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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**REQUEST FOR APPLICATIONS**  
**RFA P-22.1-PPA**

**CPRIT Prevention Program Assessment**

**Please also refer to the Instructions for Applicants document,  
which will be posted on June 3, 2021**

**Application Receipt Opening Date: June 3, 2021**

**Application Receipt Closing Date: September 1, 2021**

**FY 2022**

Fiscal Year Award Period

September 1, 2021-August 31, 2022

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## RFA VERSION HISTORY

Rev 5/7/2021 RFA release

ARCHIVE

## 1. ABOUT CPRIT

The State of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$6 billion in general obligation bonds to fund grants for cancer research and prevention.

CPRIT is charged by the Texas Legislature to do the following:

- Create and expedite innovation in the area of cancer research and enhance the potential for a medical or scientific breakthrough in the prevention of or cures for cancer;
- Attract, create, or expand research capabilities of public or private institutions of higher education and other public or private entities that will promote a substantial increase in cancer research and in the creation of high-quality new jobs in the State of Texas; and
- Develop and implement the Texas Cancer Plan.

### 1.1 Prevention Program Priorities

Legislation from the 83rd Texas Legislature requires that CPRIT's Oversight Committee establish program priorities on an annual basis. The priorities are intended to provide transparency in how the Oversight Committee directs the orientation of the agency's funding portfolio. The Prevention Program's principles and priorities will also guide CPRIT staff and the Prevention Review Council on the development and issuance of program-specific Requests for Applications (RFAs) and the evaluation of applications submitted in response to those RFAs.

The ultimate goals of the CPRIT Prevention Program are to reduce overall cancer incidence and mortality and to improve the lives of individuals who have survived or are living with cancer. The ability to reduce cancer death rates depends in part on the application of currently available evidence-based interventions and strategies. CPRIT fosters the primary, secondary, and tertiary prevention of cancer in Texas by providing financial support for a wide variety of evidence-based risk reduction, early detection, and survivorship interventions. Prevention and implementation research are funded by CPRIT's Academic Research program.

#### **Established Principles:**

- Fund evidence-based interventions and their dissemination.
- Support the prevention continuum of primary, secondary, and tertiary (includes survivorship) prevention interventions.

### **CPRIT's Cross-Program Priorities:**

- Prevention and early detection initiatives
- Translation of Texas research (discoveries) to innovations
- Enhance Texas' research capacity and life science infrastructure

### **Prevention Program Priorities**

- Prioritize populations disproportionately affected by cancer incidence, mortality, or cancer risk factors
- Prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality, or cancer risk factors
- Prioritize underserved populations
- Prioritize program assessment to identify best practices, use as a quality improvement tool, and guide future program direction

Priority populations include the following:

- Underinsured and insured individuals
- Medically unserved or underserved populations
- Racial, ethnic, and cultural minority populations
- Populations with low cancer screening rates, high incidence rates, and high mortality rates
- Rural, nonmetropolitan, and/or medically underserved areas of the state

Since 2010, CPRIT has funded 244 prevention program grants in the following areas:

- Cancer Prevention Microgrants (5)
- Cancer Prevention Promotion and Navigation to Clinical Services (3)
- Community Collaborative Prevention Programs and Services (4)
- Dissemination of CPRIT-Funded Cancer Control Interventions (12)
- Evidence-Based Cancer Prevention Services (98)
- Expansion of Evidence-Based Cancer Prevention Services (48)
- Public and Professional Education (62)
- Tobacco Control and Lung Cancer Screening (12)

Grants supported by the CPRIT Prevention Program are found on the [CPRIT website](#).

## **2. FUNDING OPPORTUNITY DESCRIPTION**

### **2.1 Summary**

The evaluation of the initial progress of the CPRIT Prevention Program since 2010 and the development of an assessment plan for the next stage of the CPRIT Prevention Program will use a mixed-methods approach that triangulates quantitative and qualitative data to provide evidence of effectiveness and information about how CPRIT-related changes are embedded and sustained in organizations and populations. The proposed effort should rely on existing data sources and will also involve new data collection as the project budget allows (eg, key informant interviews, case studies that involve both qualitative and quantitative data).

