

**Wyoming Cancer Resource Services Project  
Competitive Grant Application  
July 1, 2020-June 30, 2022  
Cover Sheet**

<b>Organization Information</b>	
<b>Application for Region #</b>	
<b>Applicant Name</b>	
<b>Name/Title of Primary Contact</b>	
<b>E-Mail Address (required)</b>	
<b>Street Address</b>	
<b>City/State/Zip</b>	
<b>Mailing Address (if different from above)</b>	
<b>Phone</b>	
<b>Fax</b>	
<b>Fiscal Agent Information</b>	
<b>Tax ID Number</b>	
<b>DUNS Number</b>	
<b>Name/Title of Individual who will sign contract if awarded</b>	
<b>Street Address (City/State/Zip)</b>	
<b>Mailing Address (if different from above)</b>	
<b>Funding Request Information</b>	
<b>Funding Request for Year One</b>	\$
<b>Funding Request for Year Two</b>	\$
<b>Total Funding Request</b>	\$

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Signature Page**

I certify to the best of my knowledge that the information contained in this application is correct. If awarded funding under this program, I certify that this project will be conducted in accordance with funding source requirements and the assurances provided within this application. I have been authorized by the organization's governing body to make this application and enter into a contract with the Integrated Cancer Services Program.

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Signature of Authorizing Fiscal/Financial Agent

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Date

**Wyoming Cancer Resource Services Project  
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Year One Project Budget**

*The allowable budget items are outlined below.*

*Enter annual budget amounts requested and briefly describe each item.*

Budget Item	Budget Amount	Justification for Funds
<b>Personnel/Salary</b>		
Personnel/Salary cost including fringe should not exceed 60 percent of the total budget for Regions I-V		
	\$	
<b>Travel (include required meetings and events)</b>		
	\$	
<b>Operating Expenses</b>		
	\$	
	\$	
	\$	
<b>Anticipated Costs to Support Proposed Workplan Activities</b>		
Optional transportation funds (for patient assistance)	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
<b>SUBTOTAL</b>	\$	
Estimated Indirect (Up to 8% on budget subtotal)	\$	
<b>YEAR ONE BUDGET TOTAL</b>	\$	

**Wyoming Cancer Resource Services Project  
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Year One Project Cost Sharing**

*Required 10% cost sharing to ensure collaborative support for the work. Provide a detailed description of the sources of non-state or non-federal cost sharing funds by name and estimated amount from each for the forthcoming fiscal year.*

Organization	Cost Sharing Category (cash/in-kind, etc.)	Type of Expense and Description	Cost
			\$
			\$
			\$
			\$
			\$
			\$
			\$
<b>TOTAL COST SHARING FUNDS</b>			<b>\$</b>

*Document the procedures for determining the value of non-cash cost sharing funds and the procedures for documenting the actual cost sharing received.*

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Proposed Project Workplan Template**

**HEALTH SYSTEM PARTNERSHIP**

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to breast and cervical cancer screenings in collaboration with a health system to increase clinic screening rates. If applicable, organizations are allowed and encouraged to implement interventions within their own health system.

*Interventions to increase community demand for cancer screening:*

- ☐ Client reminders

*Interventions to increase provider delivery of screening services:*

- ☐ Provider assessment and feedback  
☐ Provider reminders

*Interventions to increase community access to cancer screening:*

- ☐ Reducing structural barriers, such as through:
- Setting up alternative screening sites
  - Additional screening hours outside of normal business hours
  - Addressing transportation barriers
  - Offering child care
- ☐ Reducing client out of pocket costs, such as through:
- Vouchers
  - Reimbursements
  - Reduction in co-pays
  - Adjustments in federal and state insurance coverage

In addition to the above requirements, Contractor(s) may additionally choose to implement any of the interventions below in combination with any chosen EBI from above. These interventions are not to be used as standalone interventions. Choosing to incorporate any of the below interventions with one of the above EBIs does not alter the above requirements.

- ☐ Small media  
☐ Mass media  
☐ Group education  
☐ One-on-one education

<b>Screening Topic: Health System Partnership</b>
<b>EBI(s) Chosen:</b>
<b>Brief overview of proposed project, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

## **BREAST CANCER SCREENING**

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to breast cancer screening. Selected interventions should focus on collaboration with health systems, health plans, employers, organizations, or other local partners.

