



STATE OF TENNESSEE
DEPARTMENT OF HEALTH

**REQUEST FOR APPLICATION # 34347-91624
AMENDMENT # 1
FOR TENNESSEE BREAST AND CERVICAL
SCREENING PROGRAM EVIDENCE-BASED
INTERVENTIONS FUNDING OPPORTUNITY**

DATE: AUGUST 30, 2023

RFA # 34347-91624 IS AMENDED AS FOLLOWS:

1. This RFA Schedule of Events updates and confirms scheduled RFA dates. Any event, time, or date containing revised or new text is highlighted.

| EVENT | TIME (Central Time) | DATE (all dates are state business days) |
|---|------------------------|---|
| 1. RFA issued | | CONFIRMED |
| 2. Written "Questions & Comments" Deadline | 2:00 p.m. | CONFIRMED |
| 3. State response to written "Questions and Comments" | | August 30, 2023 |
| 4. Deadline for Applications | 2:00 p.m. | September 11, 2023 |
| 5. Evaluation Notice released | | September 15, 2023 |
| 6. Effective start date of contract | | November 1, 2023 |

2. State responses to questions and comments in the table below amend and clarify this RFA.

Any restatement of RFA text in the Question/Comment column shall NOT be construed as a change in the actual wording of the RFA document.

| QUESTION / COMMENT | STATE RESPONSE |
|---|---|
| 1. When answering the questions in the application, the type is to 12 point. However, when answers are put in the boxes in the application, the type gets smaller. This means one must attach pages with answers to the application. Is there a maximum page limit for an attachment to the application that helps to answer the questions? | The application is a PDF form fill document and does not apply to the 12 Point font. Any attachments should be in 12 point font. The application can be expanded up to a max of 5 pages if needed per RFA on page 5 in the checklist. |

| QUESTION / COMMENT | STATE RESPONSE |
|--|--|
| 2 First, our Legal Department was reviewing the sample contract and had a question on how screenings are associated with preventing violent maternal deaths? (This language was quite different than last year's contract.) | Please see the update to the language in section A.3 in number 3 below and in the updated Sample Grant Contract. |
| 3 Our Grants Office is assuming that the goals listed in A.3 fall under the maternal violent death prevention efforts in Tennessee. Please confirm if this is accurate and we will communicate this information back to our Legal department. | Please see the update to the language in section A.3 in number 3 below and in the updated Sample Grant Contract. |
| 4 We have multiple areas within our Health System interested in submitting applications for this RFA. If we are not able to combine the efforts into one application, is it allowable for us to submit multiple competing applications, understanding that only one may be chosen. | Yes. |
| 5 What is allowed for the BCS grant. What can we spend the money on? | Examples of allowable costs under this grant could include, but is not limited to, salaries, direct assistance to individuals such as gas cards. |
| 6 The RFA states <i>“Given the limited amount of available funding and the nature of these applications, priority will be given to applications that minimize indirect costs.”</i> What is an example of an indirect costs? | This is typically someone with the authority to sign contracts at your organization. There is no requirement of what title this individual holds. |
| 7 Who can be an “authorized signor of the resulting contract?” | This is typically someone with the authority to sign contracts at your organization. There is no requirement of what title this individual holds. |
| 8 Is the \$50,000 awarded to each grantee or is it divided between all four grantees? | \$50,000 is the maximum amount to be awarded. It could be split up among a maximum of 4 |
| 9 Can you give me any examples of successful projects utilizing this grant? | Examples of implementation efforts or other successful programs can be found using The Community Guide at www.thecommunityguide.org . You can search for the recommendations mentioned in the RFA or you can search for topics such as ‘breast cancer’ and find recommendations of implementation and examples of successful programs. Similar information can be found on the Centers for Disease Control and Prevention (CDC) site at the following link: https://www.cdc.gov/cancer/community-resources/interventions/ . |
| 10 Is there a way to get information about the pre-response teleconference prior to the teleconference? | If there is a teleconference, the information for the teleconference is in the RFA document and can be downloaded the day it is available on the Funding Opportunities website. |

3. Delete Grant Contract section A.3., in its entirety and insert the following in its place (any sentence or paragraph containing revised or new text is highlighted):

A.3. Service Goals. The goal of the contract is to improve health equity in breast and cervical cancer screening and diagnostics by completing at least one of the following activities:

- a. Increasing access to needed breast and cervical services including wellness exams, screenings, follow-ups, and referrals by providing barrier reduction activities such as transportation, child or adult care, co-pay assistance, or additional access to resources in underserved areas.
 - b. Increasing community engagement through education and outreach to populations disproportionately burdened by breast and cervical cancer including but not limited to, those of ethnic or racial minorities, and those in rural areas. Community engagement and support can be provided through engaging non-traditional partners such as, but not limited to, worksites, community programs, faith-based organizations, housing authorities, etc.
 - c. Increasing the number of patients that are provided screening services related to breast or cervical cancer by removing patient barriers and decreasing missed opportunities for screening within the clinical setting. Activities must, at a minimum, include breast and cervical cancer screenings but can also include other cancer screenings such as colorectal, lung, etc.
 - d. Increasing access to timely screenings and follow-up related to breast or cervical cancer by providing patient/client navigation to reduce disparities by helping women overcome barriers and understand the medical system.
4. **RFA Amendment Effective Date.** The revisions set forth herein shall be effective upon release. All other terms and conditions of this RFA not expressly amended herein shall remain in full force and effect.