The evaluation and the plan for the future should capture the vastness and variability of the CPRIT Prevention Program. Across Texas, CPRIT prevention grants support cities and counties that range in size from a few hundred people to over 8 million people. Small areas may be studied only with qualitative data due to sample size limitations for quantitative data.

### **2.2 Evaluation Questions**

The evaluation of the CPRIT Prevention Program will primarily address the following questions:

- 1) Over the first 10 years, to what extent and how well has CPRIT enhanced the infrastructure for cancer prevention and control services in Texas?
- 2) To what extent is Texas currently reaching underserved regions and populations through CPRIT and other state-guided cancer prevention and control efforts (ie, increasing health equity)?
- 3) Since the state investment in CPRIT was initiated, what progress has Texas made in improving preventable cancer risk factors, early detection, and cancer morbidity and mortality across the state?
- 4) Moving forward, what additional data should CPRIT collect from funded Prevention Program projects to demonstrate future progress?

In addition, there are several secondary questions:

- 1) Are CPRIT stakeholders engaged and satisfied?

- 2) Are the CPRIT-funded programs developing capacity among public health entities and health care providers?
- 3) For funded projects, do sustainable benefits remain after CPRIT funding ends? How commonly does this occur?

### **2.3 Award Description**

The evaluation of the CPRIT Prevention Program solicits applications for 1 project with a duration of 24 months. The evaluation will occur in 2 phases.

Phase 1 (6 months) will consist of a review and search for available data (ie, what is available, completeness, quality) along with an overview of potential new data that would need to be collected. The funded project will provide CPRIT staff with a proposed set of any new data collection plans for review and approval. Applicants are encouraged to apply principles of evaluability assessment (see: Leviton et al. Evaluability assessment to improve public health policies, programs, and practices. *Annu Rev Public Health*. 2010;31:213-233) in Phase 1.

In Phase 2 (18 months), applicants will prioritize areas and topics for evaluation and carry out the assessment using mixed-methods approaches. Applicants are encouraged to follow the Program Evaluation Standards developed by the American Evaluation Association (see: Yarbrough et al. *The program evaluation standards: A guide for evaluators and evaluation users* [3rd ed.] Thousand Oaks, CA: Sage; 2011).

### **2.4 Outcome (Quantitative) Metrics**

There is a potential set of metrics for which existing data may be available at the county and/or health service region level. These metrics include the following:

- Change in mortality rates of targeted cancers—by race
- Change in cancer stage at diagnosis—by race (for targeted cancers)
- Incidence rate changes for targeted cancers—by race
- Number of screening tests for each cancer by county, or even smaller unit for larger counties if available
- Number of individual (deduplicated) patients screened
- Completion rate for diagnostic/follow-up testing after an abnormal screening result
- HPV vaccination rates for adolescents

## 2.5 Reporting Requirements

The funded projects will be required to report through the submission of quarterly progress reports, annual reports, and a final report.

- Quarterly progress report sections include, but are not limited to, the following:
  - Narrative on project progress, including the number and description of all evaluation activities undertaken, including progress toward key milestones
- Annual and final progress report sections include, but are not limited to, the following:
  - Key accomplishments
  - Progress toward goals and outcome objectives
  - Materials produced, presentations, and publications

## 2.6 Eligibility

- The applicant must be a Texas-based entity, such as a community-based organization, health institution, government organization, public or private company, college or university, or academic health institution.
- The applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application was submitted.
- The designated Program Director (PD) will be responsible for the overall performance of the funded project. The PD must have relevant education and evaluation experience and must reside in Texas during the project performance time.
- The applicant may only submit 1 application.
- Collaborations are permitted and encouraged, and collaborators may or may not reside in Texas. However, collaborators who do not reside in Texas are not eligible to receive CPRIT funds. Subcontracting and collaborating organizations may include public, not-for-profit, and for-profit entities. Such entities may be located outside of the State of Texas, but non-Texas-based organizations are not eligible to receive CPRIT funds.
- An applicant is not eligible to receive a CPRIT grant award if the applicant PD, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's organization or institution is related to a CPRIT Oversight Committee member.



