic model, etc. in workplan- to demonstrate the effectiveness of your program as defined in your Project Work Plan.
5. Scholarly articles or other resources cited as the evidence-base for your program on project budget summary page

Note: Insurance will not be required at the time of application, but will be required for execution of the grant agreement, if awarded.

For some pages, form fields are not enough to capture the type of information that may be required. In those situations, a file upload field may be provided to allow you to upload a file instead. Files of the following types are allowed as uploads: bmp, doc, docx, gif, jpg, pdf, png, ppt, tif, txt, wpd, xls and xlsx. To upload a file, click the “Browse” button. Uploads should be 4 mgs or less.


Browse to the folder that contains the file you would like to upload and either double-click the file or click the file and then click the “Open” button.

After the page reloads, you must then click the page “Save” button to save the uploaded file.

# Application Submission

## Change the Status

The "Change the Status" section allows the Project Director and Authorized Signer to change the status of an application or report. Status options are dependent on the current status of the document and the role of the user. Click the "View Status Options" button to see what status "push" options you currently have available.

**Helpful Hint:**

**In GeMS, "changing the status" equals "turning in" or "submitting" to the next step in the submission process.**

**Application In Progress**
- Automatically occurs when application is initiated

→

**Authorized Signature Required**
- After the Project Director/ Writer completes the entire application

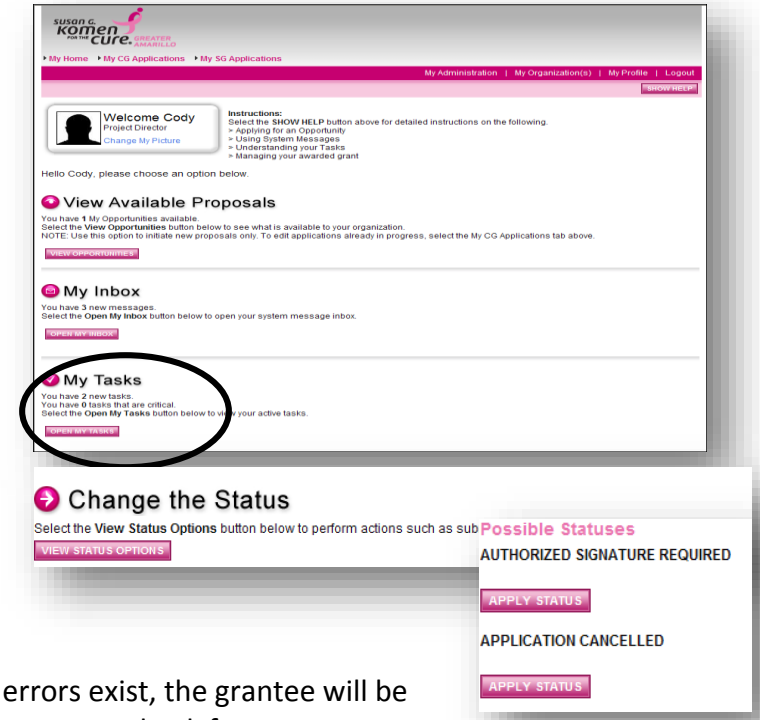
→

**Application Submitted**
- Authorized Signer completes as final submission step

The Project Director must change the status of the application to "Authorized Signature Required" to begin the application submission process. After the Project Director has changed the Application status, the Authorized Signer must finalize the submission by changing the status to "Application Submitted".

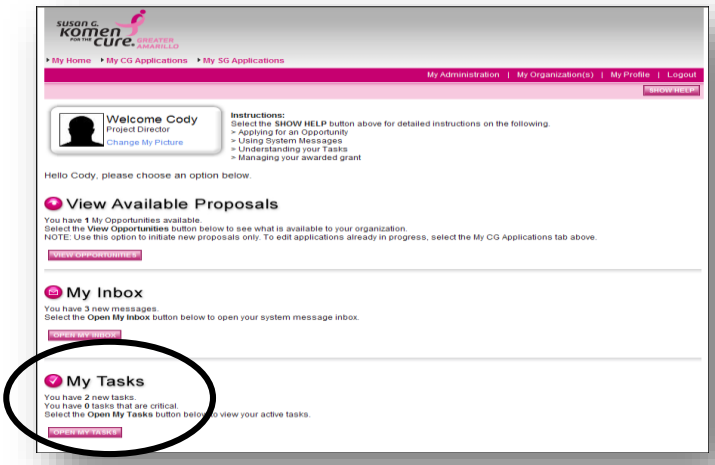
Project Director logs in and clicks "Open My Tasks."