*Interventions to increase community demand for cancer screening:*

- ☐ Client reminders

*Interventions to increase provider delivery of screening services:*

- ☐ Provider assessment and feedback
- ☐ Provider reminders

*Interventions to increase community access to cancer screening:*

- ☐ Reducing structural barriers , such as through:
  - Setting up alternative screening sites
  - Adding screening hours
  - Addressing transportation barriers
  - Offering child care
- ☐ Reducing client out of pocket costs , such as through:
  - Vouchers
  - Reimbursements
  - Reduction in co-pays
  - Adjustments in federal and state insurance coverage

In addition to the above requirements, Contractor(s) may additionally choose to implement any of the interventions below in combination with any chosen EBI from above. These interventions are not to be used as standalone interventions. Choosing to incorporate any of the below interventions with one of the above EBI does not alter the above requirements.

- ☐ Small media
- ☐ Mass media
- ☐ Group education
- ☐ One-on-on education

<b>Screening Topic: Breast Cancer Screening</b>
<b>EBI(s) Chosen:</b>
<b>Target/Priority Population(s):</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

## **CERVICAL CANCER SCREENING**

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to cervical cancer screening. Selected interventions should focus on collaboration with health systems, health plans, employers, organizations, or other local partners.

*Interventions to increase community demand for cancer screening:*

- ☐ Client reminders

*Interventions to increase provider delivery of screening services:*

- ☐ Provider assessment and feedback
- ☐ Provider reminders

*Interventions to increase community access to cancer screening:*

- ☐ Reducing structural barriers , such as through:
  - Setting up alternative screening sites
  - Adding screening hours
  - Addressing transportation barriers
  - Offering child care
- ☐ Reducing client out of pocket costs , such as through:
  - Vouchers
  - Reimbursements
  - Reduction in co-pays
  - Adjustments in federal and state insurance coverage

In addition to the above requirements, Contractor(s) may additionally choose to implement any of the interventions below in combination with any chosen intervention from above. These interventions are not to be used as standalone interventions. Choosing to incorporate any of the below interventions with one of the above interventions does not alter the above requirements.

- ☐ Small media
- ☐ Mass media
- ☐ Group education
- ☐ One-on-on education

<b>Screening Topic: Cervical Cancer Screening</b>
<b>EBI(s) Chosen:</b>
<b>Target/Priority Population(s):</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

## COLORECTAL CANCER SCREENING

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to colorectal cancer screening. Selected interventions should focus on collaboration with health systems, health plans, employers, organizations, or other local partners.

*Interventions to increase community demand for cancer screening:*

- ☐ Client reminders

*Interventions to increase provider delivery of screening services:*

- ☐ Provider assessment and feedback
- ☐ Provider reminders

*Interventions to increase community access to cancer screening:*

- ☐ Reducing structural barriers , such as through:
  - Setting up alternative screening sites
  - Adding screening hours
  - Addressing transportation barriers
  - Offering child care
- ☐ Reducing client out of pocket costs , such as through:
  - Vouchers
  - Reimbursements
  - Reduction in co-pays
  - Adjustments in federal and state insurance coverage

In addition to the above requirements, Contractor(s) may additionally choose to implement any of the interventions below in combination with any chosen intervention from above. These interventions are not to be used as standalone interventions. Choosing to incorporate any of the below interventions with one of the above interventions does not alter the above requirements.

- ☐ Small media
- ☐ Mass media
- ☐ Group education
- ☐ One-on-on education

<b>Screening Topic: Cervical Cancer Screening</b>
<b>EBI(s) Chosen:</b>
<b>Target/Priority Population(s):</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>



## SKIN CANCER PREVENTION

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to skin cancer prevention. Selected interventions should focus on collaboration with schools, day care facilities, parks, pools, employers, or other local partners.