- An applicant organization is eligible to receive a grant award only if the applicant certifies that the applicant organization, including the PD, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's organization (or any person related to 1 or more of these individuals within the second degree of consanguinity or affinity), has not made and will not make a contribution to CPRIT or to any foundation created to benefit CPRIT.
- The applicant must report whether the applicant organization, the PD, or other individuals who contribute to the execution of the proposed project in a substantive, measurable way, (whether slated to receive salary or compensation under the grant award or not), are currently ineligible to receive federal grant funds because of scientific misconduct or fraud or have had a grant terminated for cause within 5 years prior to the submission date of the grant application.
- CPRIT grants will be awarded by contract to successful applicants. CPRIT grants are funded on a reimbursement-only basis. Certain contractual requirements are mandated by Texas law or by administrative rules. Although applicants need not demonstrate the ability to comply with these contractual requirements at the time the application is submitted, applicants should make themselves aware of these standards before submitting a grant application. Significant issues addressed by the CPRIT contract are listed in [section 6](#). All statutory provisions and relevant administrative rules can be found [on the CPRIT website](#).

## 2.7 Resubmission Policy

In the event that this RFA is offered again next cycle, **1 resubmission** will be permitted.

## 2.8 Funding Information

CPRIT plans to make 1 award to a single applicant in response to this RFA.

Applicants may request any amount of funding up to a maximum of \$750,000 in total funding over a maximum of 24 months. Given the 2-phased nature of this award, applicants must submit and obtain approval for Phase 1 of the project before Phase 2 is approved. Grant funds may be used to pay for project staff salary and benefits, project supplies, equipment, costs for data collection and analysis, and travel of project personnel.

Requests for funds to support construction, renovation, or any other infrastructure needs or requests to support lobbying will not be approved under this mechanism.

Grantees may request funds for travel for 2 project staff members to attend CPRIT's conference.

State law limits the amount of award funding that may be spent on indirect costs to no more than 5% of the **total** award amount.

### 3. KEY DATES

<b>RFA release</b>	May 7, 2021
<b>Online application opens</b>	June 3, 2021, 7 AM central time
<b>Application due</b>	September 1, 2021, 4 PM central time
<b>Application review</b>	September 2021–January 2022
<b>Award notification</b>	February 2022
<b>Anticipated start date</b>	March 1, 2022

Applicants will be notified of peer review panel assignment prior to the peer review meeting dates.

### 4. APPLICATION SUBMISSION GUIDELINES

#### 4.1 *Instructions for Applicants* document

It is **imperative** that applicants read the accompanying instructions document for this RFA that will be available June 3, 2021 (<https://CPRITGrants.org>). Requirements may have changed from previous versions.

#### 4.2 Online Application Receipt System

Applications must be submitted via the CPRIT Application Receipt System (CARS) (<https://CPRITGrants.org>). **Only applications submitted through this portal will be considered eligible for evaluation.** The PD must create a user account in the system to start and submit an application. The Co-PD, if applicable, must also create a user account to participate in the application. Furthermore, the Application Signing Official (a person authorized to sign and submit the application for the organization) and the Grants Contract/Office of Sponsored Projects Official (an individual who will help manage the grant contract if an award is made) also must create a user account in CARS. Applications will be accepted beginning at 7 AM central time on June 3, 2021,

and must be submitted by 4 PM central time on September 1, 2021. Detailed instructions for submitting an application are in the *Instructions for Applicants* document, posted on CARS.

**Submission of an application is considered an acceptance of the terms and conditions of the RFA.**

### **4.3 Submission Deadline Extension**

The submission deadline may be extended for 1 or more grant applications upon a showing of good cause. All requests for extension of the submission deadline must be submitted via email to the CPRIT [Helpdesk](#) within 24 hours of the submission deadline. Submission deadline extensions, including the reason for the extension, will be documented as part of the grant review process records.