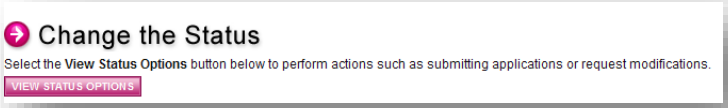
1. Select the grant you would like to submit in your task list.
2. Click "View Status Options" to see the possible statuses.
3. Click "Apply Status" under the appropriate status.




If any errors exist on any of the application's forms when the Project Director attempts to change the status to Authorized Signature Required or the Authorized Signer attempts to submit, they will receive an error message directing them to the form(s) with errors. All errors must be fixed before GeMS will allow an application to be submitted. If no errors exist, the grantee will be prompted to confirm his or her submission. You can check for errors at any time using the Global Errors link.

1. Authorized Signer logs in to GeMS and clicks “Open My Tasks.”
2. Select the grant you would like to submit in your task list.
3. Click “View Status Options” to see the possible statuses.
4. Click “Apply Status” for “Application Submitted.”



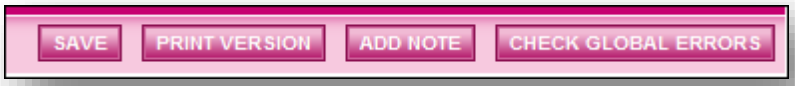
# Helpful Hints and Troubleshooting

## Error Messages

If any required field is not completed within an application form or there are business rules violated, an error message will be displayed in red across the top of the page immediately after the "Save" button is clicked. During form completion it is not necessary to correct errors right away. You may return to the form at a later time and fix errors. If for some reason any errors remain when you attempt to submit the application, you will receive an error message. The Komen GeMS system will require the errors be fixed before the application submission can be completed. See the example below.


## PDF Version

In many pages, once the page is saved, a "Print Version" button will be available that will automatically create a PDF for you with the data you provided for each form. These dynamic PDF's can be printed or saved to your computer for reference.

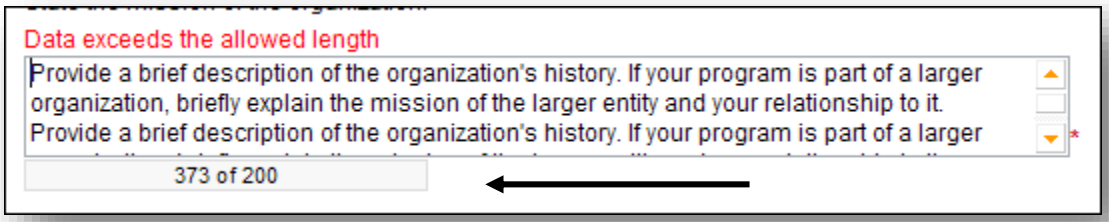



## Copy and Paste

Applicants should be cautious when utilizing copy and paste. We suggest you copy to NotePad first, then to GeMS. Copying to NotePad will remove all formatting.

## Text Limits

Applicants must also be aware of the character limits of each text box, as attempting to copy and paste text larger than the allotted amount of space will yield an error. The character limit may be found at the bottom left of each text box. If you exceed the allowed length, do not exit the document until you have edited it down to the allowed text limit; otherwise your text will be lost.



Helpful Hints

• Always hit “save” to save your data. If you do not hit “save” and you navigate away from the screen, your data will be lost.

• If you scroll over the first aid kits, help content will be available for that specific question.

• The system will log out after 45 minutes with no activity. If the system logs out automatically, the last data entered will not be saved if the save button was not selected prior to the log out.

• If you copy and paste text from Word, you must hit the backspace button within the text field for the character count to be shown.

• Print versions of the blank application and completed application are available within the Access Management Tools section of the application menu.

• Always use the “Back” button within the system when trying to return to a previous page.