*Interventions to promote sun-protective behaviors among visitors to outdoor recreational, tourism settings, or among outdoor workers:*

- ☐ Educational approaches
  - Providing informational messages about sun protection
- ☐ Activities designed to influence knowledge, attitudes, or behavior of visitors
  - Modeling or demonstrating behaviors
- ☐ Environmental approaches to encourage sun protection
  - Providing sunscreen or shade
- ☐ Policies to support sun protection practices
  - Requiring sun protective clothing

*Interventions to promote sun-protective behaviors among children and students:*

- ☐ Educational interventions
  - Typically providing information about sun safety and effects of ultraviolet radiation
- ☐ Supportive behavioral interventions
  - Modeling, demonstration, roleplaying
- ☐ Environmental and policy changes in daycare or preschool settings
  - Typically increasing the availability of sun-protective items, adding sun-protective features to physical environment, and implementing sun-protective policies.
  - Providing sunscreen or shade
  - Avoid scheduling outdoor activities during peak sunlight hours.

*Community-wide Interventions to promote sun-protective behaviors:*

- Environmental and policy changes
  - An integrated effort to influence UV-protective behaviors directed at an entire community

<b>Skin Cancer Prevention</b>
<b>EBI(s) Chosen:</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

## **HPV VACCINATION**

Contractor(s) will implement at least one (1) evidence-based intervention (EBI) project related to HPV vaccination. Selected interventions should focus on collaboration with health systems, public health nursing, schools, organizations, or other local partners.

### *Interventions to enhance access to vaccination services*

- ☐ Reducing client out-of-pocket costs
- ☐ Extended evening or weekend office hours
- ☐ Vaccination clinics in schools, or organized student settings, such as through:
  - Sports physicals
  - Back to school clinics
  - Open houses

### *Interventions to increase community demand for vaccinations:*

- ☐ Client or family incentive programs
- ☐ Community-wide education
- ☐ Collaboration with community partners, such as through:
  - Public health nursing
  - Cancer Centers
  - Schools

### *Provider or system-based Interventions:*

- ☐ Client reminder & recall systems
- ☐ Health care system-based interventions
- ☐ Provider reminders
- ☐ Provider and clinic staff education

<b>HPV Vaccination</b>
<b>EBI(s) Chosen:</b>
<b>Target/Priority Population(s):</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

## **RADON**

Contractor(s) will implement at least one (1) project related to radon education. Selected project should focus on educating local schools, real estate professionals, housing authorities, or other identified organizations.

Contractor(s) will have access to state funded radon materials and free radon testing kits when available.

<b>Radon</b>
<b>Discuss the process for identifying potential partners, organizations, or other educational opportunities:</b>
<b>How will you evaluate effectiveness of project?</b>

## **QUALITY OF LIFE AND SURVIVORSHIP**

Contractor(s) will implement at least one (1) project related to quality of life and survivorship. Selected project should focus on collaboration with cancer centers, health systems, support groups, organizations, or other local partners.

<b>Screening Topic: Quality of life or survivorship</b>
<b>EBI(s) Chosen:</b>
<b>Brief overview of proposed project, what will be achieved, potential partners, action steps, and timeline:</b>
<b>How will you evaluate the project?</b>

### **PATIENT NAVIGATION**

Contractor(s) will serve as a bridge between communities and health systems by providing patient navigation for those seeking cancer screening or cancer treatment services by reducing structural barriers.

Contractor(s) will be expected to gather general demographic information for the clients they assist as well as have a system in place to follow up with clients to determine if screenings have been completed by those who are eligible.

Contractor(s) are able to provide transportation assistance as part of their budget. Additional resources such as Fecal Immunochemical Test (FIT) Kits, mammogram assistance vouchers, and state level cancer screening programs are available for contractor(s).

<b>Patient Navigation</b>
<b>Brief overview of proposed process for gathering demographic information and follow up:</b>
<b>Discuss the process for identifying potential partners, organizations, or other resources not listed above:</b>

### **COMMUNICATION AND MEDIA PLAN**

Contractor(s) will develop and implement evidence-based communications and media that includes all of the following topics: colorectal cancer, breast cancer, lung cancer, melanoma, and cervical cancer/HPV vaccination.