### **4.4 Application Components**

Applicants are advised to follow all instructions to ensure accurate and complete submission of all components of the application. Refer to the *Instructions for Applicants* document for details.

**Submissions that are missing 1 or more components or do not meet the eligibility requirements may be administratively withdrawn without review.**

#### **4.4.1 Abstract and Significance (5,000 characters or less)**

Clearly explain the problem(s) to be addressed, the approach(es) to the solution, and how the application is responsive to this RFA. In the event that the project is funded, the abstract will be made public; therefore, no proprietary information should be included in this statement. Initial compliance decisions are based in part upon review of this statement.

**The abstract format is as follows (use headings as outlined below):**

- **Background:** Include the rationale for the proposed assessment. In this section, include potential barriers, opportunities, and other information for framing the assessment.
- **Evaluation objectives:** State the overall goal and objectives of the evaluation.
- **Evaluation methods:** Describe the methods to be used, including the design, data collection and analyses approaches, and plans for data triangulation.

- **Innovations:** Explain how the proposed assessment, if successful, will enhance the understanding the impacts of CPRIT on cancer prevention and control.
- **Dissemination:** Describe how the findings from the assessment will be disseminated to clinical, public health, and lay audiences.

#### 4.4.2 Goals and Objectives (700 characters each)

List only major **outcome goals** and **measurable objectives** for each year of the project.

The maximum number is 3 goals with 3 objectives each. Projects will be evaluated annually on progress toward outcome goals and objectives.

#### 4.4.3 Project Timeline (2 pages or less)

Provide a project timeline for project activities that includes deliverables and dates. Use Years 1, 2, and Months 1, 2, 3, etc, as applicable (eg, Year 1, Months 3-5) instead of specific months or years. Month 1 is the first full month of the grant award.

The major deliverables are as follows:

- An interim report on Phase 1;
- A presentation of early findings to the Prevention Review Council;
- A final report on both phases; and
- One or more peer-reviewed articles on the evaluation for publication in a scientific journal.

#### 4.4.4 Project Plan (12 pages or less)

*The required project plan format follows. Applicants must use the headings outlined below.*

**Background:** Briefly present the rationale behind the proposed evaluation, emphasizing the value of the evaluation, critical barriers, the need for a mixed-method approach, and any other pertinent information for framing the evaluation.

**Evaluation Goal and Objectives:** State the overall goal of the evaluation along with a series of objectives. The objectives should be both quantitative (eg, process objectives, impact objectives) and qualitative (eg, how a set of questions will be answered with words).

**Components of the Project:** Clearly describe the design components for this multifaceted evaluation. The description should cover data collection, data management methods, data analyses,

and anticipated results. The applicant should include their approach for triangulating quantitative and qualitative data.

**Innovation:** Provide a brief overview of the innovations in the evaluation approach, including the new information that will be generated, how methods are novel, and how the findings might shift paradigms.

**Organizational Qualifications and Capabilities:** Evaluation and reporting of results should be headed by a professional who has demonstrated expertise in the field. If needed, applicants may want to consider seeking expertise at Texas-based academic cancer centers, schools/programs of public health, or the like. Describe the organization and its track record and success in conducting large-scale evaluations. Include an overview of the role and qualifications of the key collaborators/partners in the project.

**Dissemination:** Describe the dissemination of project results and outcomes, including approaches for reaching clinical, public health, and lay audiences. Dissemination efforts should consider the message, source, audience, and channel (see: Brownson, et al. [\*J Pub Health Manag Pract.\* 24\(2\):102-111](#), March/April 2018). Dissemination methods may include, but are not limited to, presentations at workshops and seminars, one-on-one meetings, publications, news media, and social media.

#### 4.4.5 References

Provide a concise and relevant list of references cited for the application. The successful applicant will provide referenced evidence and literature support for the proposed project.