- When completing the application within GeMS, please review the Request for Applications and additional support tools provided by the local Affiliate for details on each application page and submission requirements.
- The Project Work Plan Summary is a report of all of the goals and objectives entered on the Project Work Plan pages.
- You should only enter on intervention per objective in your Project Workplan, for the most effective evaluation at the time of your progress and final reports. Keep in mind that your reports will be expected to reflect the success of each item in your workplan.
- When in doubt, contact the GeMS Affiliate staff – Julie McMahon, Director of Mission – at juliemcmahon@komencolumbus.org or 614-297-8155x204. Affiliate staff is available for:
    - Registration and log-in troubleshooting
    - General system troubleshooting
    - Editing sections of the application to comply with text limits
    - Further explanation of application requirements

# Application Checklist

**Your GeMS username:** _____

**Your GeMS password:** _____

- ❑ Register a Project Director and Authorized Signer for your Organization, or identify them from previous years in GeMS
- ❑ Make sure your "My Organization" section is up to date
  - ❑ Non-profit or tax-exempt documentation is in Organization Details
- ❑ Create an application through View Opportunities
- ❑ Use recommended workplan ideas and Workplan Template to create your workplan
- ❑ Complete all forms in the View Forms section
  - ❑ Project Profile
  - ❑ Organization Summary
  - ❑ Project Abstract
  - ❑ Project Narrative
  - ❑ Project Target Demographics
  - ❑ Key Personnel
    - ❑ Resumes, job descriptions, training, qualifications
  - ❑ Project Workplan- Goals
  - ❑ Project Workplan- Objectives
    - ❑ Evaluation tools (we do recommend you use our tracking sheet)
  - ❑ Salaries
  - ❑ Consultants
  - ❑ Supplies
  - ❑ Travel
  - ❑ Patient Care
  - ❑ Sub-contracts
  - ❑ Other
  - ❑ Project Budget Summary (Including in-kind)
    - ❑ W-9
    - ❑ Evidence-base documentation
- ❑ Change the status to "Authorized Signature Required to begin the submission process
  - ❑ Confirm with Authorized Signer that they have submitted by changing the status to "Application submitted"

# Appendix A: Scoring Procedures

After submission, all applications will be checked for compliance to the application guidelines in the RFAs. Applications that do not pass the compliance check process will be returned for modifications and have at least 48 hours to re-submit the application.

At least three reviewers will score each grant application. Each application will be evaluated on the basis of the following criteria:

| | |
|---|---|
| 30% | Impact: Will the project have a substantial positive and measurable impact on increasing the percentage of people who enter, stay in, or progress through the continuum of care? Will the project have a substantial and measurable impact on the priority selected? How closely does the project align with the funding priorities, target populations and counties stated in the RFA? Does the project have a sufficient and documented plan to evaluate its impact? |
| 15% | Feasibility: How likely is it that the objectives and activities will be achieved within the scope of the funded project? Is the project well planned? Is the budget appropriate and realistic? Does the budget justification explain in detail the reasoning and need for the costs associated with the project? |
| 15% | Capacity: Does the organization, Project Director and his/her team have the expertise to effectively implement all aspects of the project? Is the organization respected and valued by the target population? Is it culturally competent? |
| 15% | Collaboration: Does this project enhance collaboration among organizations with similar or complementary goals without duplicating services? Are the roles of the partners appropriate and relevant? Does the partnership efficiently benefit the partner(s) by sharing a service that would not otherwise be available? Is overlap in the system minimized so as to effectively use funds to the maximum benefit? |
| 10% | Sustainability: Is the project likely to be sustained? Are partnerships likely to be sustained past project period? Is the impact likely to be long-term? |
| 15% | Evidence-base: Does the project demonstrate awareness of and/or potential replication of best practice models in the design and delivery of the stated priorities for funding? Does the grant application clearly articulate the best practice and evidence-based methods for successful implementation of states goals and objectives? What lessons learned from other projects are being applied to this project? |

Each reviewer will assign a numerical rating for each of the criteria above. Scores may range from 1 to 7, with 1 being the worst and 7 being the best. Each scoring criteria is weighted as noted above. In addition to the numerical rating, each reviewer will provide brief comments about the strengths and weaknesses. Reviewers will meet to discuss the applications and determine the rank order of the applications. In addition to the scores, comments, and rankings, reviewers may also consider geographical distribution of the grants, populations served, potential duplication of services, and other important variables.