<b>Communication and Media Plan</b>
<b>Discuss the process for identifying appropriate media avenue for each region:</b>
<b>How will you evaluate the success of each topic?</b>

## **DEFINITIONS**

Additional information regarding evidence-based interventions can be found at <b><a href="http://www.thecommunityguide.org">www.thecommunityguide.org</a></b>	
<b>Client Reminders</b>	Written (letters, postcards, email) or telephone messages (phone calls, text messages) that are sent to clients to advise them that they are due for cancer screenings. Client reminders may be enhanced by follow-up printed or telephone reminders, or additional text.
<b>Client Incentives</b>	Small, non-coercive rewards that aim to motivate people to seek cancer screening for themselves or to encourage others to seek screenings. Incentives are distinct from interventions designed to improve access to services.
<b>Group Education</b>	Group education conveys information on indications for, benefits of, and ways to overcome barriers to screening with the goal of informing, encouraging, and motivating participants to seek recommended screening. Group education is usually conducted by health professionals or by trained lay people who use presentations or other teaching aids in a lecture or interactive format, and often incorporate role modeling or other methods. Group education can be given to a variety of groups, in different settings, and by different types of educators with different backgrounds and styles. Group education must be used in conjunction with another intervention and is not a standalone intervention.
<b>Mass Media</b>	Messages that communicate message by using communication channels such as print media (newspapers, magazines), broadcast media (radio, television) or internet. Messages may have a wide audience or target specific audiences to disseminate information, behavioral guidance, or a combination of these persuasive techniques with the intention of changing knowledge, attitudes, beliefs, intentions, and behaviors.
<b>One-on-One Education</b>	Delivery of information to individuals about indications for, benefits of, and ways to overcome barriers to cancer screening with the goal of informing, encouraging, and motivating them to seek recommended screening. These messages are delivered by healthcare workers or other health professionals, lay health advisors, or volunteers, and are conducted by telephone or in person in medical, community, worksite, or household settings. One-on-one education must be used in conjunction with another intervention and is not a standalone intervention.
<b>Patient Navigation</b>	Individualized assistance to help clients overcome personal and healthcare system barriers, and to facilitate understanding and timely access to quality screening. Patient navigation should result in the client completing needed services.
<b>Provider Assessment and Feedback</b>	Reports that are generated to both evaluate provider performance in delivering or offering screening to clients (assessment) and present providers with information about their performance in providing screening services (feedback). Feedback may describe the performance of a group of providers (e.g., mean performance for a practice) or an individual provider, and may be compared with a goal or standard.
<b>Provider Incentives</b>	Direct or indirect rewards intended to motivate providers to perform cancer screening or make appropriate referral for their patients to receive these services. Rewards are often monetary, but can also include nonmonetary incentives (e.g., continuing medical education credit). Because some form of assessment is needed to determine whether

	providers receive rewards, an assessment component may be included in the intervention.
<b>Provider Reminder and Recall Systems</b>	Alerts that inform health care providers it is time for a client's cancer screening test (called a "reminder") or that the client is overdue for screening (called a "recall"). The reminders can be provided in different ways, such as in client charts, electronically through electronic health record systems, by e-mail, or other internal processes.
<b>Reducing Client Out-of-Pocket Costs</b>	<p>Minimizing or removing economic barriers that make it difficult for clients to access cancer screening services. Costs can be reduced through a variety of approaches, including vouchers, reimbursements, reduction in co-pays, or adjustments in federal or state insurance coverage. Efforts to reduce client costs may be combined with measures to provide client education, information about program availability, or measures to reduce structural barriers.</p> <p>Grant funding restrictions may apply and this intervention must be approved by the WCP prior to implementation.</p>
<b>Reducing Structural Barriers</b>	<p>Non-economic burdens or obstacles that make it difficult for people to access cancer screening. Interventions designed to reduce these barriers may facilitate access to cancer screening services by reducing time or distance between service delivery settings and target populations, modifying hours of service to meet client needs, offering services in alternative or non-clinical settings, eliminating or simplifying administrative procedures and other obstacles.</p> <p>Example- Mobile mammography van at worksites or in residential communities, scheduling assistance, patient navigators, transportation, dependent care, translation services, limiting the number of return clinic visits.</p>
<b>Small Media</b>	Includes videos and printed materials such as letters, brochures, and newsletters. These materials can be used to inform and motivate people to be screened for cancer. They can provide information tailored to specific individuals or targeted to general audiences. Small media must be used in conjunction with another intervention and is not a standalone intervention.