#### 4.4.6 CPRIT Grants Summary

Use the template provided on CARS (<https://CPRITGrants.org>). Provide a listing of **all** projects funded by the CPRIT Prevention program for the PD and the Co-PD, regardless of their connection to this application.

#### 4.4.7 Budget and Justification

Provide a brief outline and detailed justification of the budget for the entire proposed period of support, including salaries and benefits, travel, supplies, contractual expenses, and other expenses.

Given the funding level for this evaluation, describe how you might leverage other sources of expertise and funding to support this project. CPRIT funds will be distributed on a reimbursement basis. Applications requesting more than the maximum allowed cost (total costs) as specified in [section 2.8](#) will be administratively withdrawn.

- **Personnel:** The individual salary cap for CPRIT awards is \$200,000 per year. Describe the source of funding for all project personnel where CPRIT funds are not requested.
- **Travel:** PDs and related project staff are expected to attend CPRIT's conference. CPRIT funds may be used to send up to 2 people to the conference.
- **Indirect/Shared Costs:** Texas law limits the amount of grant funds that may be spent on indirect/shared expenses to no more than 5% of the total award amount (5.263% of the direct costs). Guidance regarding indirect cost recovery can be found in [CPRIT's Administrative Rules](#).

#### 4.4.8 Current and Pending Support and Sources of Funding

Use the template provided on the CARS (<https://CPRITGrants.org>). Describe the funding source and duration of **all** current and pending support for the proposed project, including a capitalization table that reflects private investors, if any.

#### 4.4.9 Biographical Sketches

The designated PD will be responsible for the overall performance of the funded project and must have relevant education and management experience. The PD/Co-PD(s) must provide a biographical sketch that describes his or her education and training, professional experience, awards and honors, and publications and/or involvement in programs relevant to cancer prevention and/or service delivery.

- Use the Co-PD Biographical Sketch section **ONLY** if a Co-PD has been identified.
- Up to 3 additional biographical sketches for key personnel may be provided in the Key Personnel Biographical Sketch section.

Each biographical sketch must not exceed 5 pages and should use either the “Prevention Programs: Biographical Sketch” template provided on the CARS (<https://CPRITGrants.org>) or the NIH

Biographical Sketch format. Only biographical sketches will be accepted; do not submit resumes and/or CVs. If a position is not yet filled, please upload a job description.

#### **4.4.10 Collaborating Organizations**

If applicable, list all key participating organizations that will partner with the applicant organization to provide 1 or more components essential to the success of the program. Please be sure to also include anyone listed as key personnel and/or listed under the Current & Pending Support section.

#### **4.4.11 Letters of Commitment (10 pages or less)**

If applicable, applicants may provide letters of commitment and/or memoranda of understanding from community organizations, key faculty, or any other component essential to the success of the evaluation. Letters should be specific to the contribution of each organization.

## **5. APPLICATION REVIEW**

### **5.1 Review Process Overview**

All eligible applications will be reviewed and scored by the CPRIT Prevention Review Council and selected peer reviewers with expertise in evaluation, based on the criteria in [section 5.2](#) below. Review Council members are listed on CPRIT's website. The Prevention Review Council will review applications and provide an overall evaluation score reflecting their overall impression of the application and responsiveness to the RFA priorities.

Applications approved by the Review Council will be forwarded to the CPRIT Program Integration Committee (PIC) for review. The PIC will consider factors including program priorities set by the Oversight Committee, portfolio balance across programs, and available funding. The CPRIT Oversight Committee will vote to approve each grant award recommendation made by the PIC. The grant award recommendations will be presented at an open meeting of the Oversight Committee and must be approved by two-thirds of the Oversight Committee members present and eligible to vote. The review process is described more fully in CPRIT's Administrative Rules, [chapter 703, sections 703.6 to 703.8](#).

Each stage of application review is conducted confidentially, and all CPRIT Peer Review Panel members, Review Council members, PIC members, CPRIT employees, and Oversight Committee

members with access to grant application information are required to sign nondisclosure statements regarding the contents of the applications. All technological and scientific information included in the application is protected from public disclosure pursuant to Health and Safety Code §102.262(b).