# Appendix B: Resources for your program planning

All Patient Navigator requests should be supported with a job description and resume, including training information, included as attachments to the application.

Defining Patient Navigation:

Patient Navigators are trained, culturally sensitive health care workers who provide support and guidance throughout the cancer care continuum. They help people "navigate" through the maze of doctors' offices, clinics, hospitals, outpatient centers, insurance and payment systems, patient-support organizations, and other components of the health care system. Services are designed to support timely delivery of quality standard cancer care and ensure that patients, survivors, and families are satisfied with their encounters with the cancer care system. Patient Navigator activities designed to achieve these outcomes include:

Job duties:

- Coordinating appointments with providers to ensure timely delivery of diagnostic and treatment services.
- Maintaining communication with patients, survivors, families, and the health care providers to monitor patient satisfaction with the cancer care experience.
- Ensuring that appropriate medical records are available at scheduled appointments.
- Arranging language translation or interpretation services.
- Facilitate financial support and assist with paperwork
- Arrange transportation and/or child/elder care
- Facilitate linkage to follow-up services
- Help locate local support groups
- Help patients fill out the proper paperwork
- Assist patients with understanding of their diagnosis and available treatment options
- Coordinate multidisciplinary conferences
- Provide educational material to patients

Other Navigator activities include community outreach, providing access to clinical trials, and building partnerships with local agencies and groups (e.g., referrals to other services and/or cancer survivor support groups).

Patient Navigators can be:

- A licensed Social Worker
- A licensed Registered Nurse
- Someone with a Baccalaureate degree in health education, public health, or other health related field

A Patient Navigator should not be limited to billing, scheduling and tracking patients, but should encompass the activities and description listed above. The outcomes listed above should be reported and evaluated for any patient navigators funded through a grant project.

Survivorship Care Planning:

http://livestrongcareplan.org/
http://journeyforward.org/

# Appendix C: Important Dates

| | |
|---|---|
| Grant writing Workshop | October 31, 2014, TIME TBD. (Attendance is strongly recommended due to significant changes in the RFA, RSVP to juliemcmahon@komencolumbus.org by October 20) |
| Question Period | September 30- November 18th, 2014 (Questions and proposal ideas may be submitted for comments, discussion and guidance from staff) |
| Application Deadline | January 6, 2015, 5 p.m. |
| Revision Period | January 6- January 12, 2015 |
| Award Notification | March 2015 |
| Award Period | April 1, 2015- March 31, 2016 |

# Appendix D: Review Panel Cheat Sheet

The reviewers will score your application on impact, feasibility, sustainability, capacity, collaboration and evidence-base. Below, you can view the parts of the application the reviewers often refer to for each criteria, to help you create an application that provides the reviewers with the information they need to review your program.

SAVE REVIEW CLOSE REVIEW PANEL

My Score 0 Total Page Score: 0

**What are the strengths of the program application? What are the weaknesses of the program application? Would you recommend this application to receive funding?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Should we even rank this application for funding?<br>SWOT Analysis Here<br>0 of 2000 |

**Impact: Will the project have a substantial positive impact on increasing the percentage of people who enter, stay in, or progress through the continuum of care? Will the project have a substantial impact on the priority selected? How closely does the project align with the funding priorities of the Affiliate? Does the project have a sufficient and documented plan to evaluate its impact?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Meeting priority 1: you can give up to 7 as highest score<br>Meeting priority 2: you can give up to 5 as highest score<br>Workplan: Goals and objectives, how many women will they reach?<br>Statement of Need: Will they target a population in need effectively?<br>Evaluation: Will they be able to show it? Have they built impact AND process evaluation?<br>0 of 2000 |

**Feasibility: How likely is it that the objectives and activities will be achieved within the scope of the funded project? Is the project well planned? Is the budget appropriate and realistic? Does the budget justification explain in detail the reasoning and need for the costs associated with the project?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Project Description: Have they connected all the dots in their description of their plan/ project?<br>Workplan/budget: Does the budget match the workplan?<br>Project Target Demographics/ Narrative: Have they built the cultural competency to reach the people they say they will?<br>0 of 2000 |