Individuals directly involved with the review process operate under strict conflict-of-interest prohibitions. All CPRIT Peer Review Panel members and Review Council members are non-Texas residents.

**By submitting a grant application, the applicant agrees and understands that the only basis for reconsideration of a grant application is limited to an undisclosed Conflict of Interest as set forth in CPRIT's Administrative Rules, [chapter 703, section 703.9](#).**

Communication regarding the substance of a pending application is prohibited between the grant applicant (or someone on the grant applicant's behalf) and the following individuals: an Oversight Committee member, a PIC member, a Review Panel member, or a Review Council member. Applicants should note that the CPRIT PIC comprises the CPRIT Chief Executive Officer, the Chief Scientific Officer, the Chief Prevention and Communications Officer, the Chief Product Development Officer, and the Commissioner of State Health Services. The prohibition on communication begins on the first day that grant applications for the particular grant mechanism are accepted by CPRIT and extends until the grant applicant receives notice regarding a final decision on the grant application. The prohibition on communication does not apply to the time period when preapplications or letters of interest are accepted. Intentional, serious, or frequent violations of this rule may result in the disqualification of the grant application from further consideration for a grant award.

## **5.2 Review Criteria**

Peer review of applications will be based on primary scored criteria and secondary unscored criteria, identified below. Review panels will evaluate and score each primary criterion and subsequently assign an overall score that reflects an overall assessment of the application. The overall evaluation score will not be an average of the scores of individual criteria; rather, it will reflect the reviewers' overall impression of the application and responsiveness to the RFA priorities.



## 5.2.1 Primary Evaluation Criteria

### Impact

- Does the proposed evaluation show promise in documenting the impact of CPRIT?
- Will the findings from the evaluation help in future planning for CPRIT, particularly in addressing health equity?
- If applicable, has applicant demonstrated that the collaborative evaluation efforts will add value to CPRIT?

### Project Strategy and Feasibility

- Does the proposed project provide a comprehensive set of evaluation activities specified in the RFA?
- Are measurable objectives for each phase of the project provided?
- Will the evaluation plan answer the evaluation questions?
- Are possible barriers addressed and approaches for overcoming them proposed?
- Can the project be completed as proposed given the available funding, time frame and the staff knowledge, skills, experience, and institutional resources?
- Does the program leverage partners and resources to maximize the success of the proposed evaluation?

### Organizational Qualifications and Capabilities

- Do the organization and its collaborators/partners demonstrate the ability to provide the proposed evaluation services?
- Does the described role of each collaborating organization make it clear that each organization adds value to the project and is committed to working together to implement the project?
- Have the appropriate personnel been recruited to carry out the project?
- Is the organization structurally and financially stable and viable?

## 5.2.2 Secondary Evaluation Criteria

### Budget

- Is the budget appropriate and reasonable for the scope and services of the proposed work?
- Is the project a good investment of Texas public funds?

## **Innovation**

- Will the evaluation provide new and useful information?
- Are evaluation methods novel and original?
- Has the team thought creatively about how to conduct the evaluation and how to address barriers?

## **6. AWARD ADMINISTRATION**

Texas law requires that CPRIT grant awards be made by contract between the applicant and CPRIT. CPRIT grant awards are made to institutions or organizations, not to individuals. Award contract negotiation and execution will commence once the CPRIT Oversight Committee has approved an application for a grant award. CPRIT may require, as a condition of receiving a grant award, that the grant recipient use CPRIT's electronic Grant Management System to exchange, execute, and verify legally binding grant contract documents and grant award reports. Such use shall be in accordance with CPRIT's electronic signature policy as set forth in [chapter 701, section 701.25](#).

Texas law specifies several components that must be addressed by the award contract, including needed compliance and assurance documentation, budgetary review, progress and fiscal monitoring, and terms relating to revenue sharing and intellectual property rights. These contract provisions are specified in [CPRIT's Administrative Rules](#). Applicants are advised to review CPRIT's administrative rules related to contractual requirements associated with CPRIT grant awards and limitations related to the use of CPRIT grant awards as set forth in [chapter 703, sections 703.10, 703.12](#).

Prior to disbursement of grant award funds, the grant recipient organization must demonstrate that it has adopted and enforces a tobacco-free workplace policy consistent with the requirements set forth in CPRIT's Administrative Rules, [chapter 703, section 703.20](#).

CPRIT requires the PD of the award to submit quarterly, annual, and final progress reports. These reports summarize the progress made toward project goals and address plans for the upcoming year and performance during the previous year(s). In addition, quarterly fiscal reporting and reporting on selected metrics will be required per the instructions to award recipients. Continuation of funding is contingent upon the timely receipt of these reports. Failure to provide timely and

complete reports may waive reimbursement of grant award costs and may result in the termination of the award contract.

## **7. CONTACT INFORMATION**

### **7.1 Helpdesk**

Helpdesk support is available for questions regarding user registration and online submission of applications. Queries submitted via email will be answered within 1 business day. Helpdesk staff are not in a position to answer questions regarding the scope and focus of applications. Before contacting the helpdesk, please refer to the *Instructions for Applicants* document (posted on June 3, 2021), which provides a step-by-step guide to using CARS.

**Hours of operation:** Monday through Friday, 8 AM to 6 PM central time

**Tel:** 866-941-7146

**Email:** [Help@CPRITGrants.org](mailto:Help@CPRITGrants.org)

### **7.2 Program Questions**

Questions regarding the CPRIT Prevention program, including questions regarding this or any other funding opportunity, should be directed to the CPRIT Prevention Program Office.

**Tel:** 512-305-8417

**Email:** [Help@CPRITGrants.org](mailto:Help@CPRITGrants.org)

**Website:** [www.cprit.texas.gov](http://www.cprit.texas.gov)

## 8. RESOURCES

- The Texas Cancer Registry. <https://www.dshs.texas.gov/tcr> or contact the Texas Cancer Registry at the Department of State Health Services.
- Brownson RC, et al. Getting the Word Out: New Approaches for Disseminating Public Health Science. **Journal of Public Health Management & Practice**. 24(2):102-111, March/April 2018.
- Centers for Disease Control and Prevention. *Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide* (2011).  
<https://www.cdc.gov/eval/guide/cdcevalmanual.pdf>
- *Practical Strategies for Culturally Competent Evaluation* (2014).  
[https://www.cdc.gov/dhdsp/docs/cultural\\_competence\\_guide.pdf](https://www.cdc.gov/dhdsp/docs/cultural_competence_guide.pdf)
- *Using Evaluation to Inform CDC's Policy Process* (2014).  
<https://www.cdc.gov/policy/analysis/process/docs/usingevaluationtoinformcdcpolicyprocess.pdf>
- Colorado Dept of Public Health & Environment. [Designing Program Evaluation to Advance Health Equity](#)
- Community Toolbox. [A Framework for Program Evaluation: A Gateway to Tools](#)
- Partnership for the Public's Health. [Participatory Evaluation. What is it? Why do it? What are the challenges?](#)
- Israel A, Cummings KM, Dignan MB, Heaney CA, Perales DP, Simons-Morton BG, Zimmerman MA. Evaluation of health education programs: current assessment and future directions. *Health Educ Q*. 1995;22:364-89. Leviton L, Kettel Khan L, Rog D, Dawkins N, Cotton D. Evaluability assessment to improve public health policies, programs, and practices. *Annu Rev Public Health*. 2010;31:213–33.
- Strauss A, Corbin J. *Basics of Qualitative Research, Third Edition*. Sage: Thousand Oaks; 2008.
- Zukoski A, Luluquisen M. Participatory evaluation. What is it? Why do it? What are the challenges? *Community Based Public Health Policy Pract*. 2002 Apr;(5):1-6.