**Capacity: Does the organization, Project Director and his/her team have the expertise to effectively implement all aspects of the project? Is the organization respected and valued by the target population? Is it culturally competent?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Key Personnel<br>Organization Capacity: Does the organization have the infrastructure to deliver the program, including staffing? Need salary?<br>0 of 2000 |

**Collaboration: Does this project enhance collaboration among organizations with similar or complementary goals? Are the roles of the partners appropriate and relevant?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Collaboration: are the right partners at the table to reach the desired audience (target demographics)?<br>If you believe there may be overlap with other organizations, state it here<br>0 of 2000 |

**Sustainability: Is the project likely to be sustained? Are partnerships likely to be sustained past project period? Is the impact likely to be long-term?**

| Delete | Reviewer | Score | Comments |
|---|---|---|---|
| | Ms. Julie McMahon<br>Affiliate Grants<br>Admin | | Budget: In-kind, cash<br>Sustainability: Have they demonstrated good partnerships or effort to reach out for sponsors or other grant/funding? Are the start-up costs expensive or is this already running?<br>0 of 2000 |

SAVE REVIEW CLOSE REVIEW PANEL

**New section for Evidence-base will look to your Project Narrative for a description of best practices or evidence based interventions you will use.**

# Appendix E: Workplan Template

Use this template to draft a workplan that will be compatible with your GeMS application. You may copy this page for more cells. You will have multiple objective per goal, and one intervention per objective.

| Goal | Objective | Timeline | Intervention from list (one per objective) | Who is responsible? | How many will be served or reached with this intervention? | How will you track the number of individuals served? | Notes |
|---|---|---|---|---|---|---|---|
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Education Interventions:
Public education (e.g. radio, television, newspaper, e-communications, social networking)
Group education (e.g. lectures, workshops, seminars, webinars)
One-on-one education
Material development and dissemination (multi-cultural, and in accessible and alternative formats)
Events (e.g. health fairs) in accessible venues
Health care professional training and provider education

Screening Interventions:
Reminder systems directed at patients (e.g. letters, phone calls)
Reminder systems directed at health care providers (e.g. chart reminders)
Outreach programs (that result in new appointments, new patients, etc.)
In-reach programs (result in getting existing patients to get a mammogram)
Reduce costs to patient for mammography (e.g. free or low-cost mammography)
Expand hours for breast health services to evenings and weekends.
Provide free or low-cost screenings (clinical breast exams and/or screening mammograms)
Reduce other barriers to mammography (e.g. transportation, childcare)
Provide translation/interpretation services to include sign language interpreters
Genetic testing
Patient navigation
Accessible facilities for screening (education, awareness)

Diagnosis Interventions:
Provide translation/interpretation services
Reduce costs to patient for diagnostic services (e.g. ultrasound, biopsies)
Patient navigation
Reduce other barriers to diagnostic services (e.g. transportation, childcare)

Treatment Interventions:
Reduce out-of-pocket costs for treatment (e.g. co-pay or prescription drug assistance
Reduce costs for treatment services (e.g. free chemotherapy, radiation, surgery)
Clinical trials
Patient navigation

Treatment Support Interventions:
Provide financial assistance for day-to-day costs during treatment (e.g. housing, utilities)
Reduce other barriers to treatment (e.g. transportation, childcare)
Support groups
Individual counseling/psychotherapy
Side-effect management (e.g. prosthesis, wigs, lymphedema therapy)
Nutrition services (e.g. meal delivery)
Complementary therapies (e.g. meditation, yoga, acupuncture, art therapy)
End of life care (e.g. hospice/palliative care)
Legal services
Caregiver support (e.g. respite programs, training for caregivers)

Survivorship Interventions:
Support groups
Individual counseling/psychotherapy
Exercise/Nutrition programs
Complementary therapies (e.g. meditation, yoga, acupuncture, art therapy)
Side-effect management (e.g. prosthesis, wigs, lymphedema therapy)

Health Care Delivery/Systems Change Interventions:
Interventions to increase the quality of health care delivery
Process improvement